















The influence of the criminalization of HIV non-disclosure on intentional sexual inactivity among women living with HIV in Canada

Angela Kaida, Sophie Patterson, Valerie Nicholson, Allison Carter, Erin Ding, Paul Sereda, Lori A. Brotto, Saara Greene, Alexandra de Pokomandy, Mona Loutfy, on behalf of the CHIWOS research team





Conflicts of interest

We have no conflicts of interest to declare



Acknowledgments

We would like to acknowledge the traditional owners of the land on which we meet.











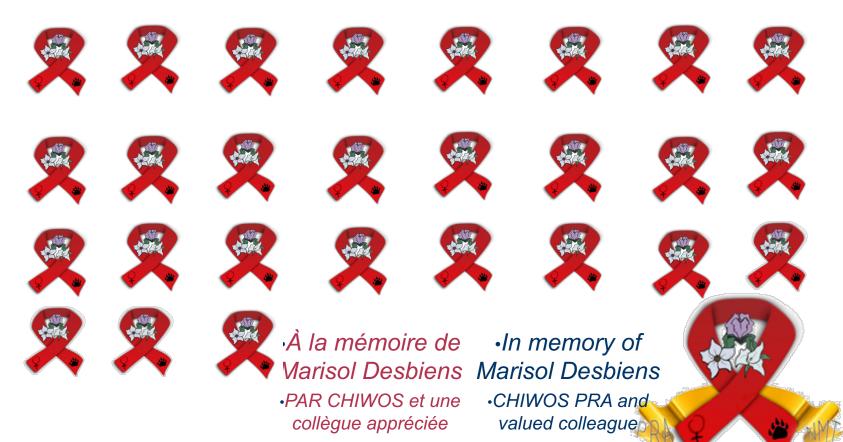




In memoriam

•Nous honorons et nous rappelons les 28 participantes CHIWOS de partout au Canada qui sont décédées et qui ne sont plus parmi nous.

•We honour and remember the 28 CHIWOS participants from across Canada who have passed away and are no longer with us.



Acknowledgements

We would like to thank...

- -All the women living with HIV who participate in CHIWOS;
- -The national team of Peer Research Associates, Coinvestigators and Collaborators;
- -The Steering Committee, Community Advisory Boards, and Aboriginal Advisory Board;
- -The BC Centre for Excellence in HIV/AIDS for data support and analysis;
- -Our affiliated studies: CANOC, REACH, OSC;
- -And all our partnering organizations who support study recruitment and operations.
- -Our funders: CIHR Institute of Gender and Health, the CIHR Canadian HIV Trials Network (CTN 262), the OHTN, and the Academic Health Science Centres Alternative Funding Plans Innovation Fund;

•Thank you to the following organizations who have partnered with CHIWOS to provide interview space:

•In **BC**: AIDS Vancouver Island, BC Centre for Excellence in HIV/AIDS, Cool Aid Community Health Centre, Downtown Community Health Clinic, Keys Housing and Health Solutions (Positive Haven), Living Positive Resource Centre, Oak Tree Clinic, Positive Living Fraser Valley, Positive Women's Network, Positive Living North, and Vancouver Island Persons with AIDS Society.

•In **ON**: 2-Spirited People of the 1st Nations; 519 Community Centre; ACCKWA; Africans in Partnership Against AIDS (APAA); AIDS Committee of Durham Region; AIDS Committee of Guelph and Wellington County; AIDS Committee of Simcoe County; AIDS Network Hamilton; Alliance for South Asian AIDS Prevention; Black Coalition for AIDS Prevention; Bruce House; Casey House; Centre Francophone; Elevate NOW; Fife House; Hemophilia Ontario; HIV/AIDS Regional Services (HARS); Maggie's: Toronto Sex Worker's Action Project; Peel HIV Network; Positive Living Niagara; Prisoners with AIDS Support Action Network; Réseau Access Network; Toronto PWA Foundation; Women's Health in Women's Hands; Children's Hospital of Eastern Ontario; Kingston Hotel Dieu Hospital; Health Sciences North, Sudbury Regional Hospital, HAVEN Program; Lakeridge Health; Maple Leaf Medical Clinic; McMaster Family Practice; Ottawa General Hospital; Riverside Family Health Team; SIS Clinic, Hamilton Health Sciences; St. Joseph's Healthcare London; St. Michael's Hospital; Sunnybrook Health Sciences Centre; Toronto East General Hospital; Toronto General Hospital; William Osler Health System; Windsor Regional Hospital, HIV Care Program.

