

The Invisible Link: HIV and Violence Against Women

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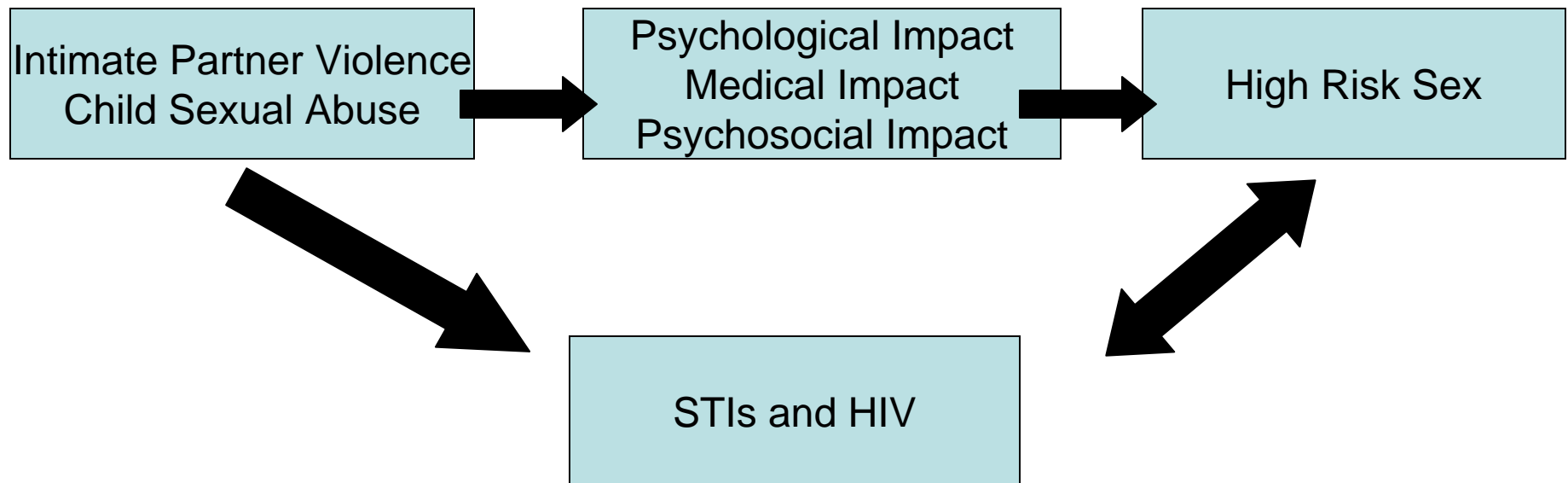
HIV Case Manager

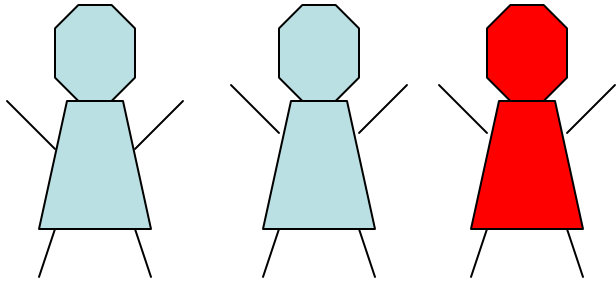
Parkland Health and Hospital
System

Objectives

- Analyze the association between HIV and violence against women
- Discuss the connection between violence against women, HIV disclosure and access to medical care
- Describe the strategies that providers can utilize to support HIV+ women with a history of violence

