



HAÏTI

A country context analysis on the human rights
and health situation of LGBT





Lead author: Maxime Smith

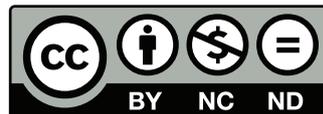
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TABLE OF CONTENTS

Abbreviations and acronyms	3
Data collection method and its limits	4
General context	5
International and regional human rights mechanisms	7
State of the community	9
LGBT Human Rights Awareness and Behavior	9
Protection of human rights and legal support for LGBT: availability and accessibility	9
Demographic data and characteristics of the population of LGBT	10
Visibility of LGBT communities	10
State of the movement	11
Health and wellbeing	12
Prevalence and incidence of HIV infections	12
Prevalence of other STIs	12
Prevalence of tuberculosis	12
Effects of HIV infections	13
Prevention	14
Primary prevention	14
Secondary prevention	14
Tertiary prevention	14
Awareness and behavior related to hiv prevention among LGBT	15
LGBT health care: availability and accessibility	16
National hiv and aids policy and budget	17
Recommendations	18
Endnotes	19

ABBREVIATIONS AND ACRONYMS

ACPDH	Citizen Action for Human Rights
AFARKAP	Asosiyasyon Fanm Revòlte Okap
AJCCDS	Association of Young Combatants against Discrimination and Stigmatization
APLCH	Association for Fight Against Homophobia
ARV	Antiretroviral drugs
COIN	Integral Center for Guidance and Research
CRN +	Caribbean Regional Network of People living with HIV and AIDS
EMMUS	Survey on Mortality, Morbidity and Utilization of Services
FACSDIS	Women in Action Against Stigma and Sexual Discrimination
WSW	Women who have Sex with Women
MSM	Men who have Sex Men
J-FLAG	Jamaica Forum for Gay, Lesbian and Queer
LGBT	Lesbian, Gay, Bisexual, and Transgender
OIF	International Organization of the Francophonie
ORAH	Rainbow Organization of Haiti
PEPFAR	President Emergency Plan for AIDS Relief
PETP	Platform for Equal Treatment of Persons
GDP	Gross Domestic Product
REDES	AIDS Resources and Expenditures
SOFA	Solidarite Fanm Ayisyèn
AIDS	Acquired Immunodeficiency Syndrome
SW	Sex worker
UPLCDS	Union of Persons Struggling Against Discrimination and Stigmatization
USAID	United States Agency for International Development
HIV	Human Immunodeficiency Virus



DATA COLLECTION METHOD AND ITS LIMITS

In order to develop programs in Haiti, COC Netherlands has first carried out a contextual analysis report in order to have a deeper understanding of the conditions and needs faced by its LGBT inhabitants.

Two research techniques were used to collect the data for this report: Documentary analyses and face-to-face interviews. It is important to mention here that there exists little to no official documentation concerning Haitian LGBT. The official data that is available only concerns Men who has Sex with Men (MSM). As a result, the conclusions of this analysis may not fully reflect the multifaceted conditions of the LGBT in this region.

GENERAL CONTEXT

At the political, economic, social and legal level, LGBT communities have evolved in very precarious conditions. Instigated by both religious and political leaders, the country experienced its first mass demonstration opposing the rights of LGBT communities in 2013. Soon after, LGBT rights started to make significant appearances on the Haitian political stage. During the 2014 and 2015 campaigns for presidential and legislative elections, the issue of LGBT rights was debated. In the media¹, candidates were asked to adopt a caricatured posture on same-sex marriage. Without referring directly to the rights of LGBT, journalists² simply asked candidates whether they were for, or against same-sex marriage. The candidates unanimously confirmed their opposition to same-sex marriage. Further, the argument of sexual orientation has been used and continues to be used against candidates or officials of the state. Being a homosexual can be detrimental to the career and success of a political candidate, leader or existing government official. On occasions, such individuals are obliged to declare publicly that they are not homosexual, as was the case of presidential candidate Steven Benoit. Messages are even written publicly, on streets and walls, denouncing candidates or government officials on the grounds that they are known homosexuals.

