

STUDY GUIDE

United Nations Commission on the Status of Women



BITSMUN 2019

NOTE FROM THE EXECUTIVE BOARD

Dear delegates,

This note is to inform you that this study guide shall act as a mere roadmap. This guide is not all inclusive, although we have done our best to cater to all aspects of the agenda given to you. Please find attached with this document, links that shall help you delve deeper into this topic. The good news is that what you shall research will not go unnoticed and that it is never too late to smash patriarchy. Rest assured, your adherence to policies or your lack thereof shall also be easily identified.

Here's a few things to keep in mind:

1. Speak whenever opportunity beckons, since we will follow a 100% participation rule, making sure we know what your voice sounds like, by the end of the 3 days. However, this is only a learning mechanism, and nothing shall be done without your consent.
2. Our intentions regarding procedure shall be intimated to you in the 1st session of this conference.
3. Substantiation shall include reports (any United Nations report/ Reuters report and country-based release, on which we will exercise discretion).
4. Do not make things up. If you get caught (and you will), penalisation will be inevitable.
5. Be confident. Remember this golden rule: What you say is Gospel, let judgemental eyes seek other pastures. Channelize your inner spirit animal (not giraffes, duh).
6. If another delegate/ANYONE inside or outside committee makes you feel uncomfortable, talk to us. We will try everything within our capability to help dissipate your discomfort.
7. A little effort goes a long way and bits of information if read properly, will never fail to assist you later.
8. Be respectful towards everyone, especially towards logistics members. Bad manners and ignorance will not sit well with us. Intolerance in any form will not be tolerated.
9. Do not contact us after committee hours asking about your day's performance.
10. Good luck, kids!

Tannistha Sinha (Chairperson)
Rohan Kapur (Vice-Chairperson)

IMPORTANT CONVENTIONS, TREATIES AND DOCUMENTS

Following is the list of documents that need to be perused by all delegates before they come to the council, without which you may find yourself standing on shore, while the council will sail away. Please understand that you need to know the following aspects regarding each of the mentioned documents:

- The reason why this document exists (for e.g. the Geneva Conventions were enacted to lay down the rules of war and for the treatment of all parties concerned in the wars.)
- The nature of the document and the force it carries, i.e. whether it is a treaty, a convention, a doctrine, a declaration or a universally accepted custom or norm.
- The areas where the document can be applied or has jurisdiction on (for e.g. international humanitarian law applies only to situations of armed conflict, whereas the human rights laws applies at all times of war and peace alike.)
- The contents of the document at hand. You need not memorize any articles or rules of any convention or treaty but should know what the document has to say in various situations that may arise in the council.

The delegates must understand the following:

INTERNATIONAL BILL OF RIGHTS

- Universal Declaration of Human Rights
- International Covenant on Economic, Social and Cultural Rights
- International Covenant on Civil and Political Rights
- Optional Protocol to the International Covenant on Civil and Political Rights
- Second Optional Protocol to the International Covenant on Civil and Political Rights, Aiming at the abolition of the death penalty.

UNIVERSAL HUMAN RIGHTS INSTRUMENTS

- In addition to the International Bill of Rights and the core human rights treaties, there are many other

universal instruments relating to human rights. A non-exhaustive selection is listed below.

WORLD CONFERENCE ON HUMAN RIGHTS AND MILLENNIUM ASSEMBLY

- United Nations Millennium Declaration

THE RIGHT OF SELF-DETERMINATION

- General Assembly resolution 1803 (XVII) of 14 December 1962, "Permanent sovereignty over natural resources"
- Vienna Declaration and Programme of Action
- United Nations Declaration on the Granting of Independence to Colonial Countries and Peoples
- International Convention against the Recruitment, Use, Financing and Training of Mercenaries

RIGHTS OF INDIGENOUS PEOPLES AND MINORITIES

- Declaration on the Rights of Persons Belonging to National or Ethnic, Religious and Linguistic Minorities

PREVENTION OF DISCRIMINATION

- World Conference against Racism, 2001 (Durban Declaration and Programme of Action)

RIGHTS OF WOMEN

- Declaration on the Elimination of Violence against Women

RIGHTS OF THE CHILD

- Worst Forms of Child Labour Convention, 1999 (No. 182)

RIGHTS OF OLDER PERSONS

- United Nations Principles for Older Persons

RIGHTS OF PERSONS WITH DISABILITIES

- Protocol Instituting a Conciliation and Good Offices Commission to be responsible for seeking a settlement of any disputes which may arise between States Parties to the Convention against Discrimination in Education
- Declaration on the Elimination of All Forms of Intolerance and of Discrimination Based on Religion or Belief
- Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW-OP)
- Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography (CRC-OPSC)
- Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict (CRC-OPAC)
- Principles for the protection of persons with mental illness and the improvement of mental health care
- Declaration on the Rights of Indigenous Peoples
- Indigenous and Tribal Peoples Convention, 1989 (No. 169)
- Discrimination (Employment and Occupation) Convention, 1958 (No. 111)
- International Convention on the Elimination of all Forms of Racial Discrimination (ICERD)
- Declaration on Race and Racial Prejudice
- Convention against Discrimination in Education

- Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)
- Declaration on the Protection of Women and Children in Emergency and Armed Conflict
- Convention on the Rights of the Child (CRC)
- Minimum Age Convention, 1973 (No. 138)
- Convention on the Rights of Persons with Disabilities
- Optional Protocol to the Convention on the Rights of Persons with Disabilities
- Declaration on the Rights of Mentally Retarded Persons
- Declaration on the Rights of Disabled Persons
- Standard Rules on the Equalization of Opportunities for Persons with Disabilities

HUMAN RIGHTS IN THE ADMINISTRATION OF JUSTICE: PROTECTION OF PERSONS SUBJECTED

TO DETENTION OR IMPRISONMENT

- Updated Set of principles for the protection and promotion of human rights through action to combat impunity

SOCIAL WELFARE, PROGRESS AND DEVELOPMENT

- Universal Declaration on Cultural Diversity

PROMOTION AND PROTECTION OF HUMAN RIGHTS

- United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules)
- Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment
- Declaration on the Protection of All Persons from Being Subjected to Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
- Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT)
- Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT)
- Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
- Principles on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
- United Nations Standard Minimum Rules for the Administration of Juvenile Justice (The Beijing Rules)
- Principles on the Effective Prevention and Investigation of Extra-legal, Arbitrary and Summary

Executions

- United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules) – PDF
- Declaration on the Use of Scientific and Technological Progress in the Interests of Peace and for the Benefit of Mankind
- Basic Principles for the Treatment of Prisoners
- United Nations Rules for the Protection of Juveniles Deprived of their Liberty
- Safeguards guaranteeing protection of the rights of those facing the death penalty
- Code of Conduct for Law Enforcement Officials
- Basic Principles on the Use of Force and Firearms by Law Enforcement Officials
- United Nations Standard Minimum Rules for Non-custodial Measures (The Tokyo Rules)
- Guidelines for Action on Children in the Criminal Justice System
- United Nations Guidelines for the Prevention of Juvenile Delinquency (The Riyadh Guidelines)
- Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power
- Basic Principles on the Independence of the Judiciary
- Basic Principles on the Role of Lawyers
- Guidelines on the Role of Prosecutors
- Declaration on the Protection of All Persons from Enforced Disappearance
- Basic Principles and Guidelines on the Right to a Remedy and Reparation
- International Convention for the Protection of All Persons from Enforced Disappearance
- Declaration on Social Progress and Development
- Universal Declaration on the Eradication of Hunger and Malnutrition
- Declaration on the Right of Peoples to Peace
- Declaration on the Right to Development
- Universal Declaration on the Human Genome and Human Rights
- United Nations Declaration on Human Rights Education and Training

