ABSTRACT
Objective: to report on the factors related to the feminization of the AIDS epidemic in the literature.
Method: a descriptive study, updating, which presents aspects about the feminization of the AIDS epidemic.
Results: the following factors related to the feminization of the AIDS epidemic were found in the literature: socioeconomic status, drug use, sexual behavior, sexual violence and gender unequal relationship.
Conclusion: to apprehend the transition of the epidemiological profile of AIDS, but specifically, the factors that particularize women are more vulnerable to contracting HIV infection are badly needed for nurses and, therefore, for these women. It is understood, therefore, that efforts to control STD/AIDS should be implemented.
Descriptors: Vulnerability; HIV; Women.

RESUMO
Objetivo: informar sobre os fatores relacionados à feminização da epidemia da AIDS presentes na literatura.
Método: estudo descritivo, de atualização, o qual apresenta aspectos sobre a feminização da epidemia da AIDS.
Resultados: os seguintes fatores relacionados à feminização da epidemia da AIDS foram encontrados na literatura: condições socioeconômicas, o uso de drogas, comportamento sexual, violência sexual e a relação desigual de gênero.
Conclusão: apreender a transição do perfil epidemiológico da AIDS, mas especificamente, os fatores que particularizam as mulheres a serem mais vulneráveis para contrair infecção pelo HIV são de extrema necessidade para os enfermeiros e, por conseguinte, para estas mulheres. Entende-se, pois, que ações de controle das DST/AIDS devem ser implementadas.
Descritores: Vulnerabilidade; HIV; Mulheres.

RESUMEN
Objetivo: informar sobre los factores relacionados con la feminización de la epidemia del SIDA en la literatura. Método: estudio descriptivo, de actualización, el cual presenta los aspectos de la feminización de la epidemia del SIDA.
Resultados: los factores relacionados con la feminización de la epidemia del SIDA se encontraron en la literatura: el nivel socioeconómico, el consumo de drogas, el comportamiento sexual, la violencia sexual y las relaciones desiguales de género.
Conclusión: captar la transición del perfil epidemiológico del SIDA, pero específicamente, los factores que particularizan a las mujeres a ser más vulnerables a contraer la infección por el VIH son muy necesarios para las enfermeras y, por lo tanto, para estas mujeres. Se entiende, por tanto, que los esfuerzos para controlar las ETS / SIDA deben ser implementadas.
Descritores: Vulnerabilidad; el VIH; Las Mujeres.

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INTRODUCTION

The Acquired Immune Deficiency Syndrome - AIDS manifests itself as a disease called AIDS affects the immune system of the individual, a fact that predisposes him to be affected by other diseases.\(^1\) Women represent nearly half of the 40.3 million people living with HIV or AIDS in the world.\(^2\) Has been observed in Brazil, an increasing number of cases of women with AIDS compared to males. The mortality rate among men has demonstrated a more significant decrease than in women.\(^3\)

When analyzing the evolution of the epidemic among women in the country observed three distinct phases in terms of risk for infection with HIV (human immunodeficiency virus): the first phase, until 1986, when the transmission by sexual contact was the most important, highlighting the susceptibility of men who have sex with men and the term "risk group". During this period was also relevant transmission by blood transfusion. The second phase, from the late 80th to the early 90s, where injecting drug use appears as an important form of HIV infection and the use of the term "risk behavior" becomes more frequent, and the third phase from the early 90s until now, that has a predominance of heterosexual practice as a means of HIV transmission for women and marked by the use of the term "vulnerability".\(^2\)

The concept of vulnerability can be summarized as the ability to consider the chance of exposing people to illness as a result of a number of aspects not only individual but also social and institutional.\(^4\) Thus, we became interested in knowing the aspects related to changing epidemiology of the AIDS epidemic, in which women currently present themselves as being one of the most vulnerable segments of society.

Therefore, the aim of this paper is to report on the factors related to the feminization of the AIDS epidemic in the literature.

> Factors related to the AIDS epidemic in women

Some authors point to the socioeconomic conditions as one of the factors that relate to women's vulnerability to HIV/AIDS.\(^5,9\) It is understood that restricted access to information and social services and health directly influence social behaviors and sexual women. Given that aspects related to sexuality and reproductive issues such as gender, body pleasure, STD / AIDS, behavior / sexual practices, myths and truth about sexuality and condom use female / male are unknown or different sometimes do not have access to the right information or know more if you have difficulty in incorporating them or understand them.\(^3,5,6,10-1\)

Important to note that access to health services hinders women receiving condoms and perform clinical monitoring. However, please note that due to the distance and lack of financial resources to pay for passage, not seeking other health professionals for shame.\(^12\)

The reality of women living in poverty is also commonly marked by crime and violence situations that expose them to greater vulnerability to HIV / AIDS. Besides sometimes be noticed the lack of public policies to guarantee their social, economic and cultural.\(^6,8,9,13\) In social vulnerability related to forced displacement of women to these other communities need to reformulate their social relations and, consequently, to ways of responding to certain situations, among them health issues; since beliefs and customs may be different as those related to sexuality.\(^8\)

Note also that women in situations of social inequality and without support from partner and / or family submits more readily to sex work and, in turn, keep unprotected sex due to higher financial offer made by the client that actually increases even more risk for HIV infection.\(^9,13\) Women who are sex workers, and commonly do not adhere to the use of condoms because of submission to the partner also have other risk factors that make them more vulnerable to HIV, namely: multiplicity of partners, drug use and occurrence of sexual violence.\(^9,10-4,5\)

