

Resilience, heritage and vulnerability: qualitative assessment on violence and HIV among indigenous women and girls in the Amazon region

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Background

Research indicates that the indigenous peoples of Latin America have specific vulnerabilities to HIV, due to barriers to access services, which include language, culture, distance, cost, stigma and discrimination; Unmet needs that hinder the use of condoms and antiretroviral treatment, as well as gender inequality. Latin America has one of the highest rates of violence against women. Among indigenous peoples, women and girls experience physical and sexual violence, early marriage, sex work and survival sex, limited access to justice, high rates of teenage pregnancy, limited employment and education opportunities, and lack of knowledge on human rights.

Violence against women and girls can be both a cause – through rape, reduced ability to negotiate condom use, and lack of access to health services – as well as a consequence of HIV - for example, violence by a partner after a positive diagnosis for HIV.

Since 2008, UNAIDS Brazil office has been developing the UN Comprehensive Plan to Support the Response to AIDS in the Amazon, known as AMAZONAIDS. The Comprehensive Plan is an umbrella of UN agencies together with federal, state and local government, civil society organizations and other strategic partners, which seeks to strengthen local capacities to better respond to AIDS, as well as to harmonize the actions of UN agencies and other partners, optimizing the use of technical and financial resources and accelerating the efforts and priorities of local governments. The Comprehensive Plan is a tool to strengthen intersectoral partnerships and mobilize new resources to support the response to AIDS in the priority regions.



Region of the Alto Solimões in the state of Amazonia where the project AmazonAIDS and the qualitative assessment on violence and HIV among indigenous women and girl were implemented

Taking into account the lessons learned from the implementation of Amazonaids, and with a view to South-South cooperation, the qualitative assessment carries out a preliminary diagnosis on the health of Tikuna indigenous women in Alto Solimões, including issues related to vulnerability to HIV and violence, an overview on the available health services and a survey of the added value of volunteer work in indigenous communities in Brazil. This project is a partnership between UN Women, UN Volunteers programme (UNV) and UNAIDS and aims at strengthening evidences to build a proposal for intervention and an action plan for the region. The overall objective of the study is to provide an overview on the situation of violence and HIV among indigenous women in Alto Solimões and the existing services in order to design appropriate actions. As such, a situational diagnosis of the region was first put forth. Then, specific interventions were proposed to support a possible intervention project.



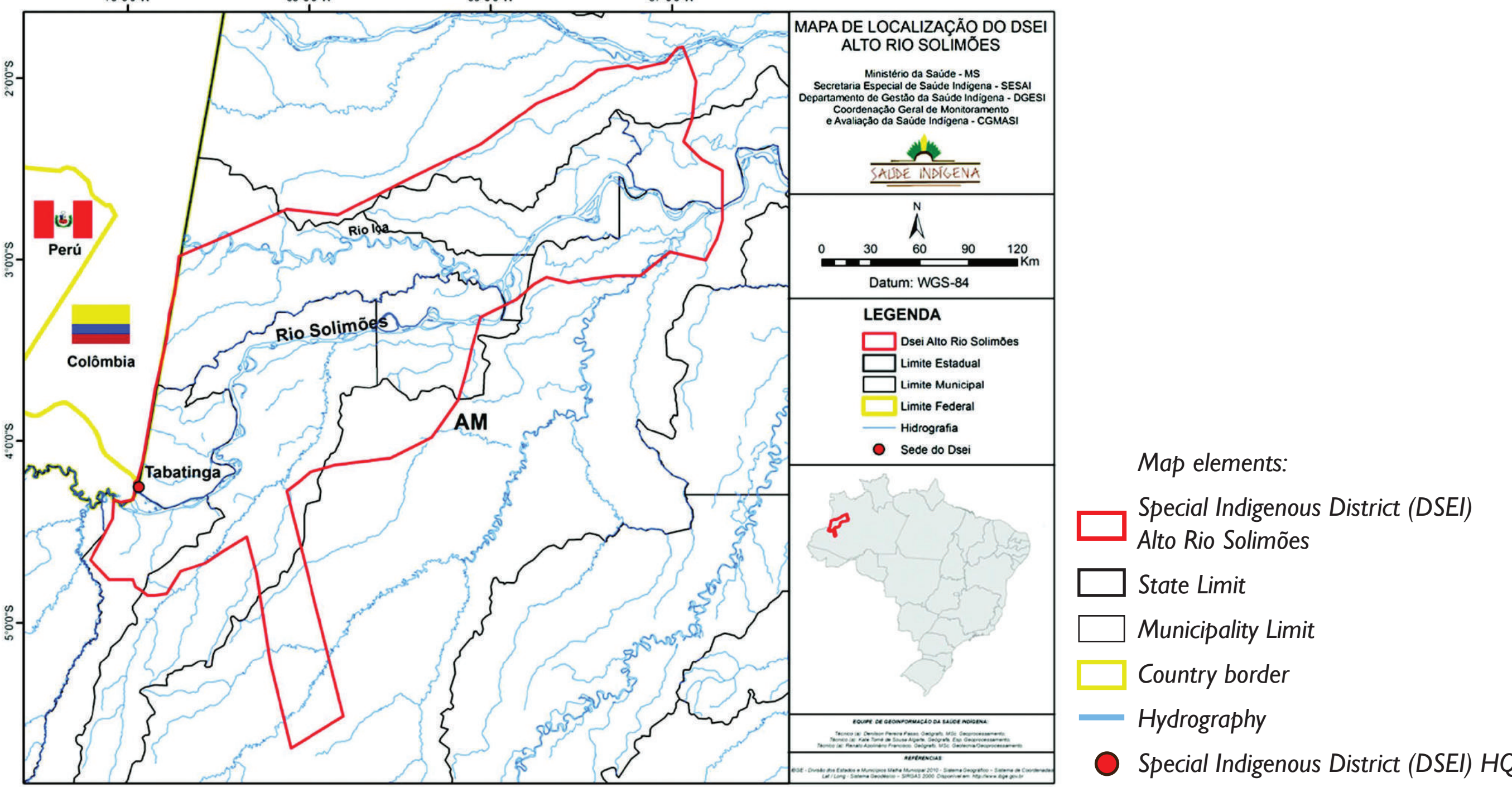
Indigenous woman and girl from the Region of the Alto Solimões

