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HIV Prevalence in Cuba Remains Low, but Prejudice and Stigmas Remain

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The prevalence of HIV remains low 25 years after the first case was detected on the island, but Cuban health authorities warn that persisting prejudices and stigmas open the way for the epidemic to spread and foster a perception of low risk as well as putting women, previously less afflicted, in a more vulnerable situation.

The Ministerio de Salud Pública (MINSAP) announced in June that the epidemic is under control, with an infection rate of 0.18% among persons 15-49 years of age. That rate is within the 0.1 range, a lower limit for the prevalence of HIV. The Caribbean is the second-most-affected area in the world for the Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) after sub-Saharan Africa.

HIV prevalence among adults in Latin America is 0.8%. The populations with the highest risk are the transgender community, men who have sex with men (MSM), sex workers, and intravenous drug users, representatives from the Joint UN Program on HIV/AIDS (UNAIDS) stated earlier this year.

The epidemic is progressing slowly in Cuba, mainly in urban areas, and affecting primarily males, who comprise 80% of the cases. Eight of ten men diagnosed have had sex with other men. The latest reports from UN agencies indicate that, as of December 2009, 12,217 people had been diagnosed as HIV positive, 4,939 diagnosed with AIDS, and 2,127 have died from the disease.

Fifty-three percent of those affected by the virus live in the nation’s capital, Havana, which has a population of more than 2 million inhabitants and is the primary point for international transit. Authorities note an increase in cases in other provinces and fear increased infections in women.

The main route of infection on the island is still unprotected sex. The transmission of HIV from mother to child and through blood and blood products has been eliminated, Dr. Luis Estruch said in June. Dr. Estruch is the Cuban vice minister of hygiene, epidemiology, and microbiology in MINSAP.

Ninety percent of the people who began treatment in 2001 are alive and receiving free antiretroviral therapy (ART), the source added. MINSAP investments for the promotion, prevention, and care of AIDS patients total more than US$200 million a year, while the free antiretroviral treatment costs between US$3,000 and US$6,000 annually per patient, Estruch disclosed in 2010.

The country began producing generic antiretroviral drugs in 2001, supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria, a partnership that works with national campaigns on the prevention of sexually transmitted diseases and provides free condoms. In 2010, the UN included Cuba as being one of the eight low-to-middle-income nations with universal access to treatment for all patients.
Machismo, prejudice, and stigma

The authorities insist on the modification of irresponsible sexual practices, especially among those who reject the use of condoms. Because of this, messages on state-controlled television and print media are more persistent and pointed in recent years, since the start of public airing of homosexuality and LGBT community issues.

In a country with a strong machismo tradition, some men continue their promiscuous behavior, frequently changing partners and engaging in furtive adventures linked to the old concepts of manhood, said a young volunteer health promoter in Havana. He said many refuse to use condoms, have unprotected sex, and believe that only homosexuals are prone to infection.

The 15-to-19-year-old population reacts positively to the safe-sex program, and they are more inclined to use condoms than other ages, said the Centro de Estudios de la Población y Desarrollo (CEPDE) of the Oficina Nacional de Estadísticas (ONE) in its 2009 HIV survey, which has been updated every two years since 2001.

However, there is still a limited awareness of risk among the population. The most recent CEPDE reports revealed that 47% of respondents had no perception of risk, 36.4% had a low perception of risk, 13.2% said that they did not know, and only 3.4% showed a high perception of risk.

So far the group hardest hit by the epidemic is young people between the ages of 20 and 39, but there is a shift toward those over 30, even among those who have steady partners, according to the same source. In 2008, the local press in Pinar del Rio (on the western end of the island) warned that 29.2% of local women carry HIV infections, as opposed to 19% in the rest of the country.

Women are in a vulnerable position because the traditional gender roles and relations in the Caribbean country place them in a weak, dependent, and submissive situation. This prevents them from having successful discussions with their partners on topics such as their own sexual relationship and even the mutual agreement to use condoms, health experts explained in Havana.

There are more than 2,000 sexual-health promoters on the island, most of them volunteers. They can be seen distributing leaflets, free condoms, and lubricant gels in the parks and downtown streets of Havana frequented by teenagers, young people, and foreign tourists. Some of these volunteers are MSM who counsel men about the dangers of the epidemic.

In Cuba, it is believed that the MSM group makes up 4.6% of men between the ages of 12 and 49 years and 5.1% of all men who have had sex at least once. Their average age is 33.6, and 66.2% are white, stated reports from the CEPDE. Experts warn of the risk of infection for women with MSM partners that engage in extramarital, promiscuous behaviors.

This summer, authorities launched a campaign against AIDS that included instant-result, in situ tests. Activists and prevention organizations traveled to the East Havana beaches where traditionally members of the LGBT community have gathered and previously were occasionally harassed by police.

On the island of 11.2 million people, more than 2 million AIDS tests are performed each year, officials said. Those testing positive must enter the three-month Learning to Live with AIDS program. They are admitted into sanatoriums where they undergo psychological and clinical evaluations and receive expert counseling before returning to their daily lives.
In the early 1990s, people living with HIV faced mandatory placement in health institutions with limited chances of social reintegration, but later the country implemented the current system of outpatient care. Some still choose to live permanently in nursing homes because of family or social difficulties.

In Cuba, a Caribbean country where secrets are told out loud, many HIV carriers prefer to keep their condition under absolute discretion, including in their home environment and from work colleagues. They are tormented by the fear of being stigmatized and isolated in a society that has not eliminated its strong prejudices toward people with sexually transmitted diseases.

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