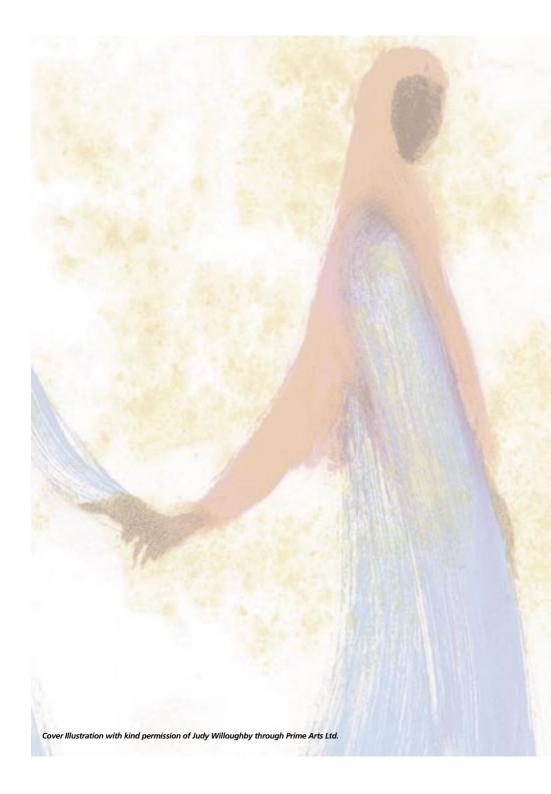


# What Every Woman Should Know

A Comprehensive Information and Advice Leaflet For Black and Minority Ethnic Women



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# Introduction

Sexual health is part of an essential package of health care and education. It is a means to the goal of women's empowerment, but it is also a human right and includes the right to choose. Women worldwide have a primary responsibility to care for family and the community as a whole. We have become very good at looking after other people's health, but not good at prioritizing our own health.

This leaflet is about HIV and sexual health. It will cover information about sexually transmitted infections, HIV transmission and related issues. As women, we should know about these issues as they affect our daily lives. Some of the subjects we cover may make you feel embarrassed, but please read on. This information is vital for your wellbeing. It will help you take the necessary steps.

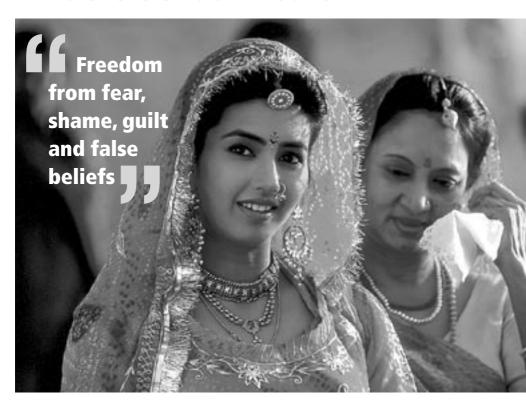
While sexual health is a health issue, the epidemic of HIV has become a gender issue. There is global proof that both the spread and impact of HIV is not random, but disproportionately affecting women, who are socially, culturally, biologically and economically vulnerable.

- The latest statistics published by UNAIDS/ WHO in 2007 indicated that women in many parts of the world are increasingly being infected with HIV. An estimated 15.5 million women half of the 30.8 million adults are living with HIV.
- In 2008 in the UK, women account for 37% of the HIV diagnosis and twice as many African women are diagnosed each year. (Health Protection Agency)
- The STI diagnosis among young women of age 16-24 has also increased in the UK about 67% in 2007 compared to 48% young men.

- 1 in 4 women will be a victim of domestic violence in their life time. The World Health organisation has reported that up to 70% of female murder victims are killed by their partner.
- The UK has the highest teenage births and abortion rates.
- Number of abortions has also risen to approximately 42 million worldwide. In UK 2007, 20,289 women under 18 had an abortion of these 4, 376 were under 16 (Family Planning Association, fpa)
- The total number of women who have undergone female genital mutilation (FGM) in England & Wales is estimated at 66,000 (FORWARD 2007)

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# What is Sexual Health?



### WHO defines sexual health

- A capacity to enjoy and control sexual and reproductive behaviour in accordance with sexual and personal ethics.
- Freedom from fear, shame, guilt, false beliefs and other psychological factors inhibiting sexual response and impairing sexual relationships.
- Freedom from diseases and deficiencies that interfere with sexual and reproductive functions.

We have different words for sex, some formal and some slang.

