HIV RISK AND HUMAN RIGHTS VIOLATIONS AMONG AFRICAN GAY MEN AND OTHER MEN WHO HAVE SEX WITH MEN (MSM)

Stefan Baral, MD, MPH
Johns Hopkins School of Public Health
Overview

- Epidemics of HIV among MSM in lower income settings
- Gay men and other MSM in Africa
- Research
  - Context and Objectives
  - Study Design
  - Results
- Conclusions
Background

- HIV epidemic spread among MSM is occurring in both high and low income settings in 2009

- Lower income HIV epidemics among MSM are underway in Latin America, Asia, Eastern Europe/FSU, and Africa

- Many HIV epidemics among MSM are occurring in “hidden” contexts of discrimination, stigma, criminalization, and limited HIV surveillance

- This study was the first attempt to link individual level rights abrogations to HIV biological outcomes in the African context.
MSM in Africa

- Increasing amount of information available since 2006
  - HIV Risk Status
    - Reports from Ghana, Nigeria, Zambia, Tanzania, Uganda, Kenya, Senegal, Ethiopia describe high rates of UAI and a population in need of basic HIV interventions
    - As of Feb, 2009, there are still only two peer-reviewed publications of HIV rates among MSM in Africa (Senegal, Kenya)
  - Sexual Identity
    - Recent reports from Kenya and Uganda describe a more visible (reachable) and demographically diverse population than a decade ago
    - Encouragingly, communities of gay men in a few countries of Africa are now more actively demanding that their health care and HIV prevention needs are addressed

# HIV Prevalence Rates among African MSM (Dec, 2008)

<table>
<thead>
<tr>
<th>Country</th>
<th>Sample Size</th>
<th>MSM Prevalence (95% CI)</th>
<th>15+ HIV Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senegal</td>
<td>943</td>
<td>21.6 (19.0-24.3)</td>
<td>0.88%</td>
</tr>
<tr>
<td>South Africa</td>
<td>574</td>
<td>15.3 (12.4-18.3)</td>
<td>15.89%</td>
</tr>
<tr>
<td>Zambia</td>
<td>641</td>
<td>32.9 (29.3-36.6)</td>
<td>15.72%</td>
</tr>
<tr>
<td>Kenya</td>
<td>1125</td>
<td>15.6 (13.5-17.7)</td>
<td>7.49%</td>
</tr>
<tr>
<td>Tanzania</td>
<td>509</td>
<td>12.4 (9.5-15.2)</td>
<td>5.88%</td>
</tr>
<tr>
<td>Malawi</td>
<td>201</td>
<td>21.4 (15.7-27.1)</td>
<td>11.46%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>1961</td>
<td>13.5 (12.0-15.0)</td>
<td>2.88%</td>
</tr>
<tr>
<td>Sudan</td>
<td>1119</td>
<td>8.8 (7.1-10.4)</td>
<td>1.26%</td>
</tr>
<tr>
<td>Egypt</td>
<td>340</td>
<td>5.3 (2.9-7.7)</td>
<td>0.02%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>6470</strong></td>
<td><strong>15.7 (14.9-16.5)</strong></td>
<td><strong>5.00%</strong></td>
</tr>
</tbody>
</table>

- Where studied, there is disproportionate HIV burden among MSM

Study Sites

- Namibia, Botswana, Malawi
  - No data on MSM
  - High HIV prevalence countries
  - CBO with experience working with MSM

- Namibia
  - The Rainbow Project (TRP)
- Botswana
  - Botswana Network on Ethics, Law and HIV/AIDS (BONELA)
- Malawi
  - Center for Development of People (CEDEP)
Study

- HIV Prevalence, Risks for HIV Infection, and Human Rights among MSM in Malawi, Namibia, and Botswana

Objectives

- Evaluate HIV prevalence and risk status among MSM in each of these countries
- Demonstrate need for targeted HIV prevention expenditures from regional, national, and international funding agencies
- Characterize human rights contexts
  - Relationship of rights violations and HIV risk and infection
Study Design

- HIV Prevalence Probe Design
  - Men, 18 or older, who have ever had anal sex with another man recruited with snowball sampling
    - Gaborone, Lilongwe, Windhoek
  - Key informant interviews used to develop protocol and structured survey instrument
  - Community partner staff trained in research methods, subjects protection, HIV screening methodology
    - 537 men recruited for study
  - Structured quantitative survey instrument
  - OraSure HIV rapid kit screen (oral fluid samples)

## Participant Characteristics

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Malawi</th>
<th>Namibia</th>
<th>Botswana</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>25.6</td>
<td>24.4</td>
<td>25.8</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary or more</td>
<td>99.5%</td>
<td>90.4</td>
<td>98.3%</td>
</tr>
<tr>
<td><strong>Self-Reported Sexual Orientation</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heterosexual</td>
<td>6.5%</td>
<td>19.4%</td>
<td>3.4%</td>
</tr>
<tr>
<td>Gay/Homosexual</td>
<td>40.5%</td>
<td>48.6%</td>
<td>66.7%</td>
</tr>
<tr>
<td>Bisexual</td>
<td>53%</td>
<td>29.1%</td>
<td>29.1%</td>
</tr>
<tr>
<td>Transgender</td>
<td>0</td>
<td>2.9%</td>
<td>0.9%</td>
</tr>
<tr>
<td><strong>Disclosed sexual orientation to</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A family member</td>
<td>17%</td>
<td>44.5%</td>
<td>60.3%</td>
</tr>
<tr>
<td>A Health Care Worker</td>
<td>8.9%</td>
<td>21.6%</td>
<td>24.1%</td>
</tr>
</tbody>
</table>

