# 70 - EPIDEMIOLOGICAL PROFILE OF A HIV/AIDS WOMEN GROUP IN A REFERENCE HOSPITAL FOR THE TREATMENT OF AIDS - NATAL/RN/BRAZIL

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# INTRODUCTION

Since twenty-seven years ago approximately life coexists with the epidemic of Acquired Immune Deficiency Syndrome (AIDS). Increasingly, AIDS is transposing the barriers and borders, building up a unpredictably between individuals from all continents and in full reproductive activity, with a fast rhythm among young people and women.

The epidemiological indicators have shown changes in the pattern of transmission of this epidemic, leaving the gay groups at risk for an increasing trend of heterosexual transmission (RED et al, 1999).

This change in the pattern of transmission, makes it is a rising frequency of infected women and hence the increase of vertical transmission of HIV infection, with increase in the number of cases of AIDS in children around the world (TOMAZELLI, 2003).

Since the beginning of the decade from 1980 until June 2007 were reported in Brazil, 407,211 cases of AIDS. Of this total, 131,127 occurred among women, demonstrating that the female is in frank rise of the epidemic in the country (BRAZIL, 2007).

Women are, in actuality, the group most vulnerable to AIDS, not only by its anatomo-phisiologic characteristics, but also by the social situation, economic and cultural with domination. His role in the family as caregiver, partner and, eventually, mother, puts them face the challenges of a disease that, despite being considered chronic after the advent of antiretroviral therapy has, even today, a fatal outcome (KEY et al, 2005).

The interest in developing this study came up with by living with HIV carriers, observation of rapid and significant changes epidemiological that this epidemic is experiencing through the, but also the importance in knowing who are these women infected by AIDS, and determinants that are associated with the transmission of the disease.

It is in this context that this work was developed with the objective of shaping the epidemiological profile of women living with HIV / AIDS attended in a reference service for the treatment of AIDS in Natal-RN.

# METHODOLOGY

This is an epidemiological study, descriptive and analytical, quantitative in nature, developed at the clinic of Giselda Trigueiro Hospital (HGT), a reference to treat AIDS, located in the city of Natal - RN / Brazil.

The sample comprised 33 women with HIV, registered and treated in this center of reference.

It obeyed the following inclusion criteria: a) accept participate in the survey as voluntary b) signing of a term of free and informed consent on the part of participants c) have confirmed the diagnosis of doctors with HIV d) are higher for 18 years, and) are in consultation at the clinic of the Hospital on the day of the interview. Were factors for exclusion: the non-signing of a consent form, and those who, voluntarily, wanted to depart during the gathering.

After approval of the HGT Board and project approval next to UFRN Human Being Research Ethics Committee, under paragraph. 142/04, the process of data collection was started, which occurred in the period between March and June 2006.

As a tool was used to collect an interview with structured questions, validated through a pilot study. It also appealed to medical records and to the database SINAN (National System of Aggravation of notification), available in the Hospital Epidemiology commission. For the data analysis was used EPI INFO software version 6.04.

# **RESULTS AND DISCUSSIONS**

33 mothers with HIV were interviewed, young people between 20 and 36 years, with an average age of 28 years. Regarding education, we observed that the greatest concentration of women have the elementary school (18), representing 54.5% of the respondents, 9 (27.3%) participants completed the first grade, and only 6 (18, 2%) attended the second degree, but not completed.

About religion, 28 (84.9%) are Catholic and 5 (15.1%) gospel. Another issue discussed on the profile of these women is related to marital status. It was observed that 6 (18.2%) were married, 9 (27.3%) separated, and the largest contingent, 12 (36.3%), was composed by single mothers. There were, among the participants 6 (18.2%) widows.

Giselda Trigueiro Hospital is a reference in state for caring for patients with infectious and contagious diseases; thus, it was noted that among those interviewed, 18 (54.55%) resided in Natal, while 15 (45.45%) came from other towns of the state. It is observed that in Brazil, the AIDS increasingly is internalising to the smaller cities (BRAZIL, 2003).

The predominant family income in the sample studied was a minimum wage, 17 (51.55%) participants, 11 (33.33%) received up to two minimum wages and 5 (15.15%) had no fixed income. It appears that the minimum wage of reference in the season was two hundred and sixty reais.

Data of family income corroborate the theory of impoverishment of the epidemic, according to Parker and Camargo Jr (2000). Some authors such as Bastos and Szwarcwald (2000), are related to the issue of social vulnerability and consequent impoverishment of AIDS epidemic in terms of economic and political. It is common that in poorer areas are brought together numerous adverse factors with regard to the lack of infrastructure, low availability of service and employment opportunity.

