

GBV and impact on HIV transmission

Dr Margaret Makanyengo

Gender Based Violence (GBV)

- Commonest type is Intimate Partner Violence (IPV) defined by **CDC** as
- ‘Violence that causes ‘Actual or threatened physical, Sexual and/or psychological harm/stalking’
 - In kenya economic deprivation and neglect
- IPV is a major public Health concern with **negative health consequences associated with high risk for HIV**

Intimate partner Violence

- Usually Involves a **perpetrator** and a **victim/s**
- Power dynamics and control
- A drive within the perpetrator to **control** and/or **exert force** on a victim/s
- Perpetrator may exhibit **Sadistic or psychopathic tendencies /derive pleasure**
- Victims usually feel **helpless** and **weaker** financially, physically, personality, thinking

Background

- IPV is most common form of violence against women world-wide
- **Africa**: one of the regions in which lifetime physical and/or sexual IPV prevalence is highest (37%)
- **Kenya**: About half (47%) of ever-married women have experienced some kind of IPV (physical, sexual, or emotional) – mostly recent (in the last 12 months)

GBV/IPV and HIV (SA study)

Increasingly noted to
**undermine HIV prevention, care, and
treatment.**

(SA study in 4 health centers)

Enactment of laws in Kenya

- Increasing burden of IPV on health sector
- KNH legislation and laws to address Sexual offences 2006 SOA,

Gender-Based Violence Recovery Centre Kenyatta National Hospital

Mission: To provide comprehensive, accessible, quality care to survivors; enhance advocacy; provide training and research; and participate in national planning and policy in relation to GBV issues.

