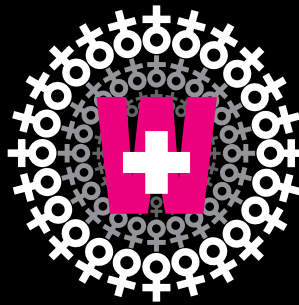


## Discussion Guide



**PWN**  
cares

*living & loving well with HIV*

*This discussion guide is designed to be just that--a guide. You don't need to use all of it. As a facilitator, you can pick and choose which questions to ask. Questions are in bold italics, marked "Q". Facilitation notes and suggestions (not necessarily to be read aloud) are in italics.*

**For more information about the PWNcares series and for links to stream or download the PWNcares video, visit [pwn-usa.org/pwncares](http://pwn-usa.org/pwncares).**

### Relationship Role Models & Ideals

In the video, the three women interviewed express very different experiences with conceptualizing relationships at a young age. Venita mentions her mother's issues with substance abuse and says she saw love as emotional blackmail rather than feeling safe. Teresa dreamed of finding a prince who would sweep her off her feet, and she wouldn't have to work. Tiommi describes her early ideas of relationships as being "so lost."

**Q: Could you relate to their early ideas of what a relationship was supposed to be?**

*This can be done either as a large group activity or a partner activity. If as a partner activity, you can use or adapt this script below.*

Turn to the person next to you. We're going to do a short activity. Practice active listening when you're not speaking. That means when you're listening,

you're not practicing what you're saying. You are truly listening to your partner. Put your hands together. The partner with larger hands is partner B. Partner A will answer the questions first, and Partner B's job is to actively listen and silently show your partner, with your face and your body, that you are paying attention to what they are sharing with you.

**Q: What were your earliest ideas about what a relationship should look like and where do you think those ideas came from?**

*Give participants 1-2 minutes to answer this question.*

**Q: Who were your relationship role models when growing up?**

## Intersections with HIV

The video pointed out some shocking statistics. Women who have been abused by partners are 48% more likely to acquire HIV. More than 60% of women living with HIV have been sexually assaulted at some point in their lives. That's 5x the rate of the general population! Over half of women living with HIV have experienced intimate partner violence. That's twice the reported rate of the general population.

We also know that this violence can have devastating consequences for health outcomes among women living with HIV. Women with HIV who have experienced recent abuse or threats are half as likely to be on HIV medication, and even when they are, they are less likely to be virally suppressed. They are also 3x more likely not to be linked to care soon after diagnosis.

**Q: What do you think makes women who have already experienced abuse or assault more likely to acquire HIV?**

**Q: How do you think being diagnosed with HIV can increase risk for violence?**

**Q: What are some steps we could take to reduce the risk of violence for women living with HIV? What steps could we take to help women from being in situations where they are vulnerable to both violence and HIV in the first place?**

## Intersections with HIV

Tiommi described feeling a sense of fear when deciding to disclose to her partner how he might react. She's not alone: According to the National Network to End Domestic Violence, almost a quarter of women in one study experienced physical abuse after disclosing their HIV status and almost half feared such a reaction.



**Q: Deciding whether or not to disclose one's status is always complicated, especially in a new relationship, or when one tests positive while in a relationship. What are common concerns about disclosure in a new relationship? What are some of the potential benefits or drawbacks of disclosing or not disclosing?**

**Q: Do you think it's possible to predict the kind of reaction a partner will have to disclosure? Why or why not?**

**Q: What are some steps a person living with HIV can take to protect their safety when disclosing to someone they fear could react violently?**

Venita was diagnosed in her forties, long after she had left her abuser, 18 years into her recovery from alcohol and drug addiction and after completing law school and starting a new career. She describes the effect her diagnosis had on her relationship at the time: Because she tested positive and he tested negative, her partner came to view her as a "project," a soul to be saved rather than the sexy woman she had been to him before her diagnosis—an experience that she describes as robbing her of her womanhood.



**Q: What would be your ideal reaction from a partner you've disclosed to? How would you want your partner to think and speak about you, HIV and your diagnosis after you've disclosed to them?**

Teresa was still in a relationship with her abuser when she was diagnosed, and describes some

ways he used her HIV status to mentally and emotionally abuse and control her: "No one else will ever love you like I do." "No one else is going to want you." Her longing to be loved and her fear of being alone were a big part of what kept her in the relationship.



**Q: How have you seen HIV status used to control people in relationships?**

**Q: HIV criminalization laws can further complicate disclosure of one's status to a partner, because abusers may use them as a threat when the person living with HIV wants to leave the relationship. What are some steps a person living with HIV can take to reduce the risk of being charged under HIV criminalization laws when leaving an abusive relationship?**

## Warning Signs

Abuse does not look the same in every relationship and can take many forms.

**Q: What are some different forms of abuse in relationships?**

Add any of these categories that don't come up and ask them to describe:

- **Verbal abuse** – putting your partner down, insulting them
- **Emotional abuse** – manipulation, guilt, threats, may result in feelings of worthlessness
- **Physical abuse** – hitting, scratching, strangling, kicking
- **Sexual abuse** – touching you without your consent, forcing you to have sex or to perform sexual acts that you don't want to
- **Financial abuse** – taking a partner's money, preventing the partner from getting or keeping a job, not sharing information about or access to family income, giving an "allowance" or refusing to provide money for necessities

**Q: It's not always obvious that a relationship will become abusive, and there's no reason to feel ashamed for being in an abusive relationship. What might be some early signs of abusive behavior in a relationship?**

If not already addressed, add:

- Unreasonable jealousy
- Someone trying to control where you go, who you see or talk to, what you do
- A partner who tries to isolate you from your

friends and family

- Explosive anger
- Violence against you, your children, your pets or property

**Q: How might children be used as a weapon in relationship?**

Make sure the following points get addressed:

- Abusers may **threaten to take the kids away** or to do something to do them
- Abusers may **use the kids to send messages** to the partner
- Abusers may try to **make the partner feel guilty** about their parenting.