•In QC: ACCM; L'ARCHE de l'Estrie; ASTT(e)Q; BLITS; BRAS-Outaouais; CACTUS; CASM; Centre Sida Amitié; Corporation Félix Hubert d'Hérelle; COCQ_SIDA; Fondation d'Aide Directe-SIDA Montréal; GAP-VIES; GEIPSI; M.A.I.N.S-Bas St-Laurent; Maison Plein Coeur; Maison Dominic; Maison du Parc; Maison Re-Né; MIELS-Québec; Le MIENS Chicoutimi; Portail VIH/sida du Québec; Sidaction Mauricie; Sida-Vie Laval; Stella, l'amie de Maimie.























HIV non-disclosure laws in Canada & sex



- Contradict the science revealing a zero risk of HIV transmission with an undetectable viral load (U=U!)¹
- Propagate misconceptions & stigma about realities of living with HIV²
- Place responsibility of preventing HIV transmission onto the person with HIV, rather than a shared responsibility²
- Deny risks that women face with disclosure and/or condom use⁴
- Violate women's rights to sexual privacy, autonomy, and freedom^{3,5}
- Intersect with other oppressions to regulate women's sexual lives^{3,4,5}



Objectives

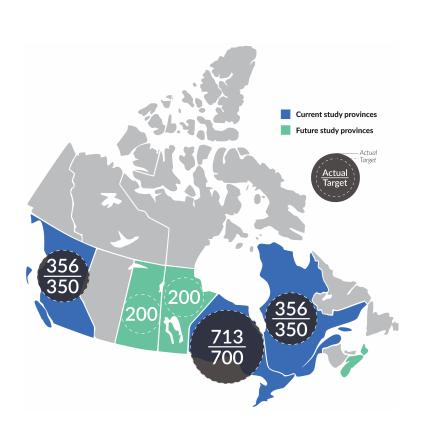
In the 18-month follow-up survey (Wave 2) of the community-based CHIWOS study developed *by, with*, and *for* women living with HIV in three Canadian provinces, we assessed:

- Prevalence and correlates of intentional (vs. unintentional) sexual abstinence
- •Women's reasons for intentional sexual abstinence.



Data Source: CHIWOS⁶

- Cross-sectional survey data from CHIWOS.
 - A multi-site, community-based, cohort study by, with, and for women living with HIV
 - Enrolled 1,425 women living with HIV from BC, ON & QC
- Inclusion: Self-identified women with HIV (cis and trans inclusive), ≥16 years
- PRA-administered survey at baseline with 18 month follow-up (Wave 2 complete, Wave 3 currently underway).





Measures & Analysis

Primary outcome: Intentional sexual inactivity (vs. Unintentional)

- Have you had consensual sex in the past 6 months (including oral, vaginal and/or anal sex with people of any gender)?
- If NO, "Has your abstinence or avoidance of sex been intentional? As in, you are actively deciding not to have sex right now."

Descriptive and bivariable analyses



Consensual sex in 6 months prior to interview

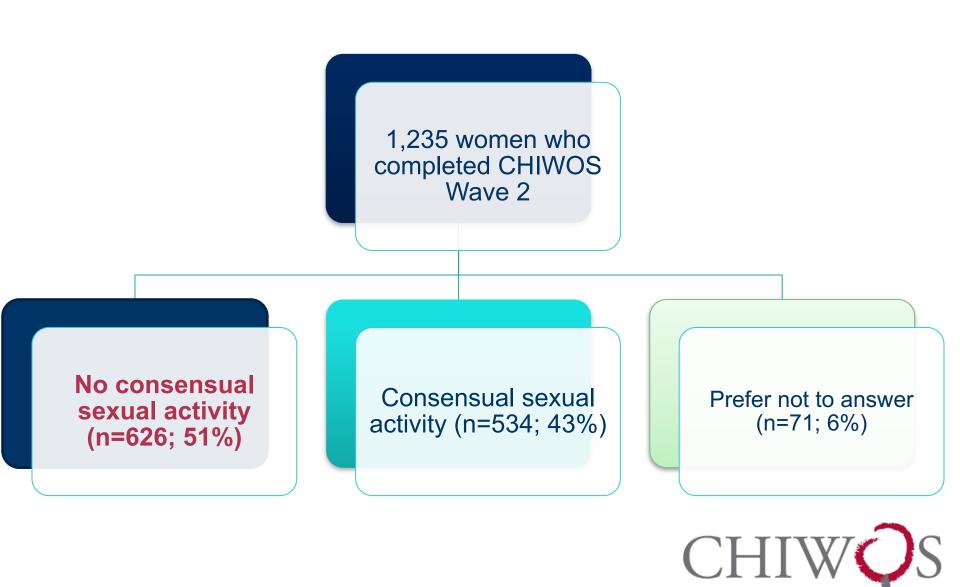


Table 1: Socio-demographic characteristics of participants who report no consensual sexual activity in previous 6 months (n=619)

