

Reclaiming Sexual, Reproductive Health & Rights of People living with HIV in Kenya

N.J. Otwoma¹, L. Ghati¹, E. Imbo¹, P. Abwao¹, R. Mwaniki¹

National Empowerment Network of People living with HIV/AIDS in Kenya

P.O. Box 75654 – 00200 Nairobi, Kenya ; Tel. +254-725921768 ; Email: info@nephak.or.ke

Website : <http://nephak.or.ke/> Facebook: Nephak-Kenya; Twitter: @NEPAKPLHA

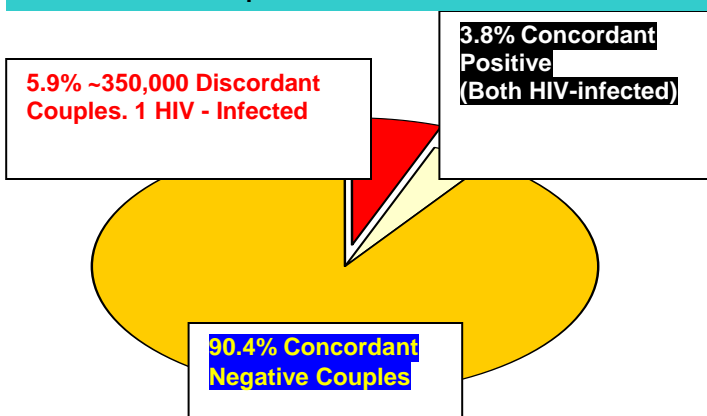
Background

- Sexual and reproductive health risks such as unintended pregnancy and other sexually transmitted infections (STIs) remain a big problem to people living with HIV (PLHIV) in Kenya.
- The Kenya AIDS Indicator Survey (KAIS, 2008) revealed that:
 - Overall, 81% of HIV infected respondents were sexually active in the year before the survey.
 - 67% of HIV-positive women desire to limit or space births;
 - 40% of HIV-infected women are not using any form of modern contraception.
 - 80.7% of HIV-infected persons were infected with HSV-2

Description



HIV-Discordant Couples too



Lessons Learnt

- An expanded HIV-prevention and safe sex approaches should address sexual, reproductive health and rights of PLHIV
- Integrating services and strengthening referral mechanisms ensures PLHIV have adequate access to quality sexual and reproductive health services.
- Peer education and support is an important strategy in sustaining access to sexuality information and services among PLHIV

It all Boils Down to Human Rights!

- Negative approach to sex and sexuality has been filtered through stereotypes that depict men as predators, women as victims and PLHIV as people who should remain sexually active.*
- If wanted sex, good sex, pleasure and right to enjoy sex are all not for PLHIV, where does PMTCT come from?*
- If Young PLHIV are taught only the dangers of sex, STIs, unwanted pregnancies and abstinence, how will they know about consensual safe sex and negotiation skills?*
- Is it not the right of PLHIV to have children?*
- What of adolescent PLHIVs and the right to information?*

Issues

- Health care workers ill-equipped, not ready and/or unwilling to address sexual and reproductive health challenges PLHIV face.
- HIV-prevention and safe sex practices tailored more to reduce the risk of HIV-acquisition and less to HIV-transmission.
- Although policy provision for service integration exist, this is not adhered to in practice. Management of STIs and provision of family planning services are 'rarely' readily available in ART sites.
- Family planning promoted as an aspect of mother to child transmission (PMTCT) of HIV ignoring HIV infected parents desire to have children.
- Diagnosis and treatment of STIs 'referred' and done at a cost

Next Steps

- NEPHAK is intensifying advocacy for increased access to dual protection devices for people living with HIV and;
 - Broaden partnership to more effectively engage health workers and legal experts at community and facility levels.
 - Enhance treatment and rights literacy for PLHIV, including discordant couples.
 - Repositioning 'pleasure' at the centre of safe sex and promoting condoms as pleasure enhancing devices rather than disease prevention commodities

HIV Peaks in Sexually-active Adults

