

STIGMA AND DISCRIMINATION

By Sheila B. Gashishiri, Newvision Dec 1 2003

Discrimination is one of the most significant human right abuses in the area of HIV/AIDs. A recent chilling example is the killing of an NGO volunteer who had publicly acknowledged her HIV status on World AIDS Day, 1998.

Stigma refers to the negative thoughts about a person or group based on prejudiced positions. The undesirable and the spoiled identities that HIV/AIDS causes related stigma do naturally exist but are created by individuals and communities. "Do you have time?", is the National AIDS trust for World AIDS Day 2003 campaign to increase awareness of HIV/AIDS related stigma and discrimination.

Stigma and discrimination are recognised as major factors fuelling the global HIV epidemic, creating a climate for fear and ignorance and a reluctance to confront rising infection rates.

It is a growing problem. UNAIDS has targeted HIV related-stigma and discrimination in a two-year initiative to reduce the harmful effect faced by people living with HIV. Earlier this year, an on-going campaign, "Are you HIV prejudiced?", was launched in the United Kingdom and it aims at combating HIV stigma and discrimination in the UK and beyond.

"HIV/AIDS related stigma builds upon and reinforces earlier prejudices. It plays into and reinforces existing social inequalities especially those on gender, sexuality and race," says Dr. Zainab Akol, a Senior Medical Officer, for AIDS control Programme at the Ministry of Health. She adds that HIV related discrimination is an action that results from stigma. It occurs when distinction is made against a person that results in their being treated unfairly and unjustly on the basis of their actual or presumed HIV status of belonging, or being perceived to belong to a particular group.

HIV/AIDS stigma and discrimination is wide spread, resulting into rejection, denial, discrediting, which consequently leads to violation of human rights particularly those of women and children.

One concrete aspect of HIV related discrimination is found in the formal sector employment. For example the UNAIDS handbook summarises some of the forms of discrimination in the formal sector to include; rejection, backbiting and gossiping of people living with AIDS (PLWAs).

"Employers may refuse employment to potential employees who have HIV or sack those already working and demanding for screening of employees before jobs are given" Obviously, practices in informal-sector employment represent a small fraction of all the

situations in which HIV related discrimination might take place. Though discrimination in the work places has proved to be the most common”, states in the UNAIDS handbook.

Dr Akol also outlines other different forms of discrimination to include the individual and family level says that women are normally stigmatised more than men because they are wrongly perceived as ‘transmitter’s of STDs and AIDS.

Where as at the community level, community members may demand to know or disclose the HIV status of fellow community members.

At the health facility, the hospital staff may refuse to attend to AIDS patients, carrying HIV testing without the consent of patients and breach of confidentiality by disclosing to others the patients’ HIV status.

In order to reduce stigma and discrimination, the Ministry of Health has embarked on a sensitisation campaign. There have been challenges to enact or strengthen anti-discrimination and other protective laws that protect vulnerable groups, people living with HIV/AIDS and those with disabilities from discrimination in both the public and private sectors. This will ensure privacy, confidentiality and ethics in research involving human subjects, emphasis on education and provision of speedy, administrative and civil remedies.

“The Ministry has implemented advocacy campaigns in which all people are educated about how HIV/AIDS is transmitted and how it is not transmitted and has also demystified misconceptions surrounding the transmission of HIV/AIDS,” says Dr. Joshua Musunguzi of ACP/MoH. “Specific clinics and health units have been put in place to care especially for the sick”. There are also voluntary, counselling and testing services to be accessed by those who would like to know of their HIV status as well as counselling services for all.

Also Dr. Akol says that the government has an obligation to respect and fulfil the human rights of PLWAs that is why it has also been very serious in providing drugs, care and support to the sick so that they do not physically appear clinically sick. “People living with AIDS have been empowered through routine counselling so that they don’t feel like it is their fault that they acquired the virus hence stop stigma”.

Apart from rejection of the sick, there’s however, need for positive discrimination that is necessary for the patient and the people surrounding him/her. For example, preparing of specific meals for the sick, not sharing very personal belongings like kitchen utensils, lavatories especially with people who have contracted diseases like; Tuberculosis, diarrhoea; letting PLWAs to do light work at their places of employment, delivering HIV positive mothers in a special manners, ensuring private rooms for the patients so that they can have enough time to rest with no disturbances.

In light of all this, patients have also been challenged to go for regular counselling and socio-psycho support form the various clinics. “It will be through this that they will gain

continued education so that they don't experience psychological discrimination", says Dr Akol.

The challenge also goes out to the public that these PLWAs are normal people. They need our love, attention and care in order to live out the rest of their lives in a state of mental and physical well being.

"PLWAs have their rights and discrimination is a violation of their human rights and those who are not bed ridden are useful and productive members of the society – they should be allowed to play their part in a national development", said Dr. Akol. Remember any one can be infected with AIDS at any time therefore families and communities need to help their loved ones to accept their status and cope with it through counselling.