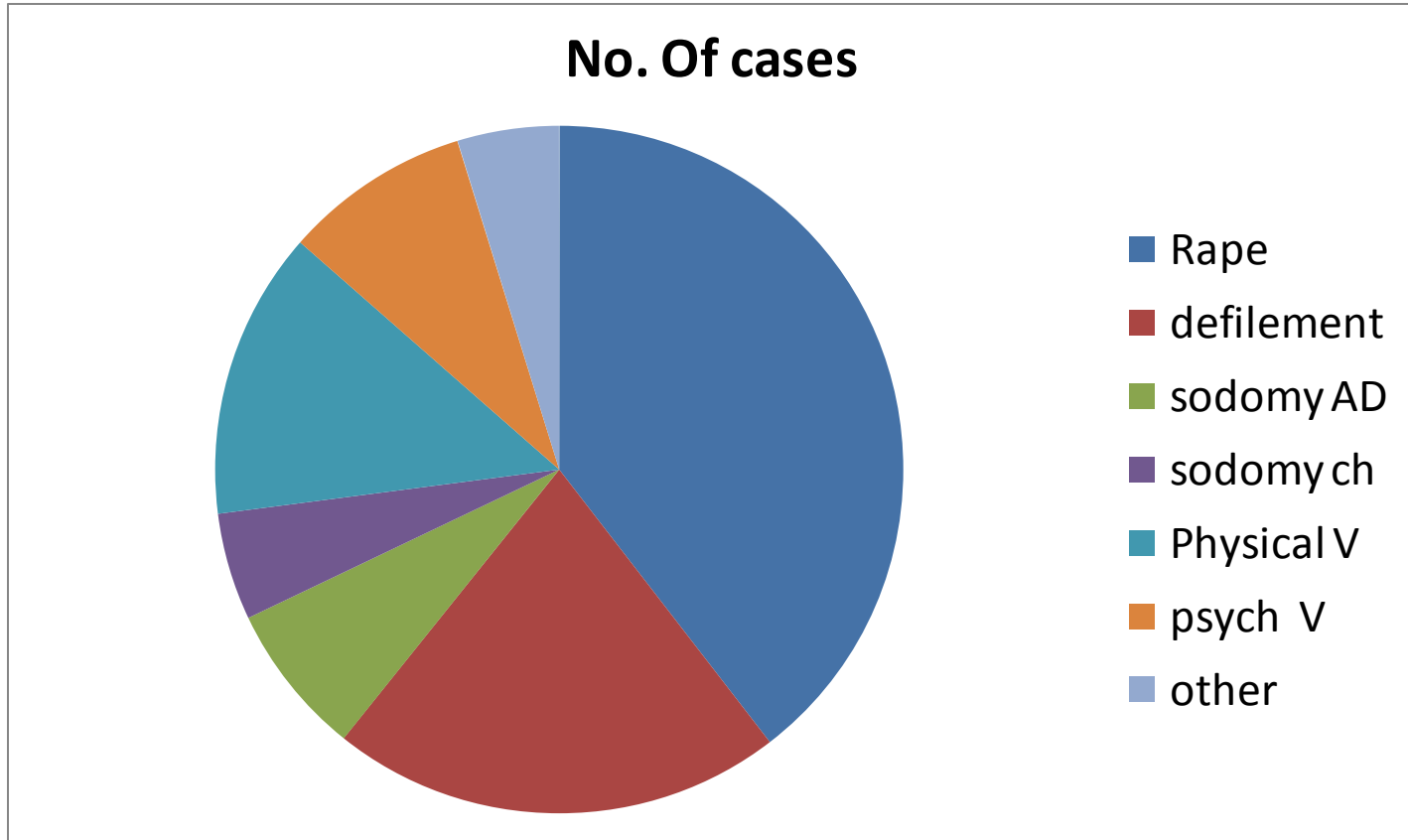


KNH GBVRC One Stop Comprehensive services 2006

- Post Rape Care
 - PEP
 - STI treatment
 - Emergency Contraception
 - Trauma Counselling
 - Forensic evidence collection

Linkage to the justice system, shelters etc,
Psychosocial support and referral to other stakeholders