In a study of women injecting drug users reported that this lack of affection, lack of care and family violence in family relations, contributed to the beginning of the consumption drugs.\(^6\) Women who become abusive drug users because they drink to accompany partners or clients, are more vulnerable to diseases such as sexually transmitted diseases, considering that by making use of licit and illicit drugs are often not remember what happened.\(^4,9\) In addition, the use of drugs also interferes with people's ability to make decisions together with the fact that can be obtained via exchange for sex. In this complex context factors that make them more vulnerable to AIDS appear interconnected.\(^3,5,6,15\) It is known that sharing syringes and needles for injecting drug user is more frequent and such practice constitutes one of the risk factors for exposure to HIV.\(^6,16\)

Women living in situations of social inequality, sex workers, homeless or the...
Maroons, drug users and affected by mental illness are more exposed to situations of violence because of stigma and / or prejudice fact that may contribute directly to exposure to HIV (sexual violence) or interfere with future attitudes of women, as drug use which increases the risk of HIV contamination. Some is also the fact that the female be considered weak or the idea that women are submissive to men. 7, 8, 10-12.7.

The unequal relationship of gender appears, therefore, as a major cause of increased AIDS in the female population. 7, 8, 10, 12, 18-21. Barriers put women in negotiating safe sex, regardless of their level of education, purchasing power, financial autonomy, reveal, on the one hand, power inequalities based on gender and on the other, the status of trust and complicity that regular stable partnerships. 10-20

Passivity in time to participate in decisions involving the sexual and reproductive lives is often due to fear of harming conjugal relationship, having embarrassed to discuss issues of sexuality with their partner or considering that intercourse with no condom is pleasurable, besides the fact that the construction of female sexuality is commonly related to family planning leaving aside the issues of prevention of HIV/AIDS. 3, 7, 10, 16-21

The use of contraception is taken, therefore, most often the woman's responsibility, except for condom use. The female condom by women themselves is not used often because of ignorance or fear in using it, is not to have safety in using it correctly or they feared the reaction of her husband.7 female sexual initiation is increasingly early and happens for various reasons, from spontaneous demonstration, social pressure, or coercion of older men, even by physical violence. In this sense, the HIV virus becomes something far these women, making one assume reckless behavior ante prevention and, in return, enhance other elements, such as maintenance of emotional bonds. 3, 4, 8, 20

The female population living in detention presents some particularities being submissive twice, once serving time on two inevitable prisons: the real prison (to which she is) and simbolic. 16. The latter causes the woman to become a prisoner of man from childhood, with laws established by cultural and social, is the participation in drug and / or passivity deciding on the use of condoms or sexual abuse in childhood and adulthood.

Meanwhile, in a study that aimed to identify the impact of both religious and social institutions of the State, in Malawi, located in Africa pointed out that, although religious institutions provide infrastructure to the population living in rural women become vulnerable by the conditions socioeconomic, and especially the lack of access to accurate information about the prevention, diagnosis and treatment of AIDS, often influenced by religious beliefs. 11

The Ministry of Health created the plan to fight the epidemic of AIDS in women in 2007, as a way to control this situation women's health. The plan's target audience: pregnant women, women living with HIV and AIDS, adolescents and youth; lesbian, bisexual, and other women who have sex with women, transgender, black, indigenous, women in prison situation, sex workers, women in a situation of sexual and domestic violence; disabled; postmenopausal women and elderly women. Noting that control of HIV / AIDS in women is crucial for reducing HIV infection by vertical transmission. 22

<table>
<thead>
<tr>
<th>Socio-cultural conditions</th>
<th>Stigma</th>
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<td>Gender relations</td>
<td>The beginning of early sex life</td>
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<td>Fragmentation of family and social networks</td>
<td>Less adherence to condom use</td>
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<td>Exposure to violence</td>
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<td>Sexual abuse in childhood and in adulthood</td>
<td>Abrupt disruption of everyday life</td>
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Figure 1. Summary of factors related to the feminization of AIDS epidemic from the scientific literature, in 2013.

CONCLUSION

Based on the foregoing, it is understood that the transition grasp the epidemiology of AIDS, but specifically, the factors that particularize women are more vulnerable to contracting HIV infection are badly needed for nurses and, therefore, for these women. It is understood, therefore, that efforts to control STD / AIDS should be implemented. Therefore, it is imperative that national campaigns involving the health of women and their partners are formulated and disseminated throughout the population, both in relation to their own information about the prevention of HIV infection, but also related to sexual violence and its political role and power in society.

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Thus, the Brazilian women can carve your own path and make choices consistent with the reality of their social and sexual relations minimizing the possibility of HIV transmission to the extent that they discuss ways of prevention and the factors that increase the possibility of these acquiring AIDS. The role of the professional nurse is essential for the quality of care for women, and is a key factor for the users’ information about HIV / AIDS prevention, treatment, recovery, and to promote changes in the epidemiological profile.

It is suggested that in-depth studies are geared to the theme in question, understanding the importance of factors related to HIV infection, especially in a population group in which its incidence is increasing in recent years. These studies could also be the type intervention research in order to contribute to the reflection and education of women and people who are at their surroundings with respect to the control of HIV / AIDS.

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