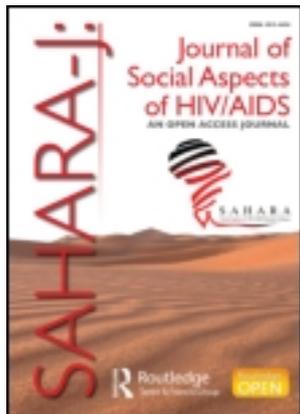


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LGBT Africa: A social justice movement emerges in the era of HIV

Chris Beyrer

Abstract

LGBT communities are emerging across Africa in 2012. Many are emerging in the context of the continent's severe HIV epidemic. Homophobia is a barrier to social acceptance and to health and other social services, but African communities are showing reliance in addressing stigma and discrimination, and in organizing for rights and social tolerance.

Keywords: homophobia, LGBT, men who have sex with men, HIV, Africa

Résumé

La communauté LGBT est émergente dans tout l'Afrique en 2012. Beaucoup voient le jour dans le contexte de l'épidémie grave de VIH. L'homophobie est un obstacle à l'acceptation sociale et de santé et autres services sociaux, mais les communautés africaines sont montrant la confiance dans la lutte contre la stigmatisation et la discrimination et à l'organisation pour les droits et la tolérance sociale.

Mots clés: homophobie, LGBT, hommes ayant des relations sexuelles avec des hommes, le VIH, Afrique

Introduction

Sexual and gender minorities, which generally include lesbian, gay, bisexual, and transgender (LGBT) persons, are found in every human society, culture, and context. The treatment of these individuals, and of their partners and families, varies enormously across social and political landscapes. Since the beginnings of the modern movement for sexual and gender minority rights, which many historians date to the June 1969 Stonewall uprising in New York City, LGBT rights movements have been enormously challenging for virtually all societies to address, tolerate, and accept. Current LGBT rights movements are very much works in progress in much of the world – with intense counter-movements in many settings responding to emerging communities and their demands with increased repression, efforts to limit rights, and both legal and extra-legal forms of discrimination and persecution. Africa, with its vast political, social, economic, cultural, and religious diversity, is no exception. The social tolerance of sexual and gender minorities ranges from full citizenship rights, including civil marriage rights, in South Africa to criminalization and the death penalty for same-sex relations between consenting adults in Sudan (Itaborahy 2012). Icons of African human rights and social justice movements such as Archbishop Desmond Tutu have been outspoken supporters of LGBT rights, while others, including national leaders Robert Mugabe of Zimbabwe and the late Bingu wa Mutharika of Malawi, have spoken out for *intolerance*. Africans at grass roots and community levels have had widely varying responses as well.

While LGBT rights issues include many social concerns in their own right, they have also been prominent areas of effort and contention in the era of HIV. This is true everywhere the pandemic

has affected communities and countries, but perhaps most especially so in Africa, the hardest hit region of the world by HIV/AIDS. Gay, bisexual, and other men who have sex with men (MSM) have been disproportionately affected by HIV, with high rates of infection and loss of life, since the beginning of AIDS in 1981 (Baral, Sifakis, Cleghorn & Beyrer 2007). Transgender persons, particularly male-to-female (M-to-F) persons, have also suffered from high burdens of HIV disease (Herbst, Jacobs, Finlayson, McKleroy, Nuemann, Crepaz, *et al.* 2008). And in Africa, lesbian women in some settings have been targets of sexual violence, which have led to considerable HIV risks for these women as well (Gontek 2007). HIV program efforts (and resource streams) are much larger in scale and in scope than LGBT rights programs, and so the HIV agenda has often dominated the LGBT discourse and been a primary focus of many organizations working with sexual minorities. This has been empowering for some communities, but further stigmatizing in others. And for most of Africa, this has also meant that LGBT communities have emerged, or are emerging, in the context of Africa's HIV epidemics, with all of the social stigmas and fears that have come with HIV, but also in the context of the community mobilization and HIV/AIDS activism and social engagement. Indeed, in several countries, the first real recognition that MSM populations have been present at all has been through HIV prevalence studies among these men (Baral, Trapence, Motimedi, Umar, Iiping, Dausab, *et al.* 2009).

