Statement by H.E. Ambassador Magued Abdel Aziz
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On the Priority theme of
“The equal sharing of responsibilities between women and men, including care giving in
the context of HIV/AIDS”
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Mr. Chairman,
Let Me at the outset congratulate you on leading the deliberations of our Commission for this session, which Agenda is charged with issues and subjects of utmost importance to the general membership, I would also like to congratulate your bureau members and express our confidence that the commission under your chairmanship will be reaching outcomes and recommendations that rises to the importance of the issues under discussion.

Mr. Chairman,
Our commission is convening these days while the World is witnessing a huge Global Crisis affecting Financial Markets and Economies around the World, which threatens Social and economic development policies and projects in so many countries, and with no doubt affecting the most vulnerable circles and social groups of societies, particularly those of developing countries, and I precisely mean by that, conditions of Women’s rights and opportunities in employment and health care.

In our perspective, as much solid mechanisms there are in developing countries for empowering women in the fields of economy, politics, culture and education, there will be less negative impact for the global crisis and better capabilities in controlling it within limited ranges. The participation of women in political decision, economic planning and their abilities to diversify their activities, in crisis management and rationalizing consumption might help in better mitigating the pressing effects of the financial Crisis, whether on the national or the international levels. Our Session might also consider seeking the possibility of providing regional or inter-regional frames to organize and activate women’s role in combating such pressing crises and in re-accentuating the importance of mainstreaming gender in economic recovery strategies and mobilizing development on national, regional and inter-regional levels. The commission can also benefit from current geographic representations of the economic and social commissions of the ECOSOC which are distributed round the World, we can also make use of all regional organizations including the African Union, the Arab League, the ASEAN and the OIC.

I don’t have the intention to raise more queries in this forum related to facts and economic realities of Globalization and its negative impacts on developing countries, and what kind of dilemmas they face related to the Global Financial Crisis; But to shed some light on what the National Council of Women is doing in relation to the Crisis and its impact on Women; The Council had convened 27 meetings chaired by Governors with
the participation of Public and Executive authorities, which triggered huge participation from the public, 13,000 persons representing all categories of Society, in addition to other public meetings, where 500 sub-local meeting were convened aiming at changing directions and creating new social trends regarding consumption and rationalizing expenses.

We have chosen the issue of “The equal sharing of responsibilities between women and men, including care giving in the context of HIV/AIDS” as our priority theme for this session. It is of no doubt that the available international statistics on the actual figures of the spread of the pandemic around the World and on the possible causes for its spread amongst new sectors of society, while facing deteriorating economic and social conditions, causes us and all others an ever growing concern. This concern is over stretched by the effect of the current Global financial Crisis and its impact on the capacity of available financial resources for the necessary public health care sector in general and in particular on funding programs directed to HIV/Aids patients. In addition to the Crisis impact on available resources aimed at financing other related sectors like Education, training, raising awareness, activities related to Civil Society, science research and pharmaceuticals.

In this occasion, permit me to give you a glimpse on the experience of Egypt regarding the two components of our priority theme, **first**: on promoting equal sharing of responsibilities between men and women in matters related to development and decision making. **Second**: on The Egyptian National program on combating the HIV/Aids pandemic.

**First: Egyptian expertise in promoting equal shared responsibilities between men and women:**

Egypt concentrated its efforts during the past two decades on gender related issues specially those related to the economic empowerment of Women, the Government had adopted in the past years a number of important initiatives and policies aiming at eliminating all forms of discrimination against women, the most important of which is the initiative establishing the National Council of Women in the year 2000, which served as a national mechanism for the advancement of Women, and committed all other national institutions to provide the Council with all necessary data and statistics related to its work.

The national strategy related to the advancement of women and enhancing its participation in decision making has concentrated on including gender into the main stream of development through national comprehensive economic and social policies, and through participating in the preparatory stages of establishing gender budgeting, to guarantee allocating adequate financial resources for women’s economic and social empowerment as well as breaching gender discrepancies and gaps and at the same time raising capacities of national economy and achieving sustainable development.
The Egyptian efforts had succeeded in tightening the gender gaps between men and women in more than one field and through more than one social and economic indicator, the percentage of girls enrolling in primary education had exceeded boys in Egypt, witnessing a jump from 81% in 1995 to 93% in 2005, while girls enrollment in (secondary) high school education had risen from 77% to more than 100%, and in vocational secondary education from 74% to 86% for the same period.

