

Homophobia and HIV



KEY POINTS:

- Homophobia is "the irrational hatred, intolerance, and fear" of lesbian, gay, bisexual and transgender (LGBT) people, and is a form of discrimination.
- Acts of homophobia happen at an individual, cultural, structural or legal level and pose a major barrier to accessing and delivering HIV services.
- Not only is homophobia damaging to public health, but studies have also shown that there is an economic cost to homophobia which can significantly reduce a country's GDP.
- It is a human rights necessity for countries to adopt better community-based education strategies, in addition to legal reforms, in order to combat homophobia.

Explore this page to find out more about [homophobia and HIV](#), [how homophobia affects HIV service provision](#), [homophobia around the world](#), [the economic cost of homophobia](#) and [what can be done to tackle homophobia](#).

What is homophobia?

Homophobia is "the irrational hatred, intolerance, and fear" of lesbian, gay, bisexual and transgender (LGBT) people.

These views are expressed through homophobic behaviours such as negative comments, bullying, physical attacks, discrimination and negative media representation.¹

As well as the actions of individuals, homophobia may be expressed through actions of the state, such as punitive laws, as well as other social institutions. Some LGBT people may internalise negative attitudes towards same-sex attraction, this is called self-stigma.

Homophobia and HIV

Homophobia continues to be a major barrier to ending the global AIDS epidemic.

The global HIV epidemic has always been closely linked with negative attitudes towards LGBT people, especially [men who have sex with men](#) (sometimes referred to as [MSM](#)); a group that is particularly affected by HIV and AIDS.

At the beginning of HIV epidemic, in many countries gay men and other men who have sex with men were frequently singled out for abuse as they were seen to be responsible for the transmission of HIV. Sensational reporting in the press, which became increasingly homophobic, fuelled this view. Headlines such as “Alert over ‘gay plague’”,² and “‘Gay plague’ may lead to blood ban on homosexuals”³ demonised the LGBT community.

LGBT people face specific challenges and barriers, including violence, human right violations, stigma and discrimination. Criminalisation of same-sex relationships, cross-dressing, sodomy and ‘gender impersonation’ feeds into ‘social homophobia’ — everyday instances of discrimination — and both factors prevent LGBT people from accessing vital HIV prevention, testing, and treatment and care services.⁴ As a result, some LGBT people are unknowingly living with HIV or being diagnosed late when HIV is harder to treat.⁵

Moreover, research has shown that men who have sex with men may exhibit less health-seeking behaviour and have greater levels of depression, anxiety and substance misuse because of stigma they face⁶ For example, a study published in 2016 on men who have sex with men in China found that depression experienced by Chinese men who have sex with men due to community norms and feelings of self-stigma around homosexuality directly affected HIV testing uptake.⁷

A global study in 2013 found that young men who have sex with men experience higher levels of homophobia than older men who have sex with men, and also face greater obstructions to HIV services, housing and employment security.⁸ The loss of these forms of security often lead young men who have sex with men to adopt behaviour that puts them at risk of HIV (such as injecting drugs or exchanging sex for money).⁹

Yet the percentage of young men who have sex with men who are able to access cheap condoms, information about how to prevent HIV and other sexually transmitted infections (STIs), HIV and STI treatment is extremely low. Nearly half of the study’s young respondents who were living with HIV were not on antiretroviral treatment, compared to 17% of older respondents.¹⁰

In 2014, MSMGF (the Global Forum on men who have sex with men and HIV) conducted its third biennial Global Men's Health and Rights Study of just under 5,000 men who have sex with men from countries across the world. The results, published in 2016, indicate significant gaps in HIV prevention and treatment for both HIV-negative and HIV-positive men who have sex with men. It found perceptions and experiences of sexual stigma and discrimination to be associated with lower access to HIV services and lower odds of viral suppression, which is when treatment has successfully reduced the level of HIV in someone’s body to such a low level they are in good health and are unlikely to pass the virus on to someone else. Interestingly, participants in the study who reported higher levels of engagement with the gay community were significantly more likely to have had an HIV test and received the result; to have participated in HIV prevention programmes and, for those living with HIV, were significantly more likely to be retained in care, giving them higher odds of viral suppression.¹¹

Similarly, a study of men who have sex with men in Tijuana, Mexico found that self-stigma, or what the study describes as ‘internalised homophobia’ caused by cultural norms of machismo and homophobia, was strongly associated with never having tested for HIV, while testing for HIV was

associated with identifying as homosexual or gay and being more 'out' about having sex with men. The study cites evidence of HIV-positive men who have sex with both men and women yet avoid affiliation with the LGBT community out of fear of homophobia. It argues that innovative strategies are needed to engage non-gay-or-bisexual-identifying men who have sex with men in HIV testing programmes without exacerbating experiences of stigma and discrimination.¹²

