

# MEN WHO HAVE SEX WITH MEN IN BURKINA FASO, SENEGAL, AND THE GAMBIA: THE MULTI-COUNTRY HIV/AIDS PROGRAM APPROACH

Cheikh I.Niang, University Cheikh Anta Diop, Dakar, Sénégal  
 Amadou Moreau, Horizons/Population Council, Dakar, Sénégal  
 Kees Kostermans and Hans Binswanger, World Bank, Washington DC, United States  
 Cyrille Compaoré, Population Council, Ouagadougou, Burkina Faso  
 Moustapha Diagne, University Cheikh Anta Diop, Dakar  
 Placide Tapsoba, Horizons/Population Council, Accra, Ghana

## Background

Although the vast majority of HIV/AIDS transmission in Africa occurs heterosexually, the contribution of homosexual transmission is unclear. Men who have sex with men (MSM) are vulnerable to HIV transmission but largely overlooked in Africa.

The overall objective of the World Bank Multi-Country HIV/AIDS Program (MAP) is to greatly increase “access to HIV/AIDS prevention, care, support, and treatment programs, with emphasis on vulnerable groups, particularly MSM”.<sup>1</sup> The initiative is geographically focused on Burkina Faso, Senegal and the Gambia.

<sup>1</sup> World Bank. MAP2 for the Africa region. 2001.

## Aims

The specific aims of the MAP program assessment study were to:

- Assess deficits in HIV/AIDS knowledge among MSM.
- Assess sensitivity to MSM in volunteer counseling and testing (VCT).
- Identify projects and programs addressing MSM, and analyze their strategies and lessons for possible wider applicability.
- Identify experts, institutions, and organizations working on MSM in the selected countries or internationally.
- Encourage organizations and institutions working on “gender” issues in HIV/AIDS to include a MSM focus.

## Methods

Participatory ethnographic techniques were used to explore the socio-cultural context of MSM, including focus group discussions and key informant interviews with MSM, service providers and NGO staff, and to make suggestions of service strategies.

## Results

### Findings from the assessment in revealed that:

- MSM practice is criminalized.
- MSM cuts across all social classes.
- Virtually all respondents reported being stigmatized, rejected, or hiding their practice.
- MSM rarely use condoms and appropriate lubricants.

### MSM vulnerability to HIV/STIs was found to be similar in all the countries:

- High levels of unprotected anal sex (examples: 23% insertive and 14% receptive sex use condoms in Senegal).
- Obstacles to condom use included reduced pleasure, lack of trust, and lack of power.
- High levels of reported STI symptoms (Senegal findings: 42% burning or penile discharge, 22% anal lesions or pustule).
- Knowledge gaps about HIV/AIDS and VCT services among MSM
- Delayed health-seeking behavior and concealment.
- Judgmental providers and lack of confidentiality at clinics.

### Ongoing challenges:

- Local researchers so far did not want to be associated with research on MSM (usually done by foreigners).
- Government, NGO partners, and donors are reluctant to support programs for MSM.
- No program funds for water-based lubricants.
- Most service recipients are young, unemployed and financially deprived.

## Recommendations for next steps

MSM must be recognized among the vulnerable groups lacking access to HIV/AIDS prevention, care, support, and treatment programs. Program managers and service providers must address the reality that sex between men occurs across Africa, and raises issues of stigma and violence. HIV/AIDS prevention, care and treatment programs must address the human rights of MSM to accessing appropriate health care services.