In September 2016, a renewed tension against homosexuals became overt. Some LGBT organizations connected with civil society organizations were planning to organize a festival named Massi-Madi, which would include a program of LGBT themed film screenings. Parliamentarians, the government commissioner at the Port-au-Prince Court of First Instance as well as religious leaders, rose to fiercely condemn the festival. The subject occupied the headlines of national newspapers for more than a week and the government commissioner prohibited the festival outright. For fear of reprisals, the landowner of the festival site rescinded his agreement with the organizers and under this pressure the festival was cancelled before it had even begun.

Two senators, Jean Renel Sénatus and Carl Murat Cantave, took the lead in anti-LGBT actions within parliament. One of the senators proclaimed himself a 'defender of the family'. This political context, unfavorable to the cause of the LGBT, reflects part of a socio-economic exclusion dynamic present in the majority of the Haitian population.

At the economic level, the Haitian population in general and the LGBT population in particular, live in a state of poverty. 'The Biological and Behavioral Surveillance Study' of 2014³, found that of the 95% of respondents (MSM) providing an estimate of their income, 61% reported monthly earnings of less than 5000 Gourdes. Data published by the World Bank in a survey report on 'Mortality, Morbidity and Utilization of Services' (EMMUS V), affirms that *"more than half of the population has less than \$1 per day income, while 78% of the population lives with Less than \$2 per day. Due to these precarious conditions, the country is classified as the poorest country in America and one of the poorest countries in the world, with a GDP of 725 US dollars in 2011"*. The massive loss caused by the effect of repeated natural disasters only adds to these figures. The devastating earthquake of 2010 caused an estimated loss of 120% of the national GDP and in October 2016, Hurricane Matthew caused damages amounting to 1.9 billion US⁵ dollars.

The country relies greatly on foreign aid and foreign transfers to cover the balance of payments deficit. According to economist Fritz A. Jean⁶, *"Transfers from the Diasporas amount to an average of 1.2 billion US dollars per year, representing 70% of the balance of payments deficit"*. External aid supplements the remaining 30%. About 50% of the Haitian state budget is financed by external aid. This economic data gives a stark overview of the social situation of the Haitian population.

At the social level, the most salient fact is that basic public services are inaccessible to a large part of the population. Education is just 15% of the total public services on offer. This means that families are forced to pay fees to send their children to private schools, which are often of sub-standard quality, while publically funded hospitals in larger cities are almost exclusively frequented by people with little income. The Haitian health care system offers formal services to 47% of the population. Despite the inaccessibility of social services, certain rights are nevertheless enshrined in the Haitian constitution.



Indeed, the Constitution of 1987 (article III) devotes an entire chapter to the fundamental rights of its citizens. In it, all rights as set out in the Universal Declaration of Human Rights are maintained. Article 19 of the constitution states that: *“the Haitian State has a paramount obligation to guarantee the right to life, health and respect for the human person, to all citizens without distinction, in accordance with the Universal Declaration of Human Rights”*. In this article, the Constitution lays down the principle of non-discrimination. This principle is reinforced in Article 58 and states that: *“National sovereignty lies within the universality of citizens”*. The constitution also provides the possibility to ameliorate the internal law by ratifying treaties or international agreements. According to article 276.2: *“Treaties, or international agreements, once endorsed and ratified in the forms provided for by the Constitution, become part of the legislation of the country and cancels all the laws that are contrary to them”*.

International Conventions and the Constitution set out general principles that require implementing legislation. In general, the magistracy enforces the law to make decisions. In criminal matters, an act is qualified as an offense if there is a law defining it as such. In effect, no citizen can be punished for an act that is not a defined offense. In the case of homosexuality in Haiti, being homosexual itself does not constitute an offense. For heterosexuals, sexual intercourse in public places can be prosecuted and in these instances, the culprit is judged on the grounds of indecent behavior. Also, according to article 281 of the Criminal Code: *“Anyone who goes against morals by inciting, favoring, or usually facilitating the debauchery or corruption of youth, of either sex, underage shall be punished by imprisonment from six months to two years. If prostitution or corruption has been incited, favored or facilitated by their father, mother, guardian or other persons entrusted with their supervision, the penalty shall be from one year to three years’ imprisonment”*.