Characteristics	Median [IQR] or n (%)	
Age at interview	48 (40, 54)	
Ethnicity Indigenous African, Caribbean, Black White Other ethnicity	137 (22) 171 (28) 263 (42) 48 (8)	
Personal annual income < \$20,000	432 (71)	
Gender identity Woman Trans woman Other gender identities	587 (95) 19 (3) 13 (2)	
Sexual orientation Heterosexual LGBTQ	553 (90) 64 (10)	
History of injection drug use	163 (27)	

Table 1 (con't): Clinical characteristics of participants (n=619)

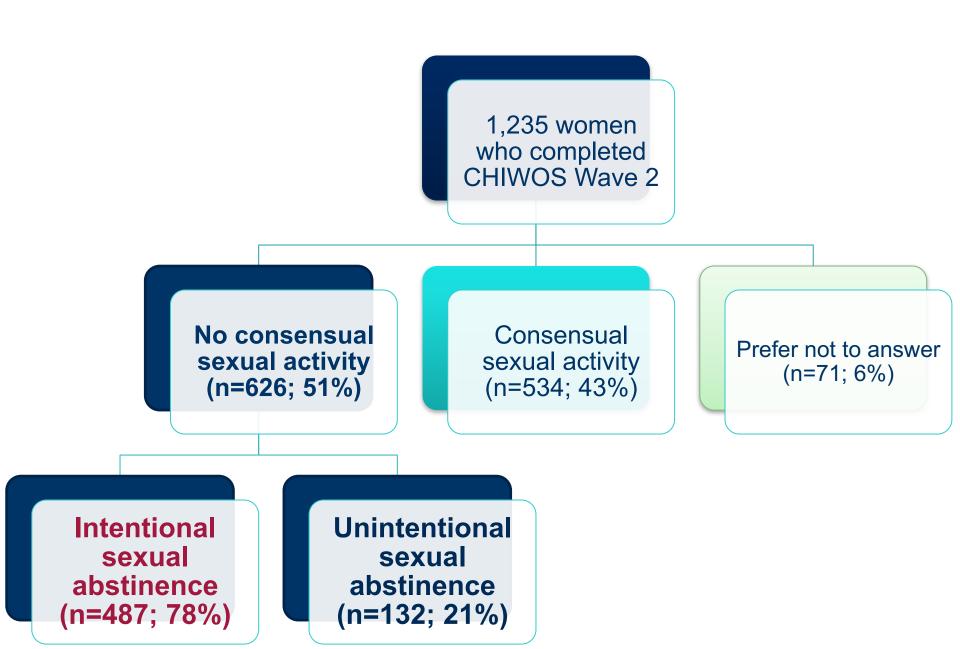
Characteristics	Total	Median [IQR] or n (%)
Years living with HIV	604	12 [7-18]
HIV medical care since last interview	619	573 (93)
On ART at interview	614	524 (85)
Undetectable viral load at interview (self-report)*	579	526 (91)
High HIV-related stigma+	611	310 (51)
Experience of physical violence as an adult	589	461 (78)

^{*}A validity study showed self-reported VL to be strongly predictive of laboratory-confirmed (true) VL in CHIWOS⁷

†Measured using the 10-item HIV Stigma Scale, with scores ≥median recorded as "high" HIV-related stigma vs. "low"