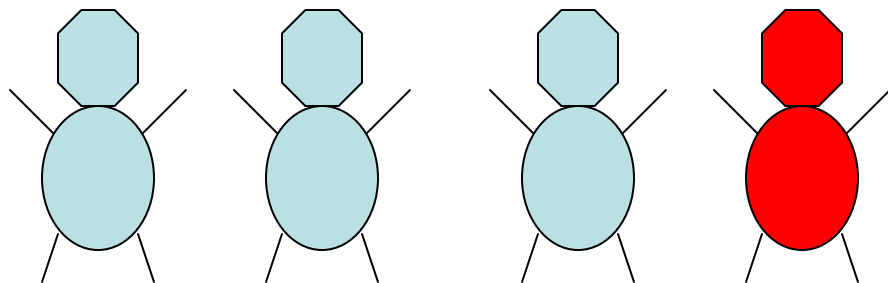
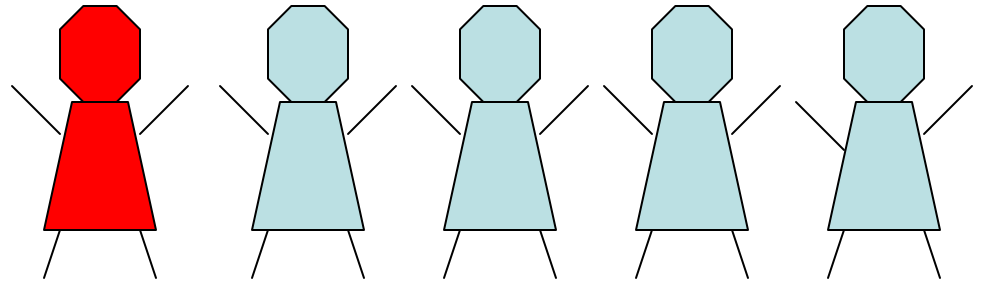
Violence Against Women: Possible Direct and Indirect Pathways to HIV





1 in 3 women will be the victim of abuse—physical, sexual, or psychological—during her lifetime.

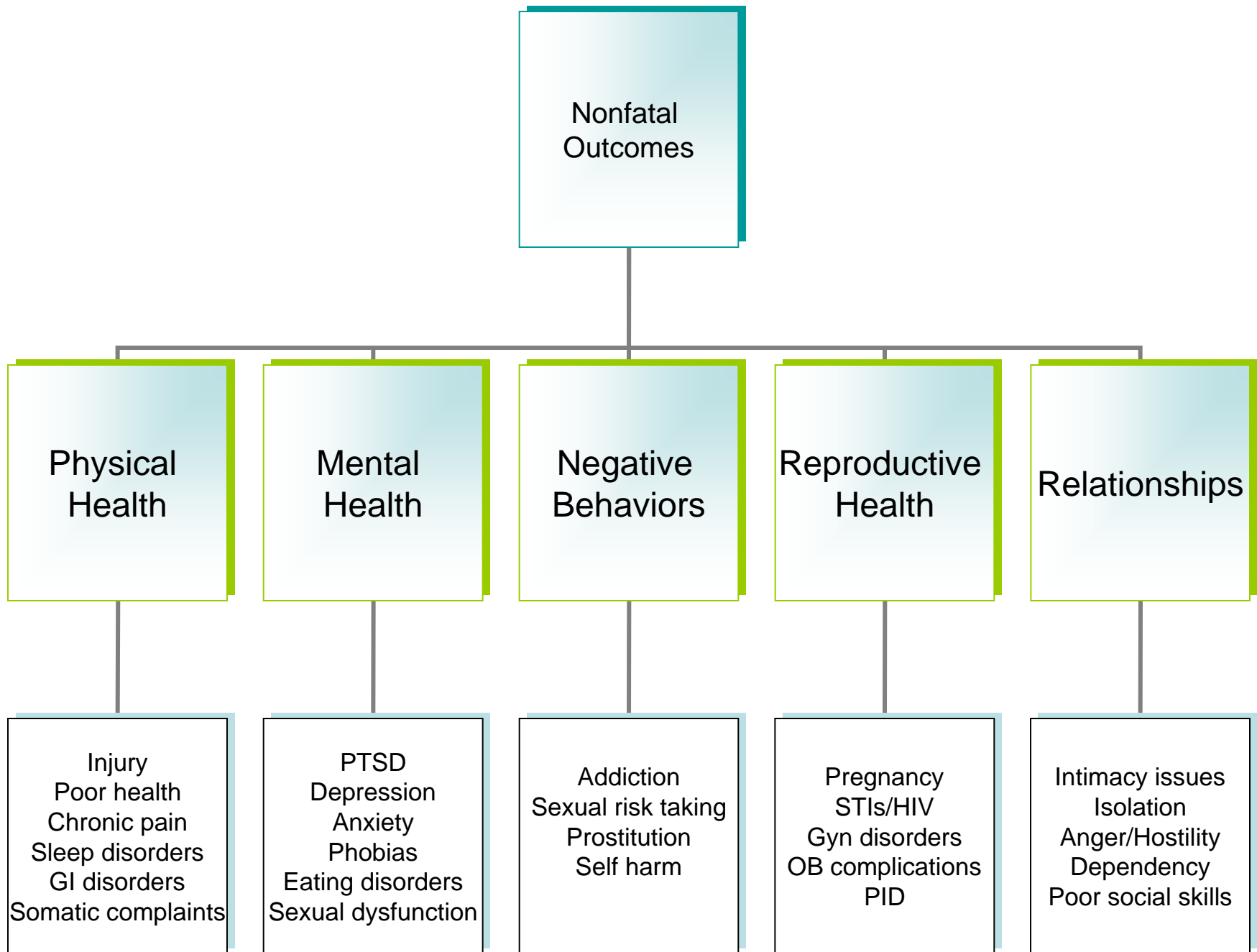
1 in 5 women will survive rape or attempted rape.