Statistics also indicates an increase in percentage of paid working women in non agricultural activities from 19% in 1990 to nearly 25% in 2006, it is worth noting that third of the working women is concentrated in top specialized professions, such as medicine, engineering, management and technical professions. The few past years have witnessed an increasing interest of women to work in the field of industries-in particular chemicals, and electronics in addition to the rising number women interested in owning small enterprises.

While the above inclines a clear enhancement in the status of Egyptian Women, indicating to a great extent the probability of Egypt achieving the Third MDG related to gender equality and empowerment of Women which we committed to realize by 2015, yet again, challenges still exists and other indicators not so optimistic still exists; The ratio of Women participating in the labour force is much less than that to men, the discrepancy is really clear amongst employer and entrepreneurs, in addition to this one third of Egyptian women still work in low productivity jobs, they mostly exist in unpaid agricultural sector. On the other hand, the rising ratios of unemployed women to four times more than men reflect the condensed challenge that still faces us regarding women’s share in Egyptian economy.

In light of the strategic transformations that the Egyptian economy has witnessed during the past two decades, which included the change in the role of the State from a producer to an employer to an organizer, supporter and observer, other parallel transformations took place at the same time, in the means of planning for development, changing comprehensive centralized planning to participatory planning, which caused planning to highly depend on decentralization, democracy and participation of many players. Important trends have taken place, integrating development strategies on local and governorates levels in the overall comprehensive national development strategies of the whole country. Parallel to this new approach, gender responsive budgeting have been established on all levels of planning for development, including those on targeting, financing, implementing, until the final stages of follow up and assessment of planning. Women have occupied an essential role in all of these levels. All authorities concerned with economic planning have joined hands with the national council of women in adopting a new five year comprehensive socio-economic development strategies (from 2002/till 2007) and (from 2007/till 2012) taking into account the principle of equal sharing of responsibility on local, governorate and national levels.

These new five year strategies included several programmes and principle projects aiming at the Advancement of Women in the fields of Education, Training, Health,
Environment Protection, Poverty Eradication, Economic Empowerment, Culture, Tourism, Information Technology and Social Care. Investments allocated for implementing the advancement of women strategy within the comprehensive development strategy reached in its first year of the second five year strategy (2008) approximately 190 Million Egyptian Pounds, of which 59 Million for the health programme (31%) while the share of the education programme reached approximately 56.5 Million Egyptian Pounds (30%) of the total investment. In addition to the programme of the Social Care which reached approximately 50.9 Million Egyptian Pounds (27%), 14.8 Million Egyptian Pounds (7%) were allocated for supporting working women and their entitlements in different ministries and government entities.

The plan of the advancement of women was based on several axis and complementary policies, the most prominent of it are the following:

- Establishing a national data base for publishing and updating statistics and indicators related to social gender in all governorates and sectors.

- Mobilizing non-governmental organizations, and encouraging them the monitor forms of discriminations against women and activating their role in changing the general perception and behavior within the society.

- Providing 600,000 additional jobs for women, over a ten years period, within the framework of the activities of civil society, especially in the field of pre-school education, health services and social work.

- Establishing public child care centers for the children of economically poor working mothers, and providing opportunities for upgrading the professional skills of women in the fields of nursing, tourism and social services.

- Developing and creating new legislations which guarantee the rights of women in ownership and inheritance, and facilitating legal procedures in the field of personal social matters.

- Enhancing political participation and political representation of women through awareness campaigns, and supporting including women candidates in elections at all levels, as well as amending the constitutions to guarantee fair participation for women by adopting an electoral system that guarantees a minimum participation for women in Parliamentary Councils.

- Revitalizing the role of the social fund for development, to provide for increasing opportunities for women from financing facilities designed for small projects (there is a special unit for social gender within the organization of structure of the fund). Supporting the programme of productive families affiliated to the Ministry of Social Affairs, which opens the door for enhancing the productive capacities and increasing the income for housewives (there are 34,000 centers for productive families nationwide in Egypt).
Developing education curricula in Egyptian high schools in order to eliminate all forms of discrimination against women, and reviewing and redirecting the training programmes for school teachers and headmasters.

At the end of this presentation on the Egyptian experiment in integrating gender within the national strategy for economic and social development, it is highly important to make due reference to the positive role and constructive cooperation received by the Egyptian Institutions from all relevant UN agencies, especially UNFPA, UNDP, and UNIFEM, as well as from other agencies and donor countries who made contributions in several workshops, training programmes and research projects and seminars in Egypt.