In the video, Tiommi admits that there were a lot of red flags, but that she ignored them. Teresa says that she gave her abuser many "second chances," until he ended up putting her in jail. Venita says that her abuser hit her for the first time when she was 17, but she didn't leave at that point.

**Q: Why might people being abused stay in abusive relationships?**

**Q: What support is available for people being abused by their partners who choose to leave a relationship?**

**Q: What do you think we can do as a society to prevent people from feeling like staying in an unhealthy relationship is their best, or only, choice? What roles can the media, schools, churches, our community and our government play in promoting healthy relationships and safety for survivors?**



## leaving Safely & Healing

All three women in the video left their abusers in different ways. Teresa refused to go home with her abuser when he came to visit her in jail, offering to drop the charges if she went back with him. Tiommi left her abuser when he was not there, and told him he was not welcome anymore. Venita found the strength to leave when she realized that she could not break free from drug and alcohol abuse without leaving her abuser—she didn't even realize at first that the relationship was part of the problem. She found support, love and acceptance in 12-step meetings, and later through exercise and yoga. Teresa found support in women's groups in jail and then through her family once she went home.



But leaving can be scary, and for good reason.

**Q: Why might it be hard for a woman with HIV to leave an abusive relationship?**

Add any of these that are missed:

- You may feel like leaving is not an option because you do not have the financial means to live independently, secure your own housing and support yourself or your family.
- Abusers may use threats and coercion, as well as psychological abuse, to prevent their partners from leaving.

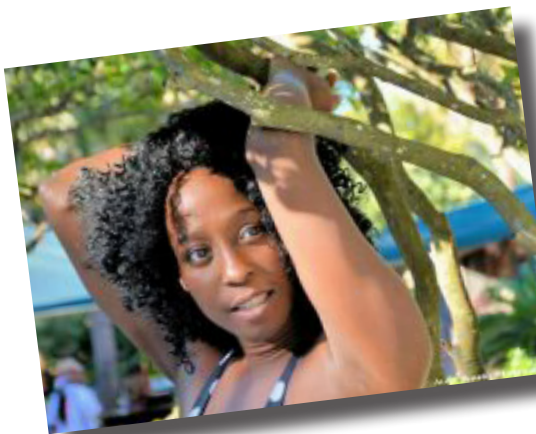
- Some abusers may threaten to disclose HIV status publicly, or to compromise your access to benefits you need to stay healthy and thrive.

It's important to know that when women are killed by their abusers, it's most often when they are trying to leave or soon after they leave their relationships. That's one of the reasons it's so important that we put supports in place when planning to leave.

The police and the courts often let us down when we report intimate partner violence. Also, for communities that are targeted by law enforcement, such as Black people, immigrants and people of trans experience, approaching the police and the courts for help may actually be dangerous.

**Q: If we don't feel safe calling on law enforcement or the courts to protect us when we are trying to leave relationships where intimate partner violence exists, what other forms of support can we look for? What are some alternatives for safe support? What steps can someone trying to leave such a situation take to help ensure their own safety and the safety of their children or pets?**

**Q: Knowing that economic insecurity is a big contributor to remaining in a violent home, what should we advocate for to make sure that survivors who want to leave are able to do so safely without risking homelessness?**



## Healthy Relationships

The descriptions Tiommi, Venita and Teresa use for what they now consider to be healthy relationships have many things in common. They talk about mutual respect; communication; genuine concern for the partner's wellbeing; trust; independence.

**Q:** *What does a healthy relationship look like to you? How do you/will you know when you are in one?*

**Q:** *What are some ways we can support our friends, sisters, mothers, daughters, cousins, granddaughters, etc., to avoid IPV situations and find healthy, loving relationships?*

## Resources

Fear of intimate partner violence may prevent women living with HIV from disclosing their HIV status to their partners. If you are worried about this or about any signs of intimate partner violence, call the

**National Domestic Violence  
Hotline: 800-799-SAFE (7233)  
thehotline.org**

Women with HIV who have survived or are experiencing intimate partner violence may suffer from depression or feel like their alcohol or drug use is out of control. This is nothing to be ashamed of. Help is available. Call

**SAMHSA's National Helpline:  
800-662-HELP (4357)**

Health care providers & domestic violence service providers can find a toolkit & trainings for addressing the intersections of HIV & IPV from the **National Network to End Domestic Violence** at:

**[bit.ly/nnedv-poz-safe](http://bit.ly/nnedv-poz-safe)**

Find more facts and statistics about violence against women living with HIV from Positive Women's Network - USA at:

**[pwn-usa.org/doa2015factsheet](http://pwn-usa.org/doa2015factsheet)**

Find more information and resources at

**[pwn-usa.org/pwncares](http://pwn-usa.org/pwncares)**



The #PWNCares series is made possible by the generous support of

Positive Women's Network - USA

