

RISK-TAKING BEHAVIORS ACROSS CULTURES THAT PLACE WOMEN AT RISK FOR HIV



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PURPOSE

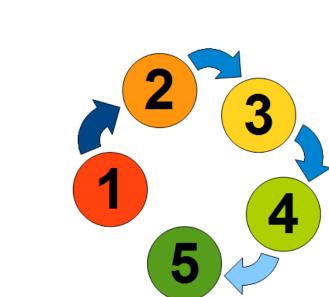
This is an examination of nursing, public health, anthropology and psychology studies completed in the last 16 years along with contemporary theories that explain the role of culture in sexual behavior and sexual risk-taking behavior that place women at risk for HIV/AIDS.

METHOD

Systematic Literature Search

Databases

- 1. CINAHL
- 2. Psychlnfo
- 3. Social Sciences
- 4. AIDSInfo
- 5. PubMed/Medline
- 6. Google Scholar



Websites

- 1. www.FedStats.gov
- 2. www.Floridaaids.org
- 3. www.CDC.gov
- 4. www.NIH.gov
- 5. www.avert.org
- 6. www.myflorida.com
- 7. World Health Organization
- 8. Pan American Health Organization
- 9. United Nations Agency for International Development
- 10. Florida Department of Health
- 11. Florida AIDS Network

METHOD: SEARCH STRATEGIES

Secondary Search

- 1. Reference lists of journal articles and research studies
- 2. Search conducted of the nursing, public health, psychology, sociology, anthropology, politics, literature
- 3. Yield: 78 articles; 63 peer reviewed; 41 related to females.

SEARCH TERMS

- 1. Search terms: HIV/AIDS, HIV or AIDS, sexual practices, theory, women, transgender, risk-taking behaviors, culture
- 2. HIV/AIDS, women, theory and/or theoretical framework
- 3. English, peer reviewed articles 1975-2015.

FINDINGS

- 78 articles found; 63 were peer reviewed;
 41 related to females
- Less than a third were theory-based
- All met search criteria, search terms
- Continents represented in the results: Africa, Asia, the Caribbean, Europe, the Middle East, and North and South America



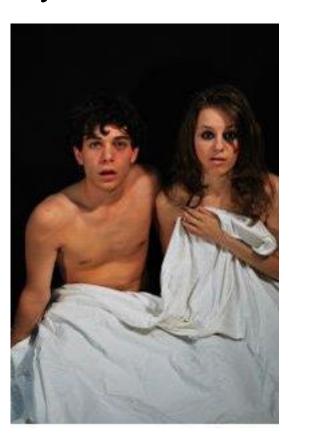
FEMALE HIV/AIDS MORBIDITY AND MORTALITY

One in four people living with HIV in the United States is a woman. Half of the people living in the world with HIV are women (WHO, 2016). Gender norms and high risk heterosexual sex account for > 80% infection (CDC, WHO). Women are unaware of their male partners' risk factors for HIV infection, or lack knowledge regarding HIV and its transmission, and/or perceive they have a lower risk of being infected (CDC, WHO, 2013). Relationship dynamics also play a role in female HIV infection. The average lifespan of an HIV infected person is 24.2 years. Costs related to the treatment of HIV/AIDS are significantly high, ranging from about \$320,000 to \$620,000 from diagnosis to death per person (CDC, 2010).

DEFINITION OF HIGH RISK SEXUAL BEHAVIORS

Place people at risk for HIV/STIs and unintended pregnancy:

- anal sex
- inconsistent or incorrect use of condoms
- increased number of sex partners
- non-adherence to HIV medications
- not being tested or treated for STIs



SEXUAL RISK-TAKING BEHAVIORS WORLDWIDE

1.Sub-Saharan Africa: Intravaginal Insertions:

Several ethnographic, qualitative and quantitative studies demonstrate the following:

Rooted in, and sanctioned by culture, handed down from mother to daughter

Used for:

- Vaginal washing, douching
- Enhances sexual experience by producing a dry, hot vagina
- Men like a dry, hot vagina with minimal lubrication during sex; wetness signifies infidelity
- Enhances female sexual desirability

Materials used for enhancement/tightening: fruit, roots, bark and leaves, animal parts, ground materials such as alum

Dry vagina causes abrasions, bruising during sexual activity and increase HIV risk

2.India and Africa: Bridewealth (Lobola, Roora in Africa; Brideprice, Dowry in India) defined as the "exchange of resources between [African] families to finalize a marriage."