BME communities are used to talking about physical ailments, but are rarely encouraged to talk about how their body works, and how to look after themselves. It may be too embarrassing or women don't have the words to describe what they want to say. We all have different ideas about sexual health and what it means to us

We have different experiences of sex, some good, some bad and some indifferent.

In this leaflet we hope to share information so that we can as women take control of our sexual health. Not everything is known about sexual health, particularly about HIV and AIDS. Here is some basic information, which may be helpful to yourself, your friends and even your partner.

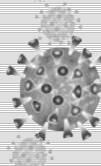
# What is HIV?

IV is a Human Immuno Deficiency Virus that attacks part of the body's immune system:the white blood cells called CD4, which are designed to fight off infection. HIV is found in significant amounts in the blood, semen, vaginal and breast fluids of HIV infected people.

HIV can be transmitted if:

- HIV is present in the body.
- The quantity of HIV in the body fluids is high (low levels of HIV reduce the possibility of transmission). Although HIV is present in tears, saliva and urine, there is NOT enough HIV found in these fluids to infect anyone. Although the highest level of HIV is present in blood and semen compared to vaginal fluids and menstrual blood, the amount of HIV present in these fluids is still enough for transmission.

# **Routes of HIV transmission**



The wine in enter more easily the interest on the delicate interest on the cervix and vaginar wall than the delicate skin on the penis. This is because the man's semen can stay inside the women's body for a while, in contrast to the vaginal fluid on the penis, which could dry or be wiped away easily.

# HIV can pass from one person to another in three main ways:-

- Although no proven case of HIV transmission has been found through oral sex (when a man or a woman stimulates the private parts of their partner with their mouth), it can be transmitted through unprotected vaginal and anal sex with a person who has HIV.
- Through blood and blood contact, including sharing injecting equipment like syringes and needles that are infected with HIV, and unscreened blood products or blood transfusion. (Since 1985, all blood and blood products are screened in the U.K.)
- A pregnant woman with HIV can pass on the virus to her baby in the womb, during birth or by breastfeeding, this is known as vertical transmission.

# Factors that increase vertical transmission

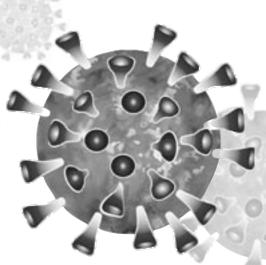
An HIV positive woman is more likely to transmit HIV to her baby if:

- She has advanced HIV infection or AIDS.
- She has high viral load or low CD4 count.
- She breast feeds.
- Her water breaks more than four hours before delivery.
- The labour is prolonged or difficult.
- She has frequent unprotected sex or uses illicit injecting drugs during pregnancy.

Remember you do not get HIV from every day contact like shaking hands, sharing toilets, cups, plates, hugging and living in the same house.

# What is AIDS?

once you are infected, your body's defence system will try to keep HIV infection under control for years without having any illness, even though the HIV cells are still increasing in number in your body. HIV uses CD4 cells to make more of itself, resulting in the weakening of your immune system. Eventually, it becomes difficult for your immune system to fight off the different types of infections you come into contact with. These are called opportunistic infections. AIDS is the name given for a collection of diseases, which can cause serious illness in both adults and children.



A.I.D.S

Acquired: something you are not born with.

**Immune: Affects the immune system.** 

**Deficiency: Breaks the immune system.** 

**Syndrome: A collection of different diseases** 

Most people with HIV feel healthy for a long time (sometimes ten years or more). They may not even know they have it and still can pass it to others through certain body fluids (semen, blood, vaginal fluids and breastfeeding).

### Do I need to have an HIV test?

The only way to tell that you have HIV is to have an HIV antibody test. Not knowing your HIV status can be quite stressful, but having the test will put your mind at rest. Whether the result is positive or negative, it will help you make decisions for your future life. If you are positive you can get the support and care you need to help you keep the HIV under control. If HIV is kept under control then you will feel well and be able to carry on with your life. You can get advice on how to reduce the risk of passing HIV to your baby. An HIV negative result tells you that you are not infected with HIV or the HIV infection is not detected in the blood because it is in the 'window period',

the first three months from the time of HIV infection. It also does not tell you whether you will be negative in the future, or whether your partner is negative. Your partner should take his own test.

Women from BME communities with HIV infection are known to be diagnosed as HIV positive during pregnancy, at GPs, or at Family Planning Services rather than Sexual Health Clinics. As a result they are diagnosed much later, mostly when they are experiencing HIV related illness.

If you are positive you can get the support and care you need

# Where can I go for the test?

You can get a free and confidential test at any Genito Urinary Medicine (GUM) clinic. There is usually a GUM department in most major hospitals in the U.K. If English is not your first language, it is the responsibility of the GUM clinic to provide you with an appropriate interpreter who understands HIV infection and the need for confidentiality.

