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GENDER DISCRIMINATION AND DEPRIVATION: CURRENT SITUATION AND PROSPECTS FOR ALLEVIATION*

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Worldwide, there is a tremendous concern towards violence against the girl-child. The title of this paper is broader and may connote a discrimination against either sex. However, it is recognized that gender discrimination usually means violence against women and girls. I will start with specific issues which are good indicators of the plight of many girl-children in the world.

Gender Violence

- Researchs shows that the main locus of violence is within the household. Socialization into accepting or committing violence starts at home where children witness their father beat or abuse their mother or when they themselves are abused.
- Reports of incestuous rapes against female children are increasing, not only in developing countries, but in the developed as well.
- Pedophilia, which involves the trafficking of minors by international syndicates, has reached alarming proportions.
- The commercial sex industry caters to the preference of customers for female virgins who usually are very young women between the ages of 12 to 15; male customers' preference for young virgins is also fueled by their belief that they can avoid HIV infection if they "use" virgins.
- At least two million girls per year suffer female circumcision. Eighty-five to 114 million girls are estimated to have been genitally mutilated in Egypt and Sudan. Researchers report that girls as young as five to nine years old are subjected to genital circumcision despite legal restrictions. Genital mutilation may lead to social and mental problems and even death. Aside from the health problems that this practice causes, cultural taboos deprive the child of a healthy social development. After circumcision, her status becomes that of a woman. She is not allowed to socialize with boys her age and is subjected to strict codes of modesty.

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- The trend is increasing where women minors are sent, through illegal ways, to work as overseas migrant workers for some countries.
- The earliest forms of gender violence occur as feticide, prenatal sex selection and infanticide as a consequence of son-preference in most cultures.

Discrimination

- In the allocation of resources (i.e., food and money for education), in the context of competing gender and generation demands in poor households, the girl-child is usually given lower priority than that accorded to boys.
- Cultural beliefs and social hierarchies place more household responsibilities on adolescent girls than on boys their age. In settings where mothers earn money outside the home, they take over much of the mother's tasks and responsibilities. When accidents occur to their infant siblings, there have been reports that they are violently punished for negligence.
- The health services specific to needs of adolescent girls are either inadequate or nonexistent. Health professionals are usually untrained or insensitive to sexuality and reproductive health problems of young women and adolescents.
- Early marriage, which may also be prearranged, exposes the girl-child to obstetrical risks and can shorten life span. This also hinders further educational or employment opportunities.

Deprivation

- Cultural beliefs in some communities such as food taboos during menstruation, deprive the girls of critically needed nutrition.
- Most cultures deprive girls of an education for a number of reasons.
- Social norms and power structures deprive young women of opportunities to participate meaningfully in community affairs and political events.
- Young women, some as young as 12 to 15 years old, are recruited to work in sweat shops like garment and electronics factories and are deprived of protection of labor laws. The focus on child survival has inadvertently diverted attention away from the situation of millions of violated, discriminated and deprived girl-children. This picture does not even include the situation of girl-children in very difficult circumstances like the street children and children who are living in war-torn areas.
- According to a 1994 WHO statement, the vast majority of female adolescents in developing countries suffer from iron deficiency. At least 25 percent of adolescent girls in developing countries are affected by iodine deficiency, a common cause of mental retardation.

In an October 1994 press release, the World Health Organization called attention to the plight of adolescent girls. "Their health is jeopardized because often they have a low status in their families and in their workplaces, and crucially fewer opportunities for education, training and employment. In such an atmosphere, they face hazards such as child marriage, child prostitution, genital mutilation, assault during pregnancy, courtship or dating violence and sexual harassment and abuse".

In many countries, young women suffer from double neglect because they are neither regarded as children or adults. Dr. Hiroshi Nakajima, Director-General of WHO, states: "More and more, changing global conditions are placing greater strains on young people, modifying their behavior and relationship which are increasingly exacerbating health problems. These problems often fall most heavily on young women. It is often action by others that is a prime root cause of many of these problems, detrimental not only to themselves, but to their future families and society as a whole".