MARRIAGE

- Recommendation on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages

RIGHT TO HEALTH

- Declaration of Commitment on HIV/AIDS

RIGHT TO WORK AND TO FAIR CONDITIONS OF EMPLOYMENT

- Employment Policy Convention, 1964 (No. 122)

FREEDOM OF ASSOCIATION

- Right to Organise and Collective Bargaining Convention, 1949 (No. 98)

SLAVERY, SLAVERY-LIKE PRACTICES AND FORCED LABOUR

- Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime

RIGHTS OF MIGRANTS

- Protocol against the Smuggling of Migrants by Land, Sea and Air, supplementing the United Nations Convention against Transnational Organized Crime

NATIONALITY, STATELESSNESS, ASYLUM AND REFUGEES

- Declaration on the Right and Responsibility of Individuals, Groups and Organs of Society to Promote and Protect Universally Recognized Human Rights and Fundamental Freedoms
- Supplementary Convention on the Abolition of Slavery, the Slave Trade, and Institutions and Practices Similar to Slavery
- Convention for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others
- International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (ICPMW)
- Principles relating to the status of national institutions (The Paris Principles)
- Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages
- Freedom of Association and Protection of the Right to Organise Convention, 1948 (No. 87)
- Slavery Convention
- Protocol amending the Slavery Convention signed at Geneva on 25 September 1926
- Forced Labour Convention, 1930 (No. 29)
- Abolition of Forced Labour Convention, 1957 (No. 105)
- Convention on the Reduction of Statelessness
- Convention relating to the Status of Stateless Persons
- Convention relating to the Status of Refugees
- Protocol relating to the Status of Refugee
- Protocol Additional to the Geneva Conventions of 12 August 1949, and relating to the Protection of Victims of International Armed Conflicts (Protocol I)
- Protocol Additional to the Geneva Conventions of 12 August 1949, and relating to the Protection of Victims of Non-International Armed Conflicts (Protocol II)
- Declaration on the Human Rights of Individuals who are not nationals of the country in which they live

WAR CRIMES AND CRIMES AGAINST HUMANITY, INCLUDING GENOCIDE

- Rome Statute of the International Criminal Court

HUMANITARIAN LAW

- Convention on the Non-Applicability of Statutory Limitations to War Crimes and Crimes against Humanity
- Principles of international co-operation in the detection, arrest, extradition and punishment of persons guilty of war crimes and crimes against humanity
- Convention on the Prevention and Punishment of the Crime of Genocide
- Statute of the International Tribunal for the Former Yugoslavia
- Statute of the International Tribunal for Rwanda
- Geneva Convention relative to the Treatment of Prisoners of War
- Geneva Convention relative to the Protection of Civilian Persons in Time of War

Summary of recent campaigns and events

- *#Breaktheglass:*

This is a digital event storytelling event that focuses on women to break the ‘glass ceiling’. This term is used as a metaphor to denote the barriers that are preventing women from climbing the corporate ladders, regardless of their skills and qualifications. The main aim of the campaign was to break gender stereotypes, the barriers across disciplines, advocating women economic empowerment, gender equality and contributing to the world for more equal rights.

- *#Herstory:* This campaign materialised in 2016 with a view to decrease the gender knowledge gap. Knowledge is meant to be both a resource and an investment, which is another form of wealth. Information, and access to information, is still not completely free, and is still systematically denied to females and housewives on account of them ‘never going to need education’. If knowledge is equally distributed the knowledge gap between genders may be addressed, with the biases, harmful stereotypes and practices that often misrepresent women and degrade their values also coming into the spotlight.

- *#Timeisnow:*

Urban and rural activists transforming the lives of women have found a new voice through this campaign. 2018 was the year when there were numerous global marches and campaigns, like #metoo and #Timeisup, all over the world on the issue of sexual harassment and for the equal payment and representation of women in politics. In the upcoming 62nd session of the UN Commission on the Status of Women,, it was decided to echo the voice of the rural women, who make up a quarter of the world left behind in every measure of development.

- *#Pressforprogress:* This was the theme for the celebration of the 2018 International Women’s Day to maintain a gender parity mindset via progressive plans, challenging stereotypes and biases, forging positive visibility for women, influencing other beliefs/ actions and celebrating women’s achievements.

- *#HeforShe:* HeforShe is a renowned campaign through which male counterparts are invited to understand and support the idea of gender parity. The concept starts with the idea of promoting gender equality and harnessing gender roles in our societies at all levels to support and understand the value of gender equality. The main motto of the campaign is not only about women- related issues, it is about human rights as well.

Past UN resolutions to consider

- 2010/7 - Strengthening the institutional arrangements for support of gender equality and the empowerment of women
- 2010/29 - Mainstreaming a gender perspective into all policies and programmes in the United Nations system
- 2010/6 - Situation of and assistance to Palestinian women
- 2010/15 - Strengthening crime prevention and criminal justice responses to violence against women

Agenda 1: Discussing bodily integrity and the introduction of courses on reproductive and sexual rights of women in curriculums

Overview of the Agenda

Women's sexual and reproductive health is related to multiple human rights, including the right to life, the right to be free from torture, the right to health, the right to privacy, the right to education, and the prohibition of discrimination. The Committee on Economic, Social and Cultural Rights and the Committee on the Elimination of Discrimination against Women (CEDAW) have both clearly indicated that women's right to health includes their sexual and reproductive health'. This means that States have obligations to respect, protect and fulfil rights related to women's sexual and reproductive health. The Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health maintains that women are entitled to reproductive health care services, goods and facilities that are: (a) available in adequate numbers; (b) accessible physically and economically; (c) accessible without discrimination; and (d) of good quality [see report A/61/338].

Despite these obligations, violations of women's sexual and reproductive health rights are frequent. These take many forms including denial of access to services that only women require, or poor-quality services, subjecting women's access to services to third party authorization, and performance of procedures related to women's reproductive and sexual health without the woman's consent, including forced sterilization, forced virginity examinations, and forced abortion. Women's sexual and reproductive health rights are also at risk when they are subjected to female genital mutilation (FGM) and early marriage.

Violations of women's sexual and reproductive health rights are often deeply ingrained in societal values pertaining to women's sexuality. Patriarchal concepts of women's roles within the family mean that women are often valued based on their ability to reproduce. Early marriage and pregnancy, or repeated pregnancies spaced too closely together, often as the result of efforts to produce male offspring because of the preference for sons, has a devastating impact on women's health with sometimes fatal consequences. Women are also often blamed for infertility, suffering ostracism and being subjected various human rights violations as a result.

