Commission on the Status of Women

Report on the fifty-third session
(2-13 March 2009)

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Note

Symbols of United Nations documents are composed of capital letters combined with figures.
## Contents

**Chapter** | **Page**
--- | ---
I. Matters calling for action by the Economic and Social Council or brought to its attention | 1
   A. Agreed conclusions on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS | 1
   B. Gender perspectives on global public health: implementing the internationally agreed development goals, including the Millennium Development Goals | 10
   C. Draft resolutions for adoption by the Council | 13
      I. Future operation of the International Research and Training Institute for the Advancement of Women | 14
      II. Situation of and assistance to Palestinian women | 15
      III. Future organization and methods of work of the Commission on the Status of Women | 17
      IV. Working Group on Communications on the Status of Women of the Commission on the Status of Women | 19
   D. Draft decision for adoption by the Council | 20
      Report of the Commission on the Status of Women on its fifty-third session and provisional agenda and documentation for the fifty-fourth session of the Commission | 20
   E. Matters brought to the attention of the Council | 21
      Resolution 53/1. Preparations for the fifty-fourth session of the Commission on the Status of Women | 21
      Resolution 53/2. Women, the girl child and HIV and AIDS | 22
      Decision 53/101. Documents considered by the Commission on the Status of Women | 29
II. Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly entitled “Women 2000: gender equality, development and peace for the twenty-first century” | 30
III. Communications concerning the status of women | 41
IV. Follow-up to Economic and Social Council resolutions and decisions | 45
V. Provisional agenda for the fifty-fourth session of the Commission | 46
VI. Adoption of the report of the Commission on its fifty-third session | 47
VII. Organization of the session | 48
   A. Opening and duration of the session | 48
   B. Attendance | 48
C. Election of officers ......................................................... 48
D. Agenda and organization of work ............................................. 49
E. Appointment of the members of the Working Group on Communications on the Status of Women ................................................................. 50
F. Documentation ........................................................................ 50
Chapter I

Matters calling for action by the Economic and Social Council or brought to its attention

A. Agreed conclusions on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS

1. The following agreed conclusions adopted by the Commission are transmitted to the Economic and Social Council, in accordance with its resolution 2008/29 of 24 July 2008, for adoption and as an input into the annual ministerial review of 2009.

The equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS*

1. The Commission on the Status of Women re-affirms the Beijing Declaration and Platform for Action, the outcome documents of the twenty-third special session of the General Assembly, and the declaration adopted by the Commission on the occasion of the tenth anniversary of the Fourth World Conference on Women.

2. The Commission re-affirms the outcomes of the 1994 International Conference on Population and Development, the 1995 World Summit for Social Development, the 2000 Millennium Summit, the 2002 World Summit on Children and the 2002 Monterrey Consensus on Financing for Development, recalls the 2005 World Summit, and recognizes that their full and effective implementation is essential to achieve the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS.

3. The Commission reiterates that the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child, and the Optional Protocols thereto, as well as other conventions and treaties, provide a legal framework and a comprehensive set of measures for the promotion of equal sharing of responsibilities between women and men.

4. The Commission reiterates the 2001 Declaration of Commitment on HIV/AIDS and the 2006 Political Declaration on HIV/AIDS, which, inter alia, expressed concern that gender inequality increases women’s vulnerability to HIV/AIDS and the overall expansion and feminization of the pandemic, and also acknowledges that women and girls bear the disproportionate burden of caring for and supporting those infected and affected by HIV/AIDS.

5. The Commission duly notes the Workers with Family Responsibilities Convention, 1981 (Convention No. 156) of the International Labour Organization and its corresponding Recommendation (No. 165), which provide a framework for reconciling work and family responsibilities.

6. The Commission recognizes that gender inequalities still exist and are reflected in imbalances of power between women and men in all spheres of society. The Commission further recognizes that everyone benefits from

* For the discussion, see chap. II, paras. 55-61.
gender equality and that the negative impacts of gender inequality are borne by society as a whole, and emphasizes, therefore, that men and boys, through taking responsibility themselves and working jointly in partnership with women and girls, are essential to achieving the goals of gender equality, development and peace. The Commission recognizes the capacity of men and boys in bringing about changes in attitudes, relationships and access to resources and decision-making which are critical for the promotion of gender equality and the full enjoyment of all human rights by women.

7. The Commission recognizes that the full integration of women into the formal economy, in particular, into economic decision-making, means changing the current gender-based division of labour into new economic structures where women and men enjoy equal treatment, pay and power, including sharing of paid and unpaid work.

8. The Commission notes that the costs of unequal sharing of responsibilities include weaker labour market attachment for women (forgone jobs, shorter working hours, confinement to informal work, and lower wages), weaker access to social security benefits, and less time for education/training, leisure and self-care, and political activities.

9. The Commission recognizes that caregiving work at the household, family and community levels includes the support and care of children, older persons, the sick, persons with disabilities, and caring associated with family kinship and community responsibilities, which is affected by factors such as size of household and number and age of children, with significant differences between developed and developing countries in the availability of infrastructure and services supporting caregiving. The Commission also recognizes that gender inequality and discrimination contribute to the continuing imbalance in the division of labour between women and men and perpetuate stereotypical perceptions of men and women. The Commission further recognizes that changes in demographics in ageing and youthful societies, and in the context of HIV/AIDS, have increased the need for, and scope of, care.

10. The Commission further welcomes ongoing partnerships between stakeholders at all levels and the commitments on gender equality and HIV/AIDS announced at the 2008 high-level event on the Millennium Development Goals.

11. The Commission expresses its deep concern over the negative impact of the global economic and financial crisis, which could hamper progress in achieving the Millennium Development Goals and the implementation of the Beijing Declaration and Platform for Action.

12. The Commission acknowledges the important role of national machineries for the advancement of women, national human rights institutions where they exist, and civil society, especially women’s organizations, in advancing the implementation of the Beijing Declaration and Platform for Action and in promoting the equal sharing of responsibilities between women and men, and recognizes their contributions to the work of the Commission.
13. The Commission reaffirms the commitment to the equal participation of
women and men in public and political life as a key element in women’s and
men’s equal participation in caregiving.

14. The Commission acknowledges General Assembly resolution 62/277 of
15 September 2008, in particular its gender-specific provisions, and in this
context encourages the ongoing work on gender equality and the
empowerment of women.

15. The Commission urges Governments, including local authorities, to take
the following actions, as appropriate, with the relevant entities of the United
Nations system, international and regional organizations, within their
respective mandates, as well as civil society, the private sector, employer
organizations, trade unions, media and other relevant actors:

(a) Intensify efforts to fully implement the Beijing Platform for Action,
the outcome documents of the International Conference on Population and
Development and the World Summit for Social Development, and the
Monterrey Consensus on Financing for Development, and the outcomes of
their follow-up processes;

(b) Consider ratifying or acceding to, as a particular matter of priority,
the Convention on the Elimination of All Forms of Discrimination against
Women, the Convention on the Rights of the Child and their respective
Optional Protocols, limit the extent of any reservations that they lodge and
regularly review such reservations with a view to withdrawing them so as to
ensure that no reservation is incompatible with the object and purpose of the
relevant treaty; and implement them fully by, inter alia, putting in place
effective national legislation, policies and action plans;

(c) Consider, as a matter of priority, the ratification and
implementation of the Workers with Family Responsibilities Convention, 1981
(Convention No. 156) of the International Labour Organization, and the
implementation of its corresponding Recommendation (No. 165), which
provide a framework for reconciling work and family responsibilities;

(d) Review, and where appropriate, revise, amend or abolish all laws,
regulations, policies, practices and customs that discriminate against women or
have a discriminatory impact on women, and ensure that the provisions of
multiple legal systems, where they exist, comply with international human
rights obligations, commitments and principles, including the principle of
non-discrimination;

(e) Ensure that women and children have full and equal access to
effective legal protection against violations, including through domestic
mechanisms of justice which are monitored and revised to ensure that they
function without discrimination, as set out under all conventions related to
human rights, including the Convention on the Elimination of All Forms of
Discrimination against Women;

(f) Mainstream gender perspectives into all legislation, policies and
programmes and promote incorporation of gender-responsive budgeting
processes across all areas and at all levels, and enhance international
cooperation to promote gender equality and empowerment of women and the
equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS;

(g) Establish concrete goals and benchmarks and adopt positive actions and temporary special measures, as appropriate, to enhance women’s equal participation in decision-making processes at all levels to further the equal sharing of responsibilities between women and men;

(h) Strengthen coordination, accountability, effectiveness and efficiency in the United Nations system, including its capacity to support Member States in the implementation of national policies for the achievement of, and to address under-resourcing in, gender equality and the empowerment of women;

(i) Promote understanding between women and men in order to strengthen women’s access to resources and decision-making in policies and programmes to support caregiving, including in the context of HIV/AIDS. Ensure that men and boys, whose role is critical in achieving gender equality, are actively involved in policies and programmes that aim to improve the equal sharing of responsibilities with women and girls, so as to foster changes in attitudes and behaviour patterns in order to promote and protect the human rights of women and the girl child;

(j) Take appropriate measures to achieve equal sharing of work and parental responsibilities between women and men, including measures to reconcile care and professional life and emphasize men’s equal responsibilities with respect to household work;

(k) Acknowledge the need to address violence against women holistically, including through the recognition of linkages between violence against women and other issues such as HIV/AIDS, poverty eradication, food security, peace and security, humanitarian assistance, health and crime prevention;

(l) Make efforts to devise comprehensive social and cultural strategies, including policies and programmes, that acknowledge the societal and individual value of adequate care for all and provide both women and men with full and equal human development opportunities;

(m) Take measures to protect and address the needs of women and girls in situations of humanitarian emergencies, in particular those carrying a disproportionate burden of caregiving responsibilities;

(n) Design, strengthen and implement national development plans and strategies, including poverty eradication strategies, with the full and effective participation of women and girls, including in decision-making, that reduce the feminization of poverty and HIV/AIDS, to enhance the capacity of women and girls and empower them to meet the negative social and economic impacts of globalization;

(o) Design, implement and promote family friendly policies and services, including affordable, accessible and quality care services for children and other dependants, parental and other leave schemes and campaigns to sensitize public opinion and other relevant actors on equal sharing of employment and family responsibilities between women and men;
(p) Promote greater understanding and recognition that caregiving is a critical societal function and should be equally shared between women and men within the family and households, and strengthen dialogue and coordination between all relevant stakeholders;

(q) Measure, in quantitative and qualitative terms, unremunerated work that is outside national accounts, in order to better reflect its value in such accounts, and recognize and take necessary measures to incorporate the value and cost of unpaid work within and between households and society at large in policies, strategies, plans and budgets across all relevant sectors;

(r) Measure, in quantitative terms, unremunerated work that is outside national accounts, to accurately assess and reflect its value in satellite or other official accounts that are separate from but consistent with core national accounts;

(s) Adopt, implement and monitor gender-sensitive policies and programmes to ensure the full enjoyment of human rights, social protection, and decent working conditions of both paid and unpaid caregivers;

(t) Adopt, implement, evaluate and, where necessary, review gender-sensitive legislation and policies that promote balance between paid work and family responsibilities, reduce occupational and sectoral segregation, advance equal remuneration, and ensure that workers with flexible arrangements are not discriminated against;

(u) Ensure that women and men have access to maternity, paternity, parental and/or other forms of leave, and consider providing incentives to men to avail themselves of such leave for caregiving purposes, and take measures to protect women and men against dismissal, and guarantee their right to resume the same or equivalent post after utilizing such leave;

(v) Ensure that social protection measures such as health insurance, child and family allowances and information on these benefits are widely available and accessible, and that these measures do not reinforce gender biases, that workers are not discriminated against when they avail themselves of the benefits available, and that these benefits are regularly reviewed to target all workers, including, as appropriate, in the informal sector;

(w) Develop and improve sustainable and adequate social protection and/or insurance schemes, including pension and savings schemes, that meet basic minimum needs, and recognize leave periods for caregiving in the calculation of respective benefits;

(x) Strengthen efforts to protect the rights and ensure decent work conditions for all domestic workers, including women migrant domestic workers, in, inter alia, their working hours and wages, and to improve their access to health-care services and other social and economic benefits;

(y) Take measures to address the special needs of girls, including migrant girls, employed as domestic workers and caregivers, as well as those that have to perform excessive domestic chores and caregiving responsibilities, and to provide access to education, vocational training, health services, food, shelter and recreation, while ensuring the prevention and elimination of child labour and economic exploitation of girls;
(z) Develop gender-sensitive measures, including national action plans, where appropriate, to eliminate the worst forms of child labour;

