

ZERO NEW HIV AND TB INFECTION, ZERO DEATHS FROM HIV AND TB, AND ZERO DISCRIMINATION: HOW FAR WILL WE GO EXCLUDING LGBTI STUDENTS?

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# Presentation outline

- ▶ **Background**
- ▶ **Objective of the study**
- ▶ **Methods**
- ▶ **Results**
- ▶ **Recommendations**
- ▶ **Conclusion**

# Background

- ▶ Heterosexual university employees and students are reported to hold negative attitudes toward lesbians, gays, bisexual, transgender and intersex (LGBTI) students (Mavhandu–Mudzusi & Netshandama 2013).

# Background

- ▶ These attitudes are generally claimed to be influenced individuals 'gender, religious and cultural beliefs. Acquisition of negative attitudes is persistently reported in the literature to lead to prejudicial beliefs and discriminatory acts that may have negative impact on the health of LGBTI individuals

# Objective of the study

- ▶ To describe LGBTI students' experience of stigma and discrimination
- ▶ To explore the impact this discrimination had on their utilisation of available HIV/AIDS management at the rural university
- ▶ To explore and describe HIV/AIDS programmes to support LGBTI students

# Methods

- ▶ Interpretative Phenomenological Analysis (IPA) methodology was used to conduct this study.
- ▶ An open interview format was adopted with the use of a “grand tour” question on 20 participants.
- ▶ Data was analysed using Interpretative Phenomenological Analysis framework, as outlined by Smith (2005).

# Results

**The following super-ordinate themes emerged:**

- ▶ Homophobia could increase the risk of HIV infection amongst LGBTI students.
- ▶ University HIV/AIDS programmes do not embrace the LGBTI community.

# Increased risk to HIV Infection

- ▶ “Multiple concurrent behaviour
- ▶ Staying in abusive relationship
- ▶ Intentional exposure to HIV infection
- ▶ Wanting to infect others
- ▶ Casual sex
- ▶ Living dual life
- ▶ Dating amongst circle
- ▶ Continuous conflict amongst LGBTI groups



# Increased risk to HIV infection

*“It is tuff sister. I don’t know what else to do or where else to go. I have got nowhere to sleep tonight. They want their keys back at 12h00. The issue is, I was allocated to go and stay with other students in a hotel conference room where there were just many beds in a big hall. I felt I cannot stay there because I know people of my country highly stigmatize homosexuality.”*

# Violation of freedom of choice

- ▶ *“So I felt that my life will be in danger. I decided to go to the university female hostels and stay with my female friend who was the owner of the room. now the hostel superintended want back his keys because he doesn't deal with males but females only. But I feel that's where I belong and I feel so safe and comfortable in that residence and females in that residence are comfortable with me being there.”*

# Hiding true identity

*“Due to fear of stigma and discrimination, some people deny their true identity. With others is due to culture, religion and also peer pressure. You can see that this person is a gay or lesbian, but the person will try to behave like straight. But even when that person tries to dress like a straight girl, you can see by the way she walks that, this one is just dodging the truth”*

# Risk of being raped

- ▶ *Boys threatened to rape us to make us straight. They say that if they find me alone at night, they will gang rape me. They say this will make me a real lady. Some give comments like we are creating a shortage of females as we are taking their girlfriends.*

# Sharing sexual partners leading to conflict amongst LGBTIs

- ▶ *“And because it is difficult to know which one is homosexual, it is difficult even to get a partner. Most of homosexuals are living in a closet due to fear of stigma and discrimination. And to get a sexual partner at this university is very difficult. We end up dating among support group members cheating with each other’s partner. Making us enemy still and feel more and lonely.”*

# University HIV/AIDS services

- ▶ Heteronormativity

## Inadequate HIV/AIDS information

- ▶ *“When they give information, they talk only about male and female having sex not us, so you can’t even ask for gloves or ask about the risk of having finger sex, oral sex or dry humping.”*

# Referral to seek treatment for “LGBTINESS”

- ▶ *“I was born a lesbian. In fact I know that inside I am a lesbian. My parents referred me to the psychologist here in this institution. The psychologist told me that it is just a psychological problem. She told me that I should have a boyfriend, which I did, but to tell you the truth, I don’t feel anything sexually when I am with him.”*



# Continuation

- ▶ *“He bores me to death. The psychologists also tell me to change the way I dress. That’s why you see me in dress like this and also putting on a bra. I feel so uncomfortable. It is like it is not me. I am also transferred to the gynaecologist to give me some hormones pills so that I may start menstruating. I feel so confused. I know that I will never be anything else except a lesbian. I can’t be straight.”*

## **Fear to seek information regarding safer sex**

- ▶ *“You cannot go to the clinic and ask for information regarding methods of preventing HIV amongst gay. They will not even assist you. Instead, they will just call each other and lough at you. You can’t even ask for extra lubricant.”*

# Conclusion

- ▶ For the country to reach the ‘Zero new HIV and TB infection, a level of Zero stigma and discrimination’ towards LGBTI students should be reached. Higher Education HIV/AIDS programmes (HEAIDS) should ensure that the institutions of higher education address homophobia towards LGBTIs and ensure that HIV/AIDS programs on campus also caters for LGBTI students.



# Thank you