CEDAW (article 16) guarantees women equal rights in deciding freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights. CEDAW (article 10) also specifies that women's right to education includes access to specific educational information to help to ensure the health and well-

being of families, including information and advice on family planning.

The Beijing Platform for Action states that the human rights of women include their right to have control over and decide freely and responsibly on matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence. The CEDAW Committee's General Recommendation 24 recommends that States prioritise the prevention of unwanted pregnancy through family planning and sex education. The CESCR General Comment 14 has explained that the provision of maternal health services is comparable to a core obligation which cannot be derogated from under any circumstances, and the States have to the immediate obligation to take deliberate, concrete, and targeted steps towards fulfilling the right to health in the context of pregnancy and childbirth.

Areas of Concern

Right to Health

The importance of that right has been mentioned in many international treaties and conventions including the International Covenant on Economic, Social and Cultural Rights (ICESR)/1966, the Convention to Eliminate all forms of Discrimination Against Women (CEDAW)/1979, the Convention on the Rights of the Child (CRC)/1989, the European Social Charter, 1961, and the African Charter on Human and People's Rights, 1981. The right to health involves the idea that national governments should ensure and guarantee that everyone is as healthy as possible. This can be achieved through a variety of parameters such as the availability of health services, the healthy and safe working conditions, the spreading of health-related education and relevant information on STIs, the allotment of nutritious food, potable water and housing. The parameters involved, then, are summarized into Availability, Accessibility, Acceptability, and Quality (AAAQ). A health care system should be economically affordable, accessible as well as non-discriminatory and open to all cultures, religions and traditions. Respect to ethics and cultural provisions and gender requirements should be paid under the context of public health and health care facilities. Last but not least, the system of health must be scientifically and medically appropriate to achieve protection and fulfilment of needs. Aiming at the promotion of the motto Health for all, the WHO is offering technical, intellectual and political assistance to government, organizations and institutions in order to move towards international development and a common approach to health.

Maternal Death and Morbidity

The issue of maternal mortality and morbidity must also be understood as a matter of human rights. International human rights treaties have clarified States obligations in relation to

maternal mortality and morbidity and recognized violations of women's rights to life, to the highest attainable standard of health, and to equality and non-discrimination in this regard.

A maternal death is the death of a woman while pregnant or within 42 days of termination of pregnancy from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes. The main causes of maternal death include severe bleeding, infection, unsafe abortion, high blood pressure, and prolonged or obstructed labour. Most maternal deaths and disabilities can be prevented through effective interventions and care during pregnancy and delivery.

Abortion

Abortion is a subject that has caused controversy in various countries due to legal, sanitary and social issues. Nowadays, abortion happens commonly all around the world. However, it happens mostly dangerously, clandestinely and under the law. Basically, there is a constant struggle between the impositions of religion and the reproductive health of women. In a country where abortion is illegal, women are turning to cheaper ulcer medication techniques to end unwanted pregnancies. The medication, registered for use to prevent gastric ulcers, is easily available in the UAE. According to the legal system in Dubai, unless done for medical reasons on a married woman, abortion is illegal. A number of female immigrants that are in desperate need of abortion need to adopt illegal methods of terminating their pregnancies. In severe cases, these illegal methods result in damaging the reproductive make up of women. Unfortunately, women cannot sue the doctors responsible for the abortion as it is illegal in the first place. Abortion wasn't much of a problem until the late 1300's, back then that was the time many countries followed the equal status policy of both men and women, but following the post 1500 era, Abortion became a problem since this was the time the notion of importance of life was brought into account, this was the time when some sects started thinking the importance of women being lesser than men, that was the time the abortion rates boosted.

Now how to negate this propaganda that has been established for over 400 years, that's the question, we as executive board would be looking and expecting from you all.

Additionally, some countries, even with liberal laws, restrict advertising on abortion. This affects information on the legal status of abortion, on where abortion services are provided and on abortion methods. Restrictions on advertising deprive women, and men, of much- needed information, and decrease access to services.

Contraception and Family Planning

The right to reproductive choice means that women have a right to choose whether or not to reproduce, including the right to decide whether to carry or terminate an unwanted pregnancy and the right to choose their preferred method of family planning and contraception. Millions of women continue to lack access to modern contraceptives. According to the United Nations Population Fund, recent statistics show that of 867 million women of childbearing age in developing countries who are in need of modern contraceptives, 222 million do not have access to them. Similarly, in developed countries, millions of women are confronted with economic, social and cultural barriers to access contraceptives and family planning services and lack information or education about them.

The right to family planning' education, information and services is key to reproductive choice, and central to women's sexual and reproductive health, especially given the risk of maternal mortality and the illegality of abortion in many countries. Marginalized Groups: Persons with disabilities face particular risks of being denied their human rights in relation to contraception and family planning. Article 23 of the Convention on the Rights of Persons with Disabilities protects the right of persons with disabilities to found and maintain a family and to retain their fertility on an equal basis with others. The Committee on the Rights of Persons with Disabilities has expressed concerns about discrimination in the provision of sexual and reproductive health services against persons with disabilities and has asked States to provide these services.

Sexual Health and Rights

According to the WHO, sexual health is defined as follows: a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled. Sexual health involves being able to enjoy the positive aspects of sexual and reproductive behavior and to make informed choices that fit with your personal values and be offered the freedom of choice as far as bodily interaction is concerned. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled. Sexual health can only be achieved through respect for and protection of the sexual rights. Sexual rights embrace human rights that are already recognized in national laws, international human rights documents and other consensus statements.

They include the right of all persons, free of coercion, discrimination and violence, to:

1. the highest attainable standard of sexual health, including access to sexual and reproductive health care services
2. seek, receive and impart information related to sexuality
3. sexuality education and information
4. respect for bodily integrity
5. be safe from degrading treatment, torture and coercion
6. choose their partner
7. decide to be sexually active or not
8. consensual sexual relations
9. consensual marriage
10. found a family and enter into marriage with the consent of the intending spouses, and to attain equality in and at the dissolution of marriage
11. have privacy
12. decide whether or not, and when, to have children
13. pursue a satisfying, safe and pleasurable sexual life

Bear in mind that sexual rights do not only refer to women, but to men too. Definition of reproductive health The ICPD documents defined reproductive health as a state of complete, physical, mental, and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes . People should be able to have an enjoyable and safe sex life, have the capability to reproduce and the freedom of choice when and how often to do so, have the right to decide upon their sexuality and be offered services connected to safe pregnancy and childbirth.