1 in 4 women are abused when pregnant.

- Childhood sexual abuse (CSA) is one of the top predictors of HIV infection in women.
- Women who report CSA are 7X more likely to engage in high risk unprotected sexual behavior as adults.
- As many as half of all women living with HIV report a history of CSA.

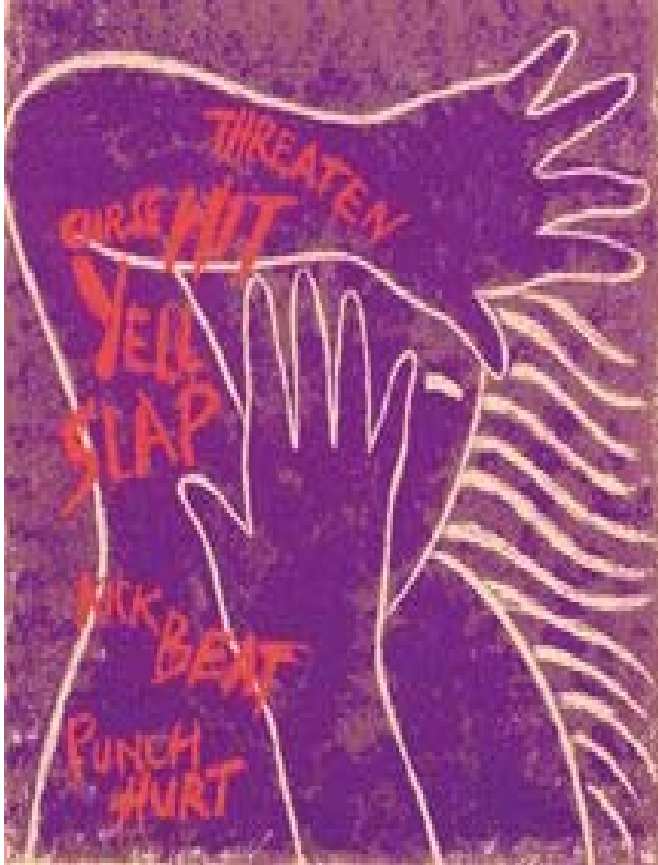




“Red Flags”

- Little or no medical care
- Failure to keep appointments or adherence issues
- Unusually high number of visit to provider
- Chronic pain without apparent etiology
- Multiple pregnancies, STIs, miscarriages, or terminations
- Sexual dysfunction
- Insistence on female providers
- Obsession with cleanliness
- Extreme sensitivity with body fluids
- Extreme concerns about exposure

“Red Flags”