(aa) Strengthen education, health and social services and effectively utilize resources to achieve gender equality and the empowerment of women and ensure women’s and girls’ rights to education at all levels and the enjoyment of the highest attainable standard of physical and mental health, including sexual and reproductive health, as well as quality, affordable and universally accessible primary health care and services, as well as sex education based on full and accurate information in a manner consistent with the evolving capacities of girls and boys, and with appropriate direction and guidance;

(bb) Develop and/or expand, and adequately resource, the provision of equitable, quality, accessible and affordable care and support services for all people needing care, including through community-based support systems, while ensuring that such services meet the needs of both caregivers and care recipients, bearing in mind the increased labour mobility of women and men, and, where applicable, kinship and extended family responsibilities, and the importance of adequate nutrition;

(cc) Assess and respond to the needs for integrated human resources at all levels of the health system, in order to achieve Millennium Development Goal 6 and the targets of the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS, and take actions, as appropriate, to effectively govern the recruitment, training, deployment and retention of skilled health personnel in prevention, treatment, care and support for those infected and affected by HIV/AIDS;

(dd) Ensure that adequate investments are made to strengthen efforts through, inter alia, the allocation of resources to provide quality, accessible and affordable public services, including education, health and other social services which incorporate gender equality as a basic principle;

(ee) Increase the availability, access to, and use of critical public infrastructure, such as transportation, the provision of a safe, reliable and clean water supply, sanitation, energy, telecommunications and affordable housing programmes, in particular in poverty-stricken and rural areas, to reduce the burden of care on households;

(ff) Significantly scale up efforts towards the goal of universal access to comprehensive HIV/AIDS prevention programmes, treatment, care and support by 2010, and the goal of halting and reversing the spread of HIV/AIDS by 2015, and ensure that those efforts promote gender equality and take into account the caregiving responsibilities of both women and men;

(gg) Reaffirm that the full realization of all human rights and fundamental freedoms for all is an essential element of the global response to the HIV/AIDS pandemic, and ensure that in all national policies and programmes designed to provide comprehensive HIV/AIDS prevention, treatment, care and support, particular attention and support is given to women and girls at risk of, infected with or affected by HIV/AIDS, including young and adolescent mothers, and recognize that, inter alia, preventing and reducing stigma and discrimination, eradicating poverty and mitigating the impact of
underdevelopment are critical elements to achieve the internationally agreed goals in this regard;

(hh) Reaffirm that access to medication in the context of pandemics, such as HIV/AIDS, is one of the fundamental elements to achieve progressively the full realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health;

(ii) Recognize the increased feminization of the HIV/AIDS pandemic and ensure that existing HIV/AIDS policies, strategies, resources and programmes at all levels are reviewed and adapted to ensure that they contribute to empowering women and reducing their vulnerability to HIV/AIDS;

(jj) Integrate gender perspectives into national HIV/AIDS policies and programmes, as well as into national monitoring and evaluation systems, taking into account the caregiving responsibilities of both women and men, including in community, family and home-based care, and ensure the full and active participation of caregivers, in particular women, including those living with HIV/AIDS, in decision-making processes;

(kk) Develop multisectoral policies and programmes and identify, strengthen and take all necessary measures to address the needs of women and girls, including older women and widows, infected with or affected by HIV/AIDS, and those providing unpaid care, especially women and girls heading households, for, inter alia, social and legal protection, increased access to financial and economic resources including microcredit and sustainable economic opportunities, education including opportunities to continue education, as well as access to health services, including affordable antiretroviral treatment, and nutritional support;

(ll) Emphasize the importance of HIV prevention as a long-term strategy to reduce the number of new HIV infections and, consequently, to reduce the burden of caregiving responsibilities on both women and men through universal access to comprehensive prevention, treatment, care and support programmes, including sexual and reproductive health and services, and to increase access to voluntary and confidential counselling and HIV testing, investments in HIV/AIDS and sex education and awareness, based on full and accurate information in a manner consistent with the evolving capacities of the child, with appropriate direction and guidance, research and development of, and access to, new, safe, quality and affordable HIV/AIDS prevention products, diagnostics, medicines and treatment commodities, including female-controlled methods, and new preventive technologies and microbicides and AIDS vaccines;

(mm) Strengthen, expand, improve and promote the accessibility of quality comprehensive public health care and services, including community-based health services specifically related to the prevention and treatment of HIV/AIDS, including for people with disabilities, as well as hospital and hospice-based care, and psychosocial support services, and increase the number of professional health-care providers, especially in rural areas, to alleviate the current burden on women and girls who provide unpaid care services in the context of HIV/AIDS;
(nn) Design and implement programmes, including awareness-raising programmes, to promote the active involvement of men and boys in eliminating gender stereotypes as well as gender inequality and gender-based violence and abuse, and educate men, including young men, to understand their role and responsibility in the spread of HIV/AIDS and in matters related to their sexuality, reproduction, child-rearing and the promotion of equality between women and men and girls and boys, and enable women and men to adopt safe and responsible, non-coercive sexual and reproductive behaviour, including increased access to an appropriate and comprehensive package of prevention programmes and support, to prevent the transmission of HIV and other sexually transmitted infections, including through increased access to education, including in the areas of sexual and reproductive health, for young people, and encourage the full participation of men and boys in caregiving, prevention, treatment, support and impact evaluation programmes;

(oo) Develop and implement appropriate policies and programmes to address stereotypical attitudes and behaviours to promote the equal sharing of responsibilities between women and men across the life cycle;

(pp) Develop gender-sensitive education and training programmes, including for educators at all levels, aimed at eliminating discriminatory attitudes towards women and girls and men and boys, to address gender stereotypes in the context of equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS;

(qq) Take measures to increase the participation of men in caregiving both within households and in care professions, such as information and awareness campaigns, education and training, school curriculum, peer programmes and government policies to promote men’s participation and responsibilities as fathers and caregivers, and to encourage men and boys to become agents of change in promoting the human rights of women and in challenging gender stereotypes, in particular as they relate to men’s roles in parenting and infant development;

(rr) Address gender stereotypes in the context of equal sharing of responsibilities between women and men by encouraging media to promote gender equality and the non-stereotypical portrayal of women and girls and men and boys, and by carrying out and publishing research on views, especially of men and boys, on gender equality and perceptions of gender roles, as well as by assessing the impact of efforts undertaken in achieving gender equality;

(ss) Develop strategies to eliminate gender stereotypes in all spheres of life, including in public and political life, and foster the positive portrayal of women and girls as leaders and decision-makers at all levels and in all areas, to achieve the equal sharing of responsibilities between women and men;

(tt) Encourage and support men and boys to take an active part in the prevention and elimination of all forms of violence, especially gender-based violence, including by developing strategies to eliminate gender stereotypes and by developing programmes that promote respectful relationships, and rehabilitate perpetrators as part of a strategy of zero tolerance for violence against women and girls;
(uu) Conduct research and collect sex- and age-disaggregated data and develop gender-sensitive indicators, as appropriate, to inform policymaking, conduct assessments in a coordinated manner, and measure progress in the sharing of responsibilities between women and men, including in the context of HIV/AIDS, and identify the obstacles and stereotypes men may face in assuming increased caregiving responsibilities;

(vv) Strengthen the capacity of national statistical offices and, when necessary, measurement systems, to effectively collect comprehensive information on all categories of activities, including through time-use surveys, to inform policy development that facilitates the sharing of unpaid work between women and men;

(ww) Enhance the collection and dissemination of statistics on the relative participation of women and men in leadership roles in public office and in strategic economic, social and political decision-making positions, in order to promote the equal sharing of responsibilities between women and men in these spheres;

(xx) Adopt appropriate measures to overcome negative impacts of the economic and financial crisis, including on women and girls, and integrate a gender perspective into these measures so that they equally benefit women and men, while seeking to maintain whenever possible adequate levels of funding for gender equality and the empowerment of women;

(yy) Take all appropriate measures to integrate women, on an equal basis with men, in decision-making regarding sustainable resource management and the development of policies and programmes for sustainable development, including to address the disproportionate impact of climate change on women, including their displacement from income-generating activities, which greatly adds to unremunerated work, such as caregiving, and negatively impacts on their health, well-being and quality of life, particularly those whose livelihoods and daily subsistence depend directly on sustainable ecosystems;

(zz) Allocate adequate financial resources at the international level for the implementation of the Beijing Platform for Action, the Cairo Plan of Action, the outcome documents of the twenty-third special session of the General Assembly, the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS, in developing countries, especially through the strengthening of their national capacities;

(aaa) Strengthen international cooperation in order to assist in the development of human resources for health, through technical assistance and training, as well as to increase universal access to health services, including in remote and rural areas, taking into account the challenges facing developing countries in the retention of skilled health personnel;

(bbb) Urge developed countries that have not yet done so, in accordance with their commitments, to make concrete efforts towards meeting the target of 0.7 per cent of their gross national product for official development assistance to developing countries and 0.15 to 0.20 per cent of their gross national product to least developed countries, and encourage developing countries to build on the progress achieved in ensuring that official development assistance
is used effectively to help meet development goals and targets and, inter alia, to assist them in achieving gender equality and the empowerment of women.

B. Gender perspectives on global public health: implementing the internationally agreed development goals, including the Millennium Development Goals*

2. The following summary is transmitted to the Economic and Social Council, in accordance with its resolution 2008/29 of 24 July 2008, as an input into its annual ministerial review of 2009.

1. On 12 March 2009, the Commission on the Status of Women convened an interactive expert panel on the theme “Gender perspectives on global public health: implementing the internationally agreed development goals, including the Millennium Development Goals”. The session was moderated by Olivier Belle, Chairperson of the Commission. The President of the Economic and Social Council, Sylvie Lucas, Permanent Representative of Luxembourg to the United Nations, made an opening address. The panellists included Anjana Bhushan, Western Pacific Regional Office, World Health Organization (WHO); Hernán Montenegro, Pan American Health Organization/WHO; and Lynn Collins, United Nations Population Fund (UNFPA).

2. Participants agreed that gender inequality reduced the potential for women worldwide to access quality health care. Effective and gender-sensitive health systems were critical to achieving the Millennium Development Goals related to health, in particular, those related to women. Participants emphasized that gender was a strong determinant of access to health and that women’s full and equal access to health care was impeded by a lack of gender-responsive health policies. Health information and research were also often gender-neutral, gender-blind or even gender-biased, and did not take sufficient consideration of women’s health needs and concerns. Women’s and men’s health-seeking behaviour differed, on the basis of their gender-specific roles, opportunities and expectations. Experience indicated that gender-responsive health systems delivered positive results for women and men, and it was therefore crucial to transform health systems to meet the needs of women and accelerate the achievement of health-related Millennium Development Goals.

3. While important progress towards the achievement of health-related Millennium Development Goals and reduction in overall health inequities was being made, significant gaps and inequities persisted. In efforts to strengthen health systems, renewed emphasis was placed on the role of primary health care in addressing health challenges and as the main strategy for attaining health for all. Reforms in primary health care aimed at better and more equitable health outcomes, greater efficiency and better service delivery, lower health-care costs and higher user satisfaction.

4. Participants stressed the importance of universal health coverage through primary health care to improve health for women and men. Lack of coverage disproportionately affected the poor, especially poor women, and women

* For the discussion, see chap. IV.
belonging to vulnerable groups such as minority or rural women. Experience indicated that women’s out-of-pocket health expenditures were in general higher than men’s; their contribution to and benefits received from social security schemes were lower; and comprehensive packages of services and entitlements did not always cover women’s specific health needs. Universal coverage as well as a gender-specific approach were critical in overcoming health inequities for women.

5. Service delivery reform in primary health care could have a positive impact on women’s right to health. Reforms should include a culturally and gender-sensitive approach that responded to the different health-seeking behaviours of women and men. Women’s input in decisions affecting their health was crucial and had to be enhanced.

6. The need to focus on capacity- and skill-building of health workers, through enhanced gender-sensitivity training, was recognized. It was noted that the majority of health workers were women and that much of the unpaid care work in households and communities was also performed by women. Service delivery should aim to enhance access to primary health care for women, as well as to reduce their unpaid caregiving responsibilities. There was also a need to focus, in a gender-sensitive manner, on effective community participation, raise awareness about people’s right to health, and encourage participation of vulnerable groups in health provision. A rights-based approach that emphasized providers’ obligations and care seekers’ rights should be applied, and training of health providers should focus on eliminating any stigmatizing attitudes or discrimination towards any person seeking care.

7. Participants stressed the role of public health literacy for health promotion and prevention of ill health, and noted that health education should be part of basic primary health-care packages. The importance of gender-sensitivity in health education for enhancing women’s health was stressed, as was the urgency of targeting health messages to the needs and priorities of women and girls in a gender-responsive manner. Consideration should be given to the choice of medium for delivering health messages and ways to take into account the barriers that women faced in accessing means of mass communication, including newspapers and the radio, as well as positive experiences with the use of interpersonal communication. The frequency and timing of such communication opportunities was critical to ensuring that women could take full advantage of those opportunities.