Reproductive Rights

Reproductive rights are associated with women's self-determination over their bodies and sexual lives, and are critical to gender equality and to the formation of democratic and just societies in a global scale. These rights include and are not limited to the following:

1. The right to a full range of safe and affordable contraception
2. The right to safe, accessible and legal abortion
3. The right to safe and healthy pregnancies

4. The right to liberty and security of person
5. The right of women to have control over and decide freely and responsibly on matters related to their sexuality
6. The right to comprehensive reproductive health care services provided free of discrimination, coercion and violence
7. The right to equal access to reproductive health care for women facing social and economic barriers
8. The right to be free from violence, and practices that harm women and girls (such as female genital mutilation)
9. The right to a private and confidential doctor-patient relationship
10. The right to freedom from discrimination (on the basis of sex, gender, marital status, age, race and ethnicity, health status)

In all parts of the world, women suffer discrimination and abuse because of their reproductive capacity leading to restrictions on sexual autonomy and reproductive freedom. Some of these abuses are even mandated by law even if internationally recognized' human rights are seriously violated. For example, such violations include women's rights to life, health, non-discrimination, bodily integrity, privacy, liberty, religious freedom, and freedom from torture. Worldwide, women suffer from the consequences of unintended pregnancies because family planning services and safe abortion facilities are thought as illegal or are inaccessible and unaffordable.

Therefore, it is true that every year, twenty million women undergo an abortion in illegal and mostly unsafe circumstances, resulting in as many as 78,000 deaths, the vast majority of which are preventable. Across the world, family and community members pressure women to undergo mutilating, physically inhibiting, and often painful bodily alterations such as female circumcision or female genital mutilation. Human Rights Watch has documented the dire consequences of other harmful traditional practices, such as dry sex in Zambia, and ritual cleansing or widow inheritance in Kenya. Examples: Discrimination based on women's reproductive capacity and choices takes many forms. Human Rights Watch has documented how private companies in Mexico, Guatemala, and the Dominican Republic routinely discriminate against women on the basis of their reproductive capacity by obliging female job applicants to undergo pregnancy exams as a condition of work and by denying work to pregnant women. When Indonesian women migrate to Malaysia to seek jobs as domestic workers, they are routinely tested for pregnancy and sent back to Indonesia or denied travel if they test positive. India observes a very high maternal death rate. From Niger to Afghanistan, from Bangladesh to Tajikistan, girls continue to be forced to marry against their will. In Africa, more than 200 million women want

but lack access to effective and safe contraception. In Colombia, female members of the FARC rebel group are forced to have abortions in case they get pregnant. In Jordan no sex education is included in the school curricula. The aforementioned are thought as a clear violation of reproductive rights and a devastating form of violence. An estimated' 20 million unsafe abortions occur around the globe every year with victimized subject s women and adolescent girls. Maternal mortality remains high and HIV causes the death of women at their reproductive ages. Finally, around 40% of pregnancies worldwide are unintended since women lack access to contraceptive services. Discrimination based on women's reproductive capacity often intersects with other forms of discrimination, such as for example discrimination based on ethnicity or race. In South Africa, for example, farm owners deny black women farm workers maternity benefits and other legal rights.

Sexual Health

Safe sex (also called safer sex or protected sex) is a set of practices that are designed to reduce the risk of infection during sexual intercourse to avoid developing sexually transmitted infections (STIs). Conversely, unsafe sex refers to engaging in sexual intercourse without the use of any barrier contraception or other preventive measures against STIs. Safe sex practices became prominent in the late 1980s as a result of the AIDS epidemic, leading to more emphasis on reproductive health issues beyond reducing fertility. From the viewpoint of society, safer sex can be regarded as a harm reduction strategy. Safe sex is about risk reduction, not complete risk elimination. Although safe sex practices can be used as a form of family planning, the term refers to efforts made to prevent infection rather than conception. Many effective forms of contraception do not offer protection against STIs. To address sexual health, we need to appreciate sexuality and gender roles at first point. Understanding sexuality and its impact on practices, partners, reproduction and pleasure presents a number of challenges as well as opportunities for improving sexual and reproductive health care services and interventions. Research on sexuality should surpass social, cultural and economic factors. Therefore, we need to go beyond reproductive health by looking at sexual health holistically and comprehensively by adding any knowledge gained from the field of STI/HIV prevention and care, gender studies, and family planning, among others.

Female Genital Mutilation (FGM)

Female genital mutilation (FGM) often referred to as female circumcision or flogging , comprises of all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs whether for cultural, religious or other non- therapeutic reasons. There are different types of female genital mutilation known to be practiced today.

Type I - excision of the prepuce, with or without excision of part or all of the clitoris

Type II - excision of the clitoris with partial or total excision of the labia minora

Type III - excision of part or all of the external genitalia and stitching/narrowing of the vaginal opening (infibulation). This type of FGM is very common in Eritrea, Djibouti, Ethiopia, Somalia, Sudan and it is an ethnic marker aiming at the control of female sexuality, without taking into account gender inequality

Type IV - pricking, piercing or incising of the clitoris and/or labia; stretching of the clitoris and/or labia; cauterization by burning of the clitoris and surrounding tissue; scraping of tissue surrounding the vaginal orifice (angurya cuts) or cutting of the vagina (gishiri cuts); introduction of corrosive substances or herbs into the vagina to cause bleeding or for the purpose of tightening or narrowing it; and any other procedure that falls under the definition given above.

The most common type of female genital mutilation is excision of the clitoris and the labia minora, accounting for up to 80% of all cases; the most extreme form is infibulation, which constitutes about 15% of all procedures. Where is FGM practiced? FGM is practiced in at least 26 of 43 African countries; the prevalence varies from 98 percent in Somalia to 5 percent in DR Congo. A review of country-specific Demographic and Health Surveys (DHS) shows FGM prevalence rates of 97 percent in Egypt, 94.5 percent in Eritrea, 93.7 percent in Mali, 89.2 percent in Sudan, and 43.4 percent in the Central African Republic. FGM is also found among some ethnic groups in 27 countries including Oman, the United Arab Emirates, and Yemen, as well as in parts of India, Indonesia, and Malaysia. FGM has become an important issue in Australia, Canada, England, France, and the United States due to the continuation of the practice by immigrants from countries where FGM is common. Who performs FGM, at what age and for what reasons? In cultures where it is an accepted norm, it is practiced by followers of all religious beliefs, animists and non-believers. The practitioner of flogging is not a doctor, but a traditional individual who uses primitive instruments (e.g. sharp knives) and no anaesthetic. The age at which female genital mutilation is performed depends on the region. It is performed on young babies, girls who are weeks after puberty, adolescents and, occasionally, on mature women. The reasons are psychosexual in order to reduce the sensitive tissue of the outer genitalia and, thus, maintain female chastity and virginity prior to marriage by controlling sexual desire and guaranteeing fidelity. Sociological reasons are associated with the cultural heritage and the social inclusion; hygiene reasons are based on the myth that external female genitalia are dirty and unsightly and by removing fertility is promoted. Finally, religious reasons have to do with some beliefs that FGM is demanded by the Islamic faith. However, this tradition is not mentioned in Quran and has no basis under Islamic law.