Dr. Nakajima's remarks remind us of the many adverse impacts of aggressive capitalist marketing on the values and desires of the young, who are among the primary targets of advertisements. The tobacco industry, for example, has spent billions of dollars on advertising which is designed to create a bigger market among the young generation which can raise a number of ethical issues. In North America, the population which registered the highest increase in cigarette consumption is that of teenage girls. A larger percentage of the world's population is acquiring the tobacco habit. The trend reflects the greater availability of cigarettes to teenagers, worldwide.

A Framework for Understanding The Situation of the Girl - Child

There are two factors which stand out when we examine the issues besetting the girl-children of the world: GENDER AND GENERATION. They are suffering from double neglect because they are women but they are neither children (who have been the subject of many child survival programs) or adults (who at least have certain prerogatives in society). Women, in general, are discriminated and deprived the world over. Adolescent women are in a worse situation because they are women and they are adolescents.

Cultural, sociological, political and economic structures and dynamics work in an interrelated fashion to sustain the double neglect and obstruct efforts at improvement. A very good illustration is gender, both as an analytic and operational concept.

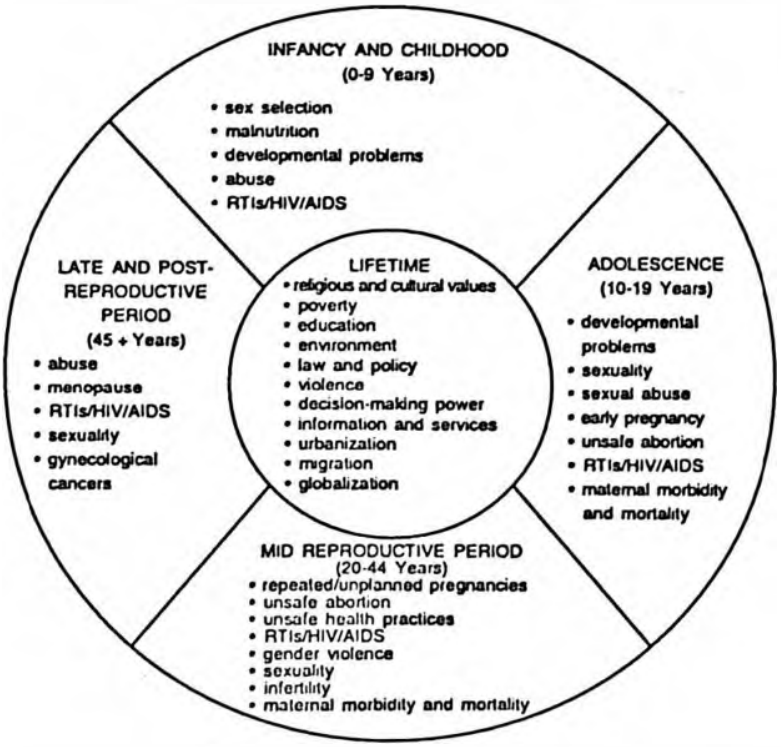
The Special Programme of Research in Human Reproduction (HRP), which is cosponsored by the UNDP, the UNPF, the WHO and the World Bank, explains gender as follows: "Gender" is used to describe those characteristics of men and women which are socially constructed in contrast to those which are

biologically determined. This social construction makes gender a dynamic concept which looks at the system formed by the interrelations between men and women in the context of society. These interrelations vary widely within and between cultures and are affected by the values of society made explicit through law, and religious and cultural practices. Gender roles change over time and over an individual's life stages. In practically all cultures, women have a lower status than men. Even in countries where discrimination against women and girls may not be evident, a deeper study will reveal a subtle existence of discrimination.