8. Participants called for gender-responsive health systems that provided sexual and reproductive health services for all women and girls. Less progress had been made towards achieving Millennium Development Goal 5, on improving maternal health, than any other Goal. At the global level, maternal mortality decreased by less than 1 per cent per year from 1990 to 2005, far below the 5.5 per cent annual improvement needed to reach the target. Maternal mortality represented one of the largest inequities in health, reflecting a lack of access to sexual and reproductive health care as well as the failure of the health system to adequately address the particular needs of women and girls. The consequences of failing to improve access to and the quality of sexual and reproductive health care included maternal morbidity and mortality, infertility and unintended pregnancies, fistula, sexually transmitted
infections and cervical and breast cancers. A number of effective strategies were available to enhance women’s sexual and reproductive health and accelerate progress towards achieving Millennium Development Goal 5, including increased access to skilled birth attendants and access to family planning and emergency obstetric care. Since young women were especially vulnerable to poor sexual and reproductive health, early childbearing, sexual coercion and violence, the inequities they faced in accessing quality services required particular attention.

9. The link between violence against women and women’s poor physical, mental and reproductive health was stressed. Participants noted that violence against women required a multisectoral response that included the public health perspective. The health sector should provide medical care, counselling, referrals, emergency contraception and prophylactic HIV treatment. The broader response should include legal measures, changing of attitudes and the provision of services for victims.

10. Participants emphasized the need for a gender-specific approach to the prevention of and response to the HIV/AIDS pandemic. The public health system should effectively address women’s increased vulnerability to HIV/AIDS and provide a gender-sensitive response. Women and girls had unequal access to health resources for the prevention, treatment and care of HIV/AIDS. They also faced particular cultural barriers in accessing services, including stigma and other negative repercussions when their HIV status was revealed. Integration of services for HIV prevention or treatment with reproductive and sexual health care was recognized as a good strategy for improving access to important public health benefits, including increased access to and use of HIV counselling and testing and condom use, as well as for addressing mother-to-child transmission of HIV.

11. Participants highlighted the particular situation of migrant women and the need for a gender-specific response by the public health system. Migrant women were particularly vulnerable to exploitation and violence, and may fear deportation because of their irregular status. As a consequence, migrant women often lacked access to basic health services such as regular check-ups and/or prenatal care. It was emphasized that migrant women should not be denied essential health services on the basis of their immigration status.

12. Participants noted the importance of collecting data disaggregated by sex, ethnicity, socio-economic status and, over time, in the area of public health. Such data needed to be analysed from a gender perspective, and the insights and results of such analysis had to be fully used in policy- and decision-making in the area of primary health care and in the health sector in general so as to ensure a gender-specific response. Participants also drew attention to the availability of tools and gender training materials aimed at the public health sector.

13. Participants recognized the importance of women’s economic and financial empowerment for improved health. The role of the education system towards this end was also highlighted. Participants drew attention to the linkages between the Millennium Development Goals, noting that efforts to eradicate poverty required by Goal 1 also contributed towards the
achievements of Goals 4 and 5, as well as Goal 3, on gender equality and the empowerment of women.

14. The need for increased health financing was noted, as was the need for increased gender-responsiveness of financing to ensure proportionate allocation of resources to women-specific health needs. Analysis of the differential disease burdens of women should result in commensurate resource allocation and expenditure. There was also a need to consider the scope of health insurance and social protection schemes as these did not typically cover the informal sector, where women predominate. Gender-responsive budgeting was suggested as an effective strategy for setting priorities in health resource allocation. Such gender-responsive budgeting was especially critical during times of financial and economic crisis.

15. Participants discussed the impact of the current financial crisis on public health in general, and on the health of women and girls in particular. In the light of past experience, it was suggested that the current financial crisis would be likely to expose households to increased poverty, and cause particular hardship for women. Cuts in public spending, including in the social sectors, as well as similar cuts in private health spending, were a concern. Such cuts would result in an increase in demand for public health services and, as a consequence, an overburdened public health-care sector. Donor aid could also decrease, which would particularly affect those countries whose health services relied on external aid. It was suggested that, with less disposable income, women were more likely to delay or forgo health-care services for themselves. Negative impacts of cuts in the health and social sector were expected to lead to increased malnutrition; a worsening of mental health; increased infant mortality rates; as well as increased frequency of communicable diseases such as HIV/AIDS and tuberculosis. Governmental action was pivotal in preventing or cushioning such outcomes.

16. It was therefore of the utmost importance that Governments and all other stakeholders carefully analysed the gender dimensions of the financial crisis. They had the opportunity to avert the potential negative effects and put in place measures to prioritize spending for public health with the greatest impact on women’s and girls’ health. There was a need to capture the value of women’s unpaid caregiving and to prevent increases in those responsibilities. Social safety nets, including for women in the informal economy, should be enhanced and women’s access to employment and economic resources such as microfinance should be increased. The use of gender-responsive budgeting and support for implementation of international commitments, including the achievement of the Millennium Development Goals, should be strengthened.

C. Draft resolutions for adoption by the Council

3. The Commission on the Status of Women recommends to the Economic and Social Council the adoption of the following draft resolutions:
Draft resolution I

Future operation of the International Research and Training Institute for the Advancement of Women*

The Economic and Social Council,

Recalling all of its previous resolutions on the situation of the International Research and Training Institute for the Advancement of Women, and in particular General Assembly resolution 63/157 of 18 December 2008,

Taking into account Commission on the Status of Women resolution 52/3 of 7 March 2008 on the strengthening of the International Research and Training Institute for the Advancement of Women,1

Welcoming the contributions of the Institute to the achievement of the Millennium Development Goals and the implementation of the Convention on the Elimination of All Forms of Discrimination against Women, 2 the Beijing Declaration and Platform for Action3 and the outcome document of the twenty-third special session of the General Assembly,4

Acknowledging the contributions of the Institute in promoting gender equality and the empowerment of women in the areas of security, international migration, in particular remittances and development, and governance and political participation,

Recognizing the contribution of the Institute to the ongoing efforts in gender mainstreaming through its research and training outputs involving national gender machineries, academic institutes, regional intergovernmental organizations, non-governmental organizations and the private sector,

1. Takes note of the report of the Secretary-General on strengthening the International Research and Training Institute for the Advancement of Women; 5

2. Requests the Institute, within its mandate, to continue to assist countries in promoting and supporting the political participation and economic and social advancement of women through training programmes;

3. Stresses the critical importance of voluntary financial contributions by Member States to the United Nations Trust Fund for the International Research and Training Institute for the Advancement of Women to enable it to carry out its mandate, and invites Member States to make voluntary contributions to the Trust Fund;

4. Calls for the diversification of funding resources, and in this regard invites Member States to continue to provide assistance and support to the Institute through voluntary contributions and substantive involvement in its projects and activities;

* For the discussion, see chap. II, paras. 62-66.
3 Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995 (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annexes I and II.
4 General Assembly resolution S-23/3, annex.
5. Looks forward to the enhanced implementation of the strategic plan of the International Research and Training Institute for the Advancement of Women under the leadership of the new director, and, in this regard, urges the Secretary-General to appoint, as a matter of priority, its new director.

Draft resolution II
Situation of and assistance to Palestinian women*

The Economic and Social Council,

Having considered with appreciation the report of the Secretary-General on the situation of and assistance to Palestinian women,6

Recalling the Nairobi Forward-looking Strategies for the Advancement of Women,7 in particular paragraph 260 concerning Palestinian women and children, the Beijing Platform for Action adopted at the Fourth World Conference on Women,8 and the outcomes of the twenty-third special session of the General Assembly entitled “Women 2000: gender equality, development and peace for the twenty-first century”,9


Reaffirming the important role of women in the prevention and resolution of conflicts and in peacebuilding, and stressing the importance of their equal participation and involvement in all efforts for the maintenance and promotion of peace and security and the need to increase their role in decision-making with regard to conflict prevention and resolution,

Recalling further the Declaration on the Elimination of Violence against Women10 as it concerns the protection of civilian populations,

Recalling the International Covenant on Civil and Political Rights,11 the International Covenant on Economic, Social and Cultural Rights11 and the Convention on the Rights of the Child,12 and reaffirming that these human rights instruments must be respected in the Occupied Palestinian Territory, including East Jerusalem,

Expressing grave concern over the increased difficulties being faced by Palestinian women and girls living under Israeli occupation, including the sharp increase in poverty, soaring unemployment, increased food insecurity, incidents of domestic violence, and declining health, education and living standards, including

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6 For the discussion, see chap. II, paras. 67-72.
8 Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995 (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annex II.
9 General Assembly resolution S-23/2, annex, and resolution S-23/3, annex.
10 See General Assembly resolution 48/104.
11 General Assembly resolution 2200 A (XXI), annex.
the rising incidence of trauma and decline in their psychological well-being, and expressing grave concern about the deepening humanitarian crisis and rising insecurity and instability on the ground in the Occupied Palestinian Territory, in particular in the Gaza Strip,

Deploring the deteriorating economic and social conditions of Palestinian women and girls in the Occupied Palestinian Territory, including East Jerusalem, and the systematic violation of their human rights resulting from the severe impact of ongoing illegal Israeli practices, including the continued imposition of closures and restrictions on the movement of persons and goods, which have detrimentally affected their right to health care, including access by pregnant women to health services for antenatal care and safe delivery, education, employment, development and freedom of movement,

Deploring also the intensified Israeli military operations in the Gaza Strip, which have caused heavy casualties among civilians, including many children and women, and widespread damage to homes, United Nations schools and facilities, hospitals and public infrastructure, gravely impacting the provision of vital health and social services to Palestinian women and their families, and emphasizing that the civilian population must be protected,

Stressing the importance of providing assistance, especially emergency assistance, to alleviate the dire socio-economic and humanitarian situation being faced by Palestinian women and their families,

Emphasizing the importance of increasing the role of women in decision-making with regard to conflict prevention and the peaceful resolution of conflicts as part of efforts to ensure the safety and well-being of all women in the region,

Affirming the importance of exploring means to address the situation of assistance to Palestinian women in the resolutions of the sixty-fourth session of the General Assembly under the relevant agenda items,

1. Urges the international community to continue to give special attention to the promotion and protection of the human rights of Palestinian women and girls and to intensify its measures to improve the difficult conditions being faced by Palestinian women and their families living under Israeli occupation;

2. Reaffirms that the Israeli occupation remains a major obstacle for Palestinian women with regard to their advancement, self-reliance and integration in the development of their society, and stresses the importance of efforts to increase their role in decision-making with regard to conflict prevention and resolution and to ensure their equal participation and involvement in all efforts for the maintenance and promotion of peace and security;

3. Demands that Israel, the occupying Power, comply fully with the provisions and principles of the Universal Declaration of Human Rights, the Regulations annexed to the Hague Convention IV of 18 October 1907, the Geneva Convention relative to the Protection of Civilian Persons in Time of War of 12 August 1949, and all other relevant rules, principles and instruments of

13 General Assembly resolution 217 A (III).
international law, including the international human rights Covenants, in order to protect the rights of Palestinian women and their families;

4. **Calls upon** Israel to facilitate the return of all refugees and displaced Palestinian women and children to their homes and properties, in compliance with the relevant United Nations resolutions;

5. **Calls upon** the international community to continue to provide urgently needed assistance, especially emergency assistance, and services in an effort to alleviate the dire humanitarian crisis being faced by Palestinian women and their families and to help in the reconstruction of relevant Palestinian institutions, with the integration of a gender perspective into all of its international assistance programmes;

6. **Requests** the Commission on the Status of Women to continue to monitor and take action with regard to the implementation of the Nairobi Forward-looking Strategies for the Advancement of Women, in particular paragraph 260 concerning Palestinian women and children, the Beijing Platform for Action and the outcomes of the twenty-third special session of the General Assembly entitled “Women 2000: gender equality, development and peace for the twenty-first century”;

7. **Requests** the Secretary-General to continue to review the situation, to assist Palestinian women by all available means, including those set out in the report of the Secretary-General on the situation of and assistance to Palestinian women, and to submit to the Commission on the Status of Women at its fifty-fourth session a report, including information provided by the Economic and Social Commission for Western Asia, on the progress made in the implementation of the present resolution.