Sexual Orientation

When the Universal Declaration of Human Rights (UDHR) was adopted by the United Nations in 1948, human sexuality has not been put into discussions and little was known about sexual orientation. The campaigns for equal rights on behalf of gays and lesbians began decades later. Article 2 of the UDHR begins with: "Everyone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status." In our days, sexual orientation is thought as the personal quality that inclines people to feel romantic and/or sexual attraction to other individuals taking the forms of heterosexuality, homosexuality, bisexuality, and asexuality. A draft resolution, presented by Brazil in 2003 and co-sponsored by at least 20 countries, expresses "deep concern at the occurrence of violations of human rights all over the world against persons on grounds of their sexual orientation" and calls on relevant UN human rights bodies to "give due attention" to these violations. It calls on States to promote and protect the human rights of all people, stressing that the enjoyment of universal rights and freedoms "should not be hindered in any way" on grounds of sexual orientation. "Greater attention by the UN to this issue could make a real difference to real lives," Amnesty International said. "Millions of people across the globe face imprisonment, torture, violence and discrimination because of their sexual orientation or gender identity," the organization added, reminding of the sentencing of 21 men to three years in prison in Egypt, following a series of arrests and prosecutions of people thought to be gay. In the words of Amnesty International

Everyone has a sexual orientation and a gender identity. When someone's sexual orientation or gender identity does not conform to the majority, they are often seen as a legitimate target for discrimination or abuse. Brazil's resolution also reflected a worldwide trend towards greater protection of the rights of lesbian, gay, bisexual and transgender people. Many governments have introduced protections against sexual orientation discrimination in domestic law. In the case of South Africa, Ecuador and several Brazilian states, this protection is enshrined in the Constitution. Unfortunately, many governments at the UN have vigorously contested any attempt to address the human rights of lesbian, gay, bisexual and transgender people. Though relationship between religion and homosexuality varies greatly across time and some groups not influenced by the Abrahamic religions (such as Judaism, Islam, and Christianity) regard homosexuality as sacred, while a negative view of homosexuality has been common in the Abrahamic religions. In the wake of colonialism and imperialism undertaken by countries of the Abrahamic faiths some cultures have adopted new attitudes antagonistic towards homosexuality.

For some homosexuality is considered as sinful, whereas for others only sodomy is seen as a sin. Also, for some religious faith and spiritual salvation are the pharmakon to overcome homosexual orientation. On the other hand, voices exist within each of these religions that view homosexuality more positively, and many religious denominations may even bless same-sex marriages. Sexuality

can no longer be treated as a marginal and taboo issue at the UN. Sexual orientation and gender identity are fundamental elements of what makes us human. The right to freely determine and express these without fear or coercion is therefore human rights in the fullest sense.

The Human Rights Committee and the Committee on Economic Social and Cultural Rights have long recognized "sexual orientation" as a prohibited ground of discrimination under the two International Covenants. Both treaty-monitoring bodies have for years called on governments to end violations based on sexual orientation, from criminalization of homosexuality to discrimination in employment. In June 2011, the Human Rights Council adopted the first UN resolution on sexual orientation and gender identity, which focused on discrimination against individuals based on their sexuality. Then, the first UN report on the issue was drafted by the Office of the High Commissioner for Human Rights, and its findings opened up a panel of discussion that took place in March 2012 -the first formal debate on that issue. Violations based on sexual orientation and gender identity have also been increasingly documented by independent experts appointed by the Commission on Human Rights, including the Special Rapporteurs on Violence against Women, Extrajudicial Executions, Torture, the Right to Education and the Right to Health, as well as the Special Representative on Human Rights Defenders. These discriminatory practices take a state character since they are committed on behalf of the state including denial of rights to assembly and expression, arbitrary detention which are added to discrimination in the working environment or the right to health and education. Additionally, some states have adopted laws that criminalize same-sex relations and other laws that penalize individuals due to their sexual orientation or gender identity. Some examples of punishment are death penalty, hate crimes, rapes, bullying, sex violence, verbal abuses. The United Nations High Commissioner for Refugees has affirmed that homosexuals may be defined as a particular social group in the meaning of the 1951 Refugee Convention. At least a dozen countries around the world have provisions in their legislation making it possible for persons facing persecution in their home countries due to their perceived sexual orientation or gender identity to be recognized as refugees.

Violence against women

The United Nations has defined violence against women as any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.

Violence against women at different stages:

1. Pre-birth: Sex-selective abortion

2. Infancy: Female infanticide, Neglect the girl child (health care, nutrition, etc.)
3. Childhood: Child abuse, Malnutrition, Female genital mutilation
4. Adolescence: Forced prostitution, trafficking, forced early marriage, rape
5. Reproductive age: Honour killings, Intimate partner violence, sexual abuse, trafficking, sexual harassment
6. Elderly: Elder/widow abuse

Women's reproductive and sexual health clearly is affected by gender-based violence. A study found out that women who experienced intimate partner abuse were three times more likely to have a gynaecological problem than were non-abused women. These problems include chronic pelvic pain, vaginal bleeding or discharge, vaginal infection, painful menstruation, sexual dysfunction, fibroids, pelvic inflammatory disease, painful intercourse, urinary tract infection, and infertility. Sexual abuse, especially forced sex, can cause physical and mental trauma. In addition to damage to the urethra, vagina, and anus, abuse can result in sexually transmitted infections (STIs), including HIV/AIDS. Women who disclose that they are infected with HIV also may be subjected to violence.

Women Trafficking

Between 700,000 and 2,000,000 people, most of them women and children, are trafficked across international borders every year for forced labour, including sex work. Most of these victims of trafficking originate in Asia, but substantial numbers come from countries in the former Soviet Union (100,000), Eastern Europe (75,000), Latin America and the Caribbean (100,000), and Africa (50,000). Sex' trafficking is a crime prohibited by international law. Traffickers' not only violate victims rights to liberty and security of persons; they also violate victims reproductive rights with potentially devastating consequences for their health and reproductive capabilities.

Individuals trafficked into any form of labour are at high risk of sexual assault, sexually transmitted infection (STI) transmission, HIV transmission, and sometimes irreparable damage to their reproductive health. Trafficked women are also in danger for unwanted pregnancy. Survivors of trafficking into the sex industry, servile marriage, and domestic work are particularly vulnerable. Many traffickers use rape and sexual abuse to break the spirit, instil fear, and ensure compliance of their victims—. Some traffickers also derive financial benefit from putting their victims at sexual risk they force them to engage in prostitution under dangerous circumstances where they cannot use condoms or other protection, and where they are susceptible to sexual violence. Traffickers also control the reproductive choices of their victims in order to ensure maximum profit by engaging in any of the following tactics: forcing them to have abortions so that they can keep working, restricting or forbidding medical care for STIs or

injuries, or compelling them to carry pregnancies to term in order to control their children.

C. International Framework and the Role of United Nations

The Beijing Platform Declaration' and Platform for Action is the principal international framework addressing' women's health. The declaration' outlines five strategic objectives pertaining to women's health: Increase women's access throughout the life cycle to appropriate, affordable and quality health care, information and related services ; Strengthen preventive programmes that promote women's health ; Undertake gender sensitive initiatives that address sexually transmitted diseases, HIV/AIDS, and sexual and reproductive health issues ; Promote research and disseminate information on women's health ; and Increase resources and monitor follow-up for women's health.