GBVRC centre 377 cases of available files in KNH 2012-2014

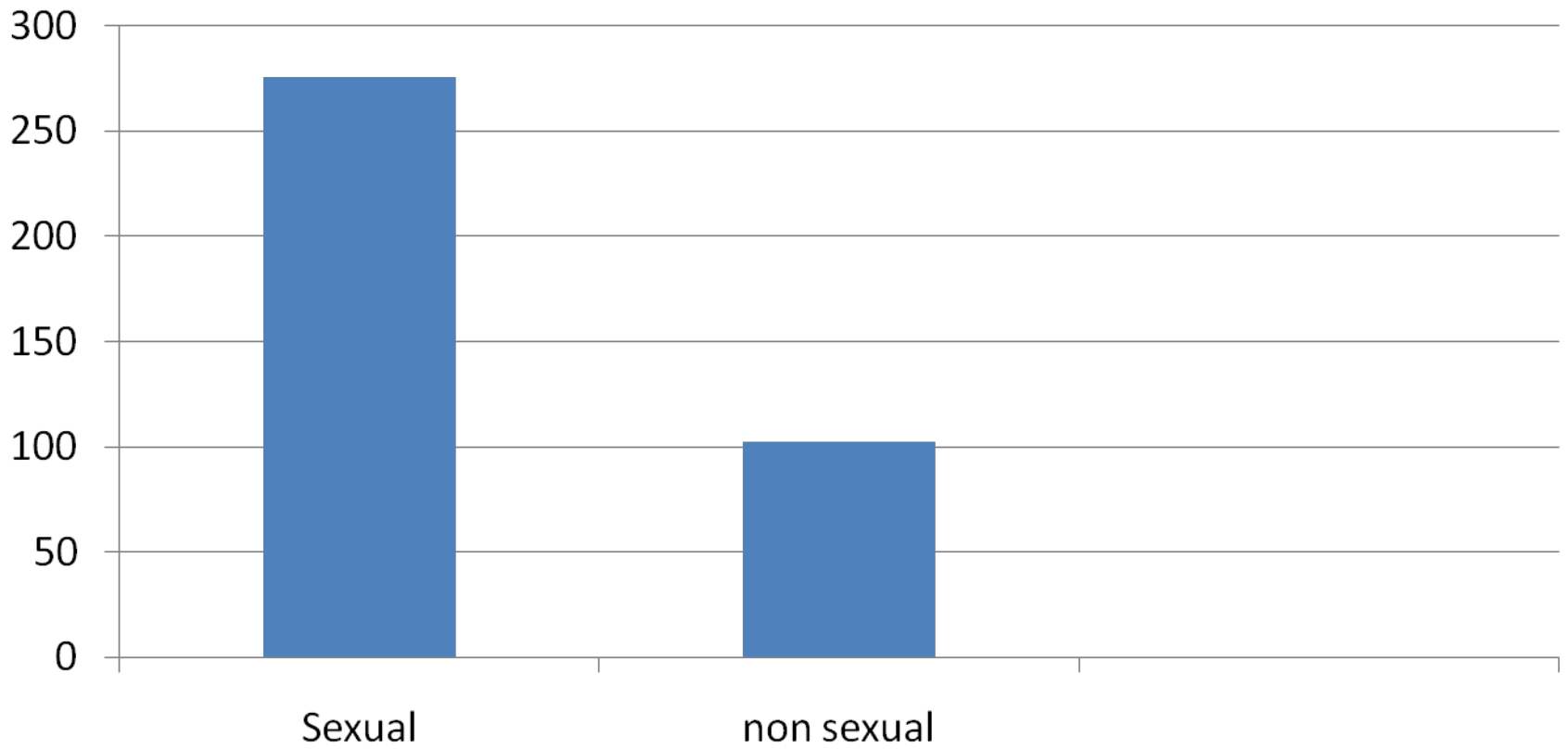


Gender of survivors

- Majority Women (Over 70 %)
- Girls
- Boys
- Men

Sexual violence vs non sexual violence

Number 377



Way forward

- How do we address the issue of IPV in health care setting?

Can we screen for GBV/IPV in general health care settings ?

- Population Council and KNH partnered in 2011-2012 to look at conducting a study to
 - test the acceptability and feasibility of screening for IPV in general health care settings
 - Antenatal clinic, HIV clinic, youth center and GBVRC
 - Those tested positive for IPV referred to GBVRC for intervention

Study design and outcome

- Descriptive case study designs
- **Aim:** to determine the acceptability and feasibility of routine screening for IPV (among women 18 years and above) in public health care settings where IPV referrals could be executed

Study Design

- Qualitative, multi-site case study
 - Four FGDs with 23 providers
 - IDIs with clients
 - 36 'compliant' clients
 - 29 'non-compliant' clients
- Collection of service statistics

Key Take-Away Messages

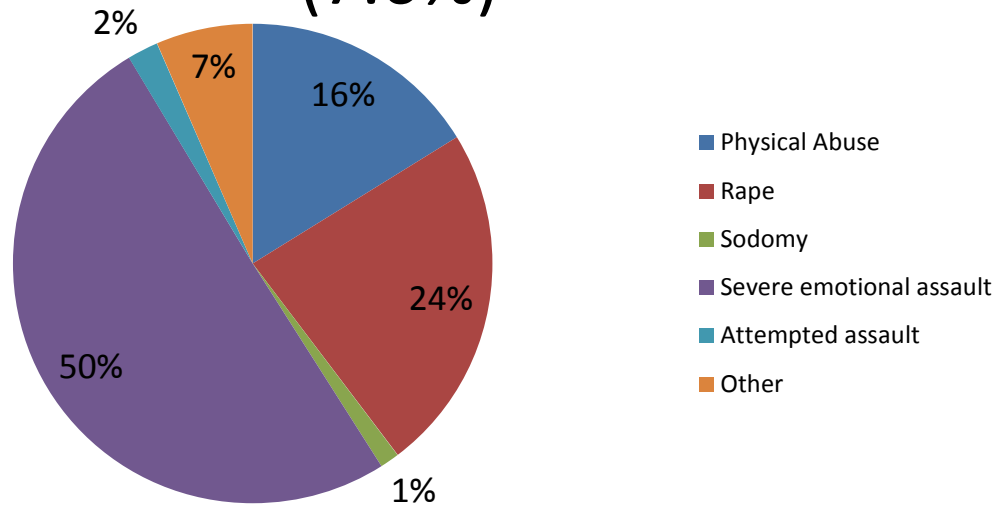
- **Routine screening for IPV ...**
 - IPV screening **acceptable** by HCP and clients
 - ✓ Is **feasible** in low-resource settings
 - ✓ Identifies **youth** and **HIV+ persons** as key populations of interest
- **Engaging with regional and int'l bodies can help broaden reach of SGBV efforts**

