

Monkeypox and Stigma: *Back to the future?*

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10th BREACH Symposium – Dolce La Hulpe

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Who is speaking?

- Community health worker
- MSM health organisation (Ex Aequo)
- Gay man
- Didn't get infected with monkeypox
- Voice of the community/of patients
- Field expertise

ASBL Ex Aequo

- Community based organisation (CBO) by/with/for MSM
- Brussels and Wallonia
- MSM health
- HIV/STI community tests
- Knowledge = power
 - Informational leaflet
 - Websites (exaequo.be, chemsex.be, depistage.be)
 - Up to date information on mpv



Conflict of interest

- Gilead
- ViiV Healthcare
- Euroclear
- Cocof
- AVIQ

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What we have witnessed

- Worries within the community
- Historically and systemically marginalised groups (MSM, SW)
- Overworked/under pressure health workers
- Post-covid context (focus on individual responsibility)
- Very limited possibilities to mpv epidemics (testing, vaccination)
- Stigma within the community

Risks and stigmatisation

- Definition of stigma
- Seek care less
- Less testing
- Less partner notification
- Outrage, trauma

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Variole du singe: «Ce virus est lié à une banalisation des rapports sexuels»

Pour l'infectiologue Nathan Clumeck, la pandémie de variole du singe ressemble à celle du sida, mais heureusement elle est moins létale. Pour se propager, le virus profite des comportements à risque, comme la multiplicité des partenaires sexuels. Un véritable travail de prévention est nécessaire et urgent.

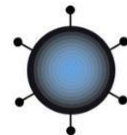
Article réservé aux abonnés



Journaliste au service Société
Par **Anne-Sophie Leurquin**

Publié le 3/08/2022 à 06:00 | Temps de lecture: 5 min

l'épidémie de variole du singe a quitté les zones endémiques d'Afrique



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ExAequo ? / Publications / Exæquo répond à l'article du soir sur la variole du singe (03/08/2022)

VARIOLE DU SINGE : NE STIGMATISONS PAS LES HOMMES GAYS ET BISEXUELS

En réaction à un article paru le 3 août dans Le Soir concernant la variole du singe, l'ASBL Ex æquo dénonce les propos tenus par le Pr Nathan Clumeck, et exprime sa solidarité avec les hommes gays et bisexuels qui sont injustement stigmatisés en raison de leurs pratiques sexuelles. Fort heureusement, ces propos jugeants ne sont pas partagés par les nombreux-euses médecins, notamment au CHU Saint-Pierre, qui œuvrent à nos côtés et que nous remercions pour la qualité de la collaboration que nous construisons depuis de nombreuses années, et tout particulièrement ces dernières semaines sur la variole du singe.

Depuis le début de l'épidémie de variole du singe ou monkeypox, l'OMS et de nombreuses autres autorités de santé n'ont cessé d'appeler à une vigilance vis-à-vis d'une stigmatisation fondée sur l'orientation sexuelle ou sur les pratiques sexuelles, comme cela a été le cas aux débuts de l'épidémie du sida et continue à l'être aujourd'hui. Les propos tenus par le Pr Nathan Clumeck, dont Le Soir a choisi de se faire l'écho, sont irresponsables et risquent d'avoir des effets délétères sur l'accès aux informations et aux services de soins pour les personnes visées.

En tant qu'association communautaire de lutte contre le VIH et de promotion de la santé sexuelle et globale chez les hommes gays, bisexuels ou ayant des relations sexuelles avec d'autres hommes, nous défendons une approche de réduction des risques fondée sur l'information et centrée sur la personne, c'est-à-dire qui prend en compte avec empathie et sans jugement la réalité des bénéficiaires et qui renforce leur capacité à prendre soin de leur santé. La meilleure protection, c'est celle que la personne aura choisie, car elle est adaptée à ses pratiques.

En ce sens, nous tenons à affirmer qu'il n'y a rien d'intrinsèquement mal ou honteux dans la multiplicité des relations sexuelles et les changements de partenaires. Ce ne sont pas ces comportements qu'il convient de prévenir ou d'éviter de banaliser, mais bien les risques qui y sont associés. Les associations et les médecins qui travaillent sur la variole du singe n'ont jamais caché le lien qui existe entre la sexualité et la variole du singe ou les infections sexuellement transmissibles (IST). S'il est vrai que les hommes gays et bisexuels font partie des groupes les plus exposés au risque de contracter le VIH et d'autres IST, nous

Community answer to stigma

- Reliable information
- Direct contact with the community (newsletters, social networks, dating apps)
- Collaboration with health facilities
- Finding ways around, feedback from the community

What has AIDS changed?