A new law was promulgated on 28th of October 2013 and published in the official newspaper, Le Moniteur, on the 15th of November of the same year. Constituted to reform adoption regulations, the law cites sexual orientation as a criterion for the first time in Haitian legal history. This is evidenced in Section 8: *“Adoption may be requested jointly by a heterosexual couple, married and not separated for five (5) years of marriage and if one of the spouses is at least Thirty (30) years old”*

INTERNATIONAL AND REGIONAL HUMAN RIGHTS MECHANISMS

The Haitian State recognizes a set of international human⁷ rights instruments. With the United Nations, Haiti ratified⁸:

- The International convention on Civil and Political Rights.
- The International convention on Economic, Social and Cultural Rights.
- The Convention on the Rights of the Child.
- The Optional Protocol to the Convention on the traffic of children, child prostitution and child pornography.
- The Convention on the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labor.
- The Convention concerning the minimum age for employment.
- The International Convention on the Elimination of All Forms of Racial Discrimination.
- The Convention on the Rights of Persons with Disabilities, and its Optional Protocol.
- The Convention on the Elimination of All Forms of Discrimination against Women.

At the regional level, within the framework of the Organization of American States, the Haitian State ratified:

- The American Convention on Human Rights.
- The Inter-American Convention on the Elimination of All Forms of Discrimination against Persons with Disabilities.
- The Inter-American Convention on the Traffic of underage persons.
- The Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women.

For the purposes of the implementation of the instruments in the Organization of American States, Haiti was part of the Inter-American Court for Human Rights, which allows citizens to appeal against violations of their rights.

The last Universal Periodic Review of Haiti was on the 7th of November 2016⁹. The next review will take place in November 2021. In the meantime, Haiti will have to submit a mid-term follow-up report in November 2019. In the presentation made by the Haitian government, violence based on sexual orientation was not taken into consideration. In addition, LGBT as a category of the citizenry of Haiti was not mentioned. However, there was a section dedicated to fighting violence against women and girls.

Two joint submissions were produced by Haitian civil society organizations. One is entitled 'Haiti: Privatized Education, the Right to Education Flouted¹⁰'. The other is 'A Contribution of the Haitian Human Rights Organizations to the Human Rights Council for the Universal Periodic Review of Haiti¹¹'. In the alternative report of Haitian human rights organizations, violence based on sexual orientation is not considered; nor are LGBT individuals regarded as a part of the population. In the Equality and Non-Discrimination section, the paper only refers to the discrimination of People Living with HIV and AIDS (PLWHIV). It states that: *"the situation of people who are discriminated and stigmatized in schools, workplaces and hospitals because of their HIV status remains a worry in Haiti. Prejudice against HIV patients persists despite the dissemination of information on AIDS, knowledge on transmission routes, and especially the development since 1996 of treatments, which have had decisive results in terms of expectancy and quality of life. The passivity and indifference of the Haitian state towards this marginalized group contributes to the upholding of an atmosphere encouraging discrimination and stigmatization towards them"*.



Among the recommendations made by other States, there is one concerning violence and discrimination based on sexual orientation put forward by Uruguay. The latter recommends that the Haitian State investigates and punishes acts of violence and discrimination based on sexual orientation¹². This recommendation is supported by the Haitian State

