

Married Women and HIV: Comprehensive Prevention

Why do abstinence and fidelity only programs put women at risk?

For most women around the world, marital sex represents their greatest risk for HIV infection.

- Men's extramarital sexual relations are a major element of that risk.
- Abstinence until marriage programs INCREASE women's risk by implying that marital sex is safer sex.
- Comprehensive HIV prevention must include programs to protect women from marital HIV infection.

What's wrong with promoting fidelity?

Fidelity is great – except that many people live in economic and social conditions that make it hard to live up to that ideal.

- Exhorting men to be faithful is not effective in the absence of socioeconomic conditions that make fidelity more possible.
- Evidence-based approaches to supporting fidelity must work at the structural or community level, rather than at the individual level.
- HIV prevention programs that imply or state that abstinence and fidelity are the best and most moral options further stigmatize condom use, and make suggestions of condom use tantamount to an accusation of infidelity.
- In our five countries, NIH-funded study of married women's HIV risk, we found that men's participation in extramarital sex is a basic aspect of social organization, produced by intertwining factors including labor migration, leisure time activities, masculine ideals, and gender inequality.

In the absence of community-based efforts to alter the social structures that promote infidelity, public health programs which aim to reduce married women's risk just by telling men to be faithful will not succeed.

About the Love, Marriage, and HIV Research Team

The *Love, Marriage and HIV* research team is comprised of five social science researchers: Jennifer Hirsch, Columbia University jsh2124@columbia.edu, Daniel Jordan Smith, Brown University, Daniel_J_Smith@brown.edu, Shanti Parikh, Washington University in St. Louis sparikh@artsci.wustl.edu, Harriet Phinney, University of Washington, Seattle, hphinney@u.washington.edu, and Holly Wardlow, University of Toronto hwardlow@chass.utoronto.ca. The team compiled this document.

The Secret: Love, Marriage and HIV is based on their research in Mexico, Nigeria, Uganda, Vietnam, and Papua New Guinea, and was supported by the National Institutes of Health (R01 HD 041724). To learn more, visit <http://www.mailman.hs.columbia.edu/sms/cgsh/lmhiv1.html>, or reference their pertinent articles in the June and July 2007 issues of *The American Journal of Public Health*.

What should we do? The *Love, Marriage, and HIV* research team advocates a **harm reduction approach to marital risk.**

- **Take a structural approach to reducing sexual risk:**
 - **HIV and migration**
 - Partner with economic sectors that employ migrant workers and mobile populations.
 - Focus on family housing, workplace education and structured recreational activities for migrants.
 - Consider HIV a ‘hidden cost’ of goods and services produced with migrant labor.
 - **HIV and men’s leisure time activities**
 - Collaborate with leisure sectors to expand men’s recreational options.
 - Enhance condom access in spaces and social contexts where men encounter potential partners (especially where alcohol is sold).
 - **HIV and sexual rights**
 - Promote respect for the human rights of sexual minorities. In communities with significant epidemics linked to men’s sexual behavior with other men, homophobia increases HIV risk for men and women.
 - **Poverty reduction**
 - Focus on creating jobs and employment opportunities for young women in communities where younger women are driven into transactional sexual liaisons with older, often married, men, sexual networking enhances HIV risk.
- **Partner with faith communities in new ways:**
 - Explore faith-based initiatives that acknowledge the challenge to fidelity posed by labor migration.
 - Provide pastoral guidance for married couples that candidly acknowledges the many challenges to fidelity in resource poor settings.
 - Consider how faith-based organizations can provide community and social support for migrant laborers.
 - Encourage religious leaders not to frame HIV as a disease of immorality.
- **Break the silence, but forget about the scare tactics. Next generation communication strategies should:**
 - Disseminate information about marital HIV transmission and promote community based dialogues about marital sexual risk.
 - Associate condom use with ideal masculinity and build on men’s existing sense of responsibility to their families.
 - Link education highlighting the vulnerability of women and girls to men’s behavior so that these messages feel relevant to men.
 - Avoid moralistic approaches to extramarital sex, which exacerbate the stigma of HIV and encourage people to be more secretive about infidelity – making honest conversations about HIV risk in marriage even less likely.