- Community based organisations, heritage of HIV/AIDS
- LGBTQI rights have improved
- Cultural/media shift
- Outreach
- MPX ≠ AIDS
 - Number of cases
 - Vaccine
 - Media coverage
 - Shorter epidemic
 - MSM still more exposed

What has been learnt?

- Involve community organisation in decision taking/implementation (ex: letter from GP was a terrible idea)
- Community organisation as a direct channel for communication (social networks)
- Use existing professional networks
- Listen to individual stories
- Strengthen bonds between CBOs and hospitals/GPs
- MSM actually trust their CBOs



Resources

- Resources from WHO



Risk communications and community engagement public health advice on understanding, preventing and addressing stigma and discrimination related to monkeypox

1 September 2022

This public health advice from WHO provides information on the potential impact of stigma, recommended language and actions to counter stigmatizing attitudes and discriminatory behaviours and policies related to the monkeypox outbreak. It will be updated as more is known about effective strategies against stigma and discrimination in the context of this outbreak.

Overview

An outbreak of monkeypox, a viral infectious disease, is currently being reported in countries where the disease had not been found before. The risk of monkeypox is not limited to any one community or any one place. Anyone who has close contact with someone who is infectious is at risk.

Outbreaks of monkeypox in newly affected countries have mostly been identified in communities of gay, bisexual and other men who have sex with men who have had recent sexual contact with a new partner or partners. Communities of trans and gender diverse people linked to the same sexual networks have also been affected.

While the risk is not limited to these groups, the outbreak has become an additional focus for stigma and discrimination directed against men who have sex with men, trans people and broader lesbian, gay, bisexual, trans, queer and intersex communities and their families. Similarly, stigma, discrimination and other expressions of racism towards communities from previously affected regions has increased as a result of the new outbreak of monkeypox.

Stigma and discrimination connected to any disease, including monkeypox, are never acceptable. They can have a serious impact on

The impact of stigma and discrimination on the monkeypox outbreak must be mitigated through active strategies to prevent people being unable or unwilling to access health services and support and to create an enabling environment where people feel able to report their symptoms.

A note before we start

People often stigmatize others without being aware that they're doing it, and without any malicious intent. People automatically make judgments about others without realizing how it might affect them. In fact, most people have felt ostracized or been treated like a minority at some time in their lives. We all find ourselves perpetuating harmful stereotypes or falling back on unconscious biases at times. Being aware of one's own unconscious bias is important, but even more important is to not allow those implicit biases to cause discrimination to be enabled or ignored.

Proactively reflecting and acting on our own language, behaviour and intentions as individuals and as agencies is essential to reducing the harm caused by stigma and discrimination. Having good intentions is not enough – this



- » Do use language like 'responding to' when talking about what is being done to stop the monkeypox outbreak.

- » Don't use combative language like 'fighting' monkeypox.

- » Do speak accurately about the risk, based upon the latest science and health advice.

- » Don't repeat or share rumors or misinformation.

- » Do talk positively, emphasizing the fact that most people will recover on their own, and the effectiveness of prevention and treatment measures.

- » Don't overemphasize or dwell on the negative or the threat.

- » Don't use hyperbolic language or language that generates fear.

- » Do be careful and conscientious when choosing photos or developing graphics to show monkeypox symptoms. Protect people's privacy and right to anonymity.

- » Don't use images that can identify individuals or use images without personal consent.

When talking about the gay and bisexual men and other men who have sex with men, sexual orientation and gender identities:

- » Do focus on patterns we are currently seeing in the data, for example, 'Many of the cases we are currently seeing are in communities of men who have sex with men'.

- » Do emphasize that everyone who has close contact with someone who is infectious is at risk of monkeypox.

- » Don't imply that only men who have sex with men are at risk.

- » Do use the term 'sexual orientation' when talking about the sex or gender of the person or people are attracted to.

- » Don't use the term 'sexual preference.' Sexual orientation refers to a person's physical, romantic and/or emotional attraction towards other people. It is comprised of three elements: sexual attraction, sexual behavior, and sexual identity (WHO, 2016).

- » Do use 'gay, bisexual and other men who have sex with men' when talking directly to these groups, and 'men who have sex with men' when talking more generally.

- » Don't use acronyms like MSM when speaking as this can be perceived as lazy and dehumanizing – talk about men who have sex with men. MSM can be used in written documents once it has been mentioned in full.

When talking about monkeypox in West and Central Africa:

- » Do talk about previously affected and newly affected countries.

- » Don't talk about endemic and non-endemic countries.

- » Do use pictures of monkeypox symptoms on diverse array of skin colors and seek