- Self destructive tendencies
- Poor self esteem
- Phobias
- Inappropriate affect
- Secrecy or discomfort when questioned
- Partner controls or dominates provider visit

Intimate Partner Violence and HIV



How IPV Puts Victims at Risk of Contracting HIV

- Victim unable to negotiate safer sex practices
- Possibility of forced sex, no condom
- Intentional infection by abuser
- Exposure to other STIs due to sexual activity outside relationship
- Prohibit access to medical care

Using HIV Status as Coercion

- Threats to reveal HIV+ status
- Child custody issues
- Reinforcing guilt about children's HIV status
- Degradation
- Isolation due to “threat” of infection
- Withholding medical treatment
- Fake illness

Obstacles to Health and Safety

- Abuser often controls...
 - Finances
 - Medical care
 - Support systems
- No hope for future relationships
- Concern for care of children
- Fear that status will be disclosed if they seek assistance
- Increased risk for violence if partner is notified

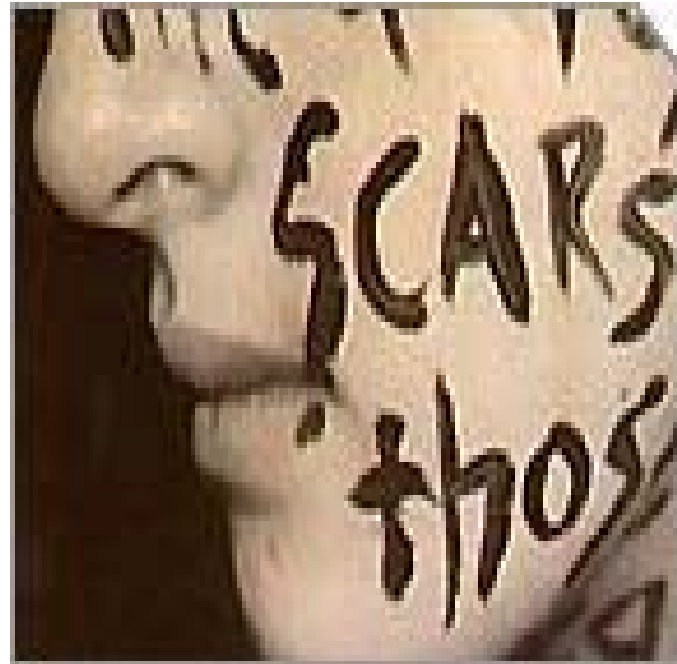


Child Sexual Abuse



Important Considerations

- Understand boundary issues
- “Difficult” patient or traumatized survivor?
- Past healthcare experiences



Sources: Chalfen, M. E., (1993)
McKegney, C. P. (1993)
Seng, J. S. & Hassinger, J. A. (1998)

Boundary Issues

- Patient boundaries
 - Distrust
- Provider boundaries
 - Patient education
- Use of touch



Difficult Patient or Traumatized Survivor?

- The demanding patient
 - Obsession with medical problems
 - Make problem go away quickly
- The anxious patient
 - Sudden fear or panic
- The lying patient
 - Protect you from their story

