

March 5, 2010

An Open Letter to the HIV and Public Health Community in Uganda

The Global Forum on MSM & HIV (MSMGF) applauds efforts by people living with HIV in Uganda to stand up against the proposed “Anti-Homosexuality Bill, 2009”, and urges HIV service providers in the country to join them by making a clear, collective public statement condemning the proposed legislation and calling for its immediate dissolution. If enacted, this legislation will have a profoundly detrimental impact upon the effort to address HIV in Uganda. Implementing organizations dedicated to delivering HIV & AIDS prevention, treatment and care services in Uganda have contributed enormously to fighting the epidemic on the ground, and as such are uniquely positioned to speak out against the bill - especially those implementers receiving significant funding from large global donors like PEPFAR and the Global Fund. Moreover, implementers have an obligation to the health and safety of all people in the communities they serve, including gay men and other men who have sex with men (MSM), their families, their loved ones, and agencies who work to provide them essential health services. Protecting and promoting public health includes weighing in on any debate that threatens to undermine HIV service implementers’ ability to deliver effective public health programs.

The MSMGF is deeply concerned about the ways in which the proposed anti-homosexuality bill will undermine the nation’s efforts in addressing the HIV epidemic:

First, the bill is very clear with regards to people living with HIV: anyone charged with the offense of aggravated homosexuality will undergo HIV testing, and all those found to be HIV positive are subject to the death penalty. Simply put, one’s HIV status is grounds for execution. This proposal not only reinforces stigma, discrimination and violence against people living with HIV, it is an outrageous violation of human rights and should be roundly condemned by all committed to the effort to end HIV.

Second, the extreme criminal penalties proposed in the bill further marginalize MSM, a community that is already criminalized in Uganda, as well as highly stigmatized and vulnerable to HIV infection. In low and middle-income countries, MSM are 19 times more likely to be infected with HIV than the general populationⁱ. The gold standard public health principle for addressing HIV – “know your epidemic, know your response” – necessitates targeting HIV-related services at most-at-risk communities. The harsh penalties in this bill drive MSM underground, fueling HIV risk and transmission in a context of silence and fear, and making it difficult to (a) assess the HIV burden among MSM, and (b) subsequently reach out to high-risk individuals with essential information and services. Uganda’s own AIDS Commission has specifically called for a review of legal impediments to the inclusion of most-at-risk populations – including MSM – in the national AIDS responseⁱⁱ.

Third, conditions in the bill against the “promotion of homosexuality” are vague, raising serious concerns that AIDS service providers’ work to provide critical HIV-related information and services tailored to the needs of MSM may be considered illegal. Without clear guidance on what specifically



constitutes “promotion of homosexuality”, the materials necessary for HIV prevention among MSM would be classified as homosexual “promotional materials”, even though such products and information are integral to save lives and prevent transmission of HIV. The 2009 AIDS Epidemic Update (UNAIDS) explicitly highlights the need to implement prevention programs for MSM and other key populations of higher risk as an important part of all national AIDS responsesⁱⁱⁱ. Given the severe nature of the proposed sentencing - convicted organizations are liable to having their registration cancelled and their executive director imprisoned for seven years - it is reasonable to expect most AIDS service organizations to halt vital HIV-related outreach to key affected populations for fear of possible broad interpretation of the law that would invoke criminal penalties.

Finally, the bill would jeopardize the critical relationship between healthcare providers and patients seeking HIV-related services by mandating that any person, including doctors, report suspected homosexuality to the authorities. In such an environment, people who may be at risk for HIV will delay seeking information and services, or may not present to healthcare facilities at all. Early identification of people living with HIV is a critical public health imperative in the prevention of onward transmission, and these provisions would seriously undermine the ability of the National AIDS Response to do so effectively.

In sum, the Anti-Homosexuality Bill will fundamentally compromise the effectiveness of the HIV response in Uganda. **We urge HIV service providers, including international non-governmental organizations, committed to halting and reversing the spread of HIV in Uganda to stand with us in calling on legislators to withdraw the bill under question immediately.** We share a collective responsibility to speak out in the interests of the communities we serve, and every voice is paramount in our work to challenge discriminatory public policy practices that undermine our efforts to end AIDS.

Sincerely,

The Global Forum on MSM & HIV

The Global Forum on MSM & HIV (MSMGF) is an expanding network of AIDS organizations, MSM networks, and advocates committed to ensuring robust coverage of and equitable access to effective HIV prevention, care, treatment, and support services tailored to the needs of gay men and other MSM. Guided by a Steering Committee of 20 members from 17 countries situated mainly in the Global South, and with administrative and fiscal support from AIDS Project Los Angeles (APLA), the MSMGF works to promote MSM health and human rights worldwide through advocacy, information exchange, knowledge production, networking, and capacity building.

ⁱ Baral S, Sifakis F, Cleghorn F, Beyrer C. Elevated Risk for HIV Infection among Men Who Have Sex with Men in Low- and Middle-Income Countries 2000-2006: A Systematic Review. *PLoS Med.* 2007 Dec;4(12):e339

ⁱⁱ Republic of Uganda. UGANDA: HIV Prevention Response and Modes of Transmission Analysis. Final Report, March 2009. Uganda AIDS Commission and UNAIDS.

ⁱⁱⁱ UNAIDS. 2009 AIDS Epidemic Update. <http://www.unaids.org/en/KnowledgeCentre/HIVData/EpiUpdate/EpiUpdArchive/2009/default.asp>. Accessed January 3, 2010.