

## 50 million women in Asia at risk of HIV from their intimate partners

*HIV prevention interventions must reach men who have sex with men, injecting drug users, clients of female sex workers as well as their long-term female partners, according to a new report released at the 9<sup>th</sup> International Congress on AIDS in Asia and the Pacific*

**Bali, 11 August 2009** – An estimated 50 million women in Asia are at risk of becoming infected with HIV from their intimate partners. Evidence from many Asian countries indicates that these women are either married or in long-term relationships with men who engage in high-risk sexual behaviours. These findings are published in a new report by UNAIDS, its Cosponsors and civil society partners entitled *HIV Transmission in Intimate Partner Relationships in Asia*, being released today at the 9<sup>th</sup> International Congress on AIDS in Asia and the Pacific in Bali.

The HIV epidemics in Asia vary between countries in the region, but are fuelled by unprotected paid sex, the sharing of contaminated injecting equipment by injecting drug users, and unprotected sex among men who have sex with men. Men who buy sex constitute the largest infected population group – and most of them are either married or will get married. This puts a significant number of women, often perceived as ‘low-risk’ because they only have sex with their husbands or long-term partners, at risk of HIV infection.

It is estimated that more than 90% of the 1.7 million women living with HIV in Asia became infected from their husbands or partners while in long-term relationships. By 2008, women constituted 35% of all adult HIV infections in Asia, up from 17% in 1990.

“HIV prevention programmes focused on the female partners of men with high-risk behaviours still have not found a place in national HIV plans and priorities in Asian countries” said Dr Prasada Rao, Director, UNAIDS Regional Support Team Asia and the Pacific, speaking at the launch of the report. “Integration of reproductive health programmes with AIDS programmes and the delivery of joint services to rural and semi-urban women are the key to reducing HIV transmission among intimate partners.”

In Cambodia, India and Thailand, the largest number of new HIV infections occur among married women. In Indonesia, where HIV was initially concentrated among drug users, the virus is now spreading quickly into sex work networks, including long-term partners and sex workers.

Research from several Asian countries indicates that between 15% and 65% of women experience physical and/or sexual violence in intimate partner relationships, placing them at increased risk of HIV infection. According to studies in Bangladesh, India and Nepal, women exposed to intimate partner violence from husbands infected with HIV through unprotected sex with multiple partners were seven times more likely to acquire HIV compared to women not exposed to violence and whose husband did not have sex with multiple partners.

The strong patriarchal culture in Asian countries severely limits a woman’s ability to negotiate sex in intimate partner relationships, according to the report. While there is a societal toleration of extramarital sex and multiple partners for men, women are generally expected to refrain sex until marriage and remain monogamous thereafter.

“Discrimination and violence against women and girls, endemic to our social fabric, are both the cause and consequence of AIDS,” said Dr Jean D’Cunha, Regional Director, UNIFEM South Asia. “Striking at the root of gender inequalities and striving to transform male behaviours are key to effectively addressing the pandemic.”

The report also indicates that the female partners of migrant workers have been shown to be at increased risk of HIV infection when the latter return from working in countries with high HIV prevalence. A study in Viet Nam showed that married migrant workers reported having commercial sex partners and low condom use.

To prevent HIV transmission among intimate partner relationships, the UNAIDS report outlines four key recommendations:

1. HIV prevention interventions must be scaled-up for men who have sex with men, injecting drug users, and clients of female sex workers and should emphasize the importance of protecting their regular female partners.
2. Structural interventions should be initiated to address the needs of vulnerable women and their male sexual partners. This includes expanding reproductive health programmes to include services for male sexual health.
3. HIV prevention interventions among mobile populations and migrants must be scaled-up and include components to protect intimate partners.
4. Operational research must be conducted to obtain a better understanding of the dynamics of HIV transmission among intimate partners.

“The work that has been started around prevention of HIV transmission in intimate partner relationships is incredibly important because it means a new way of doing our work,” said Vince Crisostomo, Regional Coordinator, Seven Sisters (Coalition of Asia Pacific Regional Networks on HIV/AIDS). “The ultimate goal is the empowerment of women and it shows that the responsibility is on both sides.”

UNAIDS, its Cosponsors, including UNDP and UNFPA, and partners are organizing a symposium today at the conference to address HIV and intimate partner transmission. The aim is to take stock of evidence showing the increasing vulnerability of women to HIV transmission from their intimate partners and address critical policy and programme challenges.

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**Terminology**

The term “HIV transmission in intimate partner relationships” in this report is used to describe transmission of HIV to women from their long-term male partners who inject drugs, have sex with other men or are clients of sex workers. Although there is evidence of HIV transmission from women to their intimate male partners, the main focus of this report is on HIV transmission from men to their female partners, as this route of infection is much more common.

**About UNAIDS**

UNAIDS is an innovative joint venture of the United Nations, bringing together the efforts and resources of the UNAIDS Secretariat and ten UN system organizations in the AIDS response. The Secretariat headquarters is in Geneva, Switzerland—with staff on the ground in more than 80 countries. The Cosponsors include UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO and the World Bank. Contributing to achieving global commitments to universal access to comprehensive interventions for HIV prevention, treatment, care and support is the number one priority for UNAIDS. Visit the UNAIDS Web site at [www.unaids.org](http://www.unaids.org)