Methods

The study focused on the indigenous areas of Umariçu I (population: 2374; 2016), Umariçu II (population: 5389; 2016) and Belém do Solimões (population: 10.918; 2016). The project was developed in four stages.

Stage I - Revision of literature and official data avia

Before the fieldwork, an analysis and systematization of demographic, epidemiological, historical and ethnographic data was carried out, involving the Alto Solimões microregion and the threefold border, with emphasis on the Tikuna people's trajectory and violence situations that they face.

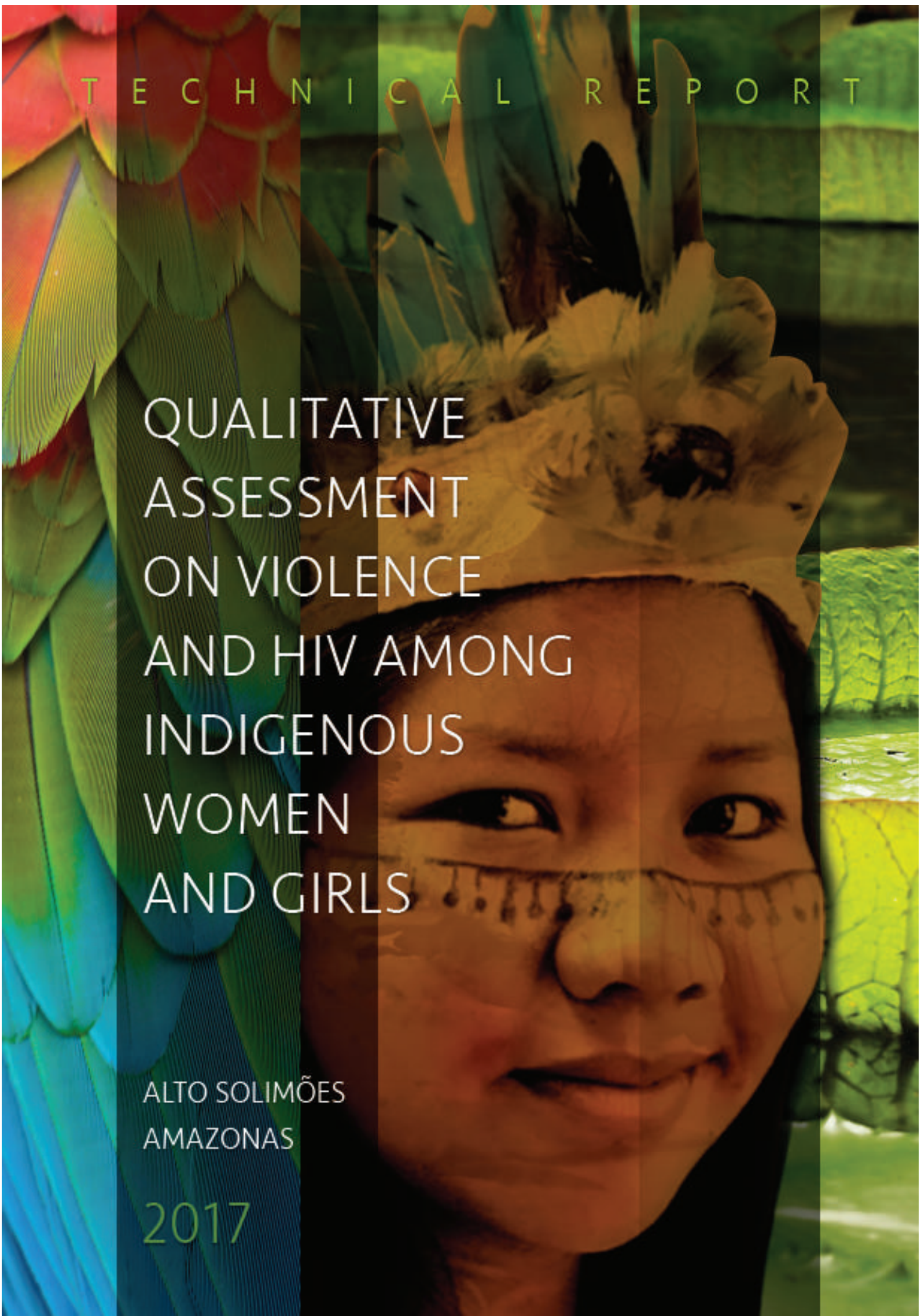


Stage II - Fieldwork

The fieldwork was composed of two distinct moments. The first of these consisted of inter-agency mobilization through meetings and discussions with government and non-governmental public officials directly or indirectly involved in HIV and violence issues. Special attention was paid for the perception of these stakeholders on the problems in the indigenous communities and possible interventions. The second moment involved intra-community mobilization through meetings and discussions with indigenous men and women previously indicated by the community leaders in each locality. We counted on the support of Portuguese-Tikuna Translators for the exercise.

Stage III - Systematization and analysis of field data

The final stage consisted of the systematization and analysis of data and field information and the preparation of the report.



Results

The cross-border setting brings several public problems. In addition to being a region of difficult access to public services, the continuous flow of goods and people makes it an area of convergence of alcohol and other drug abuse, such as cocaine, and sexual practices, leading to various forms of physical and psychological violence. In the region, there are also major police operations to seize drug trafficking, as it is a strategic outpost for these illicit goods between countries.