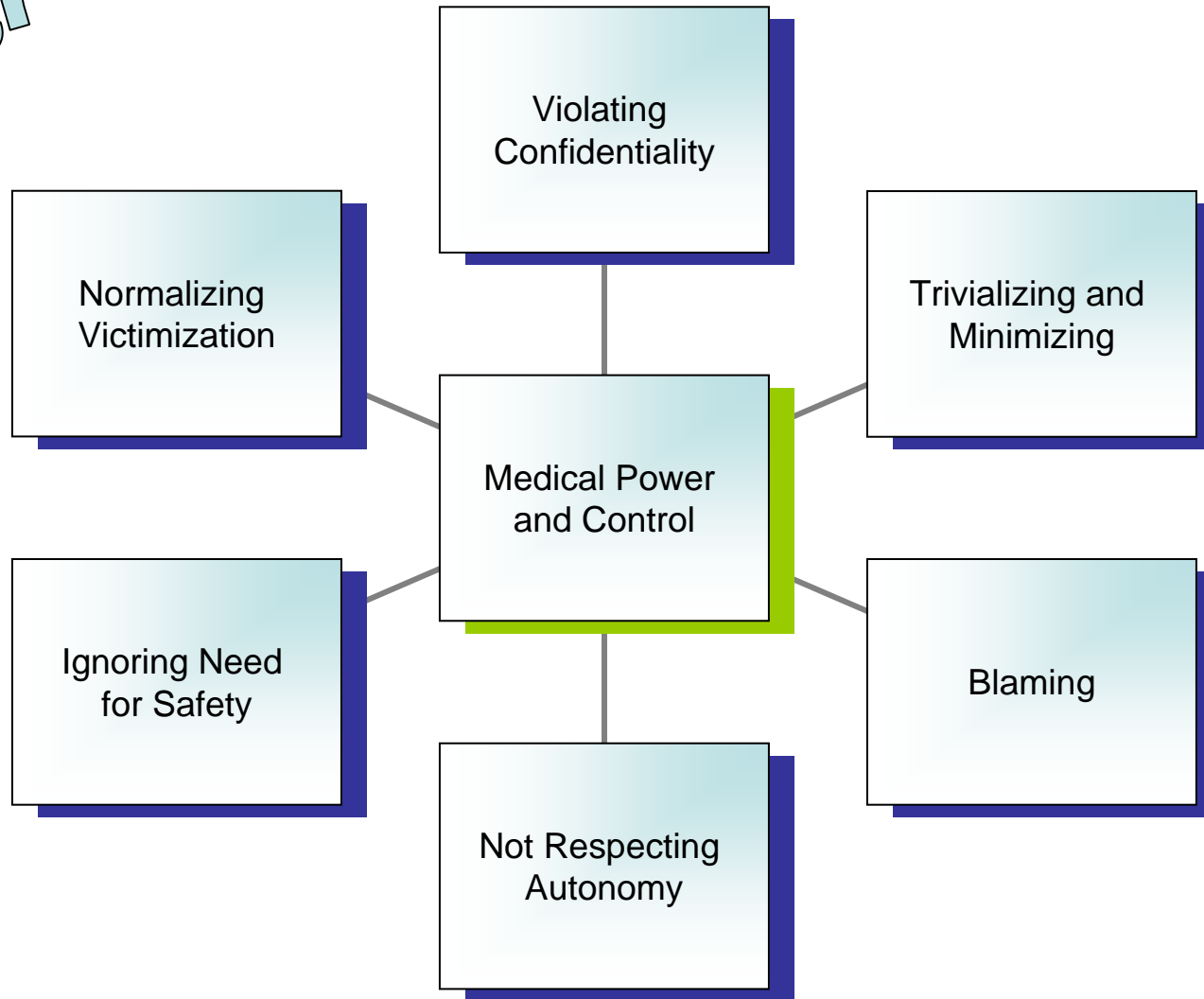
Past Healthcare Experiences

- Missed diagnosis of their abuse
- Unnecessary procedures, drug regimens
- Insensitivity