STATE OF THE COMMUNITY

LGBT Human Rights Awareness and Behavior

“He is a citizen who is not yet aware of his rights and responsibilities.”¹³ It is in these terms that Charlot Jeudy, president of the organization known as Kouraj, describes the Haitian LGBT of today. In similar words, Réginald Dupont, director of SEROvie said, *“it is a person who lives a level of fragility”¹⁴*. Charlot Jeudy places LGBT individuals into two categories: those who are members of associations and the large number who distance themselves from such associations. The difference being that, those who are part of associations have a more complete knowledge of their rights as enshrined in international treaties and national legislation and, as such are fully aware when those rights are violated. In a study of surveys carried out in Haiti by Housing Works in 2014¹⁵, *“40% of all respondents said that they were victims of rights violation between January 2013 and May 2014. The percentage was even higher among the respondents who were part of an LGBT organization, among which 48% said that they had been victims of a rights violation. While only 25% of the respondents who do not belong to such organizations confirmed that they had been victims of a rights violation. These figures show that LGBT who belong to an organization are more likely to have their rights violated”*. In the same study¹⁶, participants were asked if they had witnessed a case of the violation of LGBT rights. The document states thus: *“While 35% of all respondents reported having witnessed a violation of LGBT rights from January 2013 to May 2014, those who are members of organizations constituted 43%. For those who were not members of an LGBT organization, the percentage stood at 20%”*. The difference between these figures can be explained by the fact that those who are part of an organization are simply better educated about of their basic rights and more likely to claim these rights.

When an LGBT individual is the victim of a violation of his/her rights, rather than reporting an incident to state authorities, he or she first approaches an association. This fact is confirmed by Charlot Jeudy and Réginald Dupont, the two leaders of LGBT organizations: Kouraj and SEROvie. *“She does not go straight to the police station or the court”*, said Réginald Dupont. However, reporting to an association does not mean that the case will be brought before the judicial authorities. Of the approximately 300 cases reported to SEROvie during the last six months of 2016, 3 were brought before the judicial authorities. 11 cases concerning the violation of LGBT rights were reported to the Kouraj organization in 2016, of which 4 were transferred to court.

Protection of human rights and legal support for LGBT: availability and accessibility

Justice is not accessible to the majority of citizens in Haiti, especially for cases falling within the jurisdiction of the courts of First Instance, courts of Appeal and the Court of Cassation. To receive a fair hearing in these courts, hiring a lawyer is both necessary and often unaffordable. Despite the law stating that the government commissioner is the defender of the citizens, this does not occur in reality. In the case of LGBT claims, some associations are obliged to have a partnership with a law firm that first agrees to defend cases related to sexual orientation. But *“lawyers are not too inclined to defend LGBT in court”*, as said by Réginald Dupont.

Furthermore, there is a total lack of confidentiality within the civil service regarding sexual orientation and gender identity. In courtrooms, cases related to sexual orientation and gender identity are dealt with publicly and victims are most often exposed to the mockery of officials and court assistants. *“They are often photographed in courtrooms”*, said Charlot Jeudy.

There are even cases in which justice is simply denied to the LGBT.

Demographic data and characteristics of the population of LGBT

There is no demographic data available giving the number of LGBT individuals in Haiti. According to data published by the Ministry of Public Health and Population, the number of men who have sex with other men is estimated at 70.000¹⁷. Figures obtained from the United States of America estimate that 3.5%¹⁸ of adults identify as gay, lesbian or bisexual and that 0.3% of adults are transgender. 'Integrated Biological and Behavioral Surveillance' (a study in which men who have sex with other men is actually documented) was published in 2014¹⁹. According to this document:

- Approximately 35.2% of respondents indicated that they had transactional partners.
- Nearly 36% of respondents had been physically or verbally antagonized because they were MSM.
- 14.4% had been beaten by their sexual partners.
- 28% had been sexually assaulted.
- 38% had been assaulted because of their sexual orientation.

The 2016 Gender Assessment²⁰, commissioned by USAID (United States Agency for International Development), mentions that 37% of sex workers had been physically assaulted by a sexual partner. Of those physically assaulted, 50% were assaulted by a partner and 47% by a client. The report went further to declare that 27% of sex workers had been sexually assaulted or raped and that 51% had suffered aggression because they were sex workers.

Visibility of LGBT communities

There are varying levels of visibility in Haitian LGBT communities. First, there is a difference between groups. MSM are more active on the scene. Women who have sex with Women (WSW) are beginning to be heard and currently, there is only one formal organization (FACSDIS) bringing together the WSW. Bisexuals do not have autonomous action as such and the same currently applies to transgender individuals.

