

Socio-Cultural Construction of
HIV/AIDS Stigma among African-
migrant women in Lower Saxony,
Germany.

Joyceline Ntoh Yuh
University of Oldenburg
Germany.

Outline

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Introduction

- Despite the several HIV/AIDS prevention & treatment intervention programs, stigma continues to stand as a blight.
- Still new infection cases world wide with others not knowing their status(undiagnosed cases).
- HIV/AIDS currently gaining scant attention or no longer considered,a major health crisis.
- High levels of stigma due to socio-cultural

Background of the problem

- Migration not only linked to socio-cultural changes, integration problems, economic growth, crime etc...
- Migration also associated with disease e.g migrants including tourists and expatriates who cross international borders move with diseases that are not easy to detect.
- AIDS country report in Germany—est of 9000 migrants from high prevalence countries were infected, while 10–20% after migrating

Background of the problem.

Cont...

- HIV-positive migrants mostly from Sub-Saharan Africa(experiencing high risk of infection from their home countries,while others become infected due to risk in Germany).
- Highest mode of transmission in Sub-Saharan Africa is through sexual coitus with infected persons.
- 2013-est.80,000 PLWA in Germany with 4,400 in the state of Lower saxony,970 women

Background of the problem.end

- Further statistics includes 3400 sero-positive men(including gay community(2600) which records a high prevalence—mostly non Africans)
- An estimate of 210 new infection cases was recorded in the state, with about a 1000 via heterosexual contact.
- Stigma continues to be manifested at different levels within the society which differs e.g African migrant communities, integration problems & language barriers

Purpose & Objective of study

- Is to understand the socio-cultural construction of HIV-related stigma affecting HIV-positive women in the state of Lower Saxony.& the dilemmas they encounter.
- Stigma label on African positive women leads to negative effects on their self esteem, aspirations
- Negative behaviours & attitudes with diverse outcomes

Objectives of study

- To examine the challenges faced by HIV-positive African women migrants in relation to stigma within the state
- Investigate HIV-related stigma perceptions and attitudes in the state
- Find out barriers obscuring HIV-positive African women migrant in seeking support services

Problem statement

- In the face of HIV/AIDS, women in Africa are often blamed for contracting the virus and transmitting it to others
- HIV-related stigma is a gendered concept affecting men and women differently (HIV+ women are more stigmatized in their home countries not ruling out home countries)
- Need to understand underlying lay discourses surrounding stigma construction among gay communities in Germany to better understand & compare

Research questions

- Open ended questions
- *What are the processes that construct stigma using intersectionality framework within the context of HIV/AIDS?*
- *What are the dilemmas faced by HIV-migrant women?*
- *How do these women deal with challenges, especially in seeking social support and health care services?*

Significance of study

- HIV-research in Germany mostly focus on the medical aspect targeting prevention, testing, treatment without addressing underlying issues creating stigma.
- The various socio-cultural factors that constructs stigma will also highlight power differences between dominate and subordinates
- It would serve as an eye opener for policy members NGOs & social workers carrying

Theoretical framework

- Intersectionality: Used for analysis bringing out the realities of women's lives & their experiences
- Intersectionality arose out of a critique gender based & race based research failing to account for lived experiences at neglected point of intersection.
- Challenging us to look at the different positioning of women, bringing out the complexity that plays between advantaged & disadvantaged (distorting the multidimension of black women's experiences)

Theoretical framework.cont

- Multiple factors often precipitate stigmatization experiences and their social identities at individual level such as being female, ethnic minority (or race), low economic status.
- All the above interlocks with oppression forces at the macro level e.g. classism or sexism which creates social injustice.
- Not just HIV that precipitates stigma but multiple factors mentioned above.
- Therefore, stigma is very much socio-cultural phenomenon and not generated by positive status alone e.g. stigma & sexuality, stigma &

Previous research

- Researchers point out the fact that stigma is hooked up with other pre-existing stigmatizing whereby one stigma conflated with the stigma of the other.
- Studies in Tanzania & Uganda shows that Church based organizations have been proven to both foster and mitigate stigma.
- HIV(Stigma) & Gender: Women are a subordinated group with several cultural expectations, norms etc
- Research in Ghana attributes stigma to immorality due to cultural values against prostitution & immorality.
- Germany: Gay community & little info about African

Methodology & conclusion

- Qualitative methods: Ethnographic research to provide in depth and accurate descriptions
- The research will aid in explicating a phenomenon in a cultural sensitive way
- Purposive sampling and convenience sample of 18 respondents would be interviewed (ample size to generate data). Those who are negative and who don't know their status will also be involved
- Jonathan Mann founder of WHO Global program on AIDS: 3 stages of the epidemic, after the initial silent spread of virus came the outbreak of

Thank you



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**Challenging HIV and
AIDS discrimination**