SVRI Forum 2022
Childhood

- Apartheid system - systematic racial inequalities
- At high school during 1976 student uprising
- Political awareness
Nursing and health activism

Urged to prepare ourselves for health system change and get skilled in research
1989
Research Technologist / Fieldworker – Trauma research

1995
1995
Started Master in Public Health

1989
1995
started Women’ Health Group with Rachel Jewkes

1995
pregnant
Early research

Our plan was to focus on SRH

Disrespect and abuse in maternity services - 1998
Men’s use of violence against intimate partners: A study of working men in Cape Town

Naeemah Abrahams

A thesis completed in fulfilment of the requirements for the degree of Doctor of Philosophy in the Faculty of Public Health Sciences
University of Cape Town
Cape Town, South Africa

August 2002

PhD: ? Why are we not doing research on perpetration
South African Gender Based Violence and Health Initiative (SAGBVHI)

- Formed in 2000 to improve the response of the South African health sector to GBV
- 15 South African organisations and individuals working at the interface of health and gender-based violence
- Focus on collaboration to ensure collective efforts and skills
- Collaborate with policymakers
- We held 2 conferences, we had research agenda settings workshops and a national study on sexual assault services
- Impetus for South African policies, guidelines, training manuals
Depressive symptoms after a sexual assault among women: understanding victim-perpetrator relationships and the role of social perceptions

N. Abrahams, R. Jewkes*, B. Mathews*
Gender & Health Research Unit, Medical Research Council, Tygerberg, Cape Town, South Africa
Gender & Health Research Unit, Medical Research Council, Pretoria, South Africa

Abstract
Objective: Although mental health impact of gender-based violence has been documented for many decades, the impact of the socio-cultural dimensions and type of perpetrator on mental health outcomes has not been described outside of developed countries. We present descriptive information on the prevalence of depression in women in South Africa and examine whether this differs...

The epidemiology of rape and sexual coercion in South Africa: an overview
Rachel Jewkes*, Naema Abrahams
Gender and Health Group, Medical Research Council, Private Bag X584, Pretoria 0001, South Africa

Impact of telephonic psycho-social support on adherence to post-exposure prophylaxis (PEP) after rape:
Naeema Abrahams*, Rachel Jewkes, Carl Lombard, Shamsa Mathews, Jacqulyne Campbell and Banwari Mehl
Gender & Health Research Unit, Medical Research Council, PO Box 59030, Tygerberg 7505, Cape Town, South Africa

Research article
Managing and resisting stigma: a qualitative study among people living with HIV in South Africa
Naeema Abrahams* and Rachel Jewkes*

*Corresponding author: Naeema Abrahams, Gender & Health Research Unit, South Africa Medical Research Council, PO Box 59030, Tygerberg 7505, Cape Town, South Africa.
Corresponding author: rjewkes@umc.ac.za
*With the author chalked out in this study

Abstract
Background: Living with HIV is of daily concern for many South Africans and poses challenges including adapting to a chronic illness and continuing to achieve and meet social expectations. This study explored experiences of being HIV-positive and how people manage stigma in their daily social interactions.
Methods: Using qualitative methods we did in-depth interviews with 42 HIV-positive men and women in Cape Town and Mthatha resulting in 71 interviews.
Results: HIV was ubiquitous in our informants’ lives, and almost all participants reported fear of stigma (perceived stigma), but this fear did not disrupt them completely. The most common stigma experiences were gossip and insults where HIV status was
SOUTH AFRICAN NATIONAL FEMICIDE STUDIES

- 1999
- 2009
- 2017
- 2020/21 COVID-19 hard lock-down period in the field
Age-standardised Femicide rates/100 000 female population across 3 South African studies

Incident Rate Ratios (IRR) – indicate significant decline: 1999/2009 & 2009/2017
Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence

Worldwide prevalence of non-partner sexual violence: a systematic review

Nasrin Alaphilippe, Karen Dowden, Charlotte Watts, Christine Polletta, Mux Petris, Simavi Shamas, Claudia Garcia-Albero

Summary

Background: Several highly publicised rapes and murders of young women in India and South Africa have focused international attention on sexual violence. These cases are extreme versions of the wider problem of sexual violence against women, but the true extent is poorly quantified. We did a systematic review to estimate prevalence.

Methods: We searched for all articles published from Jan 1, 1999, to Dec 31, 2011, and manually searched reference lists and contacted experts to identify population-based data on the prevalence of women's reported experiences of sexual violence from age 15 years onwards, by anyone except intimate partners. We used random-effects meta-regression to calculate adjusted and unadjusted prevalence for regions, which we weighted by population size to calculate the worldwide estimate.

Findings: We identified 7231 studies from which we obtained 412 estimates covering 56 countries. In 2010, 7·2% (95% CI 6·8–7·6%) of women worldwide had ever experienced non-partner sexual violence. The highest estimates were in sub-Saharan Africa, central (23·1%, 95% CI 4·0–57·3%) and sub-Saharan Africa, southern (7·7–4·6%, 11·4–25·3%). The lowest prevalence was in Asia, south (3·3–%, 6·4–9·3%). Limited data were available from sub-Saharan Africa, central, North Africa, Middle East, Europe, eastern, and Asia Pacific, high income.
The only longitudinal study on the health impact of rape over 3 years in LMIC

Recruited women exposed to rape and a control group of women who have not ever experienced a rape

Recruited both HIV Pos and Neg women

Combine behavioural and biological variables

- **BIOLOGICAL Assessments**
  - HIV
  - Immunity (CD4, Viral Load)
  - HSV2
  - STI – Trichomoniasis
  - Pregnancy
  - Diabetes/ Lipid panels
  - Anthropometrics (BP, BMI)
  - Hair cortisol
  - DNA – epigenetics
RICE study: Increase HIV incidence over time post rape

The months after rape are critical for HIV risk. Women who are raped are 60% more likely to contract HIV over the next few years. Rape survivors need long-term, comprehensive healthcare and support.

Increase in HIV incidence in women exposed to rape

Naeemah Abrahams, Shihe Mhlongo, Kristin Dunkle, Esnat Chirwa, Carl Lombard, Soraya Seedat, Andre P. Kengne, Bronwyn Myers, Nasheeta Peer, Claudia Garcia-Moreno, and Rachel Jewkes

Objective: To determine the incidence of HIV acquisition in women postrape compared with a cohort of women who had not been raped.

Design: A prospective cohort study.

Methods: The Rape Impact Cohort Evaluation study based in Durban, South Africa, enrolled women aged 16–40 years from postrape care services, and a control group of women from Primary Healthcare services. Women who were HIV negative at baseline (644 in the rape-exposed group and 578 in the control group) were followed for 12–16 months with assessments every 3 months in the first year and every 6 months thereafter. Multivariable Cox regression models adjusted for baseline and time.
• **Research for impact and using science for activism:**
  Multiple presentations to Government
  Femicide research on firearm-related death strengthens Firearm Control Act
  Leading aspects of the development of the first National Strategic Prevention Strategy - 2019
  Developed 1st South African Comprehensive Femicide Prevention strategy - 2021