### HIV Prevalence

<table>
<thead>
<tr>
<th>HIV Prevalence</th>
<th>Malawi</th>
<th>Namibia</th>
<th>Botswana</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Ages</td>
<td><strong>21.4% (201 - 16.3-27.6)</strong></td>
<td><strong>12.4% (218 – 8.7-17.4)</strong></td>
<td><strong>19.7% (117 – 13.5-27.8)</strong></td>
</tr>
<tr>
<td>Age 18-23</td>
<td>15.2% (79 – 8.9-24.7)</td>
<td>3.5% (113 – 1.4-8.8)</td>
<td>8.2% (49 – 3.2-19.2)</td>
</tr>
<tr>
<td>Age 24-29</td>
<td>21.6% (88 – 14.3-31.3)</td>
<td>17.1% (70 – 10.1-27.6)</td>
<td>21.2% (52 – 12.2-34.0)</td>
</tr>
<tr>
<td>Age &gt;=30 (max 51)</td>
<td><strong>35.3% (34 – 21.5-52.1)</strong></td>
<td><strong>31.4% (35 – 18.6-48.0)</strong></td>
<td><strong>46.7% (15 – 24.8-70.0)</strong></td>
</tr>
<tr>
<td>Aware of HIV status</td>
<td><strong>4.7%</strong></td>
<td><strong>59.2%</strong></td>
<td><strong>17.4%</strong></td>
</tr>
</tbody>
</table>

Overall HIV prevalence = **17.4% (95% CI 14.4-20.8)**

**Beyrer, et al. Sexual concurrency and bisexual practices among men who have sex with men (MSM) in Malawi, Namibia, and Botswana. Abstract W-172, Croi, 2009**
Univariate Associations with HIV

- Pooled across all three countries
  - Self-reporting as homosexual
    - Likely a marker of sexual positioning
  - Not always wearing condoms with men
  - Having been diagnosed with an STI
  - Had Transactional Sex
- Ever Arrested
  - Malawi, Botswana
- Ever Raped
  - Botswana

## Human Rights Contexts

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Malawi</th>
<th>Namibia</th>
<th>Botswana</th>
<th>Pooled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denied housing other than not being able to pay</td>
<td>6.5%</td>
<td>8.3%</td>
<td>5.2%</td>
<td><strong>6.9% (37/534)</strong></td>
</tr>
<tr>
<td>Denied health care based on sexuality</td>
<td>4.0%</td>
<td>8.3%</td>
<td>0.9%</td>
<td><strong>5.1% (27/533)</strong></td>
</tr>
<tr>
<td>Afraid to seek health services</td>
<td>17.59%</td>
<td>18.3%</td>
<td>20.5%</td>
<td><strong>18.5% (99/535)</strong></td>
</tr>
<tr>
<td>Afraid to walk in community</td>
<td>15.5%</td>
<td>16.7%</td>
<td>29.1%</td>
<td><strong>19.0% (101/532)</strong></td>
</tr>
<tr>
<td>Blackmailed because of sexuality</td>
<td>18.0%</td>
<td>21.3%</td>
<td>26.5%</td>
<td><strong>21.2% (113/533)</strong></td>
</tr>
<tr>
<td>Yes to any of the above related to sexuality</td>
<td>34.3%</td>
<td>41.5%</td>
<td>56.9%</td>
<td><strong>42.1% (222/527)</strong></td>
</tr>
</tbody>
</table>

Associations with Rights Violations

- Men who reported blackmail
  - Much more likely to have disclosed sexual orientation to a family member
  - Less likely to have had HIV test in last 6 months
  - More likely to be afraid to seek health care

- Disclosing sexual orientation to health care workers
  - Highly associated with being denied health care
  - Much less likely to have had a HIV test in last 6 months

Limitations

- Cross-Sectional Design
  - Unable to establish directions of causality
- Snowball Sampling only in urban centers
  - Results have limited generalizability
  - May underestimate risk as these men are in shared social and sexual networks as service providers
Conclusions

- In Malawi, Namibia, Botswana
  - Gay men and other MSM exist
  - These men are at high risk for HIV

- Powerful reminder of the level of stigma, discrimination and human rights abuses that these men face in their everyday lives, including
  - being denied housing and healthcare
  - being afraid to walk down the streets of one’s community
  - or being afraid to seek health care services
Ecological Model for HIV Risk in MSM

HIV Epidemic Stage

- Criminalization, Homophobia, Human Rights Contexts, Condom Availability
- Excluded from National Surveillance, Sexual Health Education
- Access to preventive services, Stigma, VCT Access, ARV Access
- STI Prevalence, Condom knowledge, IDUs, MSW, Transgenders
- Unprotected Receptive Anal Intercourse, GUD, Lack of circumcision, frequency of male partners, high lifetime partners, IDU, poppers, meth, BMF

Source: Baral and Beyrer, 2006
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