

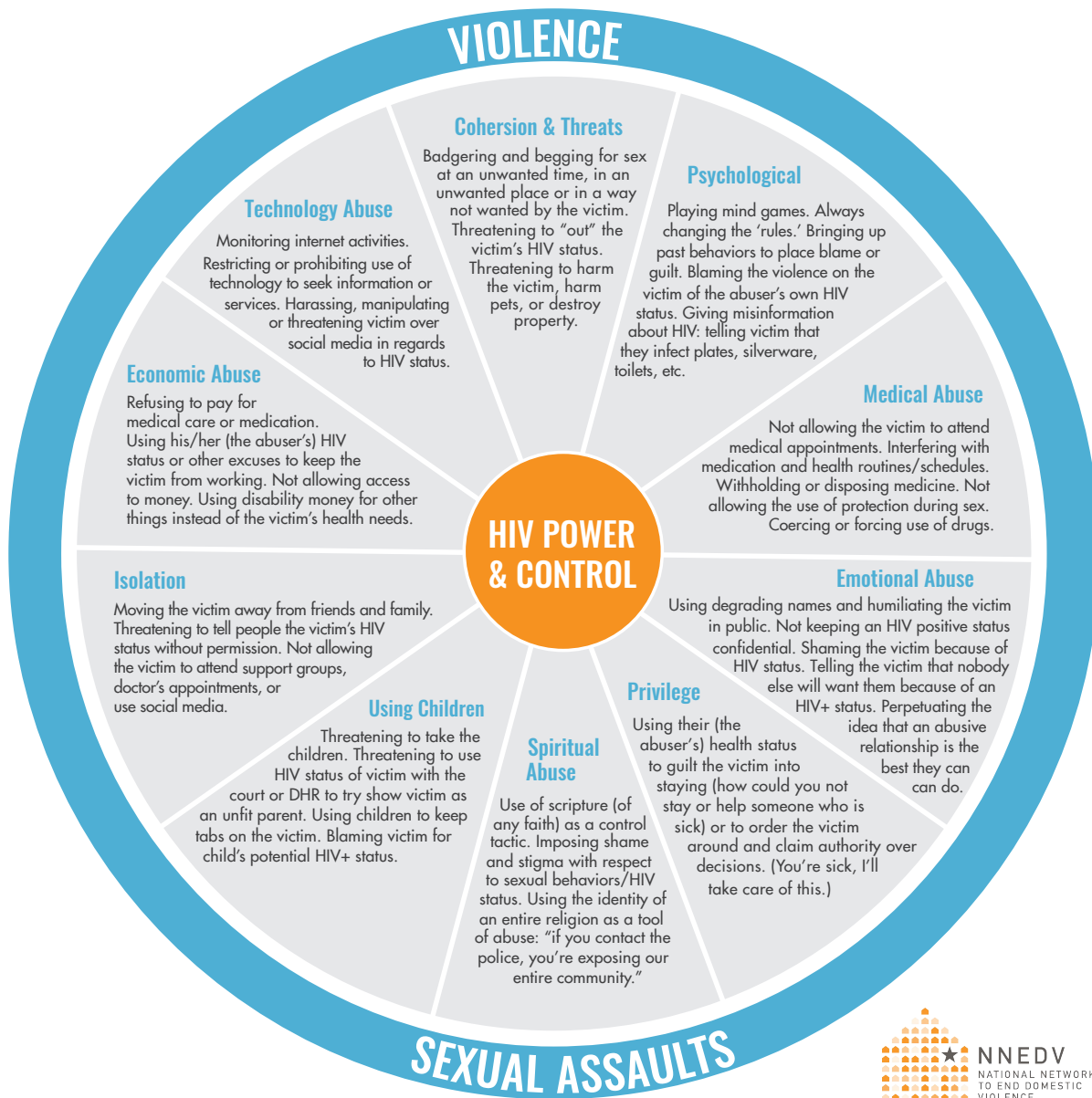


Positively Safe:

THE INTERSECTION OF DOMESTIC VIOLENCE & HIV/AIDS

HIV POWER & CONTROL WHEEL

Domestic violence (DV) is an act or pattern of acts used by a person to gain or maintain control, harm, threaten, intimidate, harass, coerce, control, isolate, restrain, or monitor another person in a current or former intimate relationship or a social relationship.





The HIV status of either or both the victim and abusive partner gives the abusive partner additional means of control. The wheel and the below examples clarify what domestic violence can look like when either or both partners have HIV/AIDS.

