

HIV/AIDS, unwanted pregnancy and abortion

THE SITUATION TODAY – AND WHAT NEEDS TO BE DONE



“HIV affects, or potentially affects, all the dimensions of women’s sexual and reproductive health — pregnancy, childbirth, breastfeeding, abortion, use of contraception, exposure to, diagnosis and treatment of STIs and their exposure to sexual violence. For instance, HIV infection accelerates the natural history of some reproductive illnesses and increases the severity of others” (WHO, 2006).

- World Health Organization (WHO) and the Joint United Nations Programme on HIV/AIDS (UNAIDS)

Coercion or pressure to abort is a violation of human rights

“HIV-positive women have been forced or feel pressured by health-care workers to have abortions. HIV-positive women may ‘choose’ to have an abortion because they are misinformed about the possible impact of a pregnancy on their health and that of their child; they may be told that the risks of perinatal transmission are high. Such misperceptions can be heightened by health workers who promote a view that HIV-positive women should not have children. ... Positive women should never be pressured by their partners, families or health workers to have abortions, that is also a violation of our human rights” (ICW, 2008).

– International Community of Women Living with HIV/AIDS (ICW)

HIV may increase risks of miscarriage — and the need for postabortion care

The limited research data available suggest that women living with HIV/AIDS have an increased risk of miscarriage (also called spontaneous abortion) and stillbirths (WHO, 2006). However, many women living with HIV/AIDS lack access to safe postabortion-care services.

Some women living with HIV have unwanted — not just unintended — pregnancies

Research shows that women living with HIV have unwanted pregnancies for many of the same reasons that HIV-negative women do, including pregnancies from rape and incest and the desire not

to bring a child into a situation of ongoing domestic violence. Some women have achieved their desired family size or do not feel they have the economic resources to care for another child. A positive HIV status may also cause women to reject pregnancy for new reasons. Some women need to spend their restricted incomes on accessing medications and treatments for their own and perhaps other family members’ HIV infection. Some women believe that a pregnancy could have a negative impact on their health or they fear infecting a child with HIV. Other women may want to postpone childbearing until HIV treatment has produced undetectable viral loads or until they can access a method of assisted conception that will further reduce transmission risks (de Bruyn, 2007a).

Some HIV-positive women have been denied safe abortion care

In some situations, “HIV-positive women have been denied safe abortion care or have been ‘asked’ to agree to sterilization in order to access abortion services. This is a violation of our rights to unbiased health care, self-determination, to decide the number and spacing of our children, to freedom from gender-based discrimination, and to freedom from inhuman treatment” (ICW, 2008).

– ICW

Abortion in relation to HIV is neglected as a research topic

Clinical research regarding provision of abortion care to HIV-positive women is almost nonexistent. We do not know yet whether complications of unsafe abortions differ between HIV-positive women who are asymptomatic, immunocompromised and not receiving antiretroviral drugs (ARVs) and women who are taking ARVs. We do not know if women living with HIV respond to surgical and medical abortion methods differently than HIV-negative women. Indeed, WHO notes that no research has been done regarding various abortion methods in HIV-positive women (WHO, 2006).

HIV-positive women may be more vulnerable to complications from unsafe abortions

“Women living with HIV/AIDS are prone to septicemia and may be particularly at risk of complications, so that preventing unintended pregnancies and unsafe abortion is essential for improving the health of these women. ... Ensuring that safe abortion is available and accessible to the full extent allowed by law to women living with HIV/AIDS who do not want to carry a pregnancy to term is essential to preserving their reproductive health” (WHO, 2006).

– WHO/UNAIDS

WHAT IS NEEDED?

Laws guaranteeing reproductive rights

“Laws should also be enacted to ensure women’s reproductive and sexual rights, including the right of independent access to reproductive and STD health information and services and means of contraception, including safe and legal abortion and the freedom to choose among these, the right to determine number and spacing of children, the right to demand safer sex practices and the right to legal protection from sexual violence, outside and inside marriage, including legal provisions for marital rape” (OHCHR, 1998).

– Office of the United Nations High Commissioner for Human Rights (OHCHR) and UNAIDS

Include abortion as an indicator for comprehensive health services for HIV-positive women

The civil society shadow report for the 2008 U.N. review of the U.N. General Assembly Special Session (UNGASS) on AIDS said that a country should report on whether the following services are available: emergency services for women and girls who are victims of violence or sexual violence, anti-HIV and anti-STD prophylaxis, emergency contraceptives and abortion (Vilella, 2008). This implies that safe abortion care (both postabortion care and induced pregnancy termination services) must be affordable and accessible.

Neutral and comprehensive pregnancy counseling for women living with HIV

“To make an informed decision about whether to continue with the pregnancy or have an abortion, women living with HIV/AIDS need to know the risks of pregnancy to their own health, the risks of transmission of HIV to their infant and the effectiveness and the availability and cost of antiretroviral drugs for treating HIV infection and for preventing HIV infection among infants as well as the potential toxicity of such drugs. They also need to know the side effects and risks of the abortion procedures available. The woman should make the final decision to terminate a pregnancy” (WHO, 2006).

– WHO/UNAIDS

Research on unwanted pregnancy, abortion needs and abortion care for HIV-positive women

These topics have been neglected; we need to build an evidence base for improved policy formulation and service provision, including linkages between HIV/AIDS and reproductive health services (de Bruyn, 2007b).

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