**Draft resolution III**

**Future organization and methods of work of the Commission on the Status of Women**

*The Economic and Social Council,*

**Recalling** its resolution 1998/46 of 31 July 1998, annex II of which contained the recommendation that the functional commissions responsible for follow-up to the major United Nations conferences adopt a multi-year thematic programme in their working methods,

**Recalling also** its request, in its resolution 2008/29 of 24 July 2004, that the functional commissions, the regional commissions and other relevant subsidiary bodies of the Economic and Social Council, in accordance with their mandates, as appropriate, contribute to the annual ministerial review and to the Development Cooperation Forum, in the context of their respective annual workplans, taking into account their specificities,


**Recalling** that the Council decided, in its resolution 2006/9, that the Commission, at its fifty-third session, should review the functioning of its revised

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* For the discussion, see chap. II, paras. 83-85.
methods of work, in the light of the outcome of the discussions on the strengthening of the Council, in order to ensure the effective functioning of the Commission,

Recalling also that in the same resolution the Council decided that, at its fifty third session, the Commission would also discuss the possibility of conducting in 2010 a review and appraisal of the Beijing Declaration and Platform for Action³ and the outcomes of the twenty-third special session of the General Assembly;⁹

Reaffirming the primary responsibility of the Commission for the follow-up to the Fourth World Conference on Women and the outcomes of the twenty-third special session of the General Assembly,

Recognizing that the organization of work of the Commission should contribute to advancing the implementation of the Beijing Declaration and Platform for Action and the outcomes of the twenty-third special session of the General Assembly,

Recognizing also that the implementation of the Beijing Declaration and Platform for Action, the outcomes of the twenty-third special session of the General Assembly and the fulfilment of the obligations under the Convention on the Elimination of All Forms of Discrimination against Women² are mutually reinforcing in achieving gender equality and the empowerment of women,

Reaffirming that gender mainstreaming constitutes a critical strategy in the implementation of the Beijing Declaration and Platform for Action and the outcomes of the twenty-third special session of the General Assembly, and underlining the catalytic role of the Commission in promoting gender mainstreaming,

Recognizing the importance of non-governmental organizations in advancing the implementation of the Beijing Declaration and Platform for Action and, in this respect, the work of the Commission,

Noting with appreciation the continuation of the annual parliamentary meetings organized by the Inter-Parliamentary Union, as well as the programme of side events held during the sessions of the Commission,

A. Methods of work of the Commission on the Status of Women

1. Decides that, following the review of the functioning of the revised methods of work of the Commission on the Status of Women, from its fifty-fourth session onwards, the Commission should maintain its current working methods, adopted by the Economic and Social Council in its resolution 2006/9, and should continue to keep its working methods under review;

B. Themes for the period 2010-2014

2. Decides that:

(a) In 2010, at its fifty-fourth session, the Commission will review the implementation of the Beijing Declaration and Platform for Action, the outcomes of the twenty-third special session of the General Assembly and its contribution to shaping a gender perspective towards the full realization of the Millennium Development Goals;
(b) In 2011, at its fifty-fifth session, the priority theme will be “Access and participation of women and girls to education, training, science and technology, including for the promotion of women’s equal access to full employment and decent work” and progress will be evaluated in the implementation of the agreed conclusions from the fifty-first session on “The elimination of all forms of discrimination and violence against the girl child”;

(c) In 2012, at its fifty-sixth session, the priority theme will be “The empowerment of rural women and their role in poverty and hunger eradication, development and current challenges” and progress will be evaluated in the implementation of the agreed conclusions from the fifty-second session on “Financing gender equality and the empowerment of women”;

(d) In 2013, at its fifty-seventh session, the priority theme will be “Elimination and prevention of all forms of violence against women and girls” and progress will be evaluated in the implementation of the agreed conclusions from the fifty-third session on “The equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS”;

(e) In 2014, at its fifty-eighth session, the priority theme will be “Challenges and achievements in the implementation of the Millennium Development Goals for women and girls” and progress will be evaluated in the implementation of the agreed conclusions from the fifty-fifth session on “Access and participation of women and girls to education, training, science and technology, including for the promotion of women’s equal access to full employment and decent work”;

3. Also decides that, at its fifty-seventh session in 2013, the Commission will discuss the possibility of conducting a review and appraisal of the Beijing Declaration and Platform for Action and the outcomes of the twenty-third special session of the General Assembly in 2015 and decide on priority themes for future sessions.

Draft resolution IV

Working Group on Communications on the Status of Women of the Commission on the Status of Women*

The Economic and Social Council,


1. Decides, in order to make the communications procedure of the Commission on the Status of Women more effective and efficient, that the Commission, starting at its fifty-fourth session, should appoint the members of the Working Group on Communications on the Status of Women for a two-year period;

2. Reiterates its decision to continue to raise awareness of the existing mandate of the communications mechanism of the Commission, as appropriate;

3. Decides to remain seized of this matter, as necessary.

* For the discussion, see chap. III, paras. 2-7.
D. Draft decision for adoption by the Council

4. The Commission on the Status of Women also recommends to the Economic and Social Council the adoption of the following draft decision:

Report of the Commission on the Status of Women on its fifty-third session and provisional agenda and documentation for the fifty-fourth session of the Commission*

The Economic and Social Council takes note of the report of the Commission on the Status of Women on its fifty-third session and approves the provisional agenda and documentation for the fifty-fourth session of the Commission set out below:

1. Election of officers.
2. Adoption of the agenda and other organizational matters.

Documentation

Annotated provisional agenda and proposed organization of work of the Commission on the Status of Women

3. 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”:

(a) Implementation of strategic objectives and action in critical areas of concern, and further actions and initiatives;

Documentation

Report of the Secretary-General on the review of the implementation of the Beijing Declaration and Platform for Action and the outcomes of the twenty-third special session of the General Assembly and its contribution to shaping a gender perspective towards the full realization of the Millennium Development Goals

(b) Emerging issues, trends and new approaches to issues affecting the situation of women or equality between women and men;

(c) Gender mainstreaming, situations and programmatic matters.

Documentation

Report of the Secretary-General on progress in mainstreaming a gender perspective in the development, implementation and evaluation of national policies and programmes, with a particular focus on the priority theme

Report of the Secretary-General on the situation of, and assistance to, Palestinian women

Report of the Secretary-General on the release of women and children taken hostage, including those subsequently imprisoned, in armed conflicts

* For the discussion, see chap. V.
Report of the Secretary-General on ending female genital mutilation

Report of the Secretary-General on the joint workplan of the Division for the Advancement of Women and the Office of the United Nations High Commissioner for Human Rights

Note by the Secretary-General transmitting the report of the United Nations Development Fund for Women on the activities of the Fund to eliminate violence against women

Note by the Secretariat transmitting the outcome of the forty-fifth session of the Committee on the Elimination of Discrimination against Women

Note by the Secretariat on the strategic framework for the biennium 2012-2013: subprogramme 2: Gender issues and advancement of women

4. Communications concerning the status of women.

Documentation

Note by the Secretary-General transmitting the list of confidential communications concerning the status of women

5. Follow-up to Economic and Social Council resolutions and decisions.

Documentation

Letter from the President of the Economic and Social Council to the Chairperson of the Commission on the Status of Women

Note by the Secretariat as input to the high-level segment of the substantive session of 2010 of the Economic and Social Council

6. Provisional agenda for the fifty-fifth session of the Commission.

7. Adoption of the report of the Commission on its fifty-fourth session.

E. Matters brought to the attention of the Council

5. The following resolutions and decisions adopted by the Commission are brought to the attention of the Council:

Resolution 53/1
Preparations for the fifty-fourth session of the Commission on the Status of Women*

The Commission on the Status of Women,

Recalling Economic and Social Council resolution 2006/9 of 25 July 2006, in which the Council decided that the Commission, at its fifty-third session, would discuss the possibility of conducting, in 2010, a review of the Beijing Declaration and Platform for Action and the outcomes of the twenty-third special session of the General Assembly entitled “Women 2000: gender equality, development and peace for the twenty-first century”,

* For the discussion, see chap. II, paras. 73-76.
Noting the relevance of the regional reviews and outcomes of the regional-level intergovernmental processes in preparation for the “Beijing plus 15” review,


1. Decides to review, at its fifty-fourth session, the implementation of the Beijing Declaration and Platform for Action\(^3\) and the outcomes of the twenty-third special session of the General Assembly, entitled “Women 2000: gender equality, development and peace for the twenty-first century”,\(^9\) emphasizing the sharing of experiences and good practices, with a view to overcoming remaining obstacles and new challenges, including those related to the Millennium Development Goals;

2. Requests the Bureau of the Commission on the Status of Women, in preparation for the fifty-fourth session of the Commission, to hold informal consultations with all member States and observer States of the Commission on the modalities of the review, with a view to agreeing on its format and outcome;

3. Decides to commemorate the fifteenth anniversary of the adoption of the Beijing Declaration and Platform for Action, and in this regard recommends, through the Economic and Social Council, that the General Assembly hold a commemorative meeting during the fifty-fourth session of the Commission in March 2010.

Resolution 53/2
Women, the girl child and HIV and AIDS*

The Commission on the Status of Women,

Reaffirming the Beijing Declaration and Platform for Action,\(^3\) the outcome documents of the twenty-third special session of the General Assembly,\(^9\) the Programme of Action of the International Conference on Population and Development,\(^16\) the Declaration of Commitment on HIV/AIDS\(^17\) and the Political Declaration on HIV/AIDS,\(^18\) the HIV/AIDS-related goals contained in the United Nations Millennium Declaration of 2000\(^19\) and the Millennium Development Goals, in particular the aim of Member States to have halted, by 2015, and begun to reverse, the spread of HIV and AIDS, as well as the commitments on HIV/AIDS made at the 2005 World Summit,

Welcoming the in-depth study of the Secretary-General on all forms of violence against women,\(^20\) and taking note of the recommendations contained therein,

Taking note of the outcome of the 2008 high-level meeting on HIV/AIDS held on 10 and 11 June 2008,

* For the discussion, see chap. II, paras. 77-82.
17 General Assembly resolution S-26/2, annex.
18 Resolution 60/262, annex.
19 See General Assembly resolution 55/2.
Welcoming the initiative taken by the Secretary-General on 25 February 2008 to launch a multi-year campaign to end violence against women,

Recalling all previous resolutions on this subject,

Reaffirming that prevention, care, support and treatment for those infected and affected by HIV and AIDS are mutually reinforcing elements of an effective response that must be integrated into a comprehensive approach to combat the epidemic, and recognizing the need to ensure the respect, protection and fulfilment of human rights in the context of HIV and AIDS,

Recognizing that populations destabilized by armed conflict, humanitarian emergencies and natural disasters, including refugees, internally displaced persons and, in particular, women and children, are at an increased risk of exposure to HIV infection,

Deeply concerned that the global HIV/AIDS pandemic disproportionately affects women and girls and that the majority of new HIV infections occur among young people,

Deeply concerned also by the increased risk of HIV/AIDS facing women and girls with disabilities resulting from, inter alia, social, legal and economic inequalities, sexual and gender-based violence, discrimination and violations of their rights,

Concerned that the vulnerability of women and girls to HIV and AIDS is increased by their unequal legal, economic and social status, including poverty as well as other cultural and physiological factors, violence against women and girls and adolescents, early marriage, forced marriage, premature and early sexual relations, commercial sexual exploitation and female genital mutilation,

Also concerned that HIV infection rates are at least twice as high among young people, especially young and married women, who do not finish primary school as among those who do,

Further concerned that women and girls are more vulnerable to HIV and AIDS and have different and unequal access to the use of health resources for the prevention and treatment of and care and support for people living with HIV and AIDS,

Stressing with deep concern that the HIV/AIDS pandemic, with its devastating scale and impact on women and girls, requires urgent action in all fields and at all levels,

Stressing that gender equality and the political, social and economic empowerment of women and girls are fundamental elements in the reduction of their vulnerability to HIV and AIDS and are essential to reversing the pandemic,

Expressing its concern that the HIV/AIDS pandemic reinforces gender inequalities, that women and girls are disproportionately affected by the HIV and AIDS crisis, that they are more easily infected, that they bear the disproportionate burden of caring for and supporting those infected and affected by the disease and that they become more vulnerable to poverty as a result of the HIV and AIDS crisis,
1. *Welcomes* the report of the Secretary-General on women, the girl child and HIV/AIDS;\(^{21}\)

2. *Reaffirms* the need for Governments, supported by the relevant actors, including civil society and the private sector, to intensify national efforts and international cooperation in the implementation of the commitments contained in the Declaration of Commitment on HIV/AIDS,\(^{17}\) the Political Declaration on HIV/AIDS,\(^{18}\) the Beijing Platform for Action\(^8\) and the Programme of Action of the International Conference on Population and Development;\(^{16}\)