A large proportion of men who have sex with men in both West and Central Africa and East and Southern Africa also engage in heterosexual sex, often with wives or other long-term female partners. For example, a 2015 study of men who have sex with men in Abidjan, Côte d'Ivoire found the most widespread sexual orientation among men who have sex with men to be bisexuality.¹³ The HIV epidemic among men who have sex with men is therefore interlaced with the epidemic in the wider population in these regions.¹⁴

How homophobia affects HIV service provision

The provision of HIV services that are specific to the needs of LGBT people remains inadequate in many countries, as the needs of people from these groups are not given priority by governments. HIV data relating to LGBT people is also grossly under-reported, inconclusive or not reported at all.¹⁵ For example, while Ukraine's National Target Program calls for tolerance and less discrimination towards people living with HIV, it does not specifically mention stigma against men who have sex with men or transgender people. As a result, these groups have very limited access to specialised programmes, even in comparison with other key populations such as people who inject drugs and sex workers.¹⁶ In addition, many programmes are typically focused on medical interventions and do not take into account human rights issues.¹⁷

Homophobia around the world

Despite the important number of countries repealing laws that discriminate against LGBT people, same-sex sexual acts were illegal in 73 countries and five entities as of June 2016. This is a decrease from 92 in 2006.¹⁸ Homosexual acts are punishable by death in 13 states (or parts of) including Sudan, Iran, Saudi Arabia, Nigeria and Somalia¹⁹, an increase from 9 countries in 2006.²⁰

Such criminalisation can deter men who have sex with men from seeking out HIV prevention, testing, treatment and other services when they need them.²¹

Societal opinions about the acceptance of homosexuality vary between regions, with acceptance prominent in [North America](#), [Western Europe](#) and most of [Latin America](#). Rejection was reported in Muslim nations, [Africa](#), parts of [Asia](#), [Central and Eastern Europe](#) and [Russia](#). Secular countries, as opposed to religious countries, are more accepting of homosexuality.²²

In 2016, the International Lesbian, Gay, Bisexual, Trans and Intersex Association began a yearly global attitudes survey to gather credible data on public attitudes to LGBTI people on every continent. The first year findings included responses from 54 countries and revealed strong regional differences. For example, to the question of 'How would you feel if your neighbour were gay, lesbian or bisexual?', less than half (43%) of African respondents and just 50% of Asian respondents said they would feel 'no concern'. More than three quarters of respondents answered positively in the Americas (81%), Europe (74%) and Oceania (83%). It is notable that 39% of respondents in Africa and 28% of respondents in Asia would be 'very uncomfortable'. The North African states of Egypt (26%), Morocco (33%) and Algeria (34%) displayed the least level of 'no concern' in Africa, and Indonesia (26%), Jordan (27%), Saudi Arabia (32%) in Asia.²³

Interestingly, more than 50% of participants from each of the countries included in the survey

responded favourably to the statement: 'Human rights should be applied to everyone, regardless of whom they feel attracted to or the gender they identify with'. Algeria was the lowest at 50%, and both Ireland and Italy were the highest at 78%. This suggests that many people living in countries with regressive legal and policy frameworks have attitudes that contradict their government's stance.²⁴

The economic cost of homophobia

As well as having a very real human cost, homophobia is also damaging to a country's economy. This is because stigma and discrimination based on sexual orientation and identity can result in fewer earnings, and fewer employment opportunities, for people who are LGBT, which results in less money going towards a country's gross domestic product (GDP). The barriers to health care faced by people who are LGBT, coupled with violence and mental health issues experienced by this population due to homophobia, can also cut short the number of years LGBT people are able to work, which again affects GDP.²⁵

To highlight this, UNAIDS included findings from the global Homophobic Climate Index (HCI) in its 2016 Prevention Gap Report. The HCI takes into account a country's laws on homosexuality, as well as its levels of 'social homophobia'. The closer the HCI is to 1.0, the higher the homophobia in that country.²⁶²⁷

The HCI found homophobic laws and social norms could be costing the world up to US \$119.1 billion of global GDP each year. It found the highest total cost of homophobia to be in Asia and the Pacific at US \$88.3 billion annually, although the region with the highest cost of homophobia as a share of GDP was the Middle East and North Africa, reaching 0.59% of GDP or US \$16.92 billion. The lowest cost of homophobia as a share of GDP was in Western and Central Europe and North America, at 0.13% of GDP, although this was still estimated to be costing the region US \$50 billion each year. Homophobia was estimated to be costing Latin America and the Caribbean up to US \$8.04 billion, Eastern Europe and Central Asia up to US \$10.85 billion and sub-Saharan Africa up to US \$4.9 billion.²⁸²⁹

What can be done to tackle homophobia?

Public campaigns

Public campaigns have proven successful in reaching large numbers of people with messages challenging homophobia.