On the front line of defense of LGBT rights in Haiti, there are very competent individuals leading the struggle and actively participating in media debates. In the past, Charlot Jeudy carried out interventions on Radio Vision 2000 and Radio Caraïbes; both national radio stations. As a result of the actions of such leaders, the promotion of LGBT rights has undergone a significant change since 2013. The issue of LGBT rights became part of the debate during electoral campaigns, both at the presidential and legislative levels. Some public events have been organized specifically to debate and discuss the rights of LGBT communities. The latest is the aforementioned Massi-Madi festival. Although the festival did not take place, the prolonged media coverage due to pressure from homophobes and parliamentarians and the ban from the government commissioner at the Port-au-Prince Court of First Instance, left the public consciousness with an awareness of the intentions of the festival organizers. This created a space for fresh discussion and ideas in reaction to those intentions, be they in support or opposition.

The current visibility of the LGBT issue in Haiti is a manifestation born from the mobilization and vigilance upheld by leaders of its LGBT associations. Some of them are dedicated full-time to the promotion and advocacy of LGBT rights. Indeed, the current climate of Haitian society does not facilitate the organization of street demonstrations by communities.

STATE OF THE MOVEMENT

In the perspective of building collective action, there are three dimensions to be considered: awareness, organization and mobilization. In LGBT communities, we can say that some members have an awareness of their role in promoting and protecting the LGBT movement in Haiti. GRASADIS, which evolved into SEROVIE, was the only formal LGBT organization until 2010. Since then, several LGBT organizations have been formed in several departments of the country. Currently, there are at least ten of them: Servie, KourajPouPwotejeDwaMoun, FACSDIS (Women in Action Against Stigma and Sexual Discrimination), ORAH (Rainbow Organization of Haiti), AJCCDS (Association of Young Combatants against Discrimination and Stigmatization), ACPDH (Citizen Action for Human Rights), located in the West; APLCH (Association for the Fight Against Homophobia), situated in Artibonite; AFARKAP (AsosiyasyonFanmRevòte O kap), which is in the North; Heritage in the Northeast and UPLCDS (Union of Persons Against Discrimination and Stigma) in the South. FACSDIS and AFARKAP are specifically dedicated to the cause of women who have sex with women.

Not all these organizations are at the same level in terms of programs, management, capacity and field engagement in the effort to promote and defend the rights of LGBT.

After several abortive attempts, five of these organizations (Kouraj, ORAH, GranLakou, APLCH, and UPLCDS) finally formed a platform in 2015. This has emerged as the Platform for Equal Treatment of Persons (PETP). SEROVIE and FACSDIS have since withdrawn from this process due to divergence with leaders of other associations. *"The platform is not at the front of the scene"*, remarks Charlot Jeudy, "due to internal conflict preventing it from taking its force". According to Gerald Marie Alfred, a former PETP executive, *"it lacks financial management capacities; it has statutes but no sound management structure"*.

If the organizations within LGBT communities are groping their way towards a common strategy, the same is true for their alignment with other national organizations. The promotion and defense of the causes of these communities is carried out only by the organizations evolving within those communities. There is as yet no clear interconnection between women's rights movements, people living with HIV/AIDS, workers, impoverished, etc. In short, there is still no articulation for a total movement against exclusion and discrimination in general.

There is timid and occasional contact between certain organizations in LGBT communities, women's organizations and human rights organizations. For example, SEROVIE and Kouraj maintain contact with the organization SolidariteFanmAyisyèn (SOFA) and the Movement of Haitian Women for Education and Development. However, this does not mean that the cause of LGBT communities is a part of the agenda of women's organizations. *"Regarding the involvement of human rights organizations in defending the rights of LGBT communities, there is almost total silence. These organizations do not take a public position in defense of the LGBT, even in the face of the most flagrant violations of their rights"*, acknowledged both Charlot Jeudy and Reginald Dupont.

