Risky Women
Disrupting simple notions of women’s HIV risk
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At Risk Women

• Studies conducted to date are framed as targeting individuals “at risk” or “at high risk” for HIV infection

• Women in…
  – **VOICE**: Per participant report, *sexually active*, defined as having vaginal intercourse at least once in previous 3 months
  – **Partners PrEP**: *Sexually active* in sero-discordant relationship, defined as 6 or more vaginal sex episodes in previous 3 months.
  – **CAPRISA 004**: *Sexually active* in past 30 days, defined as having vaginal intercourse at least twice in that period
  – **TDF2**: *Sexually active*.
  – **FEM-PrEP**: At higher risk of becoming HIV infected- *vaginal sex in past 2-weeks or more than 1 partner in past 30 days*
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‘At risk’ by way of being sexually active in sexual and social networks/communities with high HIV prevalence

Not necessarily on basis of risk behavior
Risk Behavior

• Survey or interviews assessing some aspect(s) of behaviors that increase risk of exposure to HIV:
  How many times have you had vaginal sex in the past month?
  With how many partners?

Of these partners, how many were HIV positive?
  Of those partners who were HIV positive, how many times did you have vaginal sex?
  Of those times, how many times was a condom used from start to finish?

REPEAT FOR HIV-NEGATIVE AND HIV-STATUS UNKNOWN PARTNERS
Risk Behavior

- Creative innovations in risk assessment
  - Ecological momentary sampling
    - SMS [Text assessment of daily events]
    - Phone apps [Blackbook]
    - Internet accessed [SexPro]
No Evidence to date for Risk Compensation...More data needed
How at-risk and behavioral risk is defined and measured is important because...

Folded into guidelines for PrEP use and demonstration projects (Dr. Auerbach’s presentation)

Relevant for monitoring risk compensation and prevention synergies

Perceptions of risk are implicated in social behavioral models for adoption of prevention practices

What we construct as “driving” risk determines targets of intervention activities and policy focus
RISK IN HEALTH BEHAVIOR MODELS

Health Belief Model (and most risk behavior models) position risk perception as a determinant or moderator of adoption of health behavior/reduction of risk.
Perceived risk is gateway to considering a prevention method.

- Necessary but insufficient condition for adoption of a behavior
- Continues to be narrowly or ill-defined

**Perceived likelihood (probability it will happen)**

**Perceived susceptibility (vulnerability to getting it)**

**Perceived severity (how harmful is it/would it be)**

Many other factors influence adoption of prevention practices for men and women.
Causal pathways to Prevention

...feeling “at risk”, threatened by infection cannot directly lead to adoption of prevention in conditions where (1) strategy is not in your control and/or (2) multiple more immediate and negative consequences

- PrEP may offer a unique benefit to women as a self-administered strategy (vs condoms, couples HIV

- Not clear how privately one can adhere to PrEP or disclose of use to partner(s)

*Figure 1: An illustration of multilevel influences on power in relationships*
HIV risk and Prevention for Women

Constructions of risk and prevention among women require greater sensitivity to the relationships, power, and social-contextual dynamics that facilitate and challenge sexual health protection.

To reduce HIV among women we do need to aggressively identify effective female-centered options.

Even with these options, risk reduction efforts should also encompass the factors that propel risk, including:

- gender-based violence and inequitable gender norms
- systematic discrimination that promotes poverty and ongoing economic disparities and dependencies
THANK YOU