Intentional vs. Unintentional sexual abstinence



Consecutive months abstaining from sex, by intention

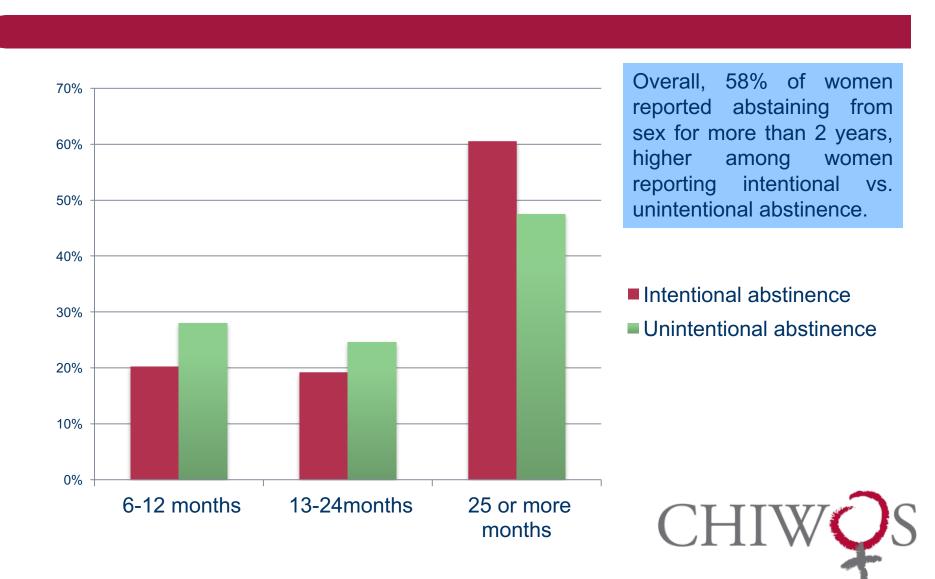


Table 2: Correlates of intentional vs. unintentional sexual abstinence (n=619)

Characteristics	Intentional (n=487)	Unintentional (n=132)	p-value
Ethnicity Indigenous African/Caribbean/Black White Other	24% 27% 42% 7%	14% 30% 45% 11%	0.05
Physical violence as an adult	59%	47%	0.05
HIV-related stigma	60 [48-73]	55 [43-68]	0.01
Satisfied with sex life	63%	34%	<0.001
* No associations with HIV clinical outcomes or awa			

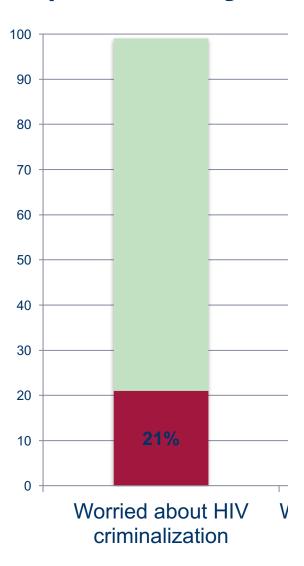


Women's reasons for intentional abstinence

(*not mutually exclusive)



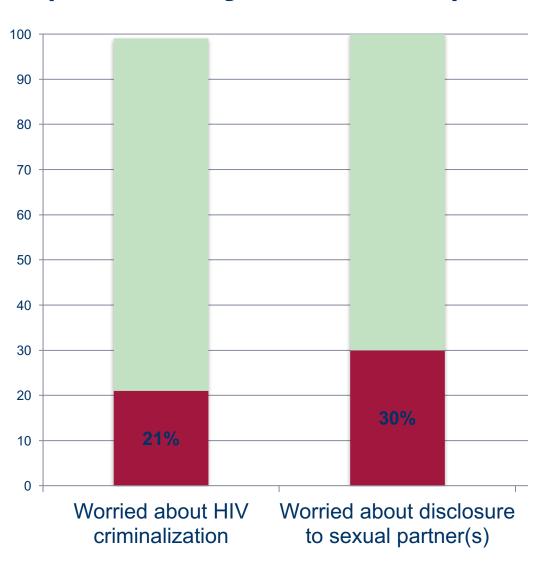
Reasons for intentional sexual inactivity (*mutually exclusive)



Other reasons

Yes

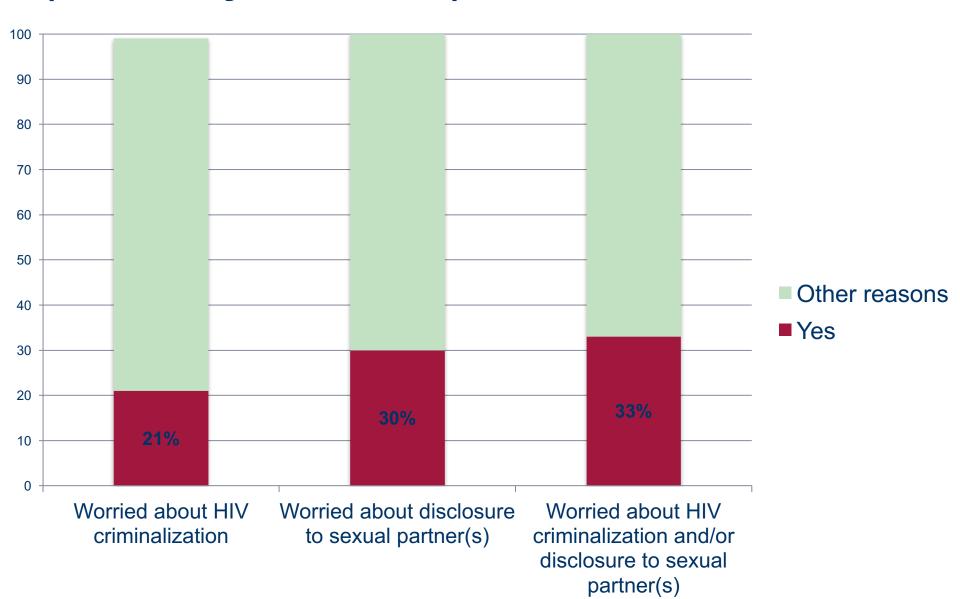
Reasons for intentional sexual inactivity (*mutually exclusive)



