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2018 CONTROLLING THE HIV EPIDEMIC SUMMIT

**SHARING NATIONAL AND SUBNATIONAL
EXPERIENCES
WESTERN AND EASTERN EUROPE**

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Women and HIV

- **Gender inequality and unequal power** relations between women and men significantly influence the rate of HIV infection.
- **Biological factors** make women and girls more vulnerable to HIV are exacerbated by **socio-cultural and structural factors**, such as poverty, harmful stereotypes, limited decision-making power, lack of control over financial resources, restricted mobility, violence, and lack of quality sexual and reproductive health services

HIV-positive Women who use drugs

- In 2016, 14% of all HIV cases reported in **Kazakhstan** were among women who use drugs, yet there is no population size estimate for women who use drugs in the country, so more sophisticated epidemiological calculations remain impossible.
- By extrapolating European data to **Russia**, it can be assumed that approximately 425,000 PUD in Russia are women. Assuming that an estimated 57% of them are HIV-positive could potentially indicate that over 242,000 women who use drugs are living with HIV.
- In **Ukraine**, 18% of women who used drugs tested positive for HIV already in labor and 11.8% - after labour; 11% of these births resulted in vertical transmission of HIV.

WLHIV in EECA and Globally

Identities	Russian language data	Global data
I have a partner who uses or has used drugs	54%	21%
I have hepatitis C	49%	20%
I use or have used drugs	42%	17%
I have been in detention	17%	7%
I have been in prison	13%	7%

WLHIV in EECA and Globally

VIOLENCE	Russian language data	Global data
I have experienced at least one type of GBV	100%	89%
Violence in the health care setting	83%	53%
Ever fear violence	81%	68%
In the community	69%	52%
Intimate partner violence	54%	59%
Fear of violence pre-diagnosis	53%	25%
From family or neighbours	41%	45%
From police / military / prison or detention	41%	17%

Women living with HIV in Ukraine

- The predominant majority of participants (87.4%) are in the reproductive age. 32.3% have one or more sexual partners living with HIV, 29.9% - without HIV.
- 42.3% learned about their HIV status during pregnancy. 54.7% gave birth to children after they learned about HIV, of them 15.9% have HIV positive children.
- 35.1% of the surveyed has hepatitis C. 32% use or have used drugs, and 28.2% have partners, who use or have used drugs. 22.1% is living with disability. 9.2% has been in prison, 12.4% - in a detention. 7.3% women have experience of sex work. 5% are internally displaced persons.
- 31.8% of women don't know their rights and where to file their complaints.
- 35.3% of WLHIV experienced violence from their intimate partner. More than a half (51.3%) after having experienced violence had no support whatsoever.

Violence against women in Ukraine

Before HIV diagnosis	After HIV diagnosis
From	
Partner – 22,5%	Partner – 12,8%
Society – 10.3%	Society – 25.8%
Family members – 9.9%	Family members – 16.8%
Police and other Law enforcement officers – 7.3%	Police and other Law enforcement officers – 9.3%
Healthcare providers – 3.2%	Healthcare providers – 49.6%

Enabling environment ?! – Criminalisation and Institutional violations

Women who use drugs are also a severely affected key population:

- Only 0.003% of women who inject drugs have access to OST in Eastern Europe;
- 83% of women who use drugs in **Ukraine** have encountered police violence, including beatings, torture, and rape;
- in **Moldova**, women who use drugs, especially young women, are often sexually exploited by police officers, and have reported being subjected to physically violating searches;
- women constitute 10% of the estimated 40,000 PUD in **Georgia**, but only 1–2% of the total number of clients who use services provided by the Global Fund or the Government of Georgia.

HIV Criminalization Scan in Eastern Europe and Central Asia

- Every step of this report was developed jointly and **led by women living with HIV.**
- While this is a regional report, it focuses on reviews of **7 countries: Belarus, Georgia, Kazakhstan, Moldova, Russia, Ukraine and Uzbekistan**, and performs a more limited review on **2 more countries Tajikistan and Estonia.**
- In addition, **HIV Criminalization 30 Case Studies collected as Internal Supporting Documentation.**

Countries	HIV Specific Laws	HIV Non Specific Laws	Cases
Albania	No	No	No/Unknown
Armenia	Yes	Yes	Yes
Azerbaijan	Yes	Yes	Yes
Belarus	Yes	Yes	Yes
Bosnia and Herzegovina	No	No	No/Unknown
Estonia	No	Yes	Yes
Georgia	Yes	Yes	Yes
Kazakhstan	Yes	Yes	Yes
Kyrgyzstan	Yes	Yes	Yes
Latvia	Yes	Yes	Yes
Lithuania	No	Yes	No/Unknown
Macedonia	No	Yes	No/Unknown
Moldova	Yes	Yes	Yes
Montenegro	Yes	Yes	No/Unknown
Russian Federation	Yes	Yes	Yes
Serbia	Yes	Yes	Yes
Tajikistan	Yes	Yes	Yes
Turkmenistan	Yes	Yes	No/Unknown
Ukraine	Yes	Yes	Yes
Uzbekistan	Yes	Yes	Yes

Belarus

- 106 cases related to HIV transmission were registered with the Ministry of Internal Affairs in 2017.
- The Gomel region reported the highest amount of cases in the country with 83 cases being before the courts under Article 157, Criminal Code of the Republic of Belarus (*Infecting with HIV*). There has been a drastic increase in 2016 (30 cases) and 2017 (83 cases) compared to 2013 (19 cases), 2014 (17 cases), and 2015 (12 cases).

Why it's important to address HIV Criminalization

- HIV criminalization is a **public health concern**
- Criminalization **increases stigma** surrounding HIV status and casts people living with HIV as predisposed to criminality, which in turn **increases discrimination**.
- Fear of prosecution deters many PLHIV from accessing needed treatment care and support, discourage disclosure, and **increase the vulnerability to violence**.
- HIV criminalization creates an atmosphere of **false sense of security for the general public**. As a result, people are not more protected by HIV criminalization, in fact it can be the opposite.
- HIV criminalization creates an atmosphere of **false efficiency of the state**, by reducing focus and energy on proven and evidence-based strategies for responding to the HIV epidemic.