The challenges of providing effective HIV prevention and treatment programs for sexual minorities have also been at the

Chris Beyrer MD, MPH is a professor of Epidemiology, International Health, and Health, Behavior and Society at the Johns Hopkins Bloomberg School of Public Health in Baltimore. He is the founder and director of the Center for Public Health and Human Rights at Johns Hopkins.

Correspondence to: cbeyrer@jhsph.edu

forefront of government sector challenges in recognizing that these men exist and need services. This has led to blame and to greater stigma in some settings, but greater visibility virtually everywhere. This visibility is unlikely to diminish. And whether African governments or wider communities are ready, willing, or able to address LGBT rights and demands today, there is no question that gay and transgender Africans are emerging, and calling for their rights, and that a continental civil rights struggle is now underway.

The human rights framework and LGBT populations

The Universal Declaration of Human Rights of 1948 is a universalist document. It is based on the principle that the rights articulated are fundamental to all human beings and that these are derived from shared human dignity. While sexual and gender minority rights are not included in the specific language of the text, the implication of universality was made clear by the drafters. The first article asserts that 'All human beings are born free and equal in dignity and rights' (United Nations 1948). These are rights that all humans share. But of course in 1948, most of Africa was still under European colonial rule, and few of the rulers accorded colonial subjects the same rights as Europeans. And even fewer countries accorded women the same rights as men. The USA, which sent former First Lady Eleanor Roosevelt to the drafting committee, also sent the great Black scholar W.E.B. Du Bois. Du Bois insisted non-discrimination on the basis of race and ethnicity as one of the fundamental human rights. This was accepted and is part of the Declaration, yet the USA in 1948 was at the height of 'Jim Crow' segregation laws and actively discriminated against Black Americans in education, employment, housing, health care, and virtually every other aspect of social life. Such stark contradictions were part of the reality of the post-war period. Nevertheless, the Universal Declaration was then, and is now, an aspirational document. It lays out a vision of a better and more equal future for humanity and so lays out the goal of equal protection under the law for all persons. When it asserted equal rights for women, most women in the world had limited rights and so the struggle for gender equality has become a struggle to realize these rights for women and girls. This is certainly analogous to the rights of sexual and gender minorities – who remain excluded and legally sanctioned in many settings and for whom equal protection under the law remains a legal reality in only one African State, South Africa.

The clearest articulation of human rights for LGBT persons is the Yogyakarta Principle (YP) (2006). The YP was developed by an international panel of human rights experts who met in the Indonesian city of Yogyakarta. They reviewed the existing international human rights conventions and treaties to identify and clarify the obligations of states to respect, protect, and fulfill the human rights of sexual and gender minorities. An impressive number of rights principles turn out to have implications in Yogyakarta. And at least two countries, India and Nepal, which have removed discriminatory laws against LGBT persons and decriminalized homosexuality, have used the YP in doing so (Beyrer, Sullivan, Sanchez, Dowdy, Altman, Trapence, *et al.* 2012).

In terms of HIV/AIDS, and health more broadly, the YP clearly indicates that there is no precedent or justification in human rights law to discriminate in health care services on the basis of sexual orientation or gender identity. But the hard truth is that discrimination and outright exclusion from health care services do exist and continue to be real barriers to services in Africa (Fay, Baral, Trapence, Motimedi, Umar, Ipinge, *et al.* 2012; Poteat, Diouf, Drame, Ndaw, Traore, Dhaliwal, *et al.* 2011).

The roots of homophobia

Given the relatively small number of LGBT persons in any population and the relatively modest impacts that changes in rights have had on majority populations when LGBT rights have been respected, it is difficult to understand why the counter-movement to LGBT equality has been so intense, so emotionally held, and so vitriolic. While many opponents of equality for LGBT persons have invoked religious sanctions as the core objection to rights, there has by no means been consistent reading of such texts and many of the 'abominations' cited in Old Testament law are considered by many adherents of faiths which use the texts to be of little or no significance in modern life (that eating shellfish is an abomination is just one of many examples).

