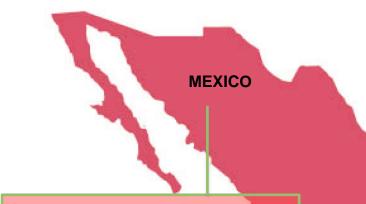


# Reproductive rights violations experienced by women with HIV in Mesoamerica

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### **57,000 Women Living with HIV**



-Adults 15-49 prevalence rate:

0.2%

-Women 15+ with HIV: 32,000

out of 180,000 PLHIV (18%)

-Adults 15-49 prevalence rate:

0.6%

**-Women 15+ with HIV:** 9,800 out of 24,000 PLHIV (41%)

UNAIDS Report on the Global AIDS Epidemic (2012)

-Adults 15-49 prevalence

rate: [0.5% - 0.9%]

-Women 15+ with HIV:

10,000 out of 29,000 PLHIV

(34%)

SALVADOR

**HONDURAS** 

**NICARAGUA** 

-Adults 15-49 prevalence rate:

0.2%

**-Women 15+ with HIV:** 5,200

out of 7,000 PLHIV (74%)





#### Reproductive Rights and HIV-related Violations

- Non-discrimination and the "the right of everyone to the enjoyment of the highest attainable standard of physical and mental health", including reproductive health are internationally recognized human rights<sup>1</sup>
- International commitments to achieve universal access to reproductive health information and services by 2015<sup>2</sup>
- Internationally women living with HIV report reproductive rights violations, from omission of information and services to coercive abortion and forced sterilization<sup>3</sup>

<sup>1)</sup> United Nations General Assembly. 1948. Universal Declaration of Human Rights; United Nations General Assembly. 1976. International Covenant on Economic, Social and Cultural Rights; Committee on Economic, Social and Cultural Rights. 2000. General comment No. 14: The right to the highest attainable standard of health.

<sup>2)</sup> United Nations Population Division. 1994. ICPD Programme of Action; United Nations General Assembly. 2000; United Nations Statistics Division. 2011. Millennium Development Goals Indicators: The official United Nations site for the MDG Indicators

<sup>3)</sup> Ahmed, A., M. J. Roseman and J. Gatsi-Mallet (2012). ""At the hospital there are no human rights": reproductive and sexual rights violations of women living with HIV in Namibia."; Kendall, T. "Reproductive Rights Violations Reported by Mexican Women with HIV." <u>Health and Human Rights: An International Journal</u> 11(2):79-89; Landolt, N. K., N. Phanuphak, S. Pinyakorn, et al. (2012). "Sexual life, options for contraception and intention for conception in HIV-positive people on successful antiretroviral therapy in Thailand." <u>AIDS Care</u> 24(7): 897-904; Mallet, J. and V. Kalambi (2008). "Coerced and forced sterilization of HIV-positive women in Namibia." <u>HIV AIDS Policy Law Rev</u> 13(2-3): 77-78.

#### Community Based Survey on Reproductive Rights Violations

- 2008-2010: Policy research on sexual and reproductive rights and HIV and capacity building with the International Community of Women Living with HIV and AIDS (ICW Latina)
- 2011: Training in documentation of reproductive rights and development, validation and pilot of a questionnaire to document reproductive rights violations in Mexico
- 2012: Regional training on strategic litigation for reproductive rights and adaptation and validation of the questionnaire
- July 2012-February 2013: Community-based data collection by women leaders living with HIV and allies from 3 regional networks and 25 non-governmental organizations
- 337 questionnaires completed

#### **National Distribution**

Country	Number	Percentage
Honduras	100	30%
Mexico	91	27%
Nicaragua	77	23%
El Salvador	69	20%
TOTAL	337	100%

#### **Sociodemographic Characteristics**

- Average age 35.5 [ range15 to 60 years old]
- 42% in a stable relationship at the time of the interview
- 79% have children, mean 2 [range 1 to 8]
- 87% take ART
- 35% live with someone who needs HIV care and treatment

Education		
Can read and write a short note	92%	
No formal education	8%	
Primary school (partial or complete)	44%	
Secondary school (partial or complete)	29%	
Higher education (technical training, university)	19%	

# Participation by Different Populations of Women with HIV

Populations*	%
Transwomen	13%
Sex workers	13%
Indigenous	9%
African descent (primarily Garifuna)	7%

<sup>\*</sup>Self-identification with different populations was not exclusionary. For example, an indigenous transwoman who was a sex worker would be included in each of those populations.