3. *Also reaffirms* the commitment to scale up towards universal access to reproductive health by 2015, as set out in the Programme of Action of the International Conference on Population and Development, integrating this goal into strategies to attain internationally agreed development goals, including those contained in the United Nations Millennium Declaration\(^{19}\) aimed at reducing maternal mortality, improving maternal health, reducing child mortality, promoting gender equality, combating HIV/AIDS and eradicating poverty;

4. *Further reaffirms* the commitment to achieve universal access to comprehensive HIV prevention programmes, treatment, care and support by 2010, as set out in the Political Declaration on HIV/AIDS;

5. *Stresses* the need to significantly increase and coordinate political and financial commitment to address gender equality and equity in national HIV and AIDS responses, and urges Governments to work towards effectively reflecting in their national policies, strategies and budgets the gender dimension of the pandemic, in line with the time-bound goals of the Declaration of Commitment on HIV/AIDS, the Beijing Platform for Action and the Political Declaration on HIV/AIDS;

6. *Urges* Governments to take all necessary measures to create an enabling environment for the empowerment of women, to strengthen their economic independence and their right to property and inheritance, and to protect and promote their full enjoyment of all human rights and fundamental freedoms in order to enable them to protect themselves from HIV infection;

7. *Urges* Governments and other relevant stakeholders to address the challenges faced by older women in accessing HIV prevention, treatment, care and support as well as in caring for people living with or affected by HIV and AIDS, including orphaned grandchildren;

8. *Also urges* Governments and other relevant stakeholders to address the increased risk of HIV/AIDS facing women and girls with disabilities, ensuring their equal access to prevention, treatment, care and support, as an integral part of their HIV and AIDS response;

9. *Emphasizes* the need to strengthen policy and programme linkages and coordination between HIV and AIDS and sexual and reproductive health, and their inclusion in national development plans, including poverty reduction strategies and sector-wide approaches, where they exist, as a necessary strategy for fighting the HIV/AIDS pandemic and mitigating its impact on the population, which could result in more relevant and cost-effective interventions with greater impact;

10. **Urges** Governments to strengthen initiatives that would increase the capacities of women and adolescent girls to protect themselves from the risk of HIV infection, principally through the provision of health care and health services, including for sexual and reproductive health, in accordance with the Programme of Action of the International Conference on Population and Development, and that integrate HIV/AIDS prevention, treatment, care and support and include voluntary counselling and testing, including through prevention education that promotes gender equality within a culturally and gender-sensitive framework;

11. **Urges** Governments and other relevant stakeholders to address the situation faced by girls caring for people living with or affected by HIV/AIDS, who are often forced to drop out of school;

12. **Also urges** Governments to ensure accessible and affordable procurement of prevention commodities, in particular male and female condoms, to ensure that their supply is adequate and secure, as well as to promote the ongoing research for safe and effective microbicides;

13. **Reminds** States to consider that flexibilities in trade-related intellectual property rights can be used by States, when necessary, to protect public health and address public health crises;

14. **Urges** Governments to strengthen legal, policy, administrative and other measures for the prevention and elimination of all forms of violence against women and girls, including harmful traditional and customary practices, female genital mutilation, abuse, early marriage and forced marriage, rape, including marital rape, and other forms of sexual violence, battering and trafficking in women and girls, and to ensure that violence against women is addressed as an integral part of the national HIV and AIDS response;

15. **Also urges** Governments, where they have not yet done so, to institute and ensure the enforcement of laws to protect women and girls from early and forced marriage and marital rape;

16. **Further urges** Governments to prioritize and expand access to treatment for all people in all settings, in a progressive and sustainable manner, including the prevention and treatment of opportunistic infections and other HIV-related diseases and the effective use of and adherence to antiretroviral medication, including through access to clinical and laboratory testing and post-exposure prophylaxis, and to promote access to affordable, high-quality, safe and effective drugs and related pharmaceutical products, in particular for women and girls;

17. **Urges** Governments to ensure that women and girls have equitable and sustained access to treatment for HIV/AIDS and opportunistic infections and other HIV-related diseases, appropriate to their age, health and nutritional status, with the full protection of their human rights, including their reproductive rights and sexual health, in accordance with, inter alia, the Programme of Action of the International Conference on Population and Development, the Beijing Platform for Action and other relevant international human rights instruments, and to protection from coerced sexual activity, and to monitor access to treatment by age, sex, marital status and continuity of care;

18. **Requests** Governments to promote and provide equal and equitable access for women and men throughout their life cycle to social services related to
health care, including education, clean water and safe sanitation, nutrition, food security and health, education programmes and social protection schemes, especially for women and girls living with or affected by HIV/AIDS, including treatment for opportunistic infections and other HIV-related diseases;

19. **Calls upon** Governments to intensify efforts to eliminate all forms of discrimination against women and girls in relation to HIV/AIDS, including through challenging gender stereotypes, stigmatization, discriminatory attitudes and gender inequalities, and to encourage the active involvement of men and boys in this regard;

20. **Stresses** that women should be empowered to protect themselves against violence and that, in this regard, women have the right to have control over and decide freely and responsibly on matters related to their sexuality, including their sexual and reproductive health, free of coercion, discrimination and violence;

21. **Calls upon** all Governments and the international donor community to integrate a gender perspective in all matters of international assistance and cooperation and to take measures to ensure that resources concomitant with the impact of HIV/AIDS on women and girls are made available, in particular in funding provided to national HIV and AIDS programmes to promote and protect the human rights of women and girls in the context of the epidemic, to promote economic opportunities for women, including to diminish their financial vulnerability and their risk of exposure to HIV, and to achieve the gender-related goals found, inter alia, in the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS;

22. **Calls upon** Governments to integrate HIV prevention, voluntary counselling and voluntary testing of HIV into other health services, including sexual and reproductive health, family planning, maternity and tuberculosis services, as well as the provision of services for the prevention and treatment of sexually transmitted infections in the mother-to-child transmission services for pregnant women infected by HIV;

23. **Encourages** the continued collaboration among the Secretariat and co-sponsors of the Joint United Nations Programme on HIV/AIDS, the Global Fund to Fight AIDS, Tuberculosis and Malaria and other international organizations in order to continue to scale up efforts to reduce the spread of HIV/AIDS and other sexually transmitted infections, in particular in the context of emergency situations and as part of humanitarian efforts, and to seek actively the achievement of results for women and girls, and also encourages the integration of the mainstreaming of a gender perspective throughout their work;

24. **Welcomes** the decision of the Global Fund to Fight AIDS, Tuberculosis and Malaria to scale up a gender-sensitive response to HIV and AIDS, tuberculosis and malaria in order to address the vulnerabilities of women and girls to HIV infection;

25. **Requests** the Secretariat and co-sponsors of the Joint United Nations Programme on HIV/AIDS and other United Nations agencies responding to the HIV/AIDS pandemic, including the Global Fund to Fight AIDS, Tuberculosis and Malaria, to mainstream a gender and human rights perspective throughout their HIV- and AIDS-related operations, including policy, planning, monitoring and
26. **Encourages** the United Nations to continue to support national monitoring and evaluation mechanisms in the context of the “three ones” principles, to enable the production and dissemination of comprehensive and timely information on the gender dimension of the pandemic, including through the collection of data disaggregated by sex, age and marital status, and to raise awareness about the critical intersection between gender inequality and HIV and AIDS;

27. **Requests** the Secretary-General to invite Member States to work in partnership with the Global Coalition on Women and HIV/AIDS, convened by the Joint United Nations Programme on HIV/AIDS and its partners, to mobilize and support a wide range of national actors, including women’s groups and networks of women living with HIV, in order to ensure that national HIV and AIDS programmes are better able to respond to the specific needs and vulnerabilities of women, girls and adolescents;

28. **Urges** Governments to rapidly scale up access to treatment programmes to prevent mother-to-child transmission of HIV and to encourage men to participate with women in programmes designed to prevent mother-to-child transmission, to encourage women and girls to participate in those programmes and to provide sustained treatment and care for the mother after pregnancy, including care and support for the family;

29. **Encourages** the design and implementation of programmes, including awareness-raising programmes, to encourage and enable men, including young men, to adopt safe, non-coercive and responsible sexual and reproductive behaviour and to use effective methods to prevent the transmission of HIV and other sexually transmitted infections;

30. **Stresses** the importance of ensuring that young men and women have access to information and education, including peer education and youth-specific HIV education, sexual education and services necessary for behavioural change, to enable them to develop the life skills required to reduce their vulnerability to HIV infection and reproductive ill health, in full partnership with young persons, parents, families, educators and health-care providers;

31. **Calls for** enhanced efforts by all relevant actors to include a gender perspective in the development of HIV and AIDS programmes and policies and in the training of personnel involved in implementing such programmes, including by focusing on the role of men and boys in addressing HIV and AIDS;

32. **Encourages** Governments and all other relevant actors to promote funding, both domestically and externally, and to support and expedite action-oriented research leading to affordable, safe and effective methods controlled by women to prevent HIV and other sexually transmitted infections, including microbicides and vaccines and research on strategies that empower women to protect themselves from sexually transmitted infections, including HIV, and methods of care, support and treatment for women of various ages, and to promote their involvement in all aspects of such research;
33. **Also encourages** Governments to increase the provision of resources and facilities to women who find themselves having to provide care and/or economic support for those infected with HIV or affected by the pandemic and to address the challenges faced by the survivors and caregivers, in particular children and older persons, utilizing funds earmarked for care and support to reduce women’s disproportionate burden of care, as well as to provide the balanced sharing of the provision of care by both men and women;

34. **Urges** Governments to continue to promote the participation and the significant contribution of people living with HIV, young people and civil society actors, in particular women’s organizations, in addressing the problem of HIV and AIDS in all its aspects, including promoting a gender perspective, and to promote their full involvement and participation in the design, planning, implementation and evaluation of HIV and AIDS programmes, as well as in creating an enabling environment to combat stigmatization;

35. **Also urges** Governments to ensure that the dignity, rights and privacy of people living with HIV, in particular women and girls, are protected;

36. **Urges** Governments, the donor community and relevant entities of the United Nations system to prioritize programmes addressing the specific needs of women and girls in HIV response, to ensure resources to support the development of capacities of women’s organizations for HIV and AIDS programme development and implementation, and to streamline funding procedures and requirements that will facilitate resource flows to community-level services;

37. **Also urges** Governments, the donor community and relevant entities of the United Nations system to ensure that gender equality implications are a key component of research, implementation and evaluation of new prevention methods and that such new prevention methods are part of a comprehensive approach to HIV prevention that protects and supports the rights of women and girls;

38. **Welcomes** the financial contributions made to date to the Global Fund to Fight AIDS, Tuberculosis and Malaria, urges further contributions to sustain the Fund, and calls upon all countries to encourage the private sector to contribute to the Fund;

39. **Stresses** the importance of building up national competence and capacity to provide an assessment of the drivers and impact of the epidemic, which should be used in planning for comprehensive HIV and AIDS prevention, treatment, care and support and for mitigating the impact of HIV and AIDS;

40. **Urges** the international community to complement and supplement, through increased international development assistance, efforts of the developing countries that commit increased national funds to fighting the HIV/AIDS pandemic, especially to address the needs of women and girls, in particular those countries most affected by HIV and AIDS, particularly in Africa, especially sub-Saharan Africa, and in the Caribbean, countries at high risk of expansion of the HIV and AIDS epidemic and countries in other affected regions whose resources for dealing with the epidemic are seriously limited;

41. **Stresses** that the review of the implementation of the Beijing Declaration and Platform for Action during its fifty-fourth session must take into account the disproportionate impact of HIV and AIDS on women and girls;
42. **Recommends** also that, in the process of the review of the Millennium Development Goals, gender-equality perspectives should be included throughout the deliberations and that attention should be paid to the situation of women and girls infected or affected by HIV and AIDS;

43. **Decides** to consider this question at its fifty-fourth session.