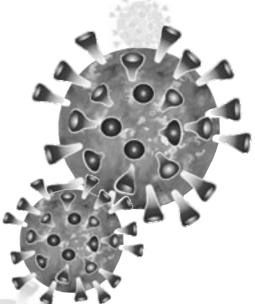
You will get a chance to talk to specially trained counsellors before having the test. The test requires a sample of your blood. All pregnant women in the U.K are now being offered HIV testing as part of antenatal care.



### **HIV Test**

The test requires a sample of your blood. Several tests will be carried out to make sure the result is correct. It is important to remember it can take up to three months from the time of HIV infection for the body to show positive in an HIV test result (Window Period). You might therefore be asked to take two tests three months apart.

If you are within 72 hours of an incident of possible exposure to HIV, ask for PEP (Post Exposure Prophylaxis) treatment from a sexual health clinic or at your nearest hospital accident and emergency department. PEP treatment can stop you becoming infected with the virus after you have been exposed to HIV. The sooner treatment is begun the higher the probability the treatment will be effective.



Staff at GUM clinics are very experienced, sensitive and will be happy to answer all your questions and provide support whatever your result.

# Do I have to tell someone that I am going for a test?

No, it is really up to you, but remember, it might be difficult not to tell them the result. The decision to tell your partner will also depend on what you think is right for you. There are several support groups where positive people meet. Women's groups often organise activities to help and share ideas. Although being honest and answering their questions helps to build children's confidence, if you find it difficult to tell your children about your status, speak to your nurse at the clinic, There are books available for children of different ages.

it can take up to three months from the time of HIV infection for the body to show positive in an HIV test

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# **Other Sexually Transmitted Infections (STIs)**



nyone who is having unprotected sex with an infected Apartner could be infected with sexually transmitted infections (STIs). You could have an infection for a long time without experiencing any kind of discomfort or symptoms. Although, many of the STIs are curable, delaying treatment could mean that the infection gets worse, leading to the damage of the fallopian tubes (the tubes that carry the eggs from the ovaries to the womb) resulting in infertility.

Although, many of the STIs are curable, delaying treatment could lead to damage or infertility

# Some of the common sexually transmitted infections include:

**Thrush:** It is a common problem for all women. It is caused by a fungus, which lives harmlessly in the vagina but becomes a problem when it overgrows. Symptoms include an itchy vagina and vulva, with or without whitish, lumpy or watery discharge. It can be set off by sex. It can be treated by antifungal drugs in creams applied directly to the genital area.

**Gonorrhoea:** Caused by bacteria, it affects moist parts of the body such as the vagina, mouth, throat and urethra. It can be passed from a pregnant woman to her baby during childbirth. You may feel pain when passing urine and have a white or yellow discharge. It can be treated by antibiotics, and to make sure that the treatment has worked, there might be a follow-up visit.

**Chlamydia:** Caused by bacteria, it affects the vagina and can also affect the throat and the eyes. A pregnant women can pass the infection on to her baby. There are no symptoms, but it can often be seen after many months, or not until the infection spreads to other parts of the body. Symptoms include watery discharge, pain when passing urine or when having sex, bleeding between periods and after sex, and lower abdominal pain. Chlamydia is easily treated with a course of antibiotics. Without proper treatment, it can lead to long-term pelvic pain, blocked fallopian tubes, infertility and ectopic pregnancy (pregnancy that occurs outside of the womb).

**Syphilis:** Caused by bacteria, it can progress through different stages, each with their own set of symptoms. Initially, a painless sore may appear on the genitals or mouth. This usually heals itself after four to eight weeks, then a rash can appear. After two years of infection, syphilis can no longer be transmitted to other people. However, untreated syphilis can affect the brain, skin and bones. If identified early, it can be treated with antibiotics.

**Herpes:** Caused by virus, sores develop near the genitals or mouth. The blisters can go away but could come back again. It can be transmitted by direct contact with a sore or blister. Herpes can be passed from a pregnant woman to her baby during childbirth. The first episode of Herpes is the most severe and usually requires antiviral tablets. Bathing the sores with salty water will help them to heal. It can be controlled but there is no cure for it.

**Genital Warts:** Caused by a virus, they grow around the genitals and appear a few weeks or many months after infection. They are lighter in colour than the surrounding skin. If untreated they grow large, having a cauliflower shape and spread. It can be itchy and sometimes causes bleeding. Warts can be treated using chemical paint and they can be frozen off using special equipment. Some warts may need to be surgically removed.

