THE INTERNATIONAL COMMUNITY OF WOMEN LIVING WITH HIV/AIDS: Point of View

The International Community of Women Living with HIV/AIDS

The International Community of Women Living with HIV/AIDS (ICW) has significant concerns regarding the global interest in dramatically scaling up HIV testing. Such a strategy, particularly if tests are service-provider initiated, may take the control from women and men to make decisions about and prepare themselves for these tests as well as for the results. Many other concerns related to testing in its current form have not yet been addressed and will only be exacerbated with scale-up. A discussion of some of these problems follows in more detail, with a particular focus on the implications for women.

Who benefits from mass testing? Why are women being tested in the first place? What is the objective? Embarking on mass testing can actually be very dangerous where there is limited access to care, treatment, and support for women once they have tested positive. The stigma, discrimination, and related violence and loss of livelihood that many women face on disclosure remain a serious concern — and one that is heightened when women are pushed to test with their partners.

Before a strategy of massively scaling up testing is implemented, consideration needs to be given to the problems associated with testing in general. For example, how voluntary is voluntary — even in traditional voluntary testing and counseling (VCT) efforts? Do people really have the power to opt out of having a test at health centers, particularly if they see health care centers as places of powerlessness?

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VCT, even at its most benign, assumes generally that all women — even those who have a limited ability to negotiate, have been subjected to subordination all their lives, and may, as a result of their circumstances, have very limited self esteem — are somehow going to be able to make a meaningful decision as to whether to be tested.

The current emphasis by the World Health Organization and other international agencies on HIV testing in ante-natal clinics for the purpose of conducting epidemiological surveillance and addressing mother-to-child transmission (MTCT) raises a range of concerns that potentially jeopardize the rights of the women being tested and compromise their overall health and well-being. Among these concerns is the fact that such practices reinforce the perception within communities that women are responsible for bringing HIV into the family, putting women at increasing risk. Placing such an emphasis on the testing of women also shifts responsibility to get tested away from men.

Furthermore, while voluntary counseling and testing should be available during pregnancy, ICW is extremely concerned about the strong focus on the testing of women during pregnancy and particularly during birth. Pregnancy is an intensely emotional period of a woman's life and finding out a diagnosis at this time can be extremely traumatic, possibly leading to negative health consequences. In order to ensure that women are provided the optimal health care possible and that their rights are respected, ICW urges more flexibility in the availability of testing, greater respect for the right to choose whether to be tested, and access to nonjudgmental information and support so that women can make informed decisions about testing, disclosure, child bearing, and child rearing.

Overall, ICW urges caution in massively scaling up HIV testing. Current efforts raise serious concerns about whether consent is informed and voluntary and access to care, treatment, and support continues to be limited.

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