About bonds of work, most of the participants, 15 (45.4), played the role of a housewife (households), as tasks of caring for children. Other functions were related to the activities of domestic, hairdresser and SGA (General Services Assistant). Among the participants, 9 (27.3%) were unemployed.

The prevalent form of contamination of these women, according to interviews, was through heterosexual transmission, ie, 25 (75.8%) and stable partner. It was found that 8 (24.2%) acquired HIV through the use of injectable drugs. The highest concentration of diagnoses occurred in 2001.

Heterosexual women, married and monogamic have no idea of their risk through ignorance of sexual practices of their stable partners and is thus very doubtful as to when and how to negotiate safe sex, remain exposed and vulnerable (MUNHOS &

# SEABRA, 1996).

It is understood that, for most women, it is very difficult to accept and understand the sexual behavior of their partners, who often have other sexual relationships, male or female. This negotiation of reality may be contributing to the fact that their women resist the change in their sexual lives.

The limited change in women's sexual practices, even with the clear threat of infection by HIV, points to the fact that most women need to evolve with regard to prevention, being able to create strategies for processing and changes in their sexual behavior to protect themselves from HIV infection.

Regarding the use of condoms, all women interviewed who a stable relationship had denied using it during sexual practices. The negative attitudes about the use of condoms in sex, contrary to what is most commonly thought, is not a predominantly male attitude, considering that women also claim that this practice interferes with sexual pleasure. This behavior may be contributing to greater exposure of women to the risks of infection, especially taking into consideration the fact that a large number of women who think this way may never have made use of condoms.

The data for the year of contamination of the participants show that 1998 and 1999 there were two cases diagnosed each year. 2001 has been highlighted as the year with the largest number of diagnosed cases, 10 (30.30%).

The mothers in this study were identified as those responsible for the treatment of their children, also HIV-positive. The fact that the mothers is responsible for care or vow to take care of the child creates a work overload and goes on these women the burden of coordinating the treatment along with the activities of daily life (GAZZINELLI, 1997).

The results concerning the profile of mothers participating in the study, which is characterized by being young, having low education and contaminated between 18 and 22 years old, coincide with the prevalence of AIDS in Brazil in women during the period from 1980 to 2004 (BRAZIL, 2004).

Studies of the Health Ministry indicate that 55.5% of 19 years or more seropositive women have education as the primary school (BRAZIL, 1997). Current data indicate that the 90's concentrated the largest percentage of AIDS cases in women of reproductive age in full (between 25 and 34 years). There was, in 2000, a percentage increase of 15.2% of pregnant women infected comparing to 1980 (BRAZIL, 2003). This study showed that 17 (51.55%) of the interviewed persons have been contaminated between the years 2000 and 2001.

Increasing in cases among heterosexuals characterizes what has been called a AIDS "process of feminization". In 1983, the number of cases reported in Brazil corresponded to the proportion of 40 men to 1 woman; from 1998 the proportion is 2 to 1, with strong tendencies to become 1 to 1 (BRAZIL, 2002).

Some factors are suggested for the greater female vulnerability to HIV infection in an unprotected sexual encounter: viral load in the sperm; greater contact area (vaginal canal), sexual intercourse during menstruation, often being the bearer of Sexually Transmitted Diseases (STD), undiagnosed, asymptomatic, which increases the known risk of infection (BORGES, 2000).

As for social vulnerability, especially in poor countries, still is required that the woman experiencing unequal relations of power, economic dependence and sexual submission. These issues difficult the adoption of preventive practices to HIV and other STDs, because it involves negotiation with the male and requires reflection on the very female sexuality that, in most cases, was experienced under the aegis of silence and censorship (BORGES, 2000).

About education, data from the Health Ministry confirm that the lower the level of schooling, the higher the probability of AIDS incidence, which confirms this research findings (VIEIRA et al, 2001).

Study developed by Fonseca et al (2003), about the profile of HIV positive women also indicated as main occupation household activities (housewife), as findings of this study.

Data found in this study are corroborated by the current profile of the epidemic. If during the 80's almost all the cases were caused by male and homosexual sexual transmission, along the nineties there was the prevalence among poor, women and heterosexual sexual transmission (BRASIL, 2003).

The data are best viewed in Table 1.