Hepatitis B: Caused by a virus, it is very infectious and can be spread by unprotected sex, by using a contaminated needle, and from an infected mother to her baby, mainly during delivery. It can also be transmitted through a blood transfusion in a country where the blood is not tested. Symptoms may not be seen, but the virus can be passed to others. Symptoms may include a short mild flu-like illness, nausea and vomiting, diarrhoea, loss of appetite, loss of weight, jaundice (yellow skin and whites of eyes, darkened yellow urine and pale faeces) and itchy skin. Injections are given for a period of 3-6 months and a blood test is taken to check that they have worked. Immunity should last for at least 5 years. You will be advised to have regular blood tests and physical check ups if you are diagnosed as having active Hepatitis B. Immunisation of the baby at birth prevents transmission of the virus.

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# **Preventive Measures**



Taboos associated with sex in many BME cultures have led quite a few women to feel embarrassed to get a check up for sexually transmitted infections. However, these infections could not be transmitted, if initially the necessary precautions are taken.

## **Condoms and Femidoms**

A condom acts as barrier between the penis and the woman's body. It stops the infected fluids passing from the man to the women or vice versa.

Femidom is a female condom that the woman inserts into her vagina before having sexual intercourse; this also stops any STIs passing between the partners.

**Condoms and** femidoms are the best methods used to prevent pregnancy, HIV transmission and cervical cancer.



There are various contraceptive methods available. Different methods suit people at different times of their lives. It is important to know how



effective they are and also the main advantages and disadvantages. Most contraceptives need to be prescribed. If your GP does not provide all the methods, they should be able to tell you of the nearest family planning clinic. Many sexual health clinics are also known to offer contraceptives.

Sometimes accidents happen; a condom can break or be left inside. If this happens, try not to panic. Although the potential for infecting a partner may be there, the likelihood of transmitting HIV is very small.

Condoms are available free in Family Planning Clinics, Genito Urinary Medicine (GUM) clinics, some GPs and many HIV charities like the Naz Project London. You can also buy condoms from pharmacies, vending machines and supermarkets.

- Condoms and femidoms are the best methods used to prevent pregnancy, HIV transmission and cervical cancer.
- If used according to instruction, a condom can be 98% effective while the femidom can be 95% effective.
- Condoms with the BSI Kite mark and femidoms with the European CE mark have thorough quality checks.
- Condoms come in different shapes, sizes and types to fit everybody.
- Femidom is not widely available free of charge like the condom.
- Lubricants can be used, but if you are using a male latex condom remember to use waterbased products and not oil-based products, such as body oils, creams, lotions, or petroleum jelly since they damage the latex and the condom is most likely to split.

# Some facts about contraception

Despite the different myths about contraception, a woman can still be pregnant if:

it is the first time she has sex.

she does not have an orgasm.

a man pulls out of her vagina before he comes she has sex during her period

she is not fully breastfeeding

she squirts water into her vagina whatever position the couple has sex

# Other contraceptive methods

There are several other contraceptive methods in addition to condoms. Remember none of the following methods of contraception can prevent you from HIV and STI infections.

**Contraceptive injection:** It is 99% effective, less than 1 woman in 100 will get pregnant in a year. Releases the hormone progesterone slowly into the body. This stops ovulation and thickens the cervical mucus to prevent the sperm meeting.

**Implant:** It is 99% effective, less than 1 woman in 100 will get pregnant in a year. Small flexible tube placed under the skin of the inner upper arm. Releases the hormone progesterone into the bloodstream to stop ovulation and thickens cervical mucus to prevent the sperm meeting an egg.

Intrauterine system (IUS): It is 99% effective, less than 1 in 100 will get pregnant in a year. A small plastic device, which releases the hormone progesterone, is inserted into the womb. It thickens the cervical mucus to stop the sperm from meeting an egg. It may stop an egg settling in the womb or stop ovulation.

Intrauterine device (IUD): It is (98-99)% effective depending on the type of IUD. Less than 1 to 2 women in 100 will get pregnant in a year. A small plastic and copper device is put into the womb. It stops the sperm meeting an egg or may stop an egg settling in the womb.

**Female sterilisation:** It is 99% effective. Failure rate in a lifetime is 1 in 200 women, depending on the method used. The fallopian tubes are cut or blocked so the egg cannot travel down to meet the sperm.

**Progesterone-only pill:** It is 99% effective, if taken according to instructions. One woman in 100 will get pregnant in a year. The hormone progesterone taken at the same time each day, thickens mucus to prevent the sperm meeting an egg or an egg settling in the womb. In some women it prevents ovulation.

