CULTURAL AND RELIGIOUS OBSTACLES TO MICROBICIDES USE FOR WOMEN IN LATIN AMERICA

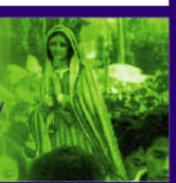
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The introduction of prevention methods controlled by women, as microbicides and the female condom requires the recognition and understanding of cultural and religious values of users and providers.

In most Latin American countries health care services are more oriented to cure than prevention. Sexual and reproductive health care is highly medicalized.

Cultural values are influence by Catholicism, the prevailing religion. Stereotypes of the sexual roles of men and women are permeated by machismo and reinforced by religion. Girls are educated to please and take care of others. The double standard of patriarchal sexuality is characteristic. The pureness and virginity demanded of women contrasts strongly with the freedom and permissiveness allowed men. Recognition of their own body and genital organs since childhood is severely refrained and punished.

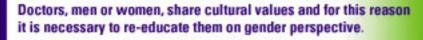




Gynecologic examination is surrounded by fear and shame.
The fact of being naked makes girls uncomfortable.
However, this feelings keeps girls from asking questions, it makes them quiet and passive.

The lack of knowledge about their body and the failure to appropriate themselves of their own bodies are some of the main constrains against female's prevention attitudes. The socially assigned role makes it difficult for a woman to perceive herself as a subject with distinct needs.

Periodical abstinence contraceptives methods as the Billings are often refused because they involve touching the vulva and introduce their fingers in the vagina. Diaphragm programs developed as Family Planning method in Sao Paulo and other cities, demonstrates the association to masturbation and self satisfaction.







WOMEN'S GROUPS EXPERIENCE IN LAC

Feminist women's groups in LA have had a two decades experience developing workshops for girls and women on sexuality and reproductive matters. This workshops used to be oriented to sexual and reproductive issues. Now it is necessary to include HIV/AIDS and preventive methods controlled by women as specific matters to allow women to cope with cultural and religious values which unable preventive attitudes and habits.