**Decision 53/101**

**Documents considered by the Commission on the Status of Women**

At its 17th meeting, on 13 March 2009, the Commission on the Status of Women decided to take note of the following documents:

(a) Report of the Secretary-General on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS;\(^{22}\)

(b) Report of the Secretary-General on proposals for a multi-year programme of work for the period 2010-2014 of the Commission on the Status of Women;\(^{23}\)

(c) Report of the Secretary-General on progress in mainstreaming a gender perspective in the development, implementation and evaluation of national policies and programmes, with a particular focus on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS;\(^{24}\)

(d) Report of the Secretary-General on the joint workplan of the Division for the Advancement of Women and the Office of the United Nations High Commissioner for Human Rights;\(^{25}\)

(e) Note by the Secretary-General transmitting the report of the United Nations Development Fund for Women on the activities of the Fund to eliminate violence against women.\(^{26}\)


Chapter II

Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly entitled “Women 2000: gender equality, development and peace for the twenty-first century”

1. The Commission considered item 3 of its agenda at its 2nd to 12th, 16th and 17th meetings, from 2 to 6 March and on 9 and 13 March 2009. It held a general discussion at its 2nd, 5th, 6th, 7th, 10th, 11th, 12th and 16th meetings. It had before it the following documents:


   (b) Note by the Secretary-General transmitting the report of the United Nations Development Fund for Women on the activities of the Fund to eliminate violence against women (A/HRC/10/43-E/CN.6/2009/10);

   (c) Report of the Secretary-General on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS (E/CN.6/2009/2);


   (e) Report of the Secretary-General on progress in mainstreaming a gender perspective in the development, implementation and evaluation of national policies and programmes, with a particular focus on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS (E/CN.6/2009/4);

   (f) Report of the Secretary-General on the situation of and assistance to Palestinian women (E/CN.6/2009/5);

   (g) Report of the Secretary-General on women, the girl child and HIV/AIDS (E/CN.6/2009/6);

   (h) Report of the Secretary-General on strengthening the International Research and Training Institute for the Advancement of Women (E/CN.6/2009/11);

   (i) Note by the Bureau of the Commission on the Status of Women: discussion guide on the high-level round table on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS (E/CN.6/2009/12);

   (j) Note by the Secretary-General on the preparation of the 2009 World Survey on the Role of Women in Development (E/CN.6/2009/14);

   (k) Note by the Secretary-General transmitting the results of the forty-second and forty-third sessions of the Committee on the Elimination of Discrimination against Women (E/CN.6/2009/CRP.1);
(l) Note by the Secretariat on the proposed programme of work of the Office of the Special Adviser on Gender Issues and Advancement of Women for the biennium 2010-2011 (E/CN.6/2009/CRP.2);

(m) Statements submitted by non-governmental organizations in consultative status with the Economic and Social Council (E/CN.6/2009/NGO/1-51).

2. At the 2nd meeting, on 2 March, statements were made by the Deputy Secretary-General, the President of the Economic and Social Council, the Under-Secretary-General for Economic and Social Affairs and the Assistant Secretary-General and Special Adviser on Gender Issues and Advancement of Women.

3. At the same meeting, statements were made by the following keynote speakers: Michel Sidibé, Executive Director, United Nations Joint Programme on HIV/AIDS; Thandika Mkandawire, Director, United Nations Research Institute for Social Development; and Jane Hodges, Director, Bureau for Gender Equality of the International Labour Organization (ILO).

4. At the same meeting, statements were made by the representatives of Cuba (on behalf of the Non-Aligned Movement), Azerbaijan, Mali and Spain and the observer for the Czech Republic (on behalf of the European Union and associated countries).

5. Also at the same meeting, statements were made by the observers for the Gambia, the Sudan (on behalf of the Group of 77), South Africa (on behalf of the Southern African Development Community), Austria, Côte d’Ivoire and Italy.

6. At the 5th meeting, on 4 March, introductory statements were made by the Assistant Secretary-General and Special Adviser on Gender Issues and Advancement of Women; the Director of the Division for the Advancement of Women; and the Executive Director of the United Nations Development Fund for Women (UNIFEM).

7. At the same meeting, the Commission heard an introductory statement by the Special Rapporteur on violence against women, following which comments and questions were posed by the representatives of Croatia, Turkey, Malaysia, Ecuador and the United States of America, and the observers for Switzerland, the Czech Republic (on behalf of the European Union) and Argentina.

8. Also at the 5th meeting, statements were made by the representatives of Mexico (on behalf of the Rio Group), Indonesia, Namibia, the United Republic of Tanzania, the Niger, the Dominican Republic, Zambia and Malaysia and the observers for Chile, Barbados, Norway, Australia, Nigeria, Palestine, Kenya, Finland, South Africa and Ghana.

9. At the 6th meeting, on 4 March, a statement was made by the Deputy Executive Director of the United Nations Population Fund.

10. At the same meeting, statements were made by the representatives of the Republic of Korea, Pakistan, Brazil, Senegal, the Russian Federation, Sweden, the Islamic Republic of Iran, the Netherlands, Togo, the United States, Eritrea and Ecuador and the observers for Burundi, Uganda, Niue (on behalf of the Pacific Islands Forum), Zimbabwe, Fiji, Iceland, Viet Nam, Angola, Egypt, Hungary, Poland, Argentina, Kazakhstan and Iraq.

11. Also at the 6th meeting, a statement was made by the representative of the United States in exercise of the right of reply.
12. At the 7th meeting, on 5 March, statements were made by the observers for Canada, Kiribati, Jamaica, Botswana, the Syrian Arab Republic, Greece and the Philippines, and the observer for the Inter-Parliamentary Union.

13. At the same meeting, the representative of the Islamic Republic of Iran and the observer for Israel made statements in exercise of the right of reply.

14. At the 10th meeting, on 6 March, a statement was made by the Chairperson of the Committee on the Elimination of Discrimination against Women.

15. At the same meeting, statements were made by the representatives of Paraguay, Cuba, Morocco, the United Kingdom of Great Britain and Northern Ireland, Turkey, Gabon, Japan, China and Qatar and the observers for New Zealand, Burkina Faso, Thailand, the Congo, Nepal, Israel, Algeria, Samoa, Estonia (on behalf of the UNIFEM Consultative Committee), Portugal, Palau, Denmark, Malta, El Salvador and Tonga.

16. At the 11th meeting, on 9 March, statements were made by the representatives of Cambodia, Lesotho, Peru, Cameroon, India, Armenia and the United Arab Emirates and the observers for Costa Rica, Papua New Guinea, Guyana, Guinea, Swaziland, the Bolivarian Republic of Venezuela, Slovenia, Colombia, Switzerland, Saint Lucia, Bangladesh, Yemen, Saudi Arabia, Jordan, Bolivia, Tuvalu and Nicaragua, as well as the observer for the Holy See.

17. At the same meeting, statements were made by the observers for the following intergovernmental organizations: International Organization for Migration and European Commission.

18. Also at the 11th meeting, statements were made by the representatives of the International Fund for Agricultural Development and the International Labour Organization.

19. At the 12th meeting, on 9 March, statements were made by the representative of Haiti and the observer for France.

20. At the same meeting, statements were made by the representatives of the following non-governmental organizations: Asia Pacific Caucus; Africa Women’s Caucus; World Council of Churches (also on behalf of the following organizations: Anglican Consultative Council; Association of Presbyterian Women of Aoteaora, New Zealand; Church Women United; Church World Service; Presbyterian Church (United States); Lutheran World Federation; Salvation Army; World Federation of Methodist and Uniting Church Women; World Student Christian Federation; World Young Women’s Christian Association; and United Methodist Church-General Board of Church and Society); West Asia Women’s Caucus; Human Rights Advocates; European Women’s Lobby; International Network of Liberal Women; Women International Democratic Federation; Istituto Internazionale Maria Ausiliatrice; Salesian Missions; International Volunteerism Organization for Women, Education and Development; and International Federation of Women Lawyers.

21. At the 16th meeting, on 13 March, a statement was made by the observer for the Democratic Republic of the Congo.
Agenda item 3 (a) (i)
Implementation of strategic objectives and action in critical areas of concern and further actions and initiatives: the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS

22. At its 2nd meeting, on 2 March, the Commission held parallel high-level round tables on the theme “The equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS”.

High-level round table A

23. The Commission held a high-level round table chaired by the Chairperson of the Commission, Olivier Belle (Belgium).

24. The delegations of the following countries participated: Argentina, Azerbaijan, Belarus, Canada, Côte d’Ivoire, Cuba, Czech Republic (on behalf of the European Union), Egypt, Eritrea, Finland, Gabon, Germany, Greece, Haiti, Indonesia, Israel, Japan, Mali, Mexico, Morocco, Netherlands, Pakistan, Philippines, Portugal, South Africa, Swaziland, United States of America and Viet Nam.

25. A statement was made by the representative of the New York Office of the United Nations High Commissioner for Refugees.

26. Statements were also made by the representatives of the following non-governmental organizations: Lunguujja Community Health Caring Uganda; and International Foundation for Electoral Systems, Washington, D.C.

27. At its 16th meeting, on 13 March, the Commission took note of the moderator’s summary of the high-level round table (E/CN.6/2009/CRP.4).

High-level round table B

28. The Commission held a high-level round table chaired by Park In-kook (Republic of Korea).

29. The delegations of the following countries participated: Australia, Bangladesh, Belgium, Botswana, Brazil, Colombia, Denmark, Ecuador, Iceland, Iran (the Islamic Republic of), Latvia, Malaysia, New Zealand, Niger, Norway, Poland, Republic of Korea, Senegal, Spain, Sudan, Sweden, Switzerland, Thailand, Turkey, United Kingdom and Zambia.


31. Statements were also made by the representatives of the following civil society organizations: Sonke Gender Justice, South Africa; and Levy Economics Institute of Bard College, New York.

32. At its 16th meeting, on 13 March, the Commission took note of the moderator’s summary of the high-level round table (E/CN.6/2009/CRP.4).

Panel discussions under agenda item 3 (a) (i)

Key policy initiatives on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS

33. At its 3rd meeting, on 3 March, the Commission held a panel discussion on the theme “Key policy initiatives on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS”.

34. Presentations were made by Patricia Espinosa Torres, Under-Secretary, Ministry of Labour and Social Welfare, Mexico; Marilyn Waring, Professor of Public Policy, Auckland University of Technology, New Zealand; Joseph Aimé Bidiga, Head, Department of Health of the Permanent Secretariat of the National Council to Combat HIV/AIDS, Burkina Faso; and Shahrashoub Razavi, Research Coordinator, United Nations Research Institute for Social Development.

35. The Commission then held a dialogue with the panellists, in which the following delegations participated: Argentina, Belgium, Benin, Congo, Côte d’Ivoire, Croatia, Cuba, Czech Republic (on behalf of the European Union), Gabon, Iran (Islamic Republic of), Israel, Italy, Malaysia, Mexico, Namibia, Pakistan, Republic of Korea, Senegal, Sudan, Togo, Tunisia, Uganda and Zambia.

36. A representative of the African Union participated in the dialogue.

37. The representatives of the following non-governmental organizations also participated in the dialogue: UNANIMA International; International Alliance of Women; European Youth Forum; International NGO Forum on Indonesian Development; and Fédération européenne des femmes actives au foyer.

38. At its 16th meeting, on 13 March, the Commission took note of the moderator’s summary of the panel discussion (E/CN.6/2009/CRP.5).1

Interactive dialogue on agenda item 3 (a) (ii)

Equal participation of women and men in decision-making processes at all levels

39. At its 9th meeting, on 6 March, the Commission held an interactive dialogue to evaluate progress in the implementation of the agreed conclusions on “Equal participation of women and men in decision-making processes at all levels”.

40. Presentations were made by Anne-Marie Goetz, Chief Adviser for Governance, Peace and Security, UNIFEM; and Francisco Cos-Montiel, Senior Programme Specialist with the Women’s Rights and Citizenship Programme, International Development Research Centre, Canada.

41. The Commission then held a dialogue with the panellists, in which the following delegations participated: Belgium, Burkina Faso, Canada, China, Colombia, Cuba, Czech Republic (on behalf of the European Union), Denmark, Egypt, Finland, Gabon, Ghana, Indonesia, Iran (Islamic Republic of), Israel, Kazakhstan, Kenya, Malaysia, Mexico, Netherlands, New Zealand, Niger, Niue (on behalf of the Pacific Islands Forum), Pakistan, Paraguay, Philippines, Republic of Korea, Senegal, South Africa, Spain, Sudan, Switzerland, Tonga, Turkey, United Kingdom, United States and Zambia.
42. The representatives of the following non-governmental organizations also participated in the dialogue: Union de l’action féminine; Femmes Afrique Solidarité; and Association nationale Al Hidn.

43. At its 16th meeting, on 13 March, the Commission took note of the moderator’s summary of the interactive dialogue (E/CN.6/2009/CRP.8). 1

Panel discussion under agenda item 3 (b)
Gender perspectives of the financial crisis

44. At its 8th meeting, on 5 March, the Commission held an expert panel discussion on the theme “Gender perspectives of the financial crisis”.

45. Presentations were made by Sakiko Fukuda-Parr, Professor, Graduate Programme in International Affairs, the New School, New York; Elizabeth Eilor, independent consultant and Vice-President, LDC Watch; Shamika Sirimanne, Chief, Trade Facilitation Section, Trade and Investment Division, Economic and Social Commission for Asia and the Pacific; Mayra Buvinic, senior spokesperson on gender equality and development, World Bank; and Stephanie Seguino, Professor of Economics, University of Vermont, United States.