**Diaphragm/cap with spermicide:** About 8 in 100 women will get pregnant in a year, but if used according to instructions it is 92-96% effective. It is a flexible rubber or silicone device used with spermicide, and is put into the vagina to cover the cervix. It must be specially fitted to make sure it is the right size.

**Combined pill:** It is 99% effective, if taken according to instructions. Less than 1 woman in 100 will get pregnant in a year. It contains two hormones, oestrogen and progesterone, which stop ovulation.

**Vaginal ring:** It is a flexible, transparent, plastic ring. It is placed in the vagina where it releases two hormones - estrogen and progestogen. These are similar to the natural hormones that women produce in their ovaries and are like those used in the combined oral contraceptive pill.

Natural family: It is 98% effective. Two women

in 100 get pregnant in a year. The fertile and infertile times of the menstrual cycle are identified by noting the different fertility indicators. This can indicate to you when to have sex without risking pregnancy.

**Breastfeeding can act** as a very effective contraceptive

# **Emergency Contraception**

If you had sex without using any kind of contraception or think your methods might have failed, there are two emergency methods you can use:

- Emergency pills, must be started up to three days (72 hours) after sex. They are more effective if started earlier after sex.
- An IUD, must be fitted up to five days after having sex.

# **Contraception** and breastfeeding

Breastfeeding can act as a very effective contraceptive when you are fully breastfeeding a baby of less than six months. It means you must be breastfeeding at regular intervals, day and night without missing one time, and you should not be having periods.

# **Contraception** and Menopause

Contraception needs to be used until menopause. It should be used even if a woman is under the age of 50 and has had no period for two years. If the woman is over 50, it still needs to be used for a year.



# **Negotiating Safer Sex**



Although women are constantly bombarded with images of the perfect body, most do not fit into that kind of description. We are all different and beautiful. However, insecurities about our shape can take over from time to time and we can lose our confidence, depending on how we feel physically or emotionally.

In the BME communities it is not always easy for a woman to talk about sex or persuade their partners to use condoms. Although it can feel embarrassing there is no shame in wanting to maintain one's sexual health. This can be achieved by being open and taking responsibility for oneself.

For some women talking about sex with their partner may feel very hard and could even be dangerous. Some men may have a range of excuses to avoid using condoms. These may include the following. "Do you think I have been unfaithful?"

An't feel anything when I wear condoms."

"If you loved me you wouldn't ask me to wear one."

"I lose my hard-on if I use a condom."

"Don't you trust me?"

"Leave it to me, it is under control, I know what I am doing"

"Why do I need to use a condom when you've been sterilised?"



# Many women say;

"If I asked my husband/boyfriend to use a condom, he'd get angry and accuse me of sleeping around."

"We have been married for ten years and we've never spoken about sex."

"I wouldn't dare say anything because it would give him an excuse to hit me."

Here are a few ideas of how you can approach the subject

"I saw this programme today about cervical cancer in women. It made me think about a lot of things and I want to talk to you about them. It is not about trust, it is about taking care of ourselves."

"The last time we went to your uncle's house for dinner, when the men were in the garden, the women started laughing and joking about sex and it suddenly occurred to me that we NEVER talk about sex."

Learning to communicate your feelings takes time especially if you have never talked about sex before. It can be scary and daunting. Remember to be patient, take your time and persevere. There are many benefits in talking openly.



"It has really brought me and my husband closer together. At first I thought he wasn't interested in talking to me about our sexual relationship but it turns out he was just embarrassed and was waiting for me to take the first step. Now we talk about everything and things feel a lot better."

"In my culture talking about sex isn't really accepted, but I have developed a sexually transmitted infection and sex was becoming very painful so I had to say something. I am glad I did now, things have really changed. I tell him what I like and what I don't like in our sexual relationship and he tells me too."

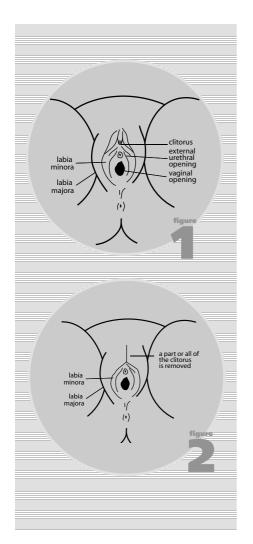
"I always insist on safer sex with my partners. If they don't want to use condoms I just forget it. The way I look at it is, if they really care about me they would use protection and if they don't it is their loss."