Common Mistakes

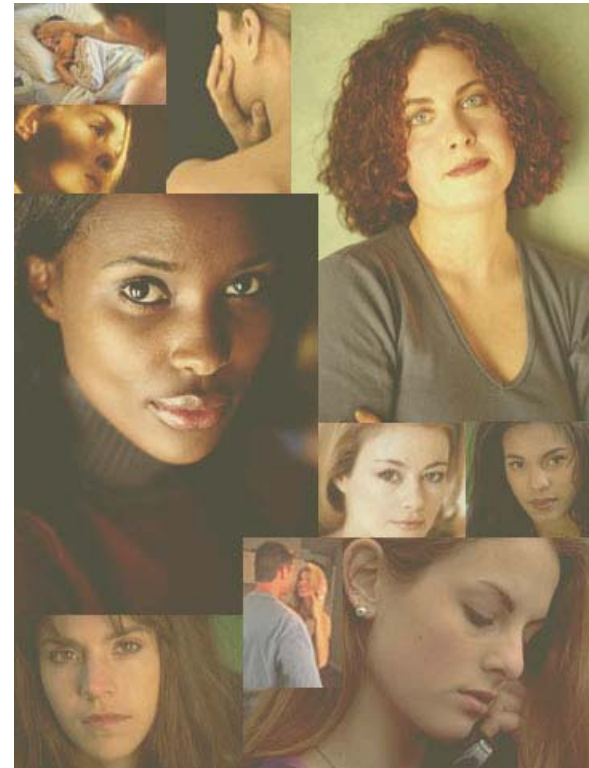
Escalating Danger



Increased Entrapment

What Can You Do?

- The best way to uncover a history of abuse is to ask.
 - 70-81% of patients reported that they would like for provider to ask them about history of abuse.
- Ask about current and lifetime abuse hx



Cultural Influences

- Gender roles
 - Woman's needs/goals vs. other's needs/goals
- Context of family
- Acceptable practices
 - “She made me do it.” vs. “Everyone does it.”
- New immigrant vs. highly acculturated

Introduce the Question

- “Before we discuss contraceptive options, it might be good to know a bit more about your relationship.”
- “Because violence is common in women’s lives, we have begun asking all clients about abuse.”
- “I don’t know if this is a problem for you, but many of my patients are dealing with tensions at home. Some are afraid or uncomfortable to bring it up themselves, so I’ve started asking about it routinely.”

Asking Indirectly

- “Your symptoms may be related to stress. Do you and your partner fight a lot?”
- “Does your husband have any problems with alcohol or drugs? How does it affect his behavior with you and the children?”
- “Does your partner ever want to have sex when you do not? What happens in these situations?”

Asking Directly

- “It’s not uncommon these days for a person to have been emotionally, physically, or sexually victimized at some time in their life. Has this ever happened to you?”
- “Did you ever have any upsetting sexual experiences as a child?”

How You Can Empower

Empowerment



Empowerment

Resources

- Chalfen, M. E. (1993). Obstetric-gynecological care and survivors of childhood sexual abuse. *AWHONN's Clinical Issue in Perinatal and Women's Health Nursing*, 4(2), 191-195.
- Childhood sexual abuse proves top predictor for HIV infection in women. [Online]. Available <http://www.scienceblog.com/community/older/2002/C/20025568.html>
- Courtois, C. (1993). Adult survivors of sexual abuse. *Family Violence and Abusive Relationships*, 21(2), 433-445.
- Domestic Violence and Culture. [Online]. Available www.melissainstitute.org/documents/eighth/DOMESTIC_VIOLENCE_CULTURE.pdf
- Domestic Violence and HIV/AIDS. [Online]. Available www.opdv.state.ny.us/health_humsvc/health/hiv.html.
- The Facts of Reproductive Health and Violence Against Women. [Online]. Available www.endabuse.org/resources/facts/reproductivehealth.pdf.
- HIV/AIDS and Gender Based Violence. [Online]. Available www.womenwarpeace.org.

Resources

- McKegney, C. P. (1993). Surviving survivors: Coping with caring for patients who have been victimized. *Family Violence and Abusive Relationships*, 20(2), 481-493.
- Taking on HIV's best-kept secret. [Online]. Available <http://www.blackaids.org/ShowArticle.aspx?pagename=ShowArticle&articletype=NEWS&articleid=137&pagenumber=1>.
- Zero Tolerance: Stop the Violence Against Women and Children, Stop HIV/AIDS. [Online]. Available www.globalaidsalliance.org.
- Seng, J.S. & Hassinger, J. A. (1998). Relationship strategies and interdisciplinary collaboration: Improving maternity care with survivors of childhood sexual abuse. *Journal of Nurse-Midwifery*, 43(4), 287-295.
- What Health Care Providers Can Do About Domestic Violence. [Online]. Available <http://www.infoforhealth.org/pr/l11/l11pullout.shtml#top>.