Furthermore, the Sustainable Development Goals (SDG) have addressed women's health through Goals three and five. Goal 3 of the SDGs is to ensure healthy lives and promoted well-being for all ages 60, with maternal and child health being at the forefront of this goal. In fact, Goal 3 targets, which must be achieved by 2030, include, amongst others, the following: [reducing] the global maternal mortality ratio to less than 70 per 100,000 live births; [ending] preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births; [ending] the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, waterborne diseases and other communicable; and [ensuring] universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.

Goal 5 specifically targets gender equality and the' empowerment of women and girls. Many of the specific targets of this goal address women's health such as: [Eliminating] all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation; [Eliminating] all harmful practices, such as child, early and forced marriage and female genital mutilation; [Ensuring] universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences. Both the SDGs and' the Beijing Platform for Action have been at the' forefront of the discussion of women's health both putting specific emphasis on women's reproductive and sexual health which is essential to the achievement of gender equality.

UN Women has launched various projects and initiatives in order to raise awareness about the importance of women's health, and address violations of women's right to health. UN Women has worked across the globe in order to remediate to the problematic. The World Food Programme launched initiatives which trained rural women as nutritionists, which tackled the issue of malnutrition in their communities. The United Nations Development Programme, in partnership with various other UN organizations, developed a programme which taught primary health care workers the skills needed to address the results of the environmental disaster on young women and girls. The United Nations Population Fund created a programme helping women which family planning which reduces unintended pregnancies, unsafe abortions, and complications from pregnancy and childbirth. The World Health Organization has worked in developing areas raising awareness about the human papillomavirus, which can cause cervical cancer. They led vaccination campaigns in order to protect women from this disease, as well as teaching young women and girls about the importance of the vaccine.

Women living with HIV/AIDS were empowered by a UN Women led initiative which gave them home-based care, skills, and training which permitted them to start their own business using a fund provided by the Gender Equality Programme. Sexual assault centres were set up by UN Women in order to address the needs of sexual assault victims.

The centres provide medical care, as well as psychological care and legal counselling. The Ebola crisis has also been addressed by UN Women, which has worked hand-in-hand with local organizations by facilitating mobilization and information efforts targeting women, who have been disproportionately affected by this disease. UN Women has also worked in partnership with various other UN bodies such as UNICEF and the WHO, to improve the reproductive health of women and children by raising awareness in developing nations in order to reduce child and maternal mortality rates. UN Women has also supported the creation of hotlines to report abuse in developing countries, which would provide assistance to women experiencing violence. They have also set up mobile units support children, women, and elderly individuals who confront problems such as human trafficking, gender based violence, child labour, and teenage pregnancy. Through its partnership with NGOs, UN Women has also established gender-based units in hospitals in order to combat the stigma that victims of sexual assault may suffer, and to provide psychological support, while also creating a forum where girls and women can discuss their experiences with each other and mutually support each other.

Bloc Positions

Women in less developed countries are 30 times more likely to die from reproductive health-

related causes than women in industrialized countries. It is one of the hundredth of facts that is alarming. In many developing countries, mainly women suffer from complications of pregnancy, sexually transmitted diseases, unsafe abortion, female genital mutilation, HIV/AIDS. Measures for the protection of their sexual and reproductive rights are essential.

Latin America

In the Americas abuses of female rights on the area of sexual and reproductive health are very common and take the form of domestic violence and violence in the workplace. After decades of dictatorships in some countries, democracy has not meant an end to impunity for violations of women rights. Women struggle daily to gain even minimal autonomy over their intimate lives achieving sexual and reproductive health standards. Women may be subjected to rape, while many more are denied access to contraceptives and reproductive health services, and refused the possibility to decide to terminate unwanted pregnancies with safe and legal abortions. Across the region, millions of abortions are performed every year, most of them under unsafe conditions, causing millions of deaths. Therefore, access to safe abortion should be ensured and the establishment of related legislation must be guaranteed. Women's right to the highest attainable standard of health is also compromised by the manner in which some countries address the growing HIV/AIDS epidemic in the region. Latin America and the Caribbean is the region with the second highest HIV prevalence rate after sub-Saharan Africa. In the Dominican Republic, for example, women are subjected to illegal HIV testing without consent when they seek employment or health care, and those who are tested positive are routinely fired from their jobs and cannot access public healthcare. In addition, the results are revealed to the families of the women, without prior consent of the females. In 1994, the Organization of American States (OAS) adopted the only international treaty specifically focused on the prevention and punishment of violence against women: The Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women, the Convention of Belém do Pará.

Asia

Discrimination and abuse of females is a common phenomenon in Asia, since violations of human rights have introduced a crisis in the region. The abuses take several forms and they depend on woman's ethnicity, sexual orientation, religion, age, race, class and origins. Governments across the region have mixed records in protecting women's rights-with some governments, such as Pakistan, routinely flouting their obligations; others, such as Indonesia, failing to back up rhetoric with resources and political will; and still others, such as India, condemning women's rights initiatives to flounder against apathy and incompetence. In India also, global concern has raised the cases of rapes of women during 2013. In recent decades, Asian women's labour force participation and earning power has grown. Yet women workers across industries endure sexual harassment, poor working conditions, pregnancy-based discrimination, and glass ceilings. Women often receive less pay than men for equal work.

Abuses are especially common in export-processing zones in countries such as Bangladesh, China, and the Philippines. Most governments have failed to prevent or respond effectively to violence against women. Survivors of violence often confront formidable challenges in obtaining redress-ranging from gaps in legal protections, onerous procedural requirements, unresponsive police, and lengthy, costly trials. Furthermore, women who seek help from the justice system are doubly victimized. Women are subject to sexual harassment and abuse by the police. Under Pakistan's Hudood Ordinances, women who report rape may instead be convicted of adultery if they cannot produce four male witnesses to support their claim. Finally, most countries fail to criminalize marital rape. Women and girls' education varies strikingly across the region. In East Asia and most of Southeast Asia, women's literacy and girls' secondary school enrolment rates are typically equal or even surpass those of males. However, in South Asia, female literacy rates remain staggeringly low. Eighty-six percent of Afghan women are illiterate, compared to 57 percent of Afghan men. Change is slow even for younger generations: in some provinces of Afghanistan, less than 10 percent of girls aged 7-12 attend school, compared to 37-63 percent of boys aged 7-12. Although many governments in the region have ratified the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW), and a few its optional protocol, their implementation rarely meets national and international legal obligations. Protection of women's rights has been uneven and inadequate.