Other reasons

Yes

Reasons for intentional sexual abstinence (*mutually exclusive)



Additional reasons for intentional sexual abstinence

- Women report several other and important reasons for intentional abstinence
- ~ 40% of women report that they "do not need, or are satisfied without, (partnered) sex"
 - 'I have so many other things that are more important to me (work, family, studies,) that I don't even think about it"
 - "I want to fall in love"
 - "I have a good vibrator"





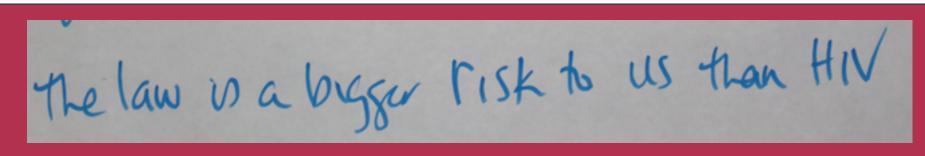
Discussion

- Despite good HIV clinical outcomes, over half of women were sexually inactive, over three-quarters of whom reported intentionally abstaining from sex.
- Women reporting physical violence and higher HIV-related stigma were *more likely* to report intentional vs. unintentional abstinence.
- Intentional abstinence was also associated with higher satisfaction with sex life.



Discussion

- One-third of women cited concerns about HIV disclosure and/or the criminalization as primary influencers of intentional abstinence.
- Findings suggest many women with HIV may be choosing abstinence as a means of resisting surveillance threats and disclosure expectations associated with sexual activity.



Conclusions

- Laws criminalizing HIV non-disclosure have been viewed, pursued, and defended as a means of protecting the sexual well-being of women.
- However, women with HIV protect themselves from the law.
- Women are making considered decisions about their sexual lives, given the unjust, often violent, and oppressive contexts within which they are forced to navigate their sexuality.
- Amplify sex-positive messaging that re-affirms women's rights to make decisions about her own sexual life.

END the overly broad criminalization of HIV non-disclosure #HIVisnotacrime

Thank You & References



- 1. Loutfy et al. Canadian consensus statement on HIV and its transmission in the context of the criminal law. Canadian Journal of Infectious Diseases and Medical Microbiology. 2014; 25 (3): 135-140
- 2. Canadian HIV/AIDS Legal Network. The criminalization of HIV non- disclosure in Canada and internationally. 2014
- 3. Women and the criminalization of HIV non-disclosure. Canadian HIV/AIDS Legal Network. 2017. Available at: http://www.aidslaw.ca/site/women-and-hiv-women-and-the-criminalization-of-hiv-non-disclosure/?lang=en
- 4. World Health Organization. Gender dimensions of HIV status disclosure to sexual partners: rates, barriers and outcomes. Geneva, Switzerland. 2004
- 5. Kaida et al. Sexual inactivity and sexual satisfaction among women living with HIV in Canada in the context of growing social, legal, and public health surveillance. JIAS. 2015: 18 (Suppl 5): 20284.
- 6. Loutfy M, et al. Establishing the Canadian HIV Women's Sexual and Reproductive Health Cohort Study (CHIWOS): Operationalizing Community-based Research in a Large National Quantitative Study. BMC Med Res Methodol. 2016;16(1):101.
- 7. Carter et al. Validating a self-report measure of HIV viral suppression: an analysis of linked questionnaire and clinical data from the Canadian HIV Women's Sexual and Reproductive Health Cohort Study. BMC Res Notes. 2017;10(1):138.
- 8. Carter et al. A critical feminist scoping review of 20 years of global epidemiological research on sexual activity, sexual function, and sexual satisfaction among women living with HIV. CAHR 2017

For more information about CHIWOS:

- Rebecca Gormley (BC): 604-682-2344 x 62544, rgormley@cfenet.bc.ca
- Logan Kennedy (ON): 416-351-3800 x 2323, logan.kennedy@wchospital.ca
- Karène Proulx Boucher (QC): 514-934-1934 x 32146, chiwos.quebec@gmail.com