Gender Equity in Mexico’s Response to HIV

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HIV Epidemic in Mexico

Non-generalized epidemic

- Adult HIV prevalence (%): 0.3
- Persons living with HIV: 200,000
- Women living with HIV: 57,000

Most-at-risk populations (MARPs)

- Men who have sex with men (MSM)
  Challenge: Perception HIV is a homosexual problem
- Transgendered women
  Challenge: Low access and use of health services
- Women with limited resources
  Challenge: MSM-focus can leave women vulnerable
Opportunities

Mexico City Government condemns discrimination based on sexual orientation

- Guidelines for discrimination-free services (Oct. 2008)
- Public service mandated to honor rights

National government commitment to address gender, diversity, and HIV

- Mexico Declaration on “Prevention through Education” (Aug. 2008)
- Data collection by ministers of Education and Health to inform national curricula for MARPs

International partners focus on MARPs

- UNDP, PAHO, UNAIDS, and USAID
Gender Equity in Policy Implementation

Analysis
- Policy
- Financing
- Data
- Gender

Advocacy and Dialogue
- High-level policy dialogue
- Engage and empower MARPs (MSM, TG, Women)
- Partner/train health service providers
- Multisectoral coordination and action

Action
- Equitable health services for MSM and transgenders
- HIV+ women’s network joins policy dialogue
Commitment to Gender Equity Resulted in

Health services for vulnerable populations
- Transgender clinic open in Mexico City; services adapted in other regions
- Clinics respond to MSM and vulnerable women

Leaders against discriminatory practices
- Public officials and clinicians become policy champions and implementing leaders
- Referral systems adopted and financed

Women engaged in advocacy and dialogue
- Network of HIV+ women formed (*Mexicanas Positivas Frente a la VIDA*)
- Network elected to National AIDS Coordinating Committee

Photo by: Ken Morrison
Lessons Learned

• Involving communities promotes sustainability

• Building alliances (state, national, international) strengthens response

• Willingness and interest of health professionals are critical

• Involving all stakeholders requires more time—but yields more sustainable results

• Helping MARPs to help themselves must be the focus

Photo by Shawna Nelles
Thank you