46. The Commission then held a dialogue with the panellists, in which the following delegations participated: Argentina, Belgium, Colombia, Côte d’Ivoire, Czech Republic (on behalf of the European Union), Ecuador, Indonesia, Iran (Islamic Republic of), Israel, Italy, Lesotho, Mexico, Pakistan, Papua New Guinea, Philippines, Republic of Korea, Samoa, South Africa, Switzerland, Togo, Tonga, United Kingdom, United States and Zambia.

47. The representatives of the following non-governmental organizations also participated in the dialogue: Coalition of Ecumenical Women; and Development Alternative with Women in a New Era.

48. At its 16th meeting, on 13 March, the Commission took note of the moderator’s summary of the panel discussion (E/CN.6/2009/CRP.7). 1

Panel discussion under agenda item 3 (c)
Capacity-building for mainstreaming a gender perspective into national policies and programmes to support the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS

49. At its 4th meeting, on 3 March, the Commission held a panel discussion on the theme “Capacity-building for mainstreaming a gender perspective into national policies and programmes to support the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS”.

50. Presentations were made by Heisoo Shin, Visiting Professor, Graduate School of International Studies, Ewha Women’s University, Seoul; Giedre Purvaneckiene, Associate Professor, Faculty of Philosophy, University of Vilnius; Gary Barker, Senior Technical Adviser on Gender, Violence and Rights, International Center for Research on Women, Washington, D.C.; Bafana Khumalo, co-founder and
Co-Director, Sonke Gender Justice, South Africa; and Naomi Cassirer, Senior Technical Specialist, Conditions of Work and Employment Programme, ILO.

51. The Commission then held a dialogue with the panellists, in which the following delegations participated: Belgium, Canada, China, Congo, Côte d’Ivoire, Cuba, Czech Republic (on behalf of the European Union), Israel, Kenya, Malaysia, Mexico, Paraguay, Philippines, Republic of Korea, Samoa, Tunisia, Turkey, United States and Zambia.

52. A representative of UNIFEM participated in the dialogue.

53. The representatives of the following non-governmental organizations also participated in the dialogue: International Federation of Women Lawyers; and Youth Organizations Caucus Coordinated by the World Association of Girl Guides and Girl Scouts.

54. At its 16th meeting, on 13 March, the Commission took note of the moderator’s summary of the panel discussion (E/CN.6/2009/CRP.6).¹

Action taken by the Commission

Agreed conclusions on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS

55. At the 17th meeting, on 13 March, the Vice-Chairperson of the Commission, Ara Margarian (Armenia), reported on the outcome of the informal consultations on the agreed conclusions on the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS, the text of which was circulated in English only.

56. At the same meeting, the Vice-Chairperson orally revised the text of the draft agreed conclusions.

57. At the same meeting, statements were made by the Secretary and the Chairperson of the Commission.

58. Also, at the 17th meeting, statements were made by the representatives of Cuba and the Islamic Republic of Iran, after which a statement was made by the Chairperson of the Commission.

59. At the same meeting, statements were made by the representatives of the Islamic Republic of Iran, Qatar, Turkey, the United States, Mexico, Cuba, India, Malaysia, China, the Russian Federation, Brazil, Japan and the Dominican Republic, and the observers for Egypt (on behalf of the Group of African States), the Czech Republic (on behalf of the European Union), Argentina, Canada (also on behalf of Australia and New Zealand), Tonga, Antigua and Barbuda (on behalf of the Caribbean Community), Switzerland, the Syrian Arab Republic, Guatemala, Chile, Costa Rica and Colombia. The meeting was then suspended.

60. Also at the same meeting, the Commission adopted the draft agreed conclusions, and decided to transmit them to the Economic and Social Council, in accordance with its resolution 2008/29 of 24 July 2008, for adoption and as an input into the annual ministerial review of 2009 (see chap. I, sect. A).
61. After the adoption, of the agreed conclusions, statements were made by the representative of the Islamic Republic of Iran and the observer for Egypt, on behalf of the Group of African States.

**Future operation of the International Research and Training Institute for the Advancement of Women**

62. At the 16th meeting, on 13 March, the observer for the Sudan, on behalf of the States Members of the United Nations that are members of the Group of 77 and China, introduced a draft resolution entitled “Future operation of the International Research and Training Institute for the Advancement of Women” (E/CN.6/2009/L.1).

63. At the same meeting, the observer for the Sudan orally revised operative paragraph 5 of the draft resolution, which read:

“Urges the Secretary-General to appoint, as a matter of priority, the new director of the International Research and Training Institute for the Advancement of Women”

so that it read:

“Looks forward to the enhanced implementation of the strategic plan of the International Research and Training Institute for the Advancement of Women under the leadership of the new director and, in this regard, urges the Secretary-General to appoint, as a matter of priority, its new director”

64. Also at the same meeting, the Commission was informed that the draft resolution had no programme budget implications.

65. Also at the 16th meeting, the observer for the Sudan announced that Azerbaijan, Côte d’Ivoire, Gabon, Israel, Mexico and Togo had joined in sponsoring the draft resolution, as orally revised. Subsequently, Italy, Slovakia and Spain also joined in sponsoring the draft resolution.2

66. At the same meeting, the Commission adopted the draft resolution, as orally revised (see chap. I, sect. C, draft resolution I).

**Situation of and assistance to Palestinian women**

67. At the 16th meeting, on 13 March, the observer for the Sudan, on behalf of the States Members of the United Nations that are members of the Group of 77 and China, as well as Palestine, introduced a draft resolution entitled “Situation of and assistance to Palestinian women” (E/CN.6/2009/L.2/Rev.1).

68. At its 17th meeting, on 13 March, the Commission was informed that the draft resolution had no programme budget implications.

69. At the same meeting, the Commission adopted the draft resolution by a recorded vote of 30 to 3, with 8 abstentions (see chap. I, sect. C, draft resolution II). The voting was as follows:3

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2 Following the adoption of draft resolution E/CN.6/2009/L.1, as orally revised, the delegation of Austria indicated that it had intended to join in sponsoring the draft resolution.

3 The representative of Cambodia indicated that, had his delegation been present at the time of the vote, it would have voted in favour of the draft resolution.
In favour:
    Armenia, Azerbaijan, Brazil, China, Cuba, Djibouti, Dominican Republic, Ecuador, Eritrea, Gabon, Haiti, India, Indonesia, Iran (Islamic Republic of), Lesotho, Malaysia, Mexico, Morocco, Namibia, Niger, Pakistan, Paraguay, Peru, Qatar, Russian Federation, Senegal, Turkey, United Arab Emirates, United Republic of Tanzania, Zambia.

Against:
    Netherlands, United Kingdom of Great Britain and Northern Ireland, United States of America.

Abstaining:
    Belgium, Cameroon, Croatia, Germany, Japan, Republic of Korea, Spain, Sweden.

70. Before the adoption of the draft resolution, a statement in explanation of vote was made by the representative of the United States.

71. After the adoption of the draft resolution, statements in explanation of vote were made by the representatives of the United Kingdom, Spain, the Netherlands and Japan.

72. A statement was made by the observer for Palestine.

Preparations for the fifty-fourth session of the Commission on the Status of Women

73. At its 16th meeting, on 13 March, the Commission had before it a draft resolution entitled “Preparations for the fifty-fourth session of the Commission on the Status of Women” (E/CN.6/2009/L.4), submitted by the Chairperson of the Commission on the basis of informal consultations.

74. At the same meeting, the Commission was informed that the draft resolution had no programme budget implications.

75. At the same meeting, a statement was made by the representative of Cuba, to which the Secretary of the Commission responded.

76. Also at its 16th meeting, the Commission adopted the draft resolution (see chap. I, sect. E, resolution 53/1).

Women, the girl child and HIV and AIDS

77. At the 16th meeting, on 13 March, the observer for South Africa, on behalf of the States Members of the United Nations that are members of the Southern African Development Community, introduced a draft resolution entitled “Women, the girl child and HIV and AIDS” (E/CN.6/2009/L.8).

78. At the same meeting, the observer for South Africa orally revised the draft resolution as follows:

    (a) In the thirteenth preambular paragraph and in operative paragraph 8, the words “HIV and AIDS” were replaced by “HIV/AIDS”;

    (b) In operative paragraph 3, the word “achieve” was replaced by the words “scale up towards”;
(c) In operative paragraph 14, “HIV/AIDS” was replaced by the words “HIV and AIDS”;

(d) In operative paragraph 23, the words “the spread of HIV” were replaced by the words “the spread of HIV/AIDS”.

79. Subsequently, Algeria, Austria, Belgium, Belize, Benin, Brazil, Bulgaria, Cameroon, Canada, Cape Verde, Chile, Côte d’Ivoire, Croatia, Cuba, Cyprus, the Czech Republic, the Democratic Republic of the Congo, the Dominican Republic, Ecuador, Eritrea, Estonia, Finland, France, Gabon, Germany, Ghana, Greece, Guatemala, Guinea, Haiti, Honduras, Hungary, Iceland, Ireland, Israel, Italy, Japan, Kazakhstan, Liechtenstein, Lithuania, Luxembourg, Mexico, the Netherlands, Nicaragua, the Niger, Nigeria, Panama, Papua New Guinea, Portugal, the Republic of Korea, Romania, Senegal, Seychelles, Sierra Leone, Slovakia, Slovenia, Spain, Sweden, Thailand, Togo, Turkey, Uganda, the United Kingdom of Great Britain and Northern Ireland, the United States of America and Venezuela (Bolivarian Republic of) joined in sponsoring the draft resolution, as orally revised. 4

80. At same meeting, the Commission was informed that the draft resolution had no programme budget implications.

81. Also at the 16th meeting, the Commission adopted the draft resolution, as orally revised (see chap. I, sect. E, resolution 53/2).

82. After the adoption of the draft resolution, statements were made by the representative of Sweden, on behalf of the European Union, and the observer for Chile.

Future organization and methods of work of the Commission on the Status of Women

83. At the 16th meeting, on 13 March, the Vice-Chairperson of the Commission, Julio Peralta (Paraguay), introduced a draft resolution entitled “Future organization and methods of work of the Commission on the Status of Women” (E/CN.6/2009/L.6), submitted by him on the basis of informal consultations, and orally revised the text by deleting, under section A, operative paragraph 2, which read:

“Also decides that the Commission should make best use of its time to promote opportunities for enhanced interactive dialogue with all participants, including among the Member States, in order to strengthen the policy coordination and share best practices”,

and renumbering the remaining paragraphs accordingly.

84. At the same meeting, the Commission was informed that the draft resolution had no programme budget implications.

85. Also at its 16th meeting, the Commission adopted the draft resolution, as orally revised (see chap. I, sect. C, draft resolution III).

4 Following the adoption of draft resolution E/CN.6/2009/L.6, as orally revised, the delegation of Denmark indicated that it had intended to join in sponsoring the draft resolution.
Documents considered by the Commission on the Status of Women under agenda item 3

86. At its 17th meeting, on 13 March, the Commission decided to take note of a number of documents before it (see chap. I, sect. E, decision 53/101).
Chapter III

Communications concerning the status of women

1. The Commission considered item 4 of its agenda at its 13th, 14th (closed), 16th and 17th meetings, on 11 and 13 March 2009. It had before it the following documents:

   (a) Reports of the Secretary-General on the future work of the Working Group on Communications on the Status of Women (E/CN.6/2004/11 and Add.1 and 2; E/CN.6/2009/8);

   (b) Report of the Working Group on Communications on the Status of Women (E/CN.6/2009/CRP.3);

   (c) Note by the Secretary-General transmitting the list of confidential communications concerning the status of women (E/CN.6/2009/SW/COMM.LIST/43/R and Add.1).

Action taken by the Commission

Future work of the Working Group on Communications concerning the Status of Women

2. At its 13th meeting, on 11 March, the Commission began its consideration of the question of the future work of the Working Group on Communications and heard an introductory statement by the Director of the Division for the Advancement of Women.

3. At the same meeting, statements were made by the representatives of the Republic of Korea, the United States of America, the Islamic Republic of Iran, Malaysia, the Russian Federation, China, India and Cuba, and the observers for Argentina, Switzerland, the Czech Republic (on behalf of the European Union), Canada and Chile.

4. At the 16th meeting, on 13 March, the Vice-Chairperson of the Commission, Enna Park (Republic of Korea), reported on the outcome of the informal consultations on the text of a draft resolution on the Working Group on Communications.


6. At the same meeting, the Commission was informed that the draft resolution had no programme budget implications.

7. Also at the 16th meeting, the Commission adopted the draft resolution (see chap. I, sect. C, draft resolution IV).
Report of the Working Group on Communications concerning the Status of Women

8. At its 14th meeting (closed), on 11 March, the Commission considered the report of the Working Group on Communications concerning the Status of Women (E/CN.6/2009/CRP.3).

