

Marital Sex and HIV Risk for Women Worldwide

The Secret: Love, Marriage, and HIV - a summary of findings from an NIH-supported multi-site study conducted by a team of researchers from the Mailman School of Public Health at Columbia University, University of Toronto, Brown University, Washington University at St. Louis, and University of Washington, Seattle

November 2010

Globally, women's risk of contracting HIV is heightened if they are married, largely due to men's extramarital sexual relationships. Despite this clear risk, current efforts to prevent the spread of HIV fall far short of protecting married women. *The Secret: Love, Marriage, and HIV* presents research gathered in five studies conducted concurrently in rural Mexico, southeastern Nigeria, Papua New Guinea, Uganda, and Vietnam. The book discusses the significant social and economic barriers to male marital fidelity, which combine to limit the potential impact of most current public health interventions targeted towards reducing the risk of marital transmission.

Key findings include:

- While marital fidelity may be an admirable long term step toward gender equality, the more immediate and urgent goal of HIV prevention is actually undermined by mass media efforts to promote fidelity;
- Changing ideas about marriage in each country studied actually exacerbated HIV risk by pushing extramarital affairs underground, making it feel more socially risky for married women to demand condom use within marriage;
- Economic pressures, especially those causing labor migration, make extramarital affairs much more likely; and
- The social organization of men's leisure time activities and their labor-related migration provide critical opportunities for novel forms of prevention programs.

The vast majority of U.S. funding of international HIV prevention efforts has been based on the "ABC" approach – Abstinence before marriage, Be faithful if married, and use Condoms if you don't choose A or B. Although the U.S. has signaled its intent to move beyond the simplistic ABC approach, the ABC approach is very much alive in current programming and implementing requirements. Congress continues to require that countries justify allocating less than 50% of their prevention funds to abstinence and faithfulness programs. While the extent of this reporting requirement's chilling effect on countries' decisions is difficult to evaluate, it clearly sends a strong signal that the U.S. continues to prioritize abstinence and faithfulness programming to prevent HIV. In 2009, PEPFAR allocated more than 20% of all prevention funding to abstinence and faithfulness programming. The assumption behind the AB part of the ABC approach is that abstinence and fidelity are purely individual choices, regardless of the social and economic context; in other words, that pro-fidelity messages alone are enough to convince people to make that choice. It also assumes a universal morality – that individuals in all cultures value abstinence and fidelity as morally good. Researchers found that both these assumptions are flawed.

In many cases, choosing infidelity is simply a matter of succeeding as a man – not because of some mythical greater physical need for sex, but because discussing and pursuing affairs is what men do when they are together socially. In Nigeria, for example, "[i]n male-dominated social settings such as social clubs, sports clubs, sections of the marketplace, and particular bars and eateries, Igbo men commonly talk about their girlfriends and sometimes show them off."

Men in Papua New Guinea told of “predominantly male work places where drinking and paying for sexual relations was the norm.” Remaining faithful to one’s wife in such situations, the research suggests, means challenging shared ideas about masculinity.

The research also makes clear that it is unrealistic to expect fidelity when men must travel to find or keep employment. Labor migration is the most extreme of these circumstances. Migrants have both the opportunity and expectation of sexual gratification away from home, where they are free to pursue other relationships with little risk of being discovered by family members. Migrant men also develop relationships with women other than their wives because they are lonely, or because social conventions dictate that men must rely on women’s domestic skills. Often, this migration is to urban areas that have higher HIV rates than the home community. As a result, wives of migrants are at greater risk than those whose husbands have other sex partners in their own communities.

Prevention messages that associate infidelity with immorality are not compatible with different cultures’ view of marriage bonds. Secrecy about affairs and maintaining financial support for wife and children were important to men in each study. However, men were more concerned about their reputations as good husbands and about preserving the dignity of their wives than they were about actually abstaining from extramarital sex. Rather, what made them “moral” men was their continued financial support for their families, coupled to differing extents with an emotional commitment to their wives. In fact, men in Mexico who expressed affection for their wives were more likely to engage in affairs with a sex worker than a girlfriend – increasing their HIV risk in exchange for reducing the possibility of their wives finding out.

As currently implemented, ABC prevention programs set up a choice between moral and immoral behavior that backfires for married women. The “A” and the “B” are portrayed as the moral choices, and “C” is a last resort if you fail to make these “moral” choices. By stigmatizing “C” – condom use – ABC programs require women to accuse their husbands of being immoral by asking them to use a condom. Because few men in these studies left their wives for mistresses, women perceive a greater immediate risk from disturbing the secrecy around extramarital affairs than they do from assuming fidelity.

Far from excusing male infidelity, the researchers in these five studies present recommendations that deal with real world issues while reducing married women’s HIV risk. These include:

- Reducing stigma around HIV so that men accurately perceive their risk of infection
- Working within male peer groups to “capitalize on their sense of moral responsibility for their families and their wives.”
- Recognizing the impact of economic migration by including workplace education on HIV risk and providing family housing in migration sites where possible
- Engaging men in the “secret” sites where they are most likely to engage in extramarital sex, such as bars and brothels

Visit <http://www.mailman.hs.columbia.edu/sms/cgsh/lmhiv1.html> to learn more about the research team and their work. You can also read their articles in the June and July 2007 issues of The American Journal of Public Health, or contact the researchers:

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