- Mixed evidence
- •Usually paid in installments, upon pregnancy, or on birth of children
- •Women married with bridewealth tend to be more educated, have less lifetime sexual partners\, use more contraceptives, older at first sex
- •Some studies show no difference in HIV rate between women bought with bridewealth and those who did not
- Bestows honor and prestige on the woman (Cambodia)

Negative Outcomes Associated with Bridewealth

- Control and rights to female reproductive decisions
- Lack of contraceptive use
- Concurrent sexual relationships
- Poverty due to divorce or lack of payment, resulting in women remaining in unsafe relationships
- Obligation to bear children a cultural expectation
- Physical violence

3. Africa, Asia, North and South America: Fluid Relationships

- WSW; BDSM: Sharing sex toys; confirmed cases of WSW transmitting HIV to partner via sex toys used during menstruation
- Unprotected use of sex toys (i.e. dental dams) (Africa, Brazil, USA)
- Having multiple male sex partners while WSW
- Artificial insemination
- Men who have sex with both men and women (Brazil, Asia, North and South America)
- Married men who have sex with both men and women (Brazil, India, USA)
- Emphasis on instant gratification and penetration lead to pursuit of any type of sex
- BDSM practices such as pissing, anal sex, scat sex (games with feces), bukake (having various men ejaculate on one's face and body)

4. Worldwide: Familial, Religious and Gender Roles Influences

Steeped in religion, culture, these influences generally place women at risk for HIV/STIs

- Burdens from poverty lead to risky practices
- Onerous family responsibilities
- Sexual practices rooted in religion
- Dependence on men lead to social and economic disempowerment placing them at risk for rape, violence, identity as sex objects
- Sex workers use rituals such as dry sex, no condoms to enhance business
- Discouragement of contraceptive (religion)
- Polygamy in families and cultural traditions
- Distinct socialization for male and female
- Lack of family discussions about sex
- Traditional pubertal practices of the Ahka tribes in Vietnam, Laos, Burma and Thailand, and Solomon Islands: – Welcome Guest, Thon Thong (Break Vagina)as female girls have sex with male visitors to welcome them
- Visitors unfamiliar with rituals exploit the rituals and place young girls at risk via rape
- Dialects that place chasm between young and generations
- Economics of female virginity sold for the highest price
- Machismo, marianismo
- Age discordant relationships

5. Worldwide – Anal Sex

- Unknown in many rural parts of the world
- Seen as a symbol of power in some cultures (Africa)
- Practiced to preserve virginity (Puerto Rico)
- Men who believe they have a right to sex from wives, practice it when their wives are pregnant (India) or when they are menstruating
- The following quote summarizes the behavior though rare: "I was forced to have sex in the back to get the desire out of my nerves," because his girlfriend was having her period (KwaZulu-Natal, Africa)

6. Worldwide: Economic Development

- Urbanization, tourism, immigration, marginalization e.g. in Asia,
 Caribbean, South America
- Under-reporting of STIs (China, Canada, Jamaica)
- Migrant tribals in India
- Poverty among street youth vaguitas and vagos in Peru
- Acculturation

7. Worldwide: Relationship Status

- Society ascribes more power to men in relationships
- More control seen in marriage and steady relationships as women forgo condom use and safe sex practices once they develop trust, even among sex workers, and place themselves at risk; human need for love and belonging
- Fear of losing relationships leads to risky sex practices
- Trust is not a replacement for safe sex practices, even in marriage
- Solidarity, barebacking

CONTEMPORARY THEORIES EXPLAINING FINDINGS

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- Intersectionality (Hankivsky, 2012)
- Structural Violence
- Theory of Gender and Health

(Courtenay, 2000)

- Neuroeconomics
- Theory of Social Dominance (SDT)
- Researchers need to veer away from behavioristic theories to explain sexual behavior because human behavior is not linear; it is multifaceted and unpredictable even when the consequences are clear-cut and dangerous

SUMMARY

- Across cultures, women's risks for HIV are, generally, the same
- Risks are embedded in culture, religion; societal norms and institutions (gender roles, poverty, politics); economics; and individual factors that continue to place them at risk for HIV
- Interventions must be culture-specific to effectively address the above factors and reduce transmission

REFERENCES

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