The responsibility to talk about sexual health should be shared between both partners. Communication is a two-way process and is constantly ongoing. If the thought of talking to your partner makes you nervous, talk to your female friends first. You will be surprised at how much you can learn. It can be a brilliant way of exchanging information and strategies for negotiating safer sex. It will boost your confidence to find ways of talking about the subject with your partner.

# **Health Awareness Tips**

# **Female Genital Mutilation (FGM)**

Female genital mutilation, often referred to as 'female circumcision', comprises all procedures involving partial or total removal of the external female genitalia. It is a cultural practice in many African and Middle Eastern communities. There are different types of female genital mutilation known to be practised today. They include:



## Types Of FGM

There are four main types of mutilations.

**Type I-** removal of the prepuce, with or without removing part or all of the clitoris (see fig. 2)

**Type II-** removal of the clitoris partially or totally cutting off the labia minora (see fig. 3)

**Type III-** removal of part of the external genitalia and stitching/narrowing of the vaginal opening, called infibulations (see fig. 4)

**Type IV-** pricking / piercing / incising the clitoris and / or labia, cauterisation by burning of clitoris and surrounding tissues; scraping (angurya cuts) of the vaginal orifice or cutting (gishiri cuts) of the vagina to cause bleeding or herbs into the vagina with the aim of tightening or narrowing the vagina; any other procedure which falls under the definition of FGM given above.

A traditional practitioner usually performs FGM with crude instruments and without anasthetic

The most common type of female genital mutilation is removal of the clitoris and the labia minora, accounting for up to 80% of all cases; the most extreme form is infibulations which constitute about 15% of all procedures.

# FGM often has severe psychological effects including anxiety and depression

# **Health Consequences of FGM**

The immediate and long-term health consequences of female genital mutilation vary according to the type and severity of the procedure performed. Immediate complications include severe pain, shock haemorrhage, urine retention, ulceration of the genital region and injury to adjacent tissue. Haemorrhage and infection can cause death.

Most recently, concern has arisen about possible transmission of HIV due to the use of the same instruments while undergoing multiple operations.

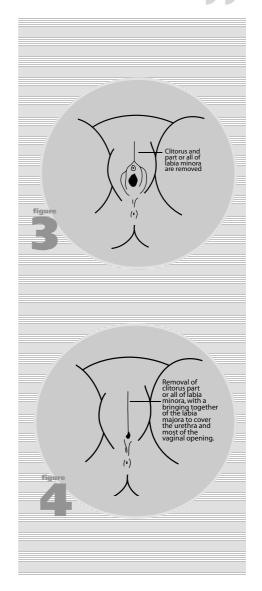
Long-term consequences include cysts and abscesses, scar formation, damage to the urethra resulting in disenablement to retain urine, painful sexual intercourse and sexual dysfunction and difficulties with childbirth.

Genital mutilation has often a severe psychological effect and may leave a lasting mark on the life and mind of the woman. In the longer term, women may suffer feelings of incompleteness, anxiety and depression.

# Reasons for performing FGM

A traditional practitioner usually performs FGM with crude instruments and without anaesthetic. Among the more affluent in the society, qualified health personnel may perform it in a health care facility. WHO is opposed to medicalization of all types of FGM.

The age of which FGM is performed varies from area to area. It is performed on infants a few days old, female children, adolescents and occasionally on mature women.





# The NHS offers free smear tests every three to five years

The reasons given by families for having FGM performed include:

**psychosexual reasons:** reduction or elimination of the sensitive tissue of the outer genitalia, particularly the clitoris, in order to reduce sexual desire in the female, maintain chastity and virginity before marriage and fidelity during marriage and increase male sexual pleasure;

**sociological reasons:** identification with the cultural heritage, initiating of girls into womenhood, social integration and the maintenance of social cohesion;

# hygiene and aesthetic reasons:

the external female genitalia are considered dirty and unsightly and are to be removed to promote hygiene and to make it appealing to sight;

**myths:** to increase fertility and promotion of child survival;

**religious reasons;** some Muslim communities practise FGM in the belief that it is demanded by the Islamic faith. The practice, however, predates Islam.

# **Cervical smears**

A cervical smear test is simple and quick. It checks the health of the cervix (lower part of the womb). For most women, it shows that the cells are normal and healthy. The signs that cancer of the cervix may develop can be spotted on the smear and cancerous growth can be stopped before it even

gets started. Regular smear tests are important. The NHS offers all women between the ages of 20 and 64 free smear tests every 3 to 5 years. You can get a smear test at your GP surgery or at GUM clinics.