Organizations can count on the support of the Embassies of the United States of America, Canada, Germany, Switzerland and France for the protection and respect of the rights of LGBT communities. USAID (United States Agency for International Development), the European Union, AJWS (American Jewish World Service) and FEI (France Expertise Internationale) fund important projects for LGBT communities. In this vein also, UN agencies such as UNHCR (United Nations High Commission for Refugees) and UNAIDS (United Nations Joint Program on AIDS) provide technical as well as financial support. The multilateral Organization OIF (International Organization of the Francophonie) also supports SEROVIE in some of its actions.

At the regional level, some organizations in LGBT communities (SEROVIE, Kouraj and the Platform) maintain a relationship with the Caribbean Vulnerable Communities (CVC), the Jamaica Forum for Lesbians, All-Sexuals and Gays, COIN (Centro de Orientacion e Investigacion Integral) And CRN + (Caribbean Regional Network of People with HIV and AIDS).

HEALTH AND WELLBEING

Prevalence and incidence of HIV infections

According to the EMMUS V report on research carried out in 2012²¹, Haiti is experiencing a generalized HIV epidemic with a prevalence rate of 2.2% in members of the population aged 15 to 49 years. HIV prevalence among women aged 15-49 years was estimated at 2.7%, which is higher than that of men in the same age group (1.7%). The difference in the ratio of infection between women and men is 1.5. In other words, there are 150 infected women per 100 men, which indicates that women are significantly more vulnerable than men to HIV infection. The results revealed disparities in HIV sero-prevalence across different departments, ranging from 1.5% in Grande Anse to 3.9% in the Northeast. After the Northeast, the highest prevalence was observed in the Northwest department (3.2%), the metropolitan area of the western department (2.5%) and the department of Artibonite (2.3%).

According to the 'Integrated Biological and Behavioral Surveillance study', the HIV prevalence rate among MSM is 12.9% across the five departments where the study was carried out. The prevalence rate varies from 1.6% to 33% from one department to another.

The table below shows the distribution of HIV prevalence among MSM in the five departments in 2014:

Department	HIV Prevalence Rates
North	4,9 %
North-East	1,6 %
Artibonite	13,3 %
West	33 %
South	23,3 %

Source: *Integrated Biological and Behavioral Surveillance Report, 2014*

There is no information available on the HIV prevalence rate among WSW and transgender individuals. The 2016 progress report on the global response to AIDS states that the indicator of the percentage of transgender living with HIV is relevant but that there has been no significant study of this category in Haiti during the last two years.

Prevalence of other STIs

According to data published in EMMUS V in 2012, an overall percentage of 27% of women were considered to have had an STI and/or STI-associated symptoms. 25% had abnormal vaginal discharge and 4% had a genital ulcer. In men, 10% had an STI and/or symptoms that may indicate STIs. 7% of men suffered urethral discharges and 3% had a genital ulcer or wound. Among MSM, 12% had tested positive for syphilis (according to the 'Integrated Biological and Behavioral Surveillance survey').

Prevalence of tuberculosis

Haiti is on the list of countries considered to have a high prevalence of tuberculosis in the Americas²². In 2012, the incidence rate was at 212 per 100,000 inhabitants; the prevalence rate for all forms of tuberculosis was 296 per 100,000 inhabitants. The number of cases of tuberculosis (all forms) detected was 14,861 in 2009; 14,265 in 2010; 15,322 in 2011; 16,723 in 2012 and 16,568 in 2013.



The total number of HIV and TB co-infected in 2014 was 3508 and 4368 in 2015.

The sources consulted did not provide data on the prevalence of tuberculosis as a co-infection among MSM, WSW and Transgender living with HIV.

Effects of HIV infections

After approximately 6 years, the number of deaths due to AIDS has decreased by 50%. In 2008, this number was 7800 [6300-14000] while in 2014 it stood at 3800 [2300-5600].

The sources consulted did not provide data on the annual number of AIDS-related deaths among MSM, WSW and transgender.