Considered variable	f	96	
Age	0.25.27	- Ariold 2011	
- 20 years 25 years -	12	36,4	
-  25 years 30 years -	8	24,2	
- 30 years 35 years -	9	27.3	
- 35 years 40 years -	4	12,1	
Family income			
<ul> <li>Minimum wage</li> </ul>	17	51,5	
-2 salaries	11	33,3	
- No income	5	15,2	
Religion			
- Catholic	28	84,8	
- Gospel	5	15,2	
Occupation			
- Housewife	15	45,5	
- Employee	9	27,3	
- Unemployed	9	27,3	
Schooling			
<ul> <li>Elementary school</li> </ul>	27	81,8	
- Secondary school	6	18,2	
Way of contamination	50		
<ul> <li>Injecting drug users</li> </ul>	8	24,2	
- Heterosexual relation	25	75,8	
Marital status			
- Single	12	36,3	
- Split	9	27,3	
- Married	6	18,2	
- Widow	6	18,2	
Diagnosis year	2	510	
- 1998	2	6,1	
- 1999	2	6,1	
- 2000	7	21,2	
- 2001	10	30,3	
- 2002	8	24,2	
- 2003	4	12,1	
Total	33	100,00	

Source: Data collected by the researcher

# CONCLUSION

In this research, the women interviewed were mostly young, low income, with little schooling, and contaminated by unprotected heterosexual relationship, which somehow brings the concept of noted already widely publicized the feminization of AIDS, following the trend of other Brazilian cities.

The vulnerability of women about HIV, which is evidenced by the current profile cases of the epidemic, shows the fragility of the mechanisms for their protection, caused by the enormous limitations of women in the area of their personal relations, their economic and social inferiority.

In the current social moment, it is observed to be a part of many technologies have been developed for the prevention of pregnancies and providing greater sexual freedom for women; the other, show the rise of HIV infections and the spread of sexually transmitted diseases, requiring corrective action to prevent women from the public.

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# EPIDEMIOLOGICAL PROFILE OF A HIV/AIDS WOMEN GROUP IN A REFERENCE HOSPITAL FOR THE TREATMENT OF AIDS - NATAL/RN/BRAZIL

ABSTRACT

AIDS epidemic presents today, in Brazil, among its prominent features, the feminization, which concerns the increasing participation of women in the total of registered cases in the country. The heterosexual relation is the main transmission that has contributed to the epidemic feminization. Therefore, the objective of this study was to trace the epidemiological profile of women living with HIV / AIDS attended in a reference service for the AIDS treatment. It is an epidemiological study, descriptive and quantitative analytical in nature, developed at the clinic of Giselda Trigueiro Hospital (HGT), a reference to treat AIDS, located in Natal - RN / Brazil. The sample comprised 33 women with HIV, registered and treated in this reference center. As main results, it was observed that women with HIV were in the range between 20 and 36 years, with an average age of 28 years. They came from Natal, 18 (54.55%). About the family income, 17 (51.5%) had a minimum wage, 11 (33.33%) two salaries and 5 (15.15%) had no income. The group had as prevalent form of contamination, the route of heterosexual transmission 25 (75.8%), from stable partner. Regarding education, we observed that the majority had the elementary school (18), representing 54.5% of the interviewees. It can be concluded that this survey, which interviewed women were mostly young, low income, with little schooling, and contaminated by unprotected heterosexual relationship, following the trend of the epidemic in Brazil and abroad.

Keywords: AIDS / HIV, Epidemiology, Women, epidemiological profile.

PROFIL ÉPIDÉMIOLOGIQUE D'UN GROUPE DE FEMMES AVEC LE VIH/SIDA DANS UN HOPITAL DE REFERENCE POUR LE TRAITEMENT DU SIDA NATAL/RN/BRESIL RE\$UMÉ L'épidémie de sida présente aujourd'hui, au Brésil, parmi ses éminentes fonctions, la féminisation, qui concerne la participation croissante des femmes dans le total des cas enregistrés dans le pays. La relation est la transmission hétérosexuelle de ce qui a contribué à la féminisation de l'épidémie. Par conséquent, l'objectif de cette étude était de tracer le profil épidémiologique de femmes vivant avec le VIH / sida ont assisté à un service de référence pour le traitement du sida. Il s'agit d'une étude épidémiologique, descriptive et analytique quantitative dans la nature, développé à la clinique de l'Hôpital Giselda Trigueiro (HGT), une référence pour le traitement du sida, situé dans la ville de Natal - RN / Brésil. L'échantillon comprenait 33 femmes avec le VIH, enregistrés et traités dans cette center de référence. Les principaux résultats, il a été observé que les femmes avec le VIH ont été dans la fourchette comprise entre 20 et 36 ans, avec une moyenne d'âge de 28 ans. La preuve même de la ville de Natal, 18 (54,55%) de la plupart du temps. Quant au revenu familial, 17 (51,5%) avait un salaire minimum, 11 (33,33%) de deux traitements et 5 (15,15%) n'avait aucun revenu. Le groupe a plus fréquente forme de contamination, la voie de transmission hétérosexuelle 25 (75,8%), de partenaire stable. En ce qui concerne l'éducation, nous avons observé que la majorité a l'école élémentaire (18), représentant 54,5% des personnes interrogées. C'est dans cette enquête, qui a interviewé les femmes étaient pour la plupart des jeunes, faible revenu, avec peu de scolarité, et non contaminés par relation hétérosexuelle, suivant la tendance de l'épidémie au Brésil et à l'étranger.

