Food insecurity, sexual risk behavior, and adherence to antiretroviral therapy among women living with HIV

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Key Findings

The gathered evidence found food insecurity is associated with a lack of control in sexual relationships, an increase in transactional sex, and reduced ART adherence. Two qualitative studies from sub-Saharan Africa and one from the United States described how food insecurity, hunger, and the need to support a family can lead to transactional sex, creating a “cycle of food insecurity, HIV risk, and social marginalization.”

Four studies, including the three above and one in Canada, described the women having a lack of control in their sexual relationships. In the three qualitative studies, women reported less power to demand protection during sex, a fear of disclosing HIV status and staying in violent or abusive relationships for food. The qualitative study in Canada found people who were severely food insecure had almost three times the odds of reporting condom-less sex compared to those who were not severely food insecure.

Three qualitative studies in Sub-Saharan Africa examining ART adherence found hunger as a key barrier to consistently adhering to medication. Participants were worried the medication would increase appetite when they didn’t have access to food. They also reported an increase in side effects from taking ART when it was done without food or vomiting after ART, losing what little food they had.

Evidence included in this review

The systematic review authors identified seven studies that ultimately met the inclusion criteria: five qualitative studies, one prospective cohort study with two years of follow-up, and one cross sectional study. The studies came from Canada, the Democratic Republic of Congo, France, Swaziland, the United States, Uganda, and Zambia.

Further research

Further research is needed that specifically addresses the effect of food insecurity on women living with HIV and its effect on sexual risk behavior and ART adherence as well as other health consequences where food insecurity, HIV and gender interact. Future research should also disaggregate data by sex so the gender dynamics of HIV and food insecurity can be better understood.

Article

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Gender inequalities shape the experience of food insecurity among women living with HIV (WLHIV). We systematically reviewed the impact of food insecurity on sexual risk behaviors and antiretroviral therapy (ART) adherence among WLHIV. We included qualitative or quantitative peer-reviewed articles, extracted data in duplicate, and assessed rigor. Seven studies, from sub-Saharan Africa, North America, and Europe, met inclusion criteria. Food insecurity was associated with increased sexual risk through transactional sex and inability to negotiate safer sex. Hunger and food insecurity were barriers to ART initiation/adherence. Multidimensional programming and policies should simultaneously address poverty, gender inequality, food insecurity, and HIV.

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