Middle East & North Africa

The human rights of women throughout the Middle East and North Africa are systematically denied by each of the countries in the region, despite the diversity of their political systems. People are subjects of confinement and limitations concerning expression and assembly. Family planning issues and sexuality matters in countries like Iran, Egypt, Israel, Lebanon are closely associated with religious codes and laws. Women are treated as inferior into a patriarchal context and they have not the same rights with men with respect to marriage, divorce, child custody and inheritance since men are responsible for family decision making. Even though women activists are working within sharia law to protect human rights of women, some others ask for separation of religion and government seeing religious fundamentalism as a ghost that haunts the lives of girls and mature women. Women in Jordan who are thought to have "dishonoured" their family have been beaten, shot, or stabbed to death by their male family members. The Jordanian penal code condones these killings by providing the perpetrators of these crimes with reduced sentencing under the law. The relationship between women and the state in the Middle East and North Africa is essentially mediated by men. Husbands in Egypt and Bahrain, for example, can file an official complaint at the airport to forbid their wives from leaving the country for any reason. Most countries in the region-with the exception of Iran, Tunisia, Israel, and to a limited extent Egypt-have permitted only fathers to pass citizenship on to their children. Women married to non-nationals are denied this fundamental right. While many countries in the region have ratified the CEDAW, most have also entered extensive reservations to its provisions due to perceived inconsistencies with sharia. These reservations have allowed countries to evade their responsibilities under the convention.

Persistent and insidious discrimination and violence against women rooted in custom and law remains widespread in the region undermining the very equality guarantees that the convention seeks to promote.

Europe and the USA

Although some form of sex education (including reproductive stages, and childbirth) is part of the curriculum at many schools, it remains a controversial issue in several countries, particularly with regard to the age at which children should start receiving such education, the amount of detail which is revealed, and topics dealing with human sexuality and behaviour (eg. safe sex practices and masturbation, and sexual ethics). In the United States in particular, sex education raises much contentious debate. Chief among controversial points is whether covering child sexuality is valuable or detrimental; the use of birth control such as condoms and hormonal contraception; and the impact of such use on pregnancy outside marriage, teenage pregnancy, and the transmission of STIs. Countries with more conservative attitudes towards sex education (including the UK and the U.S.) have a higher incidence of STIs and teenage pregnancy.

Further Reading

(Very important readings to understand the various aspects of the debate)

<http://www.ohchr.org/Documents/Issues/Women/WRGS/Health/ReportHLWG-humanrights-health.pdf>

<https://documents-ddsny.un.org/doc/UNDOC/GEN/N06/519/97/PDF/N0651997.pdf?OpenElement/AIDS> :

http://www.ohchr.org/Documents/Issues/Women/WRGS/SexualHealth/INFO_HIV_W EB.pdf

Committee on the Rights of the Child, General Comment 4 on adolescent health

Committee on the Rights of the Child, General Comment 7 on implementing child rights in early childhood

Committee on the Rights of the Child, General Comment 15 on the right of the child to the enjoyment of the highest attainable standard of health.

Agenda 2: Measures for the Empowerment of Rural Women

KEY TERMS

1. Rural Areas

The Food and Agricultural Organisation (FAO) has pondered over this definition for a while now, and while they do perceive rural areas to be “not urban”, the inconsistency arises since each country has its own way of defining urban areas. However, to ease comprehension on a broader scale, rural areas are those which are located outside city areas and those which “relate to the countryside”.

2. Empowerment

Although “empowerment” is the process of becoming increasingly confident, bold and aware of one’s rights, empowerment of women in rural areas specifically, is to recognize their agricultural, financial, educational rights and the existence of gender equality.

3. Gender Equality

Gender equality is “the state in which access to rights or opportunities is unaffected by gender.” The majority of obstacles which rural women face agriculturally derive from gender stereotypes and gaps which still linger in many rural areas.

4. Gender Division of Labour

Gender division in labor is a central aspect of gender inequality. It refers to assigning women and men with certain tasks based on their gender, and/or prohibiting them from performing others.

5. Health

The World Health Organisation defines ‘health’ as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”

6. Food Security

Food security is defined as “ the state of having reliable access to a sufficient quantity of affordable, nutritious food”. The United Nation defines food security as “having four main components: availability, access, utilisation and stability.” It makes a valid point in stating that “rural women play key roles in maintaining all four pillars of food security: as food producers and agricultural entrepreneurs”.

RURAL WOMEN AS HUMAN RESOURCES

For the empowerment of rural women of all ages and girls to be realised through sustainable development, there must be more than a superficial commitment to the Sustainable Development Goals. Instead, there must be a concerted action across all

countries and communities. Approaching gender equality as a crosscutting issue requires gender to be included at all stages of policy development, implementation, monitoring and accountability. Rural women and girls are crucial contributors, implementers and beneficiaries of sustainable development. Their empowerment is fundamental to the achievement of the full 2030 Agenda.

Rural women, especially indigenous women's traditional knowledge of environmental management must be utilised. They play a vital role in agricultural development and the achievement of food security, to ensure the health and well-being of families and communities. Let's not forget the women in rural areas who are not farmers, live in developed countries and are confronted with numerous cuts to infrastructure and facilities. Their full participation is therefore essential to achieve sustainable development as defined in Principle 20 of the 1992 Rio Declaration and subsequent reviews. With increased feminization of agriculture, 43% of the world's agricultural labour force and more than 60% in developing countries are women, therefore contributing to an important engine of growth and poverty reduction in the rural economy.

CHALLENGES FACED BY WOMEN IN RURAL AREAS

Rural women play a vital role in agricultural production, a critical component of food security; however, they are unable to reach their full potential due to discriminatory norms, policies and laws. Women are less likely to own their own land; property laws discriminate against women inheriting family property, widows are discarded in their rights to inherit from their deceased husband, and custom and patriarchal social norms often favour male relatives. These barriers threaten rural women's food security, forcing them to migrate to urban areas searching for other livelihoods. Discriminatory laws and policies which prevent women throughout the life-course from controlling their productive resources, lock them in a cycle of poverty and prevent them from being economically empowered. Investing in small-scale farming, with the particular inclusion of women, is a vital step towards meeting the challenges of food production in the future. Women are lifelong agents of change in their families, typically investing 90% of their earnings into their families and communities compared to 35% by men, thus more likely to break the inter-generational cycle of poverty.

Governments are not living up to their international commitment to protect women from discrimination, as the gap between de jure and de facto discrimination persists. Rural women still find it more difficult to access basic education and vocational (secondary) education provision; as girls are expected to assist with family routines such as fetching and carrying fuel and water. According to the UNESCO 2016 Global Education Monitoring Report, some 63% of women, predominantly living in rural areas in sub-Saharan Africa, the Arab States and in South and West Asia, have not attained even minimal literacy skills.

Education provides a major key to lifting women and girls out of poverty and enabling them to achieve their true potential. Challenges of Accountability and Monitoring of Initiatives Global initiatives designed to benefit the daily lives of people everywhere risk not being implemented appropriately, if at all, unless they are regularly monitored and accounted for.

To measure whether rural women and girls benefit from sustainable development efforts, it is critical to have accurate and reliable information through qualitative and quantitative indicators, including citizen generated and private sector data. For knowledge about the status of rural women and girls to be accurate, it is important that gender and age differentiated statistics and indicators are collected nationally, regionally and globally to measure gender gaps at each life stage and adjust development programmes to rectify inequalities. At a minimum, data should be disaggregated based on age, sex, marital status, geography, income, disability, race and ethnicity and other factors relevant to monitoring inequalities (including multiple inequalities experienced by women and girls) as stated in Sustainable Development Goal 17.18.