Mots-clés: VIH/SIDA, de la femme, profil épidémiologique.

### PERFIL EPIDEMIOLÓGICO DE UN GRUPO DE MUJERES CON VIH/SIDA EN UN HOSPITAL DE REFERENCIA PARA EL TRATAMIENTO DEL SIDA - NATAL/RN/BRASIL RESUMEN

La epidemia de SIDA presenta hoy, en Brasil, entre sus características destacadas, la feminización, lo que se refiere a la creciente participación de las mujeres en el total de casos registrados en el país. La relación es la transmisión heterosexual de lo que ha contribuido a la feminización de la epidemia. Por lo tanto, el objetivo de este estudio fue determinar el perfil epidemiológico de las mujeres que viven con el VIH / SIDA asistieron a un servicio de referencia para el tratamiento del SIDA. Se trata de un estudio epidemiológico, descriptivo, analítico y cuantitativo en la naturaleza, desarrollado en la clínica del Hospital Giselda Trigueiro (HGT), una referencia para tratar el SIDA, que se encuentra en la ciudad de Natal - RN / Brasil. La muestra comprende 33 mujeres con el VIH, registrados y tratados en este centro de referencia. Los principales resultados, se observó que las mujeres con el VIH se encontraban en el rango entre 20 y 36 años, con una media de edad de 28 años. Los mismos datos de la ciudad de Natal, 18 (54,55%) de la mayoría. En cuanto a los ingresos de la familia, 17 (51,5%) tenían un salario mínimo, 11 (33,33%), de dos sueldos y 5 (15,15%) no tenían ingresos. El grupo tenía como forma predominante de la contaminación, la vía de transmisión heterosexual 25 (75,8%), de pareja estable. En cuanto a la educación, hemos observado que la mayoría tenía la escuela primaria (18), lo que representa el 54,5% de los entrevistados. Es en esta encuesta, que entrevistó a las mujeres eran en su mayoría jóvenes, de bajos ingresos, con poca escolaridad, y contaminados por relaciones heterosexuales sin protección, siguiendo la tendencia de la epidemia en el Brasil y en el extranjero.

Palabras clave: VIH/SIDA, la Mujer, el perfil epidemiológico.

### PERFIL EPIDEMIOLÓGICO DE UM GRUPO DE MULHERES COM HIV/AIDS EM UM HOSPITAL DE REFERÊNCIAPARA O TRATAMENTO DA AIDS - NATAL/RN/BRASIL RESUMO

# A epidemia da Aids apresenta hoje, no Brasil, dentre as suas características predominantes, a feminização, que diz respeito à crescente participação das mulheres no total de casos registrados no país. A relação heterossexual é a forma de transmissão que mais tem contribuído para a feminização da epidemia. Portanto, o objetivo deste estudo foi o de traçar o perfil epidemiológico de mulheres portadoras de HIV/Aids atendidas em um serviço de referência para o tratamento da Aids. É um estudo epidemiológico, descritivo e analítico de natureza quantitativa, desenvolvido no ambulatório do Hospital Giselda Trigueiro (HGT), referência no tratamento da Aids, situado no município de Natal RN/Brasil. A amostra foi composta por 33 mulheres portadoras de HIV encontravam-se no intervalo entre 20 e 36 anos, com idade média de 28 anos. As mesmas proviam do município de Natal, 18 (54,55%) em sua grande maioria. Quanto à renda familiar, 17 (51,5%) possuíam um salário mínimo, 11 (33,33%) de dois salários e 5 (15,15%) não tinham rendimento. O grupo teve como forma de contaminação prevalente, a via de transmissão heterossexual 25 (75,8%), de parceiro estável. Em relação à escolaridade, observou-se que a maioria possuía o primeiro grau incompleto (18), correspondendo a 54,5% das entrevistadas. Conclui-se, nesta pesquisa, que as mulheres entrevistadas eram majoritariamente jovens, de baixa renda, com pouca escolaridade, e contaminadas através da relação heterossexual desprotegida, seguindo a tendência da epidemia no Brasil e no mundo.

Palavras-chave: Aids/HIV, Epidemiologia, Mulheres, Perfil epidemiológico.