# Reproductive Rights Violations of Women Living with HIV

- Quality of reproductive health services
- Right to information
  - Safe conception and prevention of mother-to-child transmission of HIV
  - Contraceptives and dual protection
- Pressure and coercion to accept sterilization

#### **Quality of Reproductive Health Services**

	YES
Considers that she has received comprehensive reproductive health services	41%
Has experienced discrimination from health workers when seeking reproductive health services	41%
Reports medical and/or emotional problems because health workers have not provided adequate reproductive health services	28%

"Doctors don't talk about sexual and reproductive health. They only talk about the medical aspects. They have too many patients, and they don't have time to talk about it."

-Honduran, 57 years old, single, 1 child

#### **Information for Safe Conception and Pregnancy**

Have you received information in health services about	YES
Prevention of mother-to-child transmission	56%
Safe pregnancy with minimum risks for you, partner, child	43%
Pregnancy while reducing sexual trans to an HIV- partner	36%
Safe conception: TasP, PreP, Insemination, ARV	21%

"The doctors aren't trained and they deny us the right to think of having children."

-Mexican, 37 years old, married, 2 children



# **Pregnancy with the HIV Diagnosis**

Has had a pregnancy since the HIV diagnosis	31%
Told her physician before becoming pregnant	16%
Plans to become pregnant in the future	16%

"My doctor told me that I shouldn't [get pregnant] and tried to convince me, but he couldn't."

-Honduran, 38 years old, married, 5 children

# **Information About Contraceptives**

INFORMATION ABOUT CONTRACEPTIVES	YES
Have you received information about contraceptives additional to or different from the condom as part of your HIV care?	25%
Drug interactions (ARV+ hormonal contraceptives)?	15%
Your health status and ability to use an IUD?	10%



# Consequences of Insufficient Information About and Access to Contraceptives

"I got pregnant because they said that women with HIV can't use contraceptives."

-Honduran, 31 years old, widowed, 1 child

"I got pregnant and infected with the human papillomavirus because I didn't have enough condoms—they limit us."

-Mexican, 30 years old, single, 4 children

# **Coercive Sterilization**

Pressured or forced to undergo sterilization	YES
Mexico	25%
Nicaragua	15%
Honduras	20%
El Salvador	19%
Total Sample	21%

#### **Coercion to Sterilize**

"The nurses forced me to sign. They asked me more than 3 times and threatened not to perform the cesarean. Because of the pressure, I had no option but to sign."

-Salvadoran, 19 years old, separated, 1 child

"They forced me to accept sterilization by telling me that if I didn't, they wouldn't help me with milk for my children."

-Salvadoran, 35 years old, married, 3 children

#### Sterilization without Consent

"She had an abdominal problem, but instead of operating on her for the pain, they sterilized her without her consent."

-Salvadoran, 39 years old, married, 2 children

"During the cesarean and under the effects of the anesthesia they forced her into sterilization so that she couldn't have more children. She didn't sign a consent. When she was recovering from the anesthesia, she saw that her finger was stained with ink."

-Mexican, 27 years old, common-law, 2 children



#### **Conclusions and Recommendations**

- Women living with HIV in Mesoamerica are not receiving the information necessary to permit the effective realization of their reproductive rights in health services
- To protect human rights and promote non-discriminatory universal access to reproductive health information and services by 2015, states should:
  - Implement rights-based training on HIV and reproductive health for healthcare providers
  - Disseminate cutting-edge knowledge about treatment as prevention
  - Integrate HIV and reproductive health services to provide a continuum of care and monitor service delivery
  - Sanction reproductive rights violations
  - Meaningfully involve women living with HIV in policy and program development and M&E
- Research and dialogue promotes country and regional coalitions in favor of the reproductive rights of women living with HIV

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