Embracing positive living for our people
Do healthcare systems in South Africa provide for the healthcare needs of gay, lesbian & transgender populations?

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Embracing positive living for our people
The Trans Women HIV Bio-Behavioural Survey: A baseline assessment among trans women in the Cape Town and Johannesburg metropolitan areas, and Buffalo City Metro Municipality, South Africa

Rationale for the Study
Globally, trans women have been shown to be at high risk for HIV infection. In South Africa, we currently have no information regarding the specific HIV vulnerabilities of trans women.

Overall Objective of the Study
To identify the social, structural, economic and cultural factors that are related to HIV infection in trans women.
To understand individual behaviours and practices related to HIV in trans women.
To determine the percentage of trans women who are HIV positive in Cape Town, Johannesburg and East London.
To conduct a size estimation of trans women in the Cape Town and Johannesburg Metropolitan areas and Buffalo City Metro Municipality.

Study Setting
The study will be conducted:
- The Cape Town Metropolitan area, located in the Western Cape Province.
- Johannesburg metropolitan area in the Gauteng province.
- Buffalo City Metro Municipality located in the Eastern Cape province of South Africa.

The rationale for conducting the study within the abovementioned cities and metro is because of the existence of organizations working with trans women.

Gender Dynamics
- STI/nc HIV/STI Counseling Clinics
- Sex Workers’ Advocacy and Education Taskforce (SWEAT)
- Access Chapter 2 (ACH)

Study Population
Trans women
The inclusion criteria for the following activities (U CGs), semi-structured interview, and the survey are:
- Aged 18 years or older
- Self-reported commercial sex within the last 6 months
- Lives in the Cape Metropolitan area in the Western Cape Province, the Johannesburg Metropolitan area in the Gauteng province, and the Eastern Cape Province.
- Sex at birth female
- Current Gender = Female or Transgender/female or identify as “other” than male or male.
- For inclusion of trans purposes, sex is defined as oral, vaginal, or anal sex.

Study Procedure
Phase 1: Rapid Ethnography
Phase 2: Pre-surveillance formative research
Phase 3: A behavioural survey and biological specimen collection

Size Estimation Methods
We currently do not know the number of trans women in South Africa.
HAST - HIV research focus areas

“We women are women with a different manner”

Keep away from our bedrooms. What we do in our bedrooms is none of your business.

Sexual Health of WSW in Four Western Cape Communities

Jill Henderson
Allanise Cloete
Mikki van Zyl

Triangle Project
December 2011
I work primarily with LGBT populations...

**LGBT (lesbian, gay, bisexual, transgender)**

- **Lesbian**: Women who are sexually/and or romantically, erotically, and/or emotionally attracted to some other women.
- **Gay**: A sexual and affectional orientation toward people of the same gender.
- **Bisexual** refers to men/women who identify their sexuality as being attracted to both men and women, or who are attracted to men, women and transgender individuals.
- **Transgender** people are those of us whose gender identity does not or is perceived to not match stereotypical gender norms associated with our assigned gender. (Prepared by Jody Marksamer and Dylan Vade)
I work primarily with LGBT populations…

- Gender identity is independent of sexuality:
  - Transgender people may identify as *straight, gay, bisexual*, or may consider conventional sexuality labels inadequate or inapplicable.

- Most transgender people want to transition their bodies to be more congruent with their identities; they often use medical technologies, such as cross-sex hormones, and undergo various types of surgeries –
Local terms and categories

• Various terms used to ‘categorise’ gay and bisexual men

• Terms that connote hidden sexual relationships between men – *after nines, cupboardy*

• Other terms have been socially constructed around notions of self-identification as gay, and to same sex men who are *out of the closet* – *stuzana, moffie, stabane,*
Local terms and categories

- I’m a gay man. I’m queer. I’m a moffie. Participant, HIV positive group, Cape Town.

- It does not matter about other people actually. I am a gay person. Participant, FGD, Soweto

- I would say gay; we are gay men only interested in men. Participant, Doornfontein FGD, Johannesburg

- You do not touch women if you are gay. You only want men, because I do not want to touch a woman, not at all. I want a man in my life. That is how it is, you see. Participant, Westbury FGD, Johannesburg
Lesbian
Gay
Bisexual
Transgender
Intersex: Adjective used to describe the experience of naturally (that is, without any medical intervention) developing primary or secondary sex characteristics that do not fit neatly into society's definitions of male or female.
• **Queer:** A person that does not want to label themselves as, e.g. lesbian, so they call themselves *queer* instead.

• **Questioning:** Someone that is questioning their sexual orientation, unsure which gender/s they are attracted to.

• **Asexual:** A sexual orientation generally characterized by not feeling sexual attraction or a desire for partnered sexuality. Asexuality is distinct from celibacy, which is the deliberate abstention from sexual activity. Some asexual people do have sex. There are many diverse ways of being asexual.
• **Pansexual**: *Used to describe people who have romantic, sexual or affectional desire for people of all genders and sexes.*

• **Kink**: *Most commonly referred to as unconventional sexual practices, from which people derive varying forms of pleasure and consensually play-out various forms of desire, fantasies and scenes.*

This glossary is available at:  
https://lgbtqia.ucdavis.edu/index.html
LGBT populations and HIV

In South Africa given the generalized nature of the HIV epidemic prevention, treatment, care and counselling services are not well suited for LGBT populations

Yet, HIV prevalence for gay and bisexual men are above the national average –
HIV infection risk

Worldwide, for gay and bisexual identified men, the odds of being infected with HIV are 19.3 times higher than for men in the general population.

