

Male to Male sex in Senegal Issues and Priorities

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Background (1)

- HIV/AIDS Situation in Senegal
 - Low intensity
 - Low prevalence (0.7% - 0.9%)
 - Concentrated Epidemic
 - Regional disparities
 - Kolda, Tambacounda, Kaolack (2% - 2.8%)
 - History of migrations (27%)
 - Marginalized groups
 - Female Sex Workers (20% - 44%)
 - MSM (20%)
- Population: 90% Muslims

Background (2)

- Social Construction of Male to Male Sex in Africa
 - Widespread denial
 - *Daniel B. Hrdy: “Homosexuality is not part of traditional societies in sub-Saharan Africa”.*
 - *One African Head of State : “[My country] has no room or time for homosexuals and lesbians.”*
 - Silence
 - Rejection and Stigma on African researchers working on MSM
 - Lack of Epidemiological data and Few solid research on MSM and HIV/AIDS in Africa
 - Imposition of largely western construct of homosexuality
 - *‘homosexuality’ as both a sexual behaviour and a social identity has obscured the reality of male-to-male sex in Africa*

Risk and vulnerability

- Multiple sex partners, Low Condom use, Drug and Alcohol
 - At last sex Anal sex (insertive) : 23% Anal sex (receptive) : 14%
 - Poor access to water-based lubricants
- Not concerned by Preventive messages
 - Messages and Counseling designed for Heterosexuals
- Stigma, Poor reception & treatment at health facilities:
 - Lack of respecting confidentiality
 - “Boycott” by some of the health care staff
 - Insults and Body language of stigma
- Self medication and Low Access to STI Treatment services:
 - *“Once I was bleeding, had sores and pains near the anus. After a few days, I couldn’t stand the pain any longer and traveled from Dakar to Thies (70km) to find a [...] friend. He went to the hospital on my behalf, complained of hemorrhoids and got a prescription which I then used.”*
- Poor access to VCT providers
 - Fair of Double rejection
- Ignorance about HIV/AIDS services
- Not integrated in HIV/AIDS Policies, Programs and Strategies

Violence and Vulnerability

- Physical violence :
 - *“In certain neighborhoods, when they find out you are an Ibbi, you may just passing through, but the young people will get together and start throwing stones at you... You have the impression then that’s raining stones”*
 - Rape (43% during lifetime, 37% in the last 12 months, 13% by a policeman); Impunity and violence as a healing process
- Verbal abuse
 - *“The most humiliating was when a police officer told my mother: ‘You didn’t give birth to a male child, your son is a homosexual’”*
- Ostracism, rejection, stigmatization
 - *“Religion forbids us to welcome them in our homes, in our mosques, we cannot shake their hand, when one of them dies we refuse to pray for him.”*
 - Family secret (denial, family sermons, isolation)
 - Double life, psychological tensions / *“Taccu”*
- State Violence (Police Harassment, Incarceration)
- Social/ Structural Violence and Discrimination
 - Housing, Work, Social exclusion, Poverty
 - Laws

Preliminary Findings and Research Issues (1)

- Understanding Various and multiple identities and meanings to develop appropriate preventive messages
 - (Societal level, Networks and community level, Interpersonal, Individual)
 - Naming:
 - Gorjigeen / Ibbi / Yoos
 - Recognized social roles :
 - Female Role-model and Patrons (“*Diriyankey*”) / Roles and Status in special ceremonies and traditional rituals
 - Working with Complexity (Codes, Symbolic communication, Social Grouping and Social Networks) to conceptualize strategies
 - (*You know many individuals who wear a boubou on Friday to go to Muslim prayer; well, the Ibbi wear the same boubou, and identify completely with the faithful ... But from the moment he wants to communicate with another Ibbi he has a way of moving the sleeve of his boubou, of undulating his hips, of rolling eyes... that identify him exclusively to the other Ibbi*)

Preliminary Findings and Research Issues (1)

- Recognizing the diversity of the social and cultural construction of Male –to- Male sexual relationship
 - Age/ Socioeconomic Status/ Gender construction/
 - Occasional / Steady / Durable
 - Social or Community recognition / Confidential
- Analyzing the social and cultural context of Male –to- Male sexual relationship
 - Poverty / Unemployment
 - Commercial Sex Work
 - Bisexuality

Responses

- Research and Advocacy
 - Overcoming Fear of disclosure : Research as an empowering process
 - From Ethnography to Epidemiology (Issues of recruitment)
 - From the Social Science Research Forum to establishing Trans-sectionality (SAHARA: MSM in the agenda and sampling design of AIDS social research: PLWAIDS, CSW, Gender and Violence, Migration; Parent to Child HIV/AIDS Transmission, Stigma and Discrimination)
- Visibility
 - Gay, Pro-MSM and MSM living with HIV/AIDS Organizations
 - AND LIGEY, PRUDENCE, ADAMA
 - Integrating the National response / Strategic planning
 - Action Plan (Approaches: Public health, Human rights, Culture)
 - Workshops with the Media
- Friendly Health Services
 - Guarantee of Confidentiality
- Networking for an African International perspective
 - Mauritania, Cote d'Ivoire, Mali, Burkina Faso

Priorities (1)

- Access to prevention
 - Adapted Preventive messages and strategies
 - Condom and Lubricants
- Extension of Friendly medical services
 - (Treatment of STI, VCT, ARV, psychosocial support)
 - Linking Treatment and Prevention
- Empowerment
 - Gay, Pro-MSM and MSM living with HIV/AIDS Organizations and of MSM Social Networks
 - More Integration to HIV/AIDS Policies, Strategies and Programs
- Sense of Emergency : “Xarr da fay weesu Mbote” (Stop turning around)
 - Next steps after Pilot Studies (Gap between Research and Intervention)
 - Scaling up Interventions
- Pushing for a strong political commitment

Priorities (2)

- Research on “invisible MSM” and social construction of masculinity
- Research and Intervention with Traditional Support system
 - Communities : *“Here, no one would dare insult an Ibbi who is a member of our community, he is protected like any other different person we protect”*
 - Women (“Jeegu Ibbi” / Meru Ibbi),
 - Mothers (biologic, social, symbolic)
- Research and Intervention for fighting stigma
 - Media
- Research and Advocacy for Structural and Environmental Change
 - Building Capacities for Self esteem and Economic Activities
- Protecting Human rights
 - Removing Anti-MSM Laws
 - Protective Laws against discrimination and Violence

CONCLUSION

- Paradigmatic and Epistemological Shift
 - Associating Modern Approach and tools with Historical and Cultural Heritage
- Comprehensive HIV/AIDS Strategy
 - Holistic Approach to MSM and marginalized group
- Social Transformation and Political Processes