# **Breast Awareness**

It is important to know how your body looks and feels. Being breast aware is about knowing the usual shape and feel of your breasts and recognising any changes.

Remember the following breast checklist

## Figure 5

Look for any changes, such as change in shape or size of either breast, a lump or thickness in the breast or armpit, dimpling or roughness of the skin, a nipple drawn in or changing direction, bleeding or discharge of the nipple, a rash or irritation around the nipple and an unusual pain or discomfort that lasts for more than a few days.

Turn from side to side whilst carefully looking at your breasts in a mirror.

Place your hands by your sides, raise your arms above head and place your hands on your hips with your elbows pushed forward.

Feel each breast in turn, keeping your fingers together and flat. Firmly move over the whole breast, including the nipple and the armpit. You may prefer to do this lying down or with a soapy hand while washing.

if you find any changes, go to your GP/practice nurse or Well Women clinic as soon as possible to get advice. It is important to know that most breast changes are not cancer.

One in 12 women in the UK develops breast cancer. It is one of the most common forms of cancer in women. Although breast cancer rarely affects women under the age of 35, women of all ages are advised to check their breasts.

# Breast cancer is one of the most common forms of cancer in women



# **Living well with HIV**



# **Treatment**

Finding out that you have HIV can be difficult because there is no cure. However, resting, exercising and eating well can keep HIV in check and result in positive outcomes in both physical and emotional well-being. Over many years of HIV infection, your immune system is weakened. Taking anti-HIV drugs can reduce the level of HIV in the body and prevent damage to your immune system. Your doctor may recommend that you take a combination of three anti-HIV drugs. Once your viral load has dropped, your immune system should begin to recover and your ability to fight infections is likely to improve. Anti-HIV drugs provided through GUM clinics are free.

Your decision on when to start therapy should be made in consultation with your doctor. Some people take treatment early on before there is much damage

> **Living with HIV can** feel like your rights or opportunities have been taken away

to the immune system. Others start when blood tests show they are likely to become sick in the near future. Some people wait until they are sick. Once you have started taking HIV medications your blood levels and health will be monitored regularly to ensure the medicines are working well, and your health is improving. If you do not understand something about the medication, ask your doctor so that it can be explained.

Many women also choose natural holistic approaches to treatment. There are many complementary therapies available such as massage, Shiatsu, acupuncture, aromatherapy, homeopathy and reflexology.



# **Preventing Infections**

iving well and avoiding stress also help prevent Lother minor illnesses and infections. Taking antibiotics can prevent serious HIV related chest infection such as Pneumocystis carinii pneumonia (PCP) and tuberculosis.

Using a condom when you have sex can be as much about maintaining your own health as it is about reducing the HIV risks to your partner. It can help you avoid getting other sexually transmitted infections (STIs) or passing them on. Other STIs, especially those that cause sores, can increase the risk of HIV transmission. You also need to protect yourself from being re-infected with other strains of HIV, which may be more aggressive or drug resistant. It can stress your immune system and increase your viral load.

# **Intimate Relationships**

iving with HIV can feel like your rights or oppor-Living with Tily call leer like yes. The tunities have been taken away. However, sexual feelings and the need for closeness remain the same as for anybody else. Every woman with HIV has different attitudes, hopes and expectations about sex and relationships.

Having HIV does not automatically give you the knowledge, skills and abilities to protect your own sexual health and that of others. For some, finding a partner who is also HIV positive is a good option, but for others a possible answer is to stay away from sex and relationships. This should not be because of people's views, but your own choice. The important thing to remember is that relationships are an important part of life. You need to avoid putting yourself or anyone else at risk of HIV and other STIs.



# **Healthy Eating**

daving HIV is unlikely to mean that you have to make drastic changes to your diet. However, if you Tare taking anti-HIV drugs it is important to eat a healthy diet as HIV medication causes changes to the way the body metabolises, uses and stores fat. Eating well regularly helps you to remain healthy.

A good diet consists of a balance of the following items:

- **starchy foods** such as bread, cereals, potatoes, rice and pasta provide carbohydrates for energy as well as minerals, vitamins and fibre. Try to eat four to six portions every day, one portion eauals to one slice of bread or one medium sized potato.
- fruit and vegetables provide vitamins, minerals and fibre. Five portions of fruit and vegetables daily are healthy. One portion is equal to a whole piece of fruit or a heaped serving spoon of vegetables.
- meat, poultry, fish, eggs, beans and nuts provide protein, mineral and vitamins. Try to eat two or three portions of these foods each

day. A portion equals to two medium eggs or a 100g meat/fish.