Selected Findings

- Over a third (38%) of IPV+ clients identified were youth (**18-24 years**)
- **Sexual IPV** more likely to be reported by **young people**
- **HIV+ clients** most likely to be **IPV+** and to be experiencing **composite violence**
- But **psychological violence** most commonly-reported form of IPV overall

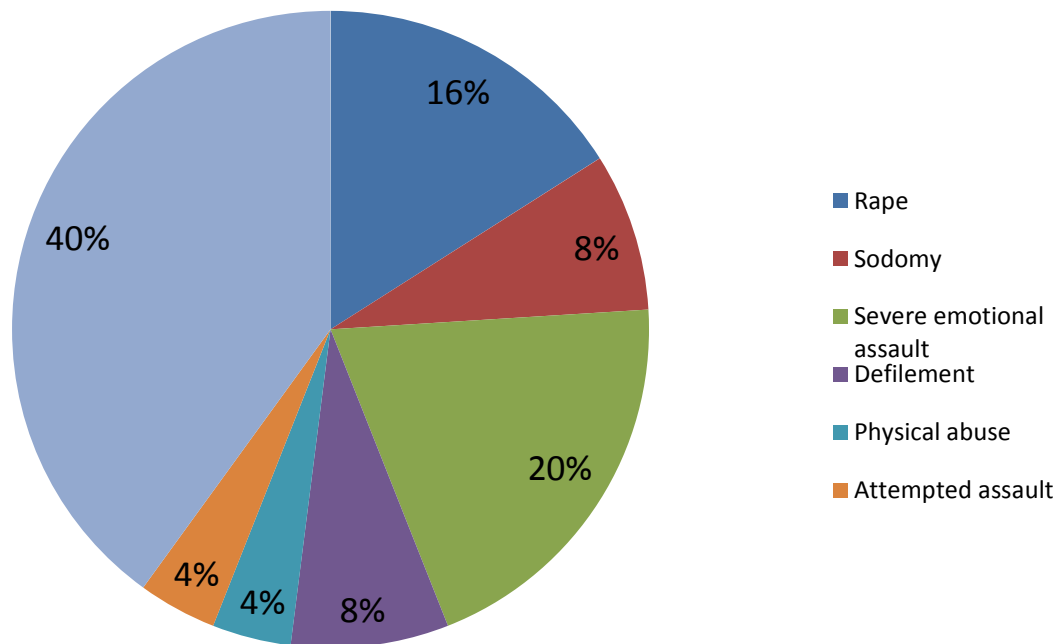
Adults- GBV screening in HIV clinic n=383

(7.6%)