A gender analysis reveals the power relations between men and women in which women are usually subordinate. In reproductive health, a gender approach examines how gender differences determine differential exposure to risk; access to benefits of technology, information, resources and health care; and the realization of reproductive and sexual rights and responsibilities.

The Life Cycle Approach

It has been convincingly shown in various fora and reports that the holistic or integrated approach is the appropriate way of addressing health concerns. The life cycle approach is the holistic way of addressing the situation of the girl-child. It affirms that the health of the girl is dynamically located in a continuum such that, for example, to have healthy women, we should promote the health of the fetus, the infant, the child, the adolescent, the adult and the elderly. This diagram has been developed by researchers and advocates of reproductive health rights of women (Fig. 1). It can be very well used to illustrate the life cycle



Fiig. 1: Life cycle approach to sexual and reproductive health.

approach to addressing the situation of the girl-child. We are not advocating that reproduction is the only or even the primary role of women. On the contrary, we take reproductive health as the totality of the health of women.

In the diagram we see the different stages in the life of the woman and the various health problems that are usually associated with each stage. Let me focus on the stages of infancy and childhood and adolescence. The health problems that usually plague children in the stages have been mentioned earlier in my paper: sex selection (which can lead to abortion or female infanticide), malnutrition, developmental problems, abuse and reproductive tract infections (RTI). In adolescence, the problems are usually those which have something to do with their biological and social development: their sexuality, sexual abuse, early pregnancy, unsafe abortion (as well as social ostracism), RTIs, maternal morbidity and mortality.

The innermost circle shows the factors which influence and contextualize these various health concerns. These are: religious and cultural values, poverty, education, environment, law and policy, violence, decision-making power, information and services, urbanization, migration and globalization.

Prospects for Improvement

The WHO Global Commission on Women's Health recognizes that young people are themselves a great resource for promoting health and human development. "Young people are very sensitive to injustice, and it is for this reason that there is hope in enhancing gender equity between the sexes".

Information and education work at the community level can target the young generations as they are the most open to new ideas and have the flexibility to adopt new ways of establishing and of forging relationships.

Education

The most promising strategy is education of young women. Let me present excerpts from "Girl's Education: A Lifeline to Development, The State of the World's Children 1996 UNICEF":

"For several decades now, female literacy has been recognized as a critical factor for both health and national development. Recent international conferences in Cairo (population) and Beijing (women) have affirmed the necessity of education for the empowerment of women.

It is a sad fact that if global figures are perused, there are twice as many girls out of school compared to boys and twice as many women who are illiterate adults as men. Earlier, in both the Convention on the Rights of the Child, and the Convention on the Elimination of All Forms of Discrimination Against Women, it has been emphasized that it is a basic human right for girls to have a basic educatilon.

Examples of the effects of education are as follows: An educated woman is likely to marry at a later age. She has fewer children. An extra year of schooling for girls has been shown by crosscountry studies to reduce fertility rates by 5 to 10 percent. It has also been demonstrated that children of an educated mother are more likely to survive. In India, the infant mortality rate of babies whose mothers have received primary education is half that of children whose mothers are illiterate.

An educated woman will be more productive at work with higher pay. Studies from a number of countries suggest that an extra year of schooling will increase a woman's future earnings by about 15 percent, compared with 11 percent for a man, clearly demonstrating that the dividend for educational investment is often higher for women than men.

The good news is that in the last two decades, significant progress in girls' education has been made with combined primary and secondary enrolment for girls in developing countries rising from 38 percent to 68 percent, with high rates in East Asia (83 percent) and Latin America (87 percent). On the other hand, the bad news is that in the least developed countries, enrolment rates are only 47 percent at the primary level and 12 percent at the secondary level.

To improve girls' access to education, experience has shown in several countries that the following contribute positively: Parental and community involvement with a partnership between families and community is important in developing curriculum and managing children's education. Low-cost basic education should not only be free or cost very little but should provide stipends and scholarships wherever possible to compensate families for the loss of the girl's household labor. A flexible timetable would enable girls to help at home and still attend classes. Schools close to home would lessen parental worry about girls travelling long distances and in some countries, many parents prefer their daughters to be taught by women.