- dairy products such as milk, cheese and yoghurt provide protein, vitamins and minerals especially calcium. Three portions should be eaten a day. A portion equals a third of a pint of milk or a small pot of yoghurt.
- fat from cooking oils, butter, margarine, meat and other protein based foods provide energy. It is recommended that 30-35% of your daily calorie intake comes from fat. However, one should take note that too much fat could lead to weight gain and chances of developing heart disease and certain cancers.

# **Getting information**

Getting information related to HIV is one way of empowering yourself and this would also help you have a better life. Many sexual health clinics (GUM) and sexual health agencies have written information about HIV. If you would like to talk to someone about HIV, some provide advice or help-lines, support groups and one-to-one services are also provided. You can also attend workshops, seminars and forums where specialists or experts could answers your questions and where people share their experiences.

Getting information is one way of empowering yourself.



# **Conclusion**

Women should be aware of their health, particularly their sexual health, without feeling embarrassed. They should have a better understanding of how to keep their body well in order to enjoy a healthy life. Lack of control over their own sexuality and sexual relationship could lead to serious illness, both physically and emotionally. It could have a profound impact on their family and the community as a whole.

This booklet has covered issues related to sexual health, relationships and a few tips for healthy living. It aims to empower black and minority ethnic women who have long been affected by cultural and religious norms, and explores the need for comprehensive care. It also aims to help the wider community to understand some of the sexual health issues common to black and minority ethnic women.





# Acronyms Used

BME: Black and Minority Ethnic

FGM: Female Genital Mutilation

**GUM:** Genito Urinary Medicine

**NPL:** Naz Project London

STI: Sexually Transmitted Infections

# Useful Addresses in London

## **Family Planning**

Association (FPA) UK

2-12 Pentonville Road, London N1 9FP

Tel: 0207 837 4044 (9am-7pm)

### Light House West London

111-117 Lancaster Road London, W11 1QT Tel: 0207 792 1200

### Positively Women

347-349 City Road, London, ECIV 1LR Tel: 0207 713 0222

## Sexual Health (GUM) Clinics in London

### The Pasteur Suite, 8th Floor

Uxbridge Road Southall UB1 3HW

Tel: 0208 967 5555 Tel: 0208 442 6536

### **Central Middlesex Hospital**

Patrick Clements Clinic Acton lane

Acton lane

London NW10 7NS Tel: 0208 453 2221

### Haringey Health Care

St Ann's Sexual Health Centre St Ann's Road London N15 3TH

### Mortimer Market Centre

Off Capper Street London WC1E 6AU Tel: 0207 530 5000

### Archway Clinic

Whittington Hospital Highgate Hill London N19 5NF Tel: 0207 530 5800

### St Thomas Hospital

The Lambeth Wing Lambeth Palace Road London SE1 7EH Tel: 0207 928 9292

### King's College Hospital

15-22 Caldecot Road London SE5 9RS Tel: 0207 346 3448

### Charing Cross Hospital

Fulham Palace Road London W6 8RF 0208 846 7582

# **Naz Project London**

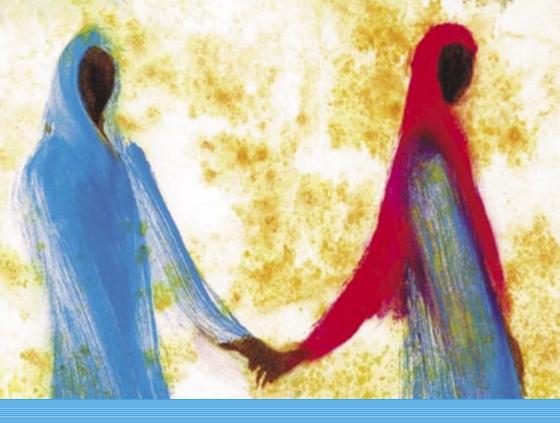
Naz Project London also provides support groups for people living with HIV/AIDS from Asian, Ethiopian, Eritrean, Muslim, Portugese-speaking, Somali and Spanish speaking communities, as well as a support group for lesbian and bisexual women of South Asian, Middle Eastern and North African origins.

Naz Project London 30 Blacks Road London W6 9DT

Tel: 020 8741 1879 Fax: 020 8834 0231

e-mail: npl@naz.org .uk website: www.naz.org.uk





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This booklet is compiled by Bisrat Yigletu, Naz Project London. If you have any comments about any of the information provided, please call Naz Project on 0208 834 0836.

NAZ PROJECT LONDON

An HIV and Sexual Health Service for Black and Minority Ethnic communities. Mobilizing BME communities for sexual health.

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