Although some indicators are measured by household (not by individual), it remains important that the data collected for those indicators is disaggregated. It is essential to know how the household is comprised, for example if a woman is alone raising her children or an older widow, this can often prematurely allow poverty and abuse to prevail. Without this information it will be difficult to properly and fully identify the gaps and challenges facing women and girls' empowerment as part of sustainable development.

Without mandated and obligatory follow-up and review processes, there is a risk that the voices of women and girls will go unheard, systematically and in all sectors. The voluntary nature of reporting on progress provides countries with the option not to follow-up or review the implementation of the Sustainable Development Goals at all, or to be selective in their review. Actions undertaken by the private sector contributing to the Sustainable Development Goals must also be accountable, as often their own interests do not prioritise the needs of vulnerable and marginalised people.

Yet women face significant constraints in maximizing their productivity. They often do not have equal access to productive inputs or to markets for their goods. They own only 15 percent of the land worldwide, work longer hours than men and earn lower wages. They are over-represented among workers in the informal labour market, in jobs that are seasonal, more precarious and not protected by labour standards.

MAJOR COUNTRIES AND ORGANISATIONS INVOLVED WITH THE ISSUE

Although almost all countries with rural areas need measures for the empowerment of women to some extent, there are a few worth mentioning, along with the aid of a few international, unbiased organisations.

African Countries

Developing African nations display the highest illiteracy rates and the highest forms of poverty amongst women in rural regions. Rural women in southern African nations specifically face numerous hardships including high rates of HIV as a result of rapes and sexual abuse, incompetent forms of education and health care as well limited access to employment. Un Women has collaborated with various organizations including UNESCO and the FAO and provided aid in empowering women in African

regions where gender inequality is a foremost issue particularly in Zimbabwe, Kenya, Ethiopia, South Sudan and Uganda.

South/South-East Asian Countries

Rural areas in south east and south Asia are faced with proliferating food prices, low incomes, severe climate change and decreasing control over seeds. Nations such as Indonesia, China, India, The Philippines, Cambodia, Sri Lanka and Malaysia have a principal role in this issue.

In China, Un Women has been active in various rural regions such as Ningxia Hui and has prompted the education of women in adapting to climate change e.g learning about maintaining advanced irrigation systems. Additionally, in order to rid of gender stereotypic cultural norms and set up more open ways of thinking, drama troupes stage performances illustrating the value of women's participation in water management.

In order to provide rural women in India with improved access to financial resources, the Dalit Women Women's Livelihoods Accountability Initiative helps women open up bank accounts under their own name which ultimately ameliorates their rights.

UN Women

UN women perhaps hold the most principal role in achieving equal rights for rural women and empowering them in all aspects. The organization displays an active participation in the issue ensuring that rural women's rights are protected and their lives improved in terms of health, education and income. UN Women created three international days from 15-17 in order to commemorate their role in development. (International Day of Rural Women (15 October), World Food Day (16 October) and International Day for the Eradication of Poverty (17 October)

Associated Country Women of the World (ACWW)

ACWW is one of the largest development organisations for rural women, working with 420 member societies and affiliates to represent more than 9 million women in 75 countries worldwide. They engage with, and advocate for women at local, national and international levels. With their headquarters in London, this organisation has been working for the empowerment of rural women for over 90 years now.

They work with the following objectives in mind:

- To raise the standard of living for rural women and their families through education, training and community development programmes
- To provide practical support to our members and help them set up income-generating schemes
- To support educational opportunities for women and girls, and help eliminate gender discrimination

- To give rural women a voice at an international level through our links with UN agencies bodies

Food and Agriculture Organisation (FAO)

The Food and Agriculture Organisation was established in 1945 and since then has actively improved the situation of rural women by collaborating with different organizations such as UN women. It aims to achieve food security for all by improving agricultural productivity and improving food nutrition. Gender equality is a prime objective of the organisation in order to improve the lives of rural populations and to ultimately increase output amongst women farmers thus taking a step towards accomplishing global food security.

TIMELINE OF EVENTS

Date	Event
April 1929	First International Conference of Rural Women, London 46 women from 24 countries attended four-day conference. A committee was set up to organize a second conference of rural women's organizations in Vienna.
1930	A conference was held in Vienna by the International Council of Women in order to form a 'Liaison Committee' of rural women's organizations. This committee became known as the 'Liaison Committee of Rural Women's Organizations' which later became the 'Associated Country Women of the World'. This organization aims to promote the rights of women in rural areas and have done much to do so.
June 1946	Established Commission on Status of Women: The Commission on the Status of Women (CSW) was established by the UN in 1946 and is dedicated to promoting gender equality and the empowerment of women. It is held annually and has done much to promote the empowerment of women in rural areas in the last 60 years.
1985	Founding of the International Women's Rights Action Watch (IWRAP): The Women's Right Action Watch has done much ameliorate the situation of women in rural areas by successfully raising awareness on the issue. It provides a substantial amount of information on resources on the obstacles which rural women face.
1995	Fourth World Conference on Women hosted by the United

	Nations, Beijing: This conference marked a turning point in achieving gender equality. The Beijing Declaration and the Platform for Action, adopted by 189 nations, is an agenda for empowering women which has successfully helped women in rural areas through clauses on women's rights in education, measures to eradicate poverty as well as their role in decision making.
2000	UN Commission on Human Rights adopts the Resolution on Land Ownership: Rural women have faced many difficulties in gaining their rights in land ownership and for the first time, the resolution on land ownership was adopted within an agenda of the UN Commission on Human Rights and marked a turning point for women's rights as land holders.
2003	Adopted UN General Assembly's Resolution 58/146 on aspects of advancement of rural women: This resolution aimed to raise awareness on advancing women in rural areas and looked at a wide range of aspects in their empowerment, including an impact of macroeconomic policy on their conditions
2005	10 -year review and appraisal of the Beijing Platform for Action conducted at the 49th session of the Commission on the Status of Women
2007	World food prices increase dramatically: The increase of food prices was the genesis of a global food crisis and had alarming repercussions on women in poorer rural regions. The increase led to large percentages of women's livelihoods being lost and much of their assets had to be sold in order for them to provide for their families.
18 December 2007	Innovation of 'the International Day of Rural Women': Established by the General Assembly in its resolution 62/136 of 18 December 2007, this day recognizes "the critical role and contribution of rural women, including indigenous women, in enhancing agricultural and rural development, improving food security and eradicating rural poverty."
15 October 2008	The first International Day of Rural Women held: A critical moment in the history of rural women for raising awareness and irrevocably promoting their rights
27 February-9 March 2012	Fifty-sixth session of the Commission on the Status of Women: The 56th session had a priority theme which is key to this issue: The empowerment of rural women and their role in poverty and hunger eradication, development and current challenges
September 2012	UN launches new programme to empower rural women and girls: Accelerating Progress Toward the Economic

	Empowerment of Rural Women
June 2015	SDG Fund Programme on Rural Women's Economic Empowerment established: This program aims to accelerate economic empowerment of rural women and has been developed as a separate and differentiated component on Gender Equality and Women Empowerment which was implemented by Un Agencies and coordinated by UN Women.