

Women Put a New Face on AIDS Epidemic

By Barbara Ruben

When the head nurse of a Kiev hospital found out she was HIV-positive when AIDS first surfaced in Ukraine, she says she was in shock, convinced, like many others, that the disease couldn't happen to her. On top of the strain of her diagnosis, she discovered that few Ukrainian facilities were equipped to treat the myriad gynecological complications of HIV and AIDS. In addition, the head physician of the hospital wanted to fire her and reveal her condition. Only through extensive talks, mediated by the Ukrainian AIDS Prevention Center, was the nurse able to convince him that she should keep her job.

Six-thousand miles away in Chicago, Illinois, GiGi Nicks was diagnosed about the same time as the nurse in Kiev. For Nicks, who had been losing weight and was constantly fatigued, the diagnosis took six months because doctors did not recommend an HIV test.

"I wasn't a gay, white male. I was a single mother in the suburbs. I just didn't fit the profile," she says. "Women are the invisible AIDS population. We're going to have to refocus on who we think of as the typical AIDS patient."

Although the AIDS crisis is just igniting in Ukraine (see article on page 32), globally the proportion of women with AIDS has skyrocketed. On the periphery of the epidemic a decade ago, women now make up half of all newly infected adults, according to WHO estimates. In the United States, the proportion of women among cases in adults and adolescents has increased steadily, from 7 percent in 1985 to 18 percent in 1994, with 15,000 women with AIDS at the end of 1995, according to the Centers for Disease Control and Prevention. AIDS is the leading cause of death in women ages 25 to 44 in 15 major US cities, including Chicago, where there are 3,500 women with HIV.

In the NIS and CEE, the numbers of women and men with AIDS are much smaller. From 1979 through 1995, there have been a total of 14 reported cases in Belarus, 191 in Russia, 6 in Estonia and 195 in Hungary. Men make up the majority of AIDS patients. For example, of the 143 HIV-positive persons in the Czech Republic in 1993, only 11 were women. In Ukraine, 386 women were reported HIV-positive at the end of last year, about 26 percent of the total infected. In Russia, there were 258 HIV-positive women in May 1996, about 30 percent of all cases. But with the freer flow of drugs and people across the borders of formerly Communist countries, most nations expect a sharp increase in the numbers of both men and women with AIDS over the next decade.

Women with HIV and AIDS face a unique set of issues both medically and socially. They are prone to recurrent yeast infections, pelvic inflammatory disease and herpes, and are vulnerable to the human papilloma virus, which has been linked to cervical cancer. Because these symptoms are many times mistaken for non-HIV-related gynecological problems that will respond to standard treatments, HIV is often diagnosed later than in men, delaying treatment that could extend women's lives.

Pregnant women with HIV have a 15 to 30 percent chance of passing the virus on to their babies.

"In Russia, a pregnant woman who is HIV-positive would be recommended by her doctor to have an abortion since this is easier for them and on the financial resources of the hospital," says Lucy Platt with AIDS Infoshare Russia, a non-governmental educational group.

In the US, many HIV-positive women are poor single mothers and often IV drug users.

"Many women who have HIV infection are women who have had very difficult lives to begin with. They have never experienced much empowerment. Sixty percent have experienced domestic violence," says Mardge Cohen, director of the women and children's HIV program at Cook County Hospital in Chicago. "We need to treat these problems as much as we need to treat the HIV infection itself."

For both the Kiev nurse and for GiGi Nicks, the trauma of HIV has propelled them into activism. The nurse helped create a non-governmental organization for HIV-positive people in Ukraine and has worked internationally to help others who are ill. Nicks, who was unemployed at the time of her diagnosis, got a job at Cook County Hospital educating women about AIDS and training other patients to counsel HIV-positive women in their communities.

"Education is the power women need to make the right decisions," says Nicks. "We've got to come out of our crawl spaces and make people see us as human beings instead of diseased aliens."