PREVENTION

Primary prevention

A free condom distribution network is available in the country as well as the standard sale routes. Lubricants are available at specific sites for MSM. As for female condoms, distribution is not as widespread as it is for men. 43.3% of MSM were reported to have used lubricants during their most recent sexual encounter²³. In the year 2015, about 68 million condoms were distributed²⁴. According to the 'National Situation's Report' published by the Ministry of Public Health in March 2016: "pre-exposure prophylaxis (PrEP) is not currently an intervention strategy in Haiti. On the other hand, post-exposure prophylaxis exists and is proposed in cases of exposure to (infected) blood and sexual assault. For the management of blood exposure accidents and sexual violence, the medications recommended by the standards manual are TDF/3TC/EFV for adults and ABC/3TC for children".

Referring to exposure to a prevention program, at the time of the survey: 11.5% of MSM had participated in an interpersonal communication activity for MSM within the previous three months; 22.3% had seen a poster in the past three months; 17.8% had participated in an outreach session for MSM provided by an organization working with them.

Available sources do not provide information on WSW and transgender.

Secondary prevention

The percentage of women and men aged 15-49 who carried out an HIV screening in the last 12 months and learned their result was respectively 20.6% for women and 12.5% for men (Refer to the 'Mortality, Morbidity and Utilization' Survey, quoted above). Among MSM, the percentage was 69.8% according to the 'Integrated Biological and Behavioral Surveillance' survey quoted above.

Available sources do not provide information on WSW and transgender.

Tertiary prevention

By 2015, approximately 67,000²⁵ people were undergoing antiretroviral therapy. For specific information about adults and children, the following indicators were obtainable:

- The percentage of adults and children living with HIV and receiving antiretroviral therapy was 45.9%.
- The percentage of adults and children who were HIV-positive and still undergoing treatment 12 months after starting antiretroviral therapy was 73.1%.
- The percentage of adults and children who were HIV-positive and still undergoing treatment 24 months after the initiation of antiretroviral therapy was 68%.
- The percentage of adults and children who were HIV-positive and still undergoing treatment 60 months after the initiation of antiretroviral therapy was 54%.

Available sources do not provide information on WSW, MSM and transgender.



AWARENESS AND BEHAVIOR RELATED TO HIV PREVENTION AMONG LGBT

The abovementioned situation Report, published by the Ministry of Public Health in March 2016, indicates that 71.8% of MSM were reported to have used a condom when with their last male sexual partner. According to the Biological and Behavioral Surveillance Survey, MSM had a general HIV awareness rate of 78.3% and an accurate HIV knowledge of 21.1% (this entailed the correct identification of ways to prevent sexual transmission of HIV and the rejection of major misconceptions about HIV transmission). The same survey found that, in the 12 months preceding, participants had an average of 5.17 female partners and 4.51 male partners. This both indicates and confirms sexual versatility.



LGBT HEALTH CARE: AVAILABILITY AND ACCESSIBILITY

As part of the activities of the beneficiaries of the Global Fund and PEPFAR (President Emergency Plan for AIDS Relief) projects, a healthcare system is currently being set up for the benefit of LGBT communities²⁶. As part of these projects, health professionals are trained in specific LGBT health issues. At these healthcare sites, LGBT individuals noted an improvement in the welcome that was now reserved²⁷ for them. However, this is not the case for the Haitian health system in general. This was revealed in the SEROvie sponsored 'Report on Stereotypes and Discrimination Against LGBT' in 2016²⁸, and also the 'Report on the Situation of LGBT Rights', sponsored by Housing Works in 2014²⁹. LGBT communities report that they still face instances in which they are denied care. The situation is even worse for transgender individuals who face either a complete refusal or an inability to meet their needs. Hormonal treatment, for example, requires travel to the Dominican Republic or the United States of America and therefore demands significant financial means.

Regarding knowledge about and access to health services, there is not much data available for all LGBT communities. In the 'Biological and Behavioral Surveillance' survey, 85.6% of the MSM were able to identify a place where they could be tested for HIV. 68% of MSM identified hospitals and healthcare centers as the ideal place for screening, against 5.6% who said they preferred an NGO.