A deeper reality may be the perceived threat to gender norms and to the status of men versus women, the male versus the female, in many societies. While modern human rights movements worldwide, including nearly all of the movements for HIV treatment access, non-discrimination, and the like, have strong bases in gender equality, the reality on the ground for women and girls worldwide is that men still dominate women in many spheres of political, economic, and social life. Many African societies are struggling with traditional norms of valuing maleness over femaleness, while attempting to address gender inequality, improve educational access for girls, and to empower women in economic and political life. And many modern economic trends can empower women over men, in ways that may present real challenges to male norms of control. Traditional male roles in pastoral societies based on livestock as wealth, for example, may be undermined by migration to urban areas, where women may find work more easily than migrant men. The newly educated young may have more opportunities than their elders, reversing power relations by age and further undermining family structures. These dynamics can cause personal, familial, and social tensions as men and women struggle to negotiate new roles and relationships. Men who *willingly* take on aspects of the feminine, transgendered persons may be the clearest examples and may be seen as further undermining male power. Homophobia, the violence directed against LGBT persons, may thus be understood as a form of misogyny or perhaps a manifestation of it. The terrible crime of the so-called corrective rape, in which women perceived to be lesbian, transgender, or otherwise insufficiently female are sexually assaulted by men, may be among the most extreme examples of this kind of violent response to the threat of male supremacy (Gontek 2007). And recent evidence suggests that male perpetrators of homophobia, and of homophobic bullying and violence, may themselves be more likely to have strongly negative reactions to their own same-sex desires (Adams, Wright & Lohr 1996).

Fear, misunderstanding, and prejudice all likely play roles in the emergence of anti-gay rhetoric and acts. And the deep roots of homophobia may indeed be rooted in the tensions of changing gender norms or the residual misogyny of many societies. But we must also acknowledge that these emotions have been manipulated by political and other leaders, often for cynical gain. The late President of Malawi Bingu wa Mutharika repeatedly engaged in anti-homosexual rhetoric when his administration was being accused of corruption and mismanagement (Kasunda 2012). And in the case of Uganda, where extremely discriminatory legislation has been under debate for several years, there is evidence of evangelical Christian leaders from the USA playing active roles in promoting anti-gay legislators and their positions (Gettleman 2010). The use anti-LGBT rhetoric as a political wedge issue has an unfortunately long and disturbing history in the USA and was a political tool used repeatedly by Republican strategist Karl Rove to assist in elections (Rutenberg 2010). As political systems mature, and voters gain in education and in tolerance, these attempts to manipulate hatred and fear of vulnerable sexual minorities will hopefully become a part of the political past. But for now they remain galvanizing tools in too many political systems and debates. And, as a consequence, these controversies have sometimes added to the exclusion of LGBT persons and MSM from HIV services, as has happened recently in Senegal (Poteat, Diouf, Drame, Ndaw, Traore, Dhaliwal, *et al.* 2011).

Ways forward

Despite harsh family, social, and political sanction, LGBT persons, groups, and communities are emerging across Africa. They are calling for justice, equality, and access to health care in settings that are safe, protect confidentiality, and respect the dignity of their persons. This is part of a wider global movement for sexual and gender minority rights that has now reached across continents, development levels, and political systems. The history of other movements toward equality, for women, for ethnic and religious minorities, and for the disabled, shows us that this will be a long struggle, with many setbacks, and sadly, much more unnecessary human suffering. But the proud history of resistance and justice also shows us that expanding human rights, not increasing intolerance, will likely prevail.

Partnerships with other rights and social justice movements may be key to making headway for LGBT Africans. The HIV community is an obvious ally, though many gay men and other MSM are rightly cautious about being defined solely as an at-risk group for

HIV infection. Both The Global Fund to Fight AIDS, TB and Malaria and the US PEPFAR program have included strong support for sexual and gender minority rights, principles of non-discrimination in care, and guidance on best practices for provision of care to MSM and other sexual minorities at risk of HIV infection. Women's organizations and those advocating for gender equality and women's empowerment may also be key allies for LGBT movements. And those voices of social tolerance and religious inclusion that are already speaking out against exclusion will likely be key partners in changing community views toward acceptance.

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