Assessing the problematics of violence against women within the indigenous community remains a challenge. The subject is seen as a taboo among these populations. In the rounds of conversation, the community members showed a clear constraint in expressing concerns about violence against women and girls in their communities.

According to indigenous perception, the occurrence of HIV infections and violence within the indigenous communities of Alto Solimões is strongly related to the recreational environment of the three-border region, composed of parties and bars where alcohol abuse and other drugs are indiscriminately used in association with the practice of sex with "strangers" - category that in the native context, the indigenous interviewees refer to probable dealers/traders of illicit goods like drugs.

From the point of view of indigenous morality, people who are exposed to STIs or HIV are subject to, in their community contexts, receive some sort of sanction ranging from domestic reprimand to public spanking, resulting in suicides. As explained by health professionals, the fear of community sanctions hampers support to community members suspected of and/or diagnosed with STIs or HIV.

In the district of Alto Rio Solimões, health professionals have been collecting aggression records since 2011. Despite having gaps and inconsistencies, the data and graphs below provide an outlook of violence among indigenous people and show the relevance of the problem in these communities.

When broken down into type, there are more cases of physical violence, with 275 reported between 2011 and 2015, followed by 75 cases of psychological violence. Regarding the condition of assailant, out of 248 cases, around 84% of the assailants identified were under the influence of alcohol. There is an intrinsic relation between alcohol consumption and cases of violence practiced among the indigenous communities of Umariçu.



