

HIV Prevention among Township Men Who Have Sex with Men in South Africa

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Project Description

This project has two aims:

1. To describe collective and individual belief systems of low-income township men who have sex with men (MSM) related to their sexuality, sexual health, choice of sexual partners, use of drugs and alcohol, use of condoms, utilization of health services, HIV voluntary counseling and testing (VCT) and disclosure of HIV status, in order to describe prevailing cultural norms around these subjects' behaviors
2. To assess the prevalence of HIV risk factors and HIV infection among MSM from Soweto township.

This study is the first of its kind in South Africa. Through in-depth interviews, focus group discussions, and structured observations of MSM social venues, we have been able to describe the gender identities and sexualities that are prevalent in township MSM communities. We will estimate the prevalence of risk behaviors and HIV infection in Soweto using respondent-driven sampling methodology. This will be the first HIV prevalence data for an MSM community in South Africa.

Significance

MSM in sub-Saharan Africa are highly vulnerable to HIV infection, but very little specific cultural, behavioral or epidemiological data exists about African MSM populations. Such information is crucial to the development and evaluation of behavioral interventions that can prevent the sexual transmission of HIV.

Interesting Findings

We looked at the relationship between MSM and their healthcare workers (HCW).

- MSM felt their options for non-stigmatising sexual healthcare services were limited by homophobic verbal harassment by HCW
- Gay-identified men sought out clinics with reputations for employing HCW who respected their privacy and their sexuality and challenged those HCW who mistreated them
- Non-gay-identified MSM presented masculine, heterosexual identities when presenting for sexual health problems and avoided discussing their sexuality with HCW
- The strategies MSM employ to confront or avoid homophobia from HCW may not be conducive to sexual health promotion in this population
- Interventions that increase the capacity of public sector HCW to provide appropriate sexual health services to MSM are urgently needed

Project Recruitment Dates: April 2006-July 2008

Project End Date: December 2010