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Relationships between health professionals and HIV+ women: A gender-based approach

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**Objectives:** To present the results of a gender-based study focusing on relationships between health professionals and their female HIV+ patients.

**Methodology:** Qualitative. Seventeen semi-structured interviews were conducted with seven health professionals and ten HIV-positive women undergoing anti-retroviral treatment. The topics treated in the interviews were: gender representations, representations of women with HIV/AIDS, and strategies used for adaptation and resistance to internalized values and attitudes among health professionals and patients. The study was conducted in a public hospital in the municipality of Rio de Janeiro, Brazil.

**Results:** In the discourse of the professionals interviewed, the authors found persistent medical and gender ideology in the relationship between professionals and patients, expressed as authoritarian, normative and/or technological-prescriptive. This was in spite of the fact that the health professionals did not perceive themselves as passively reproducing the hegemonic medical model, but as promoting comprehensive, humane, high quality health care for HIV positive women. Although the authors note that the comprehensive nature of this care, it is understood by them as the availability of a multidisciplinary team that meets patients' needs in a compartmentalized manner, not as truly integrated health care for HIV positive women. The image of the woman-mother as victim persists in the social imaginary of these health professionals. The patients perceive themselves as “warrior women” or the “strong sex,” alluding to their natural capacity to bear children and work at two jobs at once while still caring for their own health. The authors point out the close ideological relationship between reproduction and feminine sexuality, which affects HIV positive women in a particular way. They tend to repress their sexuality to protect others (children, partner). Maternity is a motive for life and hope in contrast to the concept of death associated with AIDS. The authors identify a number of strategies of adaptation and resistance, rules and new needs related with treatment.

**Conclusions:** In spite of institutional limitations and the patients’ lack of money, the authors were able to identify a significant potential for transforming interventions that could help these women reclaim their reproductive rights.