Figure 2. Reporting of assaults 2011-2015 (DIASI/DSEI-ARS, 2016)

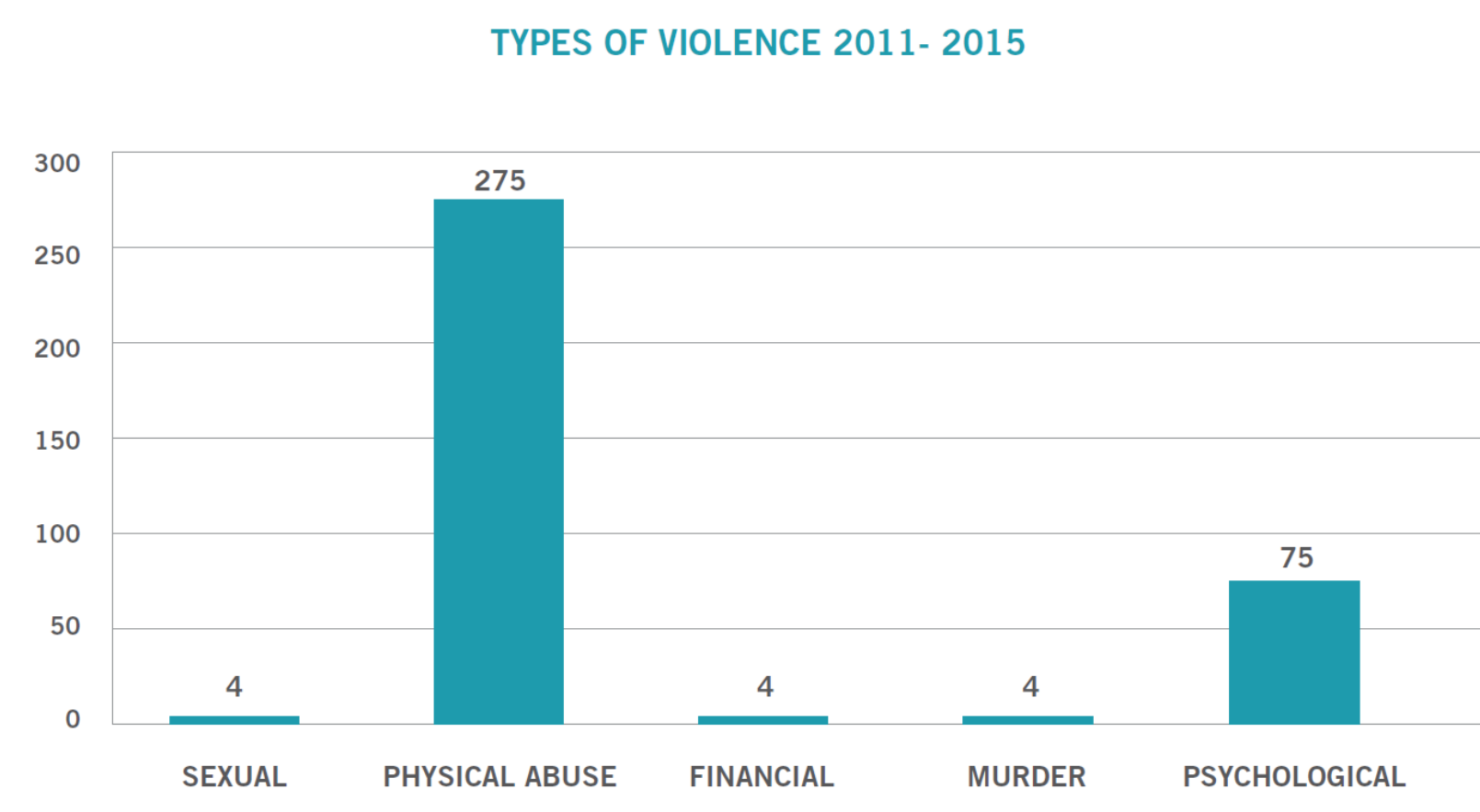


Figure 3. Types of violence 2011-2015 (DIASI/DSEI-ARS)

There is an intrinsic relation between violence, sexual and mental health and suicide cases. According to the professionals in charge of the area, the main problems that affect mental health within the Tikuna communities are due to the following: alcohol abuse, suicides, suicide attempts, violence and murders.