9. At the same meeting, the Commission decided to take note of the report and include it in the report of the Commission. The report of the Working Group read as follows:

1. The Working Group on Communications on the Status of Women met in closed meetings before the fifty-third session of the Commission on the Status of Women in accordance with Economic and Social Council decision 2002/235 and was guided in its deliberations by the mandate given to it by the Council in its resolution 76 (V), as amended by the Council in its resolutions 304 I (XI), 1983/27 and 1992/19.

2. The Working Group considered the list of confidential communications and replies by Governments (E/CN.6/2009/SW/COMM.LIST/43/R and Add.1). There was no list of non-confidential communications concerning the status of women, as no such communications had been received by the Secretary-General.

3. The Working Group considered the 21 confidential communications received directly by the Division for the Advancement of Women. The Working Group noted that no confidential communications concerning the status of women had been received from other United Nations bodies or the specialized agencies.

4. The Working Group noted that there were replies from Governments to 9 of the 21 communications received by the Division for the Advancement of Women, and a reply from a Government to a communication concerning the status of women that had been included in document E/CN.6/2008/SW/COMM.LIST/42/R from the previous year.

5. The Working Group recalled its mandate as defined in paragraph 4 of Economic and Social Council resolution 1983/27, which had stated that the Working Group should perform the following functions:

   (a) Consideration of all communications, including the replies of Governments thereon, if any, with a view to bringing to the attention of the Commission those communications, including the replies of Governments, that appeared to reveal a consistent pattern of reliably attested injustice and discriminatory practices against women;

   (b) Preparation of a report, based on its analysis of the confidential and non-confidential communications, which would indicate the categories in which communications were most frequently submitted to the Commission.

6. The Working Group discerned the following categories in which communications had most frequently been submitted to the Commission:

   (a) Sexual violence, including rape and gang rape, against women and girls, committed by private individuals, detainees and law enforcement personnel, including in detention-related situations, and links between sexual
violence and risks of contracting HIV/AIDS, as well as failure by the State to prevent such violations, provide adequate protection and medical and psychological care to victims, bring perpetrators to justice promptly and provide adequate compensation;

(b) Other forms of violence against women and girls, including domestic violence, trafficking and acid attacks against women stemming from, for example, rejected offers of marriage or property disputes, with a lack of due diligence by States to adequately and in a timely manner investigate, prosecute and punish the perpetrators and a lack of protection and support for victims and their families;

(c) Abuse of power by the police, impunity, humiliation, and lack of due process, adequate investigation and protection of victims;

(d) Inhumane treatment and inadequate conditions in mental facilities and in detention, including failure to separate women and men detainees, as well as failure by the State to sufficiently address the situation;

(e) The impact on women and girls of ongoing situations of violence, insecurity and unmet basic needs, as well as exclusion of women from decision-making and negotiating processes;

(f) Serious and systematic violations of the human rights of women and girls, some of which target specific groups, including torture, killings and abductions, with a lack of due diligence by States to adequately and in a timely manner investigate, prosecute and punish the perpetrators and lack of protection and support for victims and their families;

(g) Attacks, murders, harassment, death threats, arbitrary arrests and detentions, and disproportionate penalties and restrictions on the rights to freedom of expression and movement of women human rights defenders and their families by State and non-State actors as a means of exerting pressure on them to stop their human rights work, as well as failure by the State to prevent such violations, provide adequate protection and medical and psychological care to victims, bring perpetrators to justice promptly and provide adequate compensation;

(h) Violations of the right to health, including reproductive health, of women, especially low-income and marginalized women in rural areas and women displaced by conflict, and discrimination on the basis of HIV-positive status, including denial of antenatal and post-natal care and care at the time of delivery, as well as high rates of maternal mortality caused by poor, inaccessible and inadequately funded health care and facilities;

(i) Stereotypical attitudes and discriminatory policies towards women, including non-remunerated women caregivers;

(j) Denial of visas for visits of spouses of foreign male inmates.

7. During its consideration of all communications, including the replies of Governments thereon, and consideration of the question whether any of these appeared to reveal a consistent pattern of reliably attested injustice and discriminatory practices against women, the Working Group expressed its concern about:
(a) Violence against women and girls, including rape and other forms of sexual violence, torture, killings and abductions, as well as mistreatment of women human rights defenders;

(b) The climate of impunity and abuse of power, including in many cases where violence against women, including sexual violence, is perpetrated or condoned by law enforcement personnel;

(c) The failure by States, in contravention of their human rights obligations, to exercise due diligence to prevent all forms of violence against women and girls and adequately investigate and prosecute such crimes, punish perpetrators and provide compensation, protection and assistance to victims and their families;

(d) Violations of the right of women to health, including reproductive health, inaccessible and inadequately funded health care and facilities, and discrimination on the basis of HIV-positive status.

8. The Working Group appreciated the cooperation by Governments that had submitted replies to, or observations that clarified, the communications received, and it encouraged all others to make such submissions in the future. The Working Group considered such cooperation essential for it to discharge its duties effectively. From the replies received, the Working Group was encouraged to note that some Governments had carried out investigations into the allegations made and taken general measures, including enacting new legislation, conducting legal reform, introducing health policies, plans of action and gender-budgeting initiatives, improving health-care facilities, making efforts to increase women’s participation in political life and in key sectors of the economy, and improving public awareness-raising activities to promote gender equality and the advancement of women in accordance with relevant international standards.
Chapter IV

Follow-up to Economic and Social Council resolutions and decisions

1. The Commission considered item 5 of its agenda at its 15th meeting, on 12 March 2009, and held a panel discussion on the theme “Gender perspectives on global public health: implementing the internationally agreed development goals, including the Millennium Development Goals”. It had before it the following documents:

   (a) Letter dated 3 December 2008 from the President of the Economic and Social Council to the Chairperson of the Commission on the Status of Women (E/CN.6/2009/9);

   (b) Note by the Secretariat on implementing the internationally agreed goals and commitments in regard to global public health (E/CN.6/2009/13).

Panel discussion under agenda item 5

Gender perspectives on global public health: implementing the internationally agreed development goals, including the Millennium Development Goals

2. At its 15th meeting, the Commission held a panel discussion on the theme “Gender perspectives on global public health: implementing the internationally agreed development goals, including the Millennium Development Goals”.

3. Opening remarks were made by the Chairperson of the Commission.

4. An introductory statement was made by the President of the Economic and Social Council, Sylvie Lucas (Luxembourg).

5. Presentations were made by Anjana Bhushan, Technical Officer, Division for Health Sector Development, Western Pacific Regional Office, WHO; Hernán Montenegro, Senior Regional Adviser on Health Systems and Services, Pan American Health Organization/WHO, Washington, D.C.; and Lynn Collins, Family Medicine Physician and Technical Adviser in HIV/AIDS and Health, UNFPA.

6. The Commission then held a dialogue with the panellists, in which the following delegations participated: China, Czech Republic (on behalf of the European Union), Egypt, Eritrea, Gabon, Guinea, Indonesia, Japan, Republic of Korea, Saudi Arabia and South Africa.

7. The observer for the International Organization for Migration and a representative of the Medical Women’s International Association, a non-governmental organization, also participated.

8. At its 16th meeting, on 13 March, the Commission decided to transmit the moderator’s summary of the panel discussion to the Economic and Social Council as an input into its annual ministerial review of 2009 (see chap. I, sect. B).
Chapter V

Provisional agenda for the fifty-fourth session of the Commission

1. The Commission considered item 6 of its agenda at its 17th meeting, on 13 March 2009. It had before it a note by the Secretariat containing the draft provisional agenda and documentation for the fifty-fourth session of the Commission (E/CN.6/2009/L.5).

2. At the same meeting, the Commission recommended the draft provisional agenda for its fifty-fourth session to the Economic and Social Council for adoption (see chap. I, sect. D).
Chapter VI

Adoption of the report of the Commission on its fifty-third session

1. At the resumed 17th meeting, on 13 March 2009, the Rapporteur, Cécile Mballa Eyenga (Cameroon), introduced the draft report of the Commission on its fifty-third session, as contained in document E/CN.6/2009/L.3.

2. At the same meeting, the Commission adopted the draft report on its fifty-third session and decided to entrust the Rapporteur, in consultation with the Secretariat, with the completion of its report.
Chapter VII
Organization of the session

A. Opening and duration of the session


2. The session was opened by the Chairperson of the Commission, Olivier Belle (Belgium), who also made a statement.

3. At the 1st meeting, on 2 March, statements were made by the Deputy Secretary-General, the President of the Economic and Social Council, the Under-Secretary-General for Economic and Social Affairs and the Assistant Secretary-General and Special Adviser on Gender Issues and Advancement of Women.

4. At the 5th meeting, on 4 March, statements were made by the Assistant Secretary-General and Special Adviser on Gender Issues and Advancement of Women, the Director of the Division for the Advancement of Women and the Executive Director of the United Nations Development Fund for Women.

5. At the same meeting, the Special Rapporteur on violence against women made a presentation and responded to comments and questions posed by the representatives of Croatia, Turkey, Malaysia, Ecuador and the United States of America, and the observers for Switzerland, the Czech Republic (on behalf of the States Members of the United Nations that are members of the European Union) and Argentina.

6. At the 10th meeting, on 6 March, a statement was made by the Chairperson of the Committee on the Elimination of Discrimination against Women.

B. Attendance

7. The session was attended by representatives of 45 States members of the Commission. Observers of other States Members of the United Nations and of non-Member States, representatives of organizations of the United Nations system and observers for intergovernmental, non-governmental and other organizations also attended.

C. Election of officers

8. In accordance with paragraph 2 of Economic and Social Council resolution 1987/21, the officers are elected to the Bureau of the Commission for a term of office of two years. The following officers elected at the fifty-second session continued to serve during the fifty-third session:

Chairperson:
Olivier Belle (Belgium)
Vice-Chairpersons:
Ara Margarian (Armenia)
Enna Park (Republic of Korea)
Julio Peralta (Paraguay)

Vice-Chairperson-cum-Rapporteur:
Cécile Mballa Eyenga (Cameroon)

D. Agenda and organization of work

9. At its 1st meeting, on 2 March, the Commission adopted its agenda and approved its organization of work as contained in document E/CN.6/2009/1. The agenda read as follows:

1. Election of officers.
2. Adoption of the agenda and other organizational matters.
3. Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly, entitled “Women 2000: gender equality, development and peace for the twenty-first century”:
   (a) Implementation of strategic objectives and action in critical areas of concern and further actions and initiatives:
      (i) The equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS;
      (ii) Equal participation of women and men in decision-making processes at all levels;
   (b) Emerging issues, trends and new approaches to issues affecting the situation of women or equality between women and men;
   (c) Gender mainstreaming, situations and programmatic matters.
4. Communications concerning the status of women.
5. Follow-up to Economic and Social Council resolutions and decisions.
6. Provisional agenda for the fifty-fourth session of the Commission.
7. Adoption of the report of the Commission on its fifty-third session.

Participation of the Cook Islands and Niue as observers at the fifty-third session of the Commission

10. Also at the 1st meeting, following a statement made by the Secretary of the Commission and further to the requests of the Cook Islands and Niue to participate as observers at the fifty-third session of the Commission, the Commission decided to invite the Cook Islands and Niue, in accordance with rule 69 of the rules of procedure of the functional commissions of the Economic and Social Council, to take part in the fifty-third session as observers.

11. Statements were made by the observer for Argentina and the Secretary of the Commission.
E. Appointment of the members of the Working Group on Communications on the Status of Women

12. Pursuant to Economic and Social Council resolution 1983/27, the Commission established a working group to consider communications concerning the status of women. The following five members, nominated by their regional groups, were appointed to the Working Group of the fifty-third session:

   Janine Elizabeth Coye-Felson (Belize)
   Asif Garayev (Azerbaijan)
   Ana Jimenez (Spain)
   Palesa Joyce Liphoto (Lesotho)
   Fuzuki Nomura (Japan)

13. At its 17th meeting, on 13 March, the Commission appointed Koh Sang-Wook (Republic of Korea) and Kadra Ahmed Hassan (Djibouti) to serve on the Working Group for the fifty-fourth session of the Commission. The appointment of the remaining three members of the Working Group was deferred to the fifty-fourth session of the Commission, on the understanding that, upon nomination by their respective regional groups, the nominees would be permitted to participate fully in the proceedings of the Working Group.

F. Documentation

14. The list of documents before the Commission at its fifty-third session is available at the following website: www.un.org/womenwatch/daw/csw/53sess.htm.