NATIONAL HIV AND AIDS POLICY AND BUDGET

In the National Multi-Sectoral Strategic Plan of 2012-2015 (to be revised in 2018), the LGBT concept is used in two sections of the document and in two of the eight priorities of the strategic plan. The two priorities are outlined as follows:

- Behavior change communication interventions focusing on youth, key populations, including SWs and their clients, MSM and LGBTIs in general.
- Reinforcement of actions aimed at protecting key people who are stigmatized because of their sexual orientation and by raising awareness among the general public and public officials in particular, on discrimination and stigmatization of key groups: MSM, SW, and LGBTI³⁰.

However, in the rest of the document, priority is given to MSM. In the process of developing the plan, MSM were consulted and the group is directly mentioned in the analysis of the situation. This appears in the organizational chart, illustrating the steering structure of the strategic plan. MSM are considered a priority group, alongside SW; pregnant women living with HIV; adults and children living with HIV; orphans and other vulnerable children.

MSM have two representatives within the multi-sectoral coordination committee³¹. According to one of them, the mission of these representatives is to defend the interests of LGBT communities within this coordination mechanism.

According to the results of the REDES' 2014-2015 Report, the funds allocated to the HIV and AIDS program are decreasing: US \$ 127,773,951 was spent in 2015 against US \$ 137,722,259 in 2014. More than 97% of this funding has international origins and approximately 2% came from the Public Treasury. Implementation of HIV awareness and care activities have been carried out by international entities with more than 50% of expenditure coming from the public sector. 23.95% of expenditure in 2014 and 27.01% in 2015 by the Private sector partnership, amounting to 23.03% of the funds spent in 2014 and 19.13% in 2015. The activities entrusted to "non-classified beneficiaries" accounted for approximately 2.85% of total expenditure.

Three main lines of action have been prioritized for the use of funds injected into the fight against HIV and AIDS. Care and treatment, "prevention" and "program management", as well as "administration" accounted for more than 80% of total expenditure. For care and treatment: US \$ 53,585,185 was spent in 2014 and 60,271,725 in 2015, which adds up to 38.91% and 47.17% of the total available financing. Prevention was second with US \$ 32,109,355 (23.20%) in 2014 and 26,122,147 (20.44%) in 2015³².



RECOMMENDATIONS

The LGBT movement in Haiti is still in its infancy. There is a need for it to install itself within the various departments of the country and also to incorporate all the different categories of the LGBT population. For now, MSM are the most visible among the leaders of this movement. The issue of gender must be addressed within the movement and the promotion of women's rights is a necessity. The basic work of awareness and general organization is as yet, incomplete. The integration of more members into existing organizations is wanted, as well as the facilitation of democratic leadership. Many existing organizations lack the capacity to fight the present opposing powers, influences and stakeholders within Haitian society. The current platform that is seeking to bring LGBT organizations together is still very young. In order to formulate a sound strategy, it requires a strength that can only be gained by putting solid internal management systems in place.

The LGBT movement cannot become fully organized without forming links with the global anti-discrimination movement within Haitian society. It must be articulated alongside the human rights movement in general as well as with the movement for the respect and protection of women's rights.

Stereotypes and discrimination against LGBT have a deep presence within the beliefs of the wider Haitian population. A general public awareness and education about LGBT rights remains to be achieved. It appears certain that education surrounding behavioral impact will not be enough. It is first necessary to have state institutions that respect and protect the rights of LGBT. These institutions require clear legal references that protect LGBT from discrimination in general and discrimination based on sexual orientation in particular. In this sense, the involvement of LGBT organizations in the reform of the penal code should be encouraged. The draft of the penal code, now in circulation, does refer to violence based on sexual orientation. Legal assistance services should not be limited to just a few towns. In every court of First Instance, there should be a lawyer available who can accompany any LGBT individuals. Judges and police officers alike need to be educated about the rights of LGBT.

The movement will therefore require data and evidence in order to fuel and promote the necessary social change. This demands more active encouragement of research into LGBT issues.

ENDNOTES

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