MEDICAL ABUSE

- An abusive partner may interfere with the victim's health care by withholding, throwing away, or hiding medications, canceling medical appointments, or preventing the HIV-positive partner from receiving needed medical care.
- An abusive partner living with HIV/AIDS may even do the same things to themselves, in an attempt to blackmail the victim.
- An abusive partner may make many, if not all, of the decisions about their partner's reproductive health; for example, forbidding the use of birth control or forcing their partner to have an abortion.

PSYCHOLOGICAL

- An abusive partner may threaten to "out" a current or former partner's HIV status to friends, family, co-workers, etc., before they are ready. The fear of the stigma attached to HIV/AIDS can pose an additional threat to 'being outed'.
- An abusive partner may lie or not tell their former or current partner about their HIV/AIDS status with the intention of infecting the other person.

EMOTIONAL ABUSE

- An abusive partner living with HIV/AIDS may suggest that their condition will worsen or they will die if the victim ends the relationship.
- The abusive partner may taunt the victim living with HIV/AIDS saying, "Who would want to be with you?" Victims may perceive this to be true if they are dependent on their abusive partner for housing, nutrition, health care, or other forms of support. The additional power that accompanies this threat is that the victim may be afraid of dying alone and/or that the abusive partner, to whom the victim often has a strong emotional connection, will die alone.
- The victim may also fear that family, friends, and/or people in the community who do not understand or are not aware of the abuse may fault and turn against them for leaving the HIV-positive abusive partner who may be sick and/or perceived as vulnerable.
- An abusive partner may make moral judgments about a victim's HIV/AIDS status and verbally insult their partner regarding appearance, physical abilities, or economic burden.



PRIVILEGE

- An abusive partner may use their HIV status to control and manipulate the victim into staying in the relationship. They may also use the victim's HIV status to assert their authority in making decisions for the HIV-positive victim.
- An abusive partner living with HIV may infect, or threaten to infect, the victim.
- The threat of violence can limit a victim's ability to negotiate condom use and other sexual practices/behaviors that would decrease her/his risk of infection or re-infection.

USING CHILDREN

- Questioning the ability of the partner living with HIV to provide continuous support (emotional, economic) for children may be a tactic used to undermine the victim as a parent and/or to influence their children's view of the victim.
- An abusive partner may threaten to take children away and/or deny the partner living with HIV access to children.
- An abusive partner may threaten to use a victim's HIV status due to drug use or sexual partners outside the relationship in legal proceedings regarding the custody of their children.

ISOLATION

- An abusive partner may take advantage of an HIV-positive partner's poor health by using it as a rationale to limit contact with other individuals.
- An abusive partner may limit or interfere with the victim's ability to discuss and/or get support for their HIV status with friends, assistance programs, or support groups.
- Using physical limitations to keep the victim separated from outside community can be used to limit a victim's interactions with other.
- Threatening to tell friends/family the victim's HIV status if they spend time with other people.

ECONOMIC ABUSE

- An abusive partner may take advantage of the victim's health by assuming sole power over all the finances and financial decisions to deepen their partner's dependency.
- Denying access to financial resources for expenses related to HIV/AIDS; i.e. medication, medical care, nutritional services, is a tactic that can be used to assert control over an HIV-Positive partner.



COERCION & THREATS

- The threat of physical violence can become more potent to victims living with a disability or illness, who may be too weak to defend themselves or may fear the HIV/AIDS-related complications (easy bruising, infections, slow or difficult healing) that can result from being subjected to physical harm.
- Additionally, the emotional stress associated with surviving an abusive relationship can adversely affect a person's already weakened immune system, potentially resulting in exacerbated symptoms, and further compromising the health of someone with HIV/AIDS, or another life threatening illness or disability.
- Reproductive coercion is defined as threats or acts of violence against a partner's reproductive health or reproductive decision-making. It includes sex without consent, pressuring someone to become pregnant against their will and interfering with methods of birth control, such as refusing to wear a condom, poking holes in condoms, refusing the victim from using birth control. In an abusive relationship, asking an abusive partner to use a condom may lead to the abusive partner accusing the survivor of cheating on him or not trusting him. This reaction can be followed by physical or sexual violence.

ADDITIONAL RESOURCES:

Find more information about Domestic Violence, HIV/AIDS, and the intersection of DV and HIV/AIDS on our **Fact Sheets** in the *Positively Safe Toolkit*.