In June 1969 LGBT people in Greenwich Village, New York City, staged an uprising against police harassment, centered around the Stonewall Inn. This marked the beginning of the Gay Pride movement and the explosion of hundreds of Gay Pride events that celebrate people who identify as LGBT in order to combat the stigma and discrimination that arises from homophobia.³⁰

InterPride, which represents Pride organisers around the world, estimates that more than 900 Gay Pride events take place each year. New York, Madrid and São Paulo hold the biggest Pride events. Increasingly, Pride events are being held in countries with explicitly hostile environments for LGBT people. For example, Pride events began in Rwanda and Jamaica in 2014 and 2015, respectively.³¹ However, other countries are seeing Pride events closed down as environments become more hostile towards LGBT people. For example, in May 2014 Crimea passed legislation which effectively prohibits any public displays of LGBT activities, which resulted in the banning of Crimea Pride in August 2015.³²

LGBT organisations in Uganda have been holding Pride events since 2012, which include a lesbian

and bisexual night, a transgender beauty pageant and the distribution of lubricants and condoms in Kampala. In 2016, police raided the Uganda Pride beauty pageant and arrested around 16 people. According to Human Rights Watch, police “detained hundreds more for over 90 minutes, beating and humiliating people; taking pictures of lesbian, gay, bisexual, transgender, and intersex Ugandans and threatening to publish them.”³³

Other large-scale public campaigns against homophobia have targeted specific areas of society such as sport. For example, the Rainbow Laces campaign in the [UK](#) encourages football players to wear rainbow laces in their football boots to show support for LGBT football players, reaching a wide audience with this positive message.³⁴

Schools

Schools have an important part to play in challenging homophobia. Homophobia is fuelled by lack of awareness, and educating young people about LGBT issues is fundamental to overcoming widely accepted prejudice.³⁵ However, even in countries that are more accepting of people who are LGBT and where legal frameworks are less hostile, education relating to LGBT sexualities and gender identity is often lacking. For example, in 2016 the Terrence Higgins Trust released a report on sexual and reproductive education (SRE) in British schools, based on a survey of more than 900 young people (ages 16-24). It found that only 5% had been taught about LGBT relationships during SRE lessons.³⁶

My SRE at secondary school consisted of nothing whatsoever. In primary school I watched an animated video of a heterosexual couple having a pillow fight. This lack of, or non-existent, education in school has led to me feeling unprepared for life and unaccepting of who I am.

*Lauren Young, 18, survey respondent*³⁷

Civil society

Community-based organisations (CBOs) play an important role in addressing homophobia. They have the scope to provide support to LGBT people who might feel marginalised and isolated, especially in societies where homosexuality is illegal. Such groups can also influence the attitudes of the general public and can campaign for tolerance towards homosexuality. For example, the Rural Movement Initiative (RUMI) in Mbale, Uganda, provides condoms, HIV testing and other potentially life saving services to a hidden network of LGBT people in rural areas.³⁸

Many LGBT people are too shy to go to health centres to get services as they face a lot of discrimination when they get there. There is an idea that you can contaminate people somehow. I came out as bisexual the same year as I started RUMI and I’ve experienced many difficult situations since. Once I went to get

tested for HIV and I realised the doctor did not want to touch me. They separated me from the rest of the people in the clinic. That really brought my heart down. If it can happen to me, who can stand up for myself, what will happen to those who cannot speak out?

- Brian Byamukama, founder of RUMI³⁹

In October 2016, the International HIV/AIDS Alliance launched a US \$4 million Rapid Response Fund to support LGBT-led CBOs working on HIV prevention and services for LGBT people whose work is endangered by stigma, discrimination and violence. The fund is available in 29 countries and issues grants of up to \$20,000.⁴⁰

Global and regional LGBT networks also play an important role in combating homophobia and advancing rights. Examples include:

Global Forum on MSM and HIV (MSMGF)

An expanding network directly linked with more than 130 CBOs across 73 countries which is working to ensure an effective response to HIV among gay men and other men who have sex with men.⁴¹

African Men for Sexual Health and Rights (AMSHeR)

A coalition of 18 LGBT/MSM-led organisations across sub-Saharan Africa that addresses the disproportionate effect of the HIV epidemic on men who have sex with men and LGBT people and seeks to redress human rights violations and increase the visibility of LGBT people and their issues.⁴²

The way forward

Within the HIV response, leaving no one behind is both a moral and human rights imperative and a public health necessity. LGBT people face multiple HIV-related vulnerabilities, fuelled by inequalities and prejudices and entrenched within the legal, social and economic structures of society.⁴³

Combating homophobia takes a two-fold approach: tackling the laws that criminalise same-sex activity and non traditional gender identities and changing the way LGBT people are treated by others and by societies at large. The fact that LGBT-led CBOs are now operating in countries with some of the most hostile environments⁴⁴ is tangible evidence that progress against homophobia is being made. But, while many governments throughout the world uphold laws that ban homosexuality, homophobia will remain. Repealing these laws is essential to encouraging societies to embrace the diversity of different sexualities, and open up access to essential HIV services.⁴⁵

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