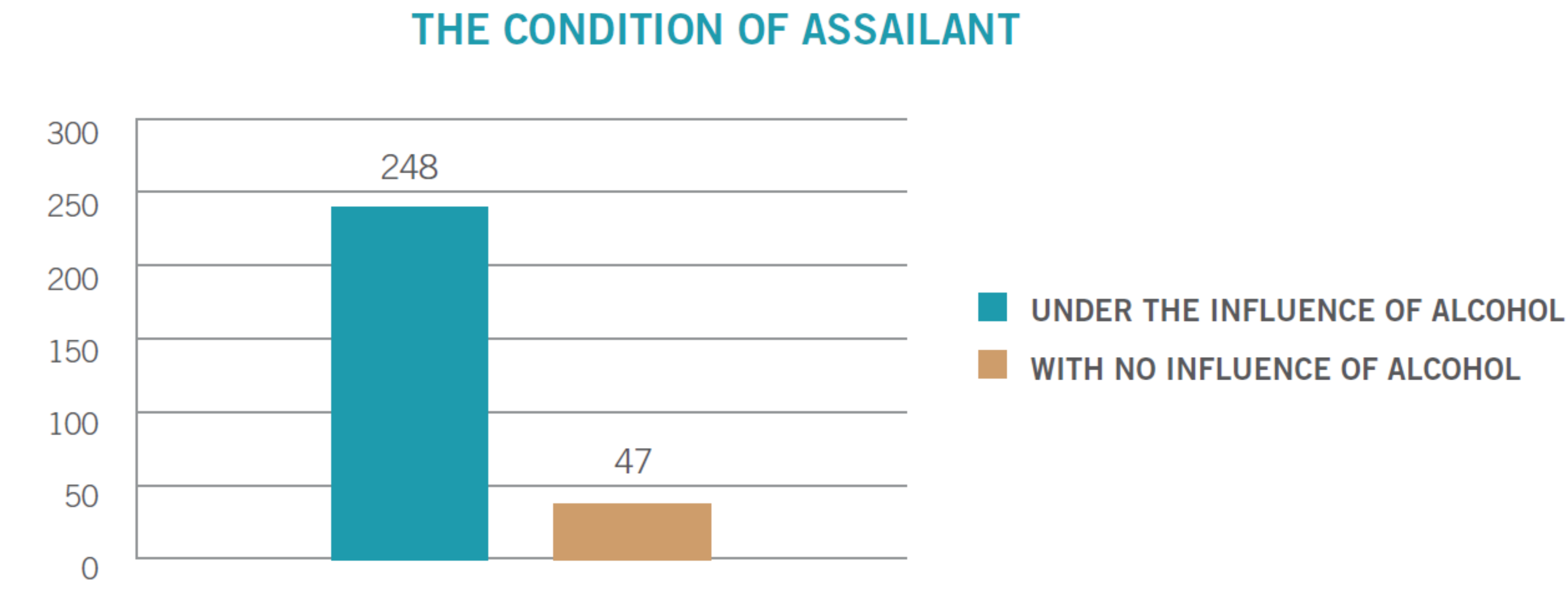


Figure 4. Condition of Assailant (DIASI/DSEI-ARS)



Launch of the project AmazonAIDS. The results of the Qualitative Assessment on Violence and HIV among Indigenous Women and Girls - Alto Solimões, Amazonas were also presented in the event

Conclusion

Violence is closely associated with the abuse of drugs/alcohol. Indigenous women who are victims of violence feel shame and fear; what limits their possibilities to cope with these situations. For example, interviewees stated having reported daily cases of violence against women, but they said that they were not the victims, referring to neighbors, acquaintances or relatives. This strategy certainly aimed at minimizing family conflicts after the meeting.

The study made a set of recommendations to tackle the issues identified. The recommendations expressed arise from the demands and suggestions made by the interviewees and collaborators of the assessment, community members and public officials. Courses of action are proposed which content aims at supporting initiatives towards community and interinstitutional development and feed future actions.

The recommendations were organized in eight courses of action: support to the strengthening of volunteer work, support to inter-institutional development, political education, support to the creation of employment, jobs and income-generation, support to cultural, recreational and sports initiatives, exchange of knowledge, public security and strengthening of the public health system. Although the indigenous living with HIV represent only 0.5% of all people living with HIV in the country, the impact for the individual is important. Sanctions from the community to people who acquire HIV can vary from domestic reprimand to public beating, resulting in ostracism or even suicide.



Three generations of indigenous women and girls from the Region of Alto Solimões in the state of Amazonas

Acknowledgements

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