



Sonke Gender Justice Network

HIV/AIDS, Gender Equality, Human Rights

**Working with men to
improve PMTCT outcomes.**

**International AIDS
Society Meeting, Vienna,
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**Dean Peacock, Sonke Gender
Justice Network**





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Key Issues:

1. WHO guidelines for PMTCT and the role of men
2. Gender based violence and HIV risk
3. Testing, disclosure and fear of violence
4. Strategies for increasing men's involvement



Men essential to effective implementation of WHO PMTCT guidelines:

1. Primary prevention of HIV among women
 2. Prevention of unintended pregnancy among HIV-infected women
 3. Preventing the transmission of HIV from HIV-positive mothers to their infants during pregnancy, labour, delivery, and breastfeeding by providing voluntary counseling and testing (VCT), antiretroviral therapy (ARV), safe delivery practices, and breast milk substitutes
 4. Care and support of women, children, and families infected and affected by HIV/AIDS
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Gender based violence and HIV:

- Compelling evidence that women who are abused and men who abuse are more likely to have HIV
- Women who have experienced physical/sexual intimate partner violence are 54% more likely to have HIV (Dunkle et al 2004).
- Men who have perpetrated physical/sexual intimate partner violence are more than twice likely to have HIV (Jewkes et al 2008)

HIV testing and gender-based violence:

- Women often reluctant to participate in PMTCT programs because of fear of disclosure and abuse from their partners if they test positive.
 - In many cases, women who test choose not to inform their partners of the results because of fear of blame or abandonment.
 - In Tanzania study, among women who did not disclose an HIV positive diagnosis to their partners, 52% reported the reason as fear of their partner's reaction.
 - Women who can not disclose their positive diagnosis may have a harder time enrolling in PMTCT programmes or in choosing exclusive feeding options.
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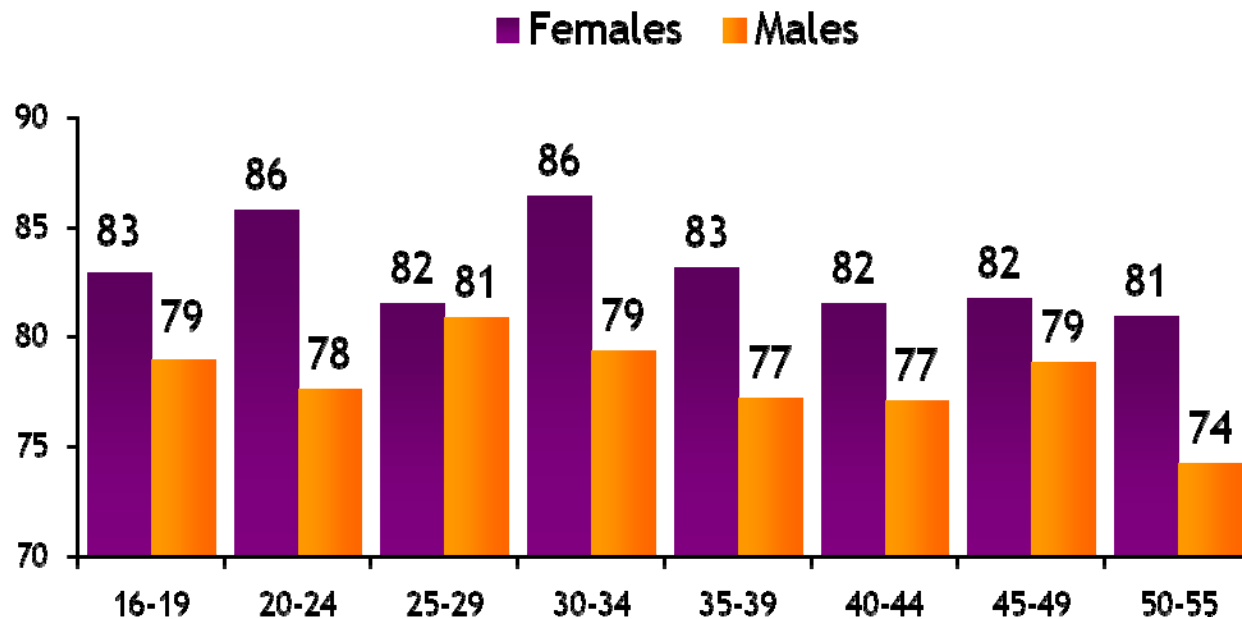
Research findings on HIV testing and gender-based violence:

- Research suggests women's experiences upon disclosing status to their partners complex and often positive; 3.5-14.6% reporting violence in a 2004 meta analysis-Medley et al (2004), Maman et al 2003; Visser et al 2006.
- However, predominant discourse about women's experiences disclosing an HIV positive diagnosis to their partners assumes violence, abandonment and stigma as probable.
- 81.9% of HIV-negative women and 48.9% of HIV-positive women reported that their partner reacted supportively to disclosure ($p < 0:001$). Less than 5% of women reported any negative reactions following disclosure.



* Agree / disagree
question

South Africa 2009 NCS: More females than males know that HIV
can be transmitted through breast milk*



Percentage of people in South Africa knowing that formula feeding and exclusive breastfeeding can prevent MTCT (2009 Nat'l Communications Survey)

	Male	Female	Total
Formula feeding	10.5	19.1	14.9
Exclusive breastfeeding	1.1	2.2	1.7



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Number of times the following words appear in the South African National PMTCT Guidelines: men, man, male, father, parent, fatherhood, dad

ZERO



Understanding men's attitudes and practices:

- Programmes often assume that men will not participate and so make little effort to engage men.
- In a pilot PMTCT program implemented by the Horizons project in Kenya that sought to increase partner involvement in PMTCT, the proportion of male partners who used VCT services as a result of being involved in the program doubled in one site and increased by 50% at another site.
- Other studies suggest that even when men are eager to be involved service provider attitudes and structural constraints serve as barriers.
- Studies on men's attitudes towards caring suggest that when men do want to participate in the provision of care to the AIDS ill they often fear ostracism and/or worry that they do not have the necessary skills.