Source: Baral et al., 2007, as cited in WHO Report “Pre-exposure prophylaxis for men who have sex with men”, July 2014
HIV infection risk

• Globally, transgender women have been shown to be at high risk for HIV infection.

• Transgender women are nearly 49 times more likely to be infected with HIV than other adults of reproductive age.
How does policy and legislation respond to bringing HIV prevention services to LGBT populations?
Our Constitution protects the rights of all people, but some old laws still discriminate against lesbians and gay men.
Policy and Legislation

- The “Alteration of Sex Description and Sex Status Act, 2003 (Act No. 49 of 2003)” makes provision for transgender people to align their bodies to their gender identity without necessarily requiring gender-conforming surgery.
Policy and Legislation
How responsive is the healthcare sector to the HIV prevention, treatment, care and counselling needs of LGBT populations?
How responsive…?

• Healthcare providers in major urban centres of South Africa the following:

• What do you think are the main challenges faced by LGBT populations living in South Africa with specific regard to HIV issues?

• What are some of their experiences of providing care, treatment and counselling to LGBT populations?

• What services are currently available for LGBT populations?
How responsive…?

• LGBT populations in major urban centres of South Africa the following:
  • What are your experiences when accessing the public health care services for seeking out HIV prevention, treatment and care services?
Healthcare provider perspectives

• Although these provide protection on paper, there are ambiguities in Act 49 which often result in delayed processing of applications for sex realignment.

• South African hospitals use gendered electronic filing systems that assign the gender of a patient according to the presented identification (ID) documents;
Healthcare provider perspectives

• “...But to be honest we haven’t had such a case”

• When healthcare providers do see LGBT clients at times there is uncertainty as to how to address those clients and this creates uneasiness between the client and the healthcare practitioner.

Participant: *The gender yes, when you are talking you don’t know must you say he, she…*

Interviewer: *She*

Participant: *You understand? Because they do become upset...*
Availability of HIV prevention, treatment, and care services for gay and bisexual men

- The scarcity of targeted HIV prevention and treatment services for gay and bisexual men

- In Johannesburg I do not know where to go. I must go to many places in order to know where bisexuals or gays can get help. I must seek around until I get the direction where to go. What they [government] can do is to ensure that the [services] are known and near to the people (FGD 1, Johannesburg)
Availability of HIV prevention, treatment, and care services for gay and bisexual men

- Health care services are not friendly towards LGBT and [HIV] programs are not strong enough and they [LGBT] have difficulty accessing services. The materials produced for awareness and behaviour change and access to care do not target this sector.

- Gay-identified people face challenges in terms of service provision – both the availability and appropriateness of health services.
Challenges with service provision (1)

• Public sector service availability and access
• Framework of heteronormative services
• Reluctance to access services
  
  I think the people feel self conscious, the inner fear of going to a public health facility to say “yes, I’ve engaged in this kind of behaviour” because they are afraid of what the health worker will say. Whether it’s real or not, perhaps the health worker may not …treat them any different, but I think it’s their perception that they might be treated differently and they do not want to admit that they have been with men (Key Informant, Johannesburg)
Challenges with service provision (2)

- Public sector health services perceived not to be LGBT-friendly:

  We go to clinics and hospitals, but most men having sex with other men do not reveal their sexual orientation because they are afraid of discrimination (Divas FGD, Durban)

- One participant had been asked about his sexual orientation by a counsellor:

  As soon as she became aware, she started giving him a lecture about how wrong it is to be homosexual, instead of counselling him (Divas FGD, Durban)

- Risk reduction, is provided within a framework of imposing moral and societal codes of ‘good behaviour’
Healthcare working training is needed

- Most healthcare providers have not received any specific training with regards to providing HIV prevention to LGBT populations

No, I never get any training for those specific people; I never get training for that (Adherence counsellor, female)
Conclusions

• South Africa’s constitutional protections afford countless opportunities to bring underserved populations out of the shadows and into the reach of public health interventions.

• Experiences of stigma (and/or perceived stigma) and discrimination impact negatively on various aspects of the lives of LGBT populations including their health seeking behaviour

• Improve responsiveness of healthcare system:
  • Prevention, treatment and care services
  • Targeted and specific information, education, communication
  • Training and orientation of healthcare providers
Recommendations

• Services and prevention information and methods to all clients including services for marginalised or vulnerable populations and must be provided without prejudice or bias.

• The understanding that a range of sexual practices may occur across both opposite-sex and same-sex partnerships and that sexual identity does not always determine sexual behaviour (e.g. with men, and women who see themselves as heterosexual may have sex with women) should be integrated into services.

• Services should be guided by a clear understanding of sexuality and the relationships between sexual behaviour, sexual practices and sexual identities.
THANK YOU
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