Early childhood care enhances girls' self-esteem and prepares them for school. Learning materials must be relevant to the girl's background, presented in the local language, and must avoid reproducing gender stereotypes. In brief, education is best started in early childhood and girls should be given equal educational opportunities as boys. "Remember, educate a girl and you educate a woman; educate a mother and you educate a family".

Advocacy

Advocacy, particularly legislative advocacy, has been found to provide a conducive environment for social transformation and the promotion of human rights. Advocacy should involve the citizenry, especially the family, the media, the Academe, the church, non-governmental organizations and the legal system.

Advocacy should be directed towards achieving the following:

- *Change of attitudes-in the girl herself, her parents and the public*: Through the media, schools, family, community.
- *Data collection*: By medical societies, obstetric and pediatric societies, governmental and non-governmental organizations.
- *Provision of equal services in*: Health/nutrition, education, reproductive education, social services.
- *Social mobilization by*: Community organizations, religious groups, cultural groups, professional organizations, media.
- *Legislation and implementation of legal provisions on*: Prohibition of prenatal gender selection, banning of female genital multilation, enforcement of laws against infanticide, protection of children vs. exploitation, compulsory primary education.
- *Acceptance and adherence to international instruments protecting the girl child*:

  The Geneva Declaration on The Rights of the Child, 1954
  Universal Declaration on The Rights of the Child, 1959
  International Covenant on Civil and Political Rights, 1966
  The UN Convention on the Elimination of All Forms of Discrimination Against Women, 1979
  The UN Convention on The Rights of the Child, 1989
  The World Conference on Education for All, 1990
  The International Conference on Nutrition, 1992
  The International Conference on Population and Development, 1994
  The Fourth World Conference on Women, 1995

- *International aid restrictions to countries that do not comply.*

Research and Data Collection

Necessarily, statistical data on gender discrimination must be available for planning, strategies and interventions. Research will provide data essential for legislative advocacy. Research data is crucial in lending credence to legislative advocacy to facilitate deliberations on a proposal. Research data would be the basis of information, education and communication materials.

Public Education and Information

Research data should be shared with the public, with community organizations, religious and cultural groups, professional organizations and media. This can bring about a mobilizatilon which can target as one of its primary objectives an attitudinal change in the girl herself, her parents and the public.

Reforms in the Health Care Delivery Systems

It is encouraging to note that progressive initiatives are now being taken by medical schools in reforming their curricula towards the production of more gender-sensitive and gender-responsive health care professionals. Health care institutions should continue to establish units and services which are specifically aimed at responding to gender-related health needs. It is obvious that increasing attention is being given to ethical issues in health care and health research. But we need to do more. Let us establish more networks and partnerships regionally and globally so that we can maximize our efforts and our impact on international trends.

Pediatricians should become involved as individual citizens with pediatric societies, putting up a collective voice that can be heard loud and clear by policy makers, legislators and the whole community.

Let me end by quoting a poem written by Dr. Sultan Arif Zuberi:

I Am the Poor Rural Woman

I am the poor rural woman
Surrounded by ignorance and superstition
Despite this age of modern civilization
Without health care and without education
I am the poor rural woman of this nation

The day of my birth is a day of grief
I toil till my death without relief

In darkness and dirt my newborns arrive
Death haunts me whilst I am giving life

My father, my husband, even my son
No one thinks of me as a person
I am no better than the cattle I feed
Is life only to graze and breed?

I am the subject of learned discourse
Reformers write papers full of remorse
Politicians raise slogans to further my cause
But my status however remains as it was

False promises do not endure
"True Will" only effects a cure
If you wish to build a nation new
Give me the rights which are my due

If justice is denied to me
From bondage no one will be free
My strength will make the nation strong
Just like the land to which I belong

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