

healthCHAT 1

Emergency Contraception

What?!

Emergency contraception is a series of pills that can be taken by a woman to prevent pregnancy after having unprotected sex.

Girls and women experience sexual violence from strangers as well as people known to them. In fact, this is much more common and sometimes even more difficult to talk about.

We can all **give support** to women and girls experiencing violence, particularly sexual violence.

Why?!

Emergency contraception allows women to choose whether they want to become pregnant, even if birth control was not used during sex. This is especially helpful for women who cannot negotiate protected sex with their partners, or who are forced into sex by their partner or a stranger.

Sexual violence

not only has **emotional consequences** for women but also **physical consequences.**

Women and girls who have been forced or coerced into sex are at risk for HIV infection as well as unwanted pregnancy.

Learning about **emergency contraception** can allow all of us to be informed support providers – and to help women get to a health clinic for these critical services. Find out which clinics in your community provide emergency contraception.

Spread the word!

How?!

- If a woman is worried about getting pregnant after unprotected or forced sex, she should go to a health clinic as soon as possible.
- Emergency contraception can be used for up to five days (120 hours) after intercourse. It is more effective the earlier it is used.
- Emergency contraception must be obtained from a healthcare provider.
- Emergency contraceptives contain the same hormones that are used in contraceptive pills. Emergency contraceptives do not cause abortion because they act before the pregnancy begins by:
 - preventing ovulation,
 - preventing fertilization, or
 - preventing implantation of the egg in the uterus.
- It's important to remember that emergency contraception is not as effective as the forms of contraception that are used during sex (e.g., condoms, birth control pills, etc). Emergency contraception is not appropriate for regular use. It should only be used in special circumstances. Emergency contraception will not prevent STI's or HIV infection.

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HealthCHAT 2

Post-Exposure Prophylaxis

What?!

Post-Exposure Prophylaxis (also called PEP) is a short-term drug treatment that reduces a person's chance of becoming infected with HIV after possible exposure to the virus.

Why?!

PEP can be used as emergency HIV prevention by people who have been exposed to infected blood or bodily fluids of a person who is HIV positive. This is especially useful for women and girls who have had or been forced to have unprotected sex with a man who is (or may be) infected with HIV.

How?!

- Women who feel they may have been exposed to HIV infection should go to a healthcare clinic as soon as possible after exposure.
- PEP treatment must begin as soon as possible and NOT later than 72 hours after possible exposure. The earlier treatment begins, the better the chance that it will prevent HIV infection.
- PEP consists of a short treatment of anti-retroviral drugs over several (usually four) weeks.
- Every dose must be taken and the entire treatment must be completed.

Providing **drug therapy** is only one aspect of post-exposure care for **sexual violence**.

Trauma and HIV **counselling** should also be provided

as well as ongoing clinical monitoring and referrals for psychosocial support.

- The full course of PEP can only be given to clients who test negative for HIV infection because use of PEP in an HIV positive person can cause the virus to become resistant to anti-retroviral drugs. Therefore, clients receiving PEP must take an HIV test within three days of the exposure and be found HIV negative before the entire course of treatment can be given.
- PEP is not guaranteed to prevent HIV infection after possible exposure. Efforts to prevent the virus (by using condoms, avoiding contact with infected fluids, etc) before exposure are always more effective.
- PEP will not prevent other STIs or unwanted pregnancy.
- Clients using PEP who have had no further possible exposure should be tested for HIV after 6 weeks, 3 months and 6 months to be sure they are virus-free.
- Pregnant women must be informed that the safety of the foetus cannot be guaranteed within the first trimester of pregnancy if PEP is given. She must weigh this with the risk of possible HIV infection of herself and the baby if PEP is not taken.

Find out if **PEP** is available in
your community.

If it is, **spread the word!**

If it is not, **make noise!** Call on MPs,
the Ministry of Health, health care providers
and other leaders **to provide this essential
service for women.**

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HealthCHAT 3

Saying “No” to Sex

What?!

Saying “No” to sex can be difficult, but it’s important – it is also your right! Thinking through and practicing ways of saying no before being in the situation can make it easier.

Why?!

Choosing when you have sex and with whom and how you have sex is your decision. Your body is your own – you have a right to decide about all matters related to your body.

How?!

How might you say “no” to a potential partner whom you do not want to have sex with?

Sometimes the most simple is the best!

“I do not want to have sex with you.”

I am flattered that you want to have sex with me, but I am trying to protect my health and have chosen not to have sex with anyone.

I am feeling very worried about HIV and I cannot be sexual with you when I am feeling this way.

Think about how a potential partner might respond and what you could say in response:

Partner: I paid a bride price for you.
You have to have sex with me.

You: Yes, you did pay a bride price. But that doesn't mean that you own me. I am not prepared to have sex with you right now.

Partner: I will force you to have sex with me.

You: Why would you want to have sex with me when I am not ready? Sex will be much more enjoyable when I am willing.

Partner: I have sexual needs that you have to fulfill.

You: Everyone has sexual needs. I respect yours, but my need right now is to not have sex. And I am asking you to respect that.

Partner: Your role as my partner is to provide me with sex.

You: I have many different roles as your partner. Isn't your role as my partner to help me to feel safe and healthy?

(Adapted from *Risk Reduction Counseling for Women at Risk for Violence*, 2006, Rakai Health Sciences Program, Uganda)

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