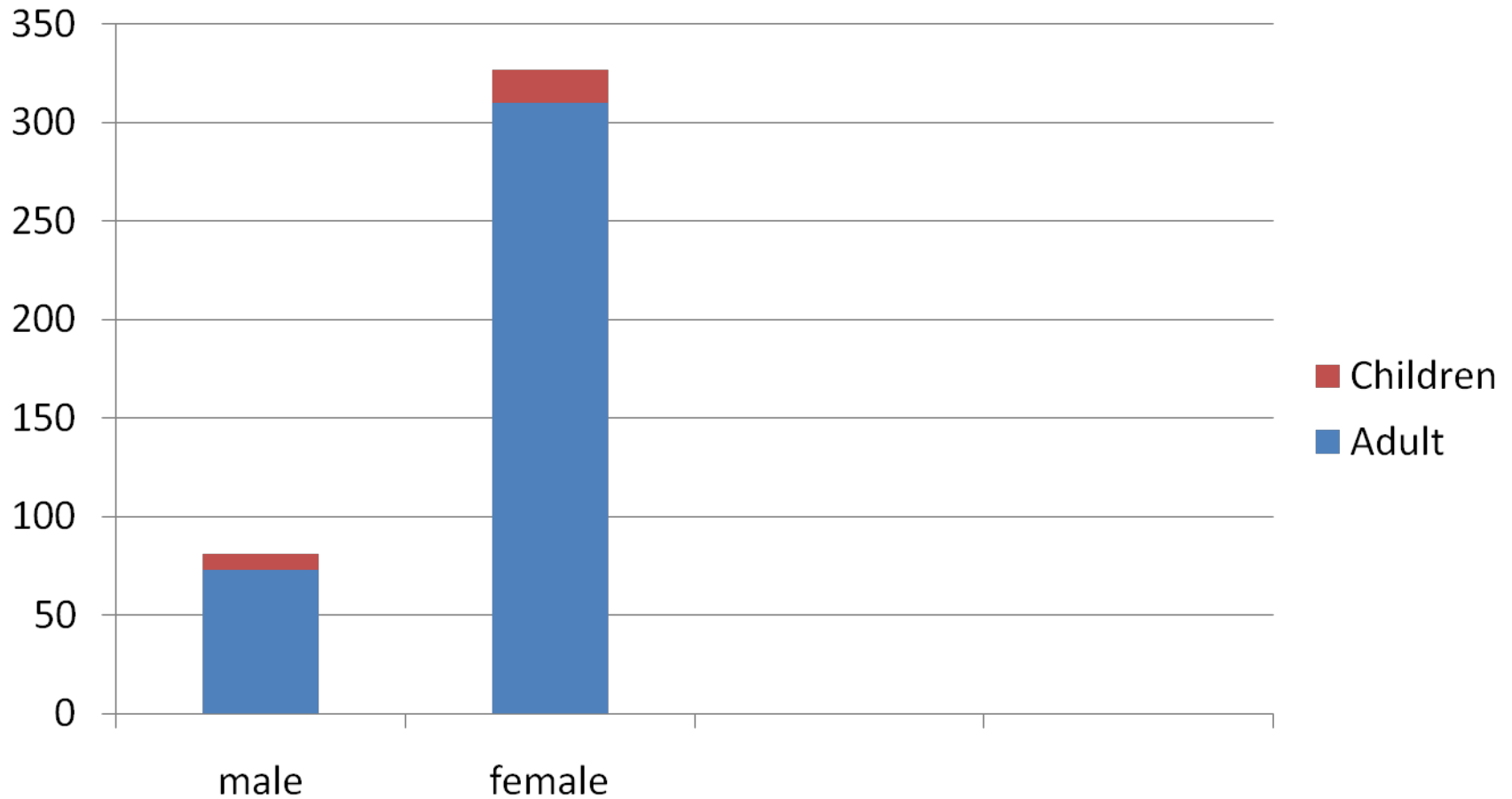


| Active on Care (total 8452 GBV 383) | | | |
|-------------------------------------|------|--------|------|
| Adults | | Paeds | |
| Female | Male | Female | Male |
| 4977 | 2714 | 379 | 382 |

GBV screening in HIV Pediatric clinic- n=25



Gender distribution of GBV in HIV infected



List of Other GBV Recorded

Spouse does not provide for the family
lack of basic needs , Psychological abuse,
Defilement, Human bite,
Forced marriage to an alcoholic husband who
was abusive

FEASIBILITY OF ROUTINE SCREENING FOR INTIMATE PARTNER VIOLENCE AT KENYATTA NATIONAL HOSPITAL

CHI-CHI UNDIE,¹
MARGARET MAK'ANYENGO,²
M. CATHERINE MATERNOWSKA,³
IAN ASKEW¹

¹Population Council, ²Kenya National Hospital,
³Bixby Center for Global Reproductive Health
University of California, San Francisco and UNICEF



How these results are being utilized

- December 2012 ECSA Health Ministers resolution on GBV & CSA screening
- Development of IPV screening training manual for providers underway
- Continued use of tool by others (GBVRC, Youth Center, other organizations, other populations)
- WHO Handbook on IPV screening in developing country contexts

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