

GENDER, SEXUALITY, AND HIV/AIDS

Gender refers to societal beliefs about the roles and responsibilities that are appropriate for women and men. Research has shown that the gender-based imbalance in power found in the socioeconomic sphere is frequently reflected in sexual relationships. Beliefs about masculinity and femininity affect the sexuality of both women and men as well as their risk of HIV and other STIs. Societal expectations of men and women also have an impact on their care and support needs. For example, the burden of AIDS-related care often falls disproportionately on women. Horizons aims to identify ways to improve HIV/AIDS programs and services through operations research that takes gender and sexuality into account.

A History of Partner Violence Predisposes Women to HIV

A Horizons study conducted by Muhimbili Medical Centre in Dar es Salaam, Tanzania, found that physical abuse is common for both HIV-positive and HIV-negative women seeking HIV voluntary counseling and testing.

- Overall, 39 percent report having had at least one physically abusive partner and 17 percent report having had at least one sexually abusive partner.
- Young HIV-positive women (18-29 years) are ten times more likely to report partner violence with their current partners than young HIV-negative women.

The study also found that disclosure of HIV serostatus to sexual partners was significantly higher among seronegative women than seropositive women (83 percent vs. 69 percent). Regardless of serostatus, the main reason for non-disclosure (52 percent) was fear of a partner's reaction, particularly fear of abuse or abandonment.¹ Muhimbili has used the findings to improve counseling about disclosure and to develop a community intervention focused on reducing violence and risky sexual behaviors that will be tested in a forthcoming study.

Can Men Become More Involved in Care for Pregnant Partners?

Researchers from the University of Zimbabwe and Horizons are exploring the role antenatal care (ANC) services can play in fostering couple communication and HIV-preventive behaviors. Findings indicate that male involvement in ANC is viewed positively by almost all informants, even though pregnancy and childbirth are traditionally seen as the domains of women.

- Men report that pregnancy is shrouded in mystery—very little information reaches them from their wives and from providers.
- While women and men agree upon the importance of providing financial support to the mother and baby, women's definition of male involvement includes many other issues. Women said that involved men would offer emotional support, engage in a regular dialogue with them and ANC providers, notice changes in a woman's body, and help out at home.
- While they may feel uncomfortable seeing men at the antenatal clinics, providers are anxious to receive training to help them discuss sexual issues with men and engage them in the pregnancy process.



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For more information, contact:

Population Council/Horizons Communications Unit
4301 Connecticut Ave, NW Suite 280
Washington DC 20008 USA
Tel: +202-237-9400
Fax: +202-237-8410
Email: horizons@pcdc.org

<http://www.popcouncil.org/horizons/horizons.html>


These data have been used to develop a clinic and community-based intervention. The findings from the evaluation will be available at the end of 2002.

Supporting People Living with HIV/AIDS: Addressing Gender and Sexuality

Horizons and the International HIV/AIDS Alliance are studying the involvement of people living with HIV/AIDS (PLHA) in NGO prevention and care programs in four countries. In Ecuador, women and men who are infected with HIV express different needs for information and support. Women express family-related needs, such as counseling for their children, child care to permit their involvement in community-based activities, and help to plan for their children if they become sick or die. Men who have sex with men report that they are victims of double discrimination because of both their sexual behavior and their serostatus. Male PLHA also want to know how to continue having a pleasurable sexual life and avoid HIV transmission and re-infection.² The NGOs that participated in the research plan to use these findings to make their services more responsive to the needs of PLHA.

Another study in South Africa is examining the gender dimensions of reducing stigma in the workplace. The study, being conducted by Horizons, DRA, and a South African power company, reveals that a minority of men and women express such stigmatizing attitudes about PLHA as discomfort with shaking their hands or with sharing work tools. But men are significantly more likely to express stigmatizing attitudes than women ($p < .05$). Women (58 percent) were significantly more likely than men (37 percent) to agree that women with HIV are treated worse than men with HIV. And women are also more likely than men to believe that if they disclose an HIV positive status to their sexual partner, they would be abandoned ($p < .05$).

MSM Face Stigma and Discrimination and an Increased Risk of HIV

Researchers from the National AIDS Control Program (PNLS), Cheikh Anta Diop University, and Horizons conducted a study of the needs, behaviors, and experiences of men who have sex with men (MSM) in Senegal. Because MSM do not conform to gender and sexuality expectations, they often face violence and rejection from families, community members, and the police. They are also at high risk of HIV because of unprotected sex, a history of STI symptoms, and poor knowledge of STIs. In addition, MSM are reluctant to seek health care for STI symptoms because they do not want to expose their homosexuality. Study findings have led to the creation of a task force to coordinate services for MSM in Dakar.³ 

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¹Maman, Suzanne et al. 2001. *HIV and Partner Violence: Implications for HIV VCT Programs*. Washington: Population Council.

²Horizons, Kimirina, and International HIV/AIDS Alliance. 2000. *The Involvement of PLHA in the Delivery of Community-based Prevention, Care and Support Services in Ecuador*. London: International HIV/AIDS Alliance.

³Niang, Cheikh et al. 2002. *Meeting the Sexual Health Needs of MSM in Senegal*. Research Summary. Washington: Population Council.

All are available on the web at www.popcouncil.org/horizons.html; for a hard copy contact horizons@pcdc.org.

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