

Criminalization of LGBT People and Those Living With HIV Threatens Global Progress Against AIDS

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When Uganda President Yoweri Museveni visited the White House during the U.S.-Africa Leaders Summit last month, a high court had just overturned his country's widely reviled "Anti-Homosexuality Law" which penalized "aggravated homosexuality" with life in prison, and criminalized the provision of services and support to gay people, threatening progress in that country's long battle against HIV.

The elimination of the law, which President Barack Obama had warned Museveni would "complicate" the relationship between their two countries, allowed Museveni to focus on the summit, centered around growth, economic development, and the theme of "investing in the next generation." In many sub-Saharan African countries, no greater threat to growth exists than the impact of HIV on human resources, development and income.

The irony is that by then, Museveni had apparently decided to sign the "HIV Prevention and Control Act," a new setback to Uganda's HIV fight. The law criminalizes HIV transmission and "attempted" transmission; forces involuntary testing on survivors of sexual assault, all pregnant women, and anyone who "unreasonably" withholds consent for testing; and encourages medical providers to divulge patients' HIV status. In addition to promising a further erosion of human rights in Uganda, the law provides a powerful disincentive for Ugandans to risk criminal

culpability by getting tested for HIV, or seek medical care at all. United States Global AIDS Coordinator Ambassador Deborah Birx, who leads the President's Emergency Plan for AIDS Relief (PEPFAR), Uganda's longtime partner and funder in fighting its HIV epidemic, called on the government of Uganda to reject the bill when the parliament passed it in May.

While Museveni's signature on the law, revealed only after the Washington summit, is dated July 31, 2014, reports say it was backdated, making it likely he signed the law after posting a photo to Twitter of himself between President Barack and First Lady Michelle Obama. Either way, he signed it within a few days of meeting with U.S. leaders to discuss ways to foster growth and opportunity in Africa, while being aware that his support for such legislation was in conflict with the goals of PEPFAR, and the U.S. Government.

The latest law raises questions of how many opportunities have been squandered, not just during the week of the U.S.-Africa Leaders' summit but also during the last decade of the global HIV response, to communicate the importance of human rights and sound public health approaches to "investing in the next generation." Museveni was representing a country with grave human rights abuses enshrined in law. Nigerian President Goodluck Jonathan, who signed his country's anti-homosexuality law earlier this year, also attended. Other leaders represented countries that already had HIV criminalization laws, as well as laws abusing the rights of gay people, women, ethnic minorities, immigrants, and migrants, and other important populations to reach if these countries hope to have lasting success in controlling their national HIV epidemics.

To communicate the link between health and human rights, however, the United States has to set a credible example. The ability to do that is challenged by HIV criminalization laws on the books of at least 33 states in this country. It also is challenged by an inconsistency. President Obama rightly issued sanctions in response to Uganda's Anti-Homosexuality Law, and those may have factored into the nullification of that law. However, PEPFAR had by then been funding activities for a decade at the Inter-Religious Council of Uganda, an organization that urged the signing of the Anti-Homosexuality Law, and then celebrated when it was signed. When their funding ended in the wake of the new law, the group's leaders claimed surprise that their stance was held against them, apparently still unaware that homophobic abuse ran counter to the mission they had been enlisted to carry out.

A decade-long public health partnership between the U.S. and African countries should have clarified, by words, actions and example, that human rights are critical to success in stopping the spread of HIV/AIDS throughout the world, particularly in those countries hardest hit by the epidemic. Any new public health partnerships must make this a priority.