Second: The Egyptian National Programme for combating HIV AIDS

Almost two decades passed after the appearance of HIV/AIDS, Egypt succeeded to be among the least countries affected by the pandemic. Official statistics of the Egyptian Ministry of Health indicate that the total recorded cases by the end of December 2008 reached only 2,551 cases, among which 1,618 carrier for the virus and 933 affected by the disease. This means that the rate of the disease among the total population in Egypt did not exceed 0.03%, and its rate among the most vulnerable population segments is only 0.05% to 2%. However, the supervisors believe in the probability of an increase in these ratios if the momentum of this programme is not reserved and enhanced. The behavior of drug addiction through intravenous injections, frequent blood transfusions, in addition to the increasing numbers of refugees, students and tourists constitute the main elements of the potential increase in those ratios. The Egyptian National Programme for combating HIV/AIDS includes several main components. Among these are raising health awareness of the whole population, especially amongst youth, women and care givers, combating sexually transmitted diseases, supervision and control of blood transfusions, strict monitoring of HIV AIDS cases and preventing the transmittance of the disease from mothers to their newborns, in addition to providing care and support for the more vulnerable social segments, such as prisoners and soldiers and finally managing discriminatory behaviors against HIV/AIDS virus carriers.

The following are the most important achievement regarding the national anti HIV/AIDS Programme:

1. The National Programme for combating the disease and the national committee supervising its implementation where established in 1986 as soon as the first case appeared in Egypt.
2. Several ministerial decisions were issued, among which is the one committing different institutions and all citizens to promptly notify upon the appearance of early symptoms of any suspected cases. All physicians and all and all epidemic deceases’ hospitals were provided with the medical manual explaining the
symptoms, elements of suspicions and the proper way to deal with suspected cases.

3. In 1987 a central most advanced blood test laboratory and others at the local and governorate levels were established, as well as new supervisory codes for monitoring blood transfusions banks. Periodical reports are sent from the local level laboratories to the main central laboratory, reporting on the numbers, nature and results of investigated cases.

4. Information about HIV/AIDS was included in the curricula of preparatory and high schools and in all University and colleges specialized in nursing and medical services, especially in the curricula of social services colleges.

5. Relative development occurred in the social and human behavior of those in contacts with the virus carriers, whether among family members or social institutions or members of medical teams and services providers. The increased awareness of the population about the dimensions of this disease through public media contributed significantly to these developments, as well as the public debates and transparency in dealing with this issue through literature, media, televisions series and movies.

6. Medical services and care for HIV/AIDS patients and virus carriers are provided through 112 epidemic disease hospitals and 126 chest and pulmonary disease hospitals all over Egypt.

7. Several programmes and activities were established between a number of authorities and foundations working in the field of combating the disease and providing care for the patients, under the general supervisions of the national committee within the framework of the National Programme.

8. In September 1996, a hotline was established in the Ministry of Health, in cooperation with the Ford Foundation foundation, for early notification on suspected cases, and providing advice and urgent assistance. That hotline received approximately 50,000 calls, some of which are from Arab citizens residing in other Countries.

9. The establishment of 15 permanent centers for blood tests in 15 Egyptian governorates in addition to 9 mobile centers for providing blood tests services free of charge.

10. A programme for capacity building was developed through TOT, for providing training to social leaders, religious mentors, leading figures in women societies on techniques of early monitoring of suspected cases and effective handling of patients.
11. Providing Necessary ways and means for sterilizing subcutaneous injections and surgical instruments, in addition to tightening supervision on suspected places of drug addicts.

12. More institutions are becoming involved in combating HIV/AIDS pandemic nationwide, whether at the diagnostic, treatment phase, educating on the disease and awareness raising levels. Hence, National Programme now combines different related foundations, institutions, programmes, and various sectors and players of society including education, health, media, religious mentors, societal development, civil society, the National Council for Women, the National Council for Motherhood and Childhood, as well as the participation of the private sector in several activities, funding, awareness raising and strengthening the institutional capacities of the diagnostic centers and laboratories.

Finally, we came to realize that achieving “equal shared responsibility between men and women, including in the area of care for the HIV/AIDS” as much as it needs equal partnership between men and women, is of utmost need for different national authorities, institutions and foundations, to come together on all levels, whether central or local and work towards achieving that goal.

I thank you Mr. Chairman