

CASE STUDY

Stigmatizing attitudes towards people living with HIV (PLHIV) are common among young people. Yet there are few opportunities for youth to be exposed to interventions that address the key drivers of stigma and discrimination, namely lack of awareness of stigma and its harmful consequences, social judgment and fear of infection through casual contact. This project demonstrated that higher education can be an effective entry point for stigma reduction, by working with several groups and environments, in this case the faculty, students and college. This initiative was part of a larger effort to adapt and pilot test a global stigma reduction framework to the Indian context.¹

Implementation

Creating a cadre of master trainers

To institutionalize and sustain stigma reduction within an educational setting, the project team first gained buy-in from college management. After this, they trained a cadre of faculty members as master trainers who in turn would train students. A three-day training was held for 17 faculty members from various disciplines to address gaps detected prior to the training, such as a lack of knowledge about HIV and stigmatizing attitudes. The faculty training focused on the meaning, forms, causes and consequences of stigma as well as myths and misconceptions around HIV and AIDS. To help the faculty understand HIV-related stigma, the training first explored stigma and discrimination based on caste, gender and socioeconomic status. The training exercises helped faculty members to question their own attitudes and overcome any reluctance to start conversations with their students on sensitive topics such as sex, sexuality and condoms. Overall, faculty members felt that the training was important and would prove useful for the students.

Training the students

Sixty-four students across different disciplines took part in a three-day workshop facilitated by the master trainers. All the second year graduation students were informed about the programme and were asked to volunteer. About 75 students volunteered of whom 64 attended the workshop. More girls than boys participated in the training.

“ I used to be scared of HIV before, but after the training I feel it is not something to fear. I participated in this training because I felt that as a professor, if I am more aware, I can help reduce the stigma around HIV among my students.”

FACULTY MEMBER

Project highlights

- The project developed and tested a youth-appropriate stigma reduction curriculum in a college setting.
- The team built institutional capacity by training college faculty on reducing HIV-related stigma.
- The project convinced college management of the value of a stigma reduction curriculum.
- The study found an overall positive shift in attitudes towards key populations as well as towards people living with HIV.
- Students who had been through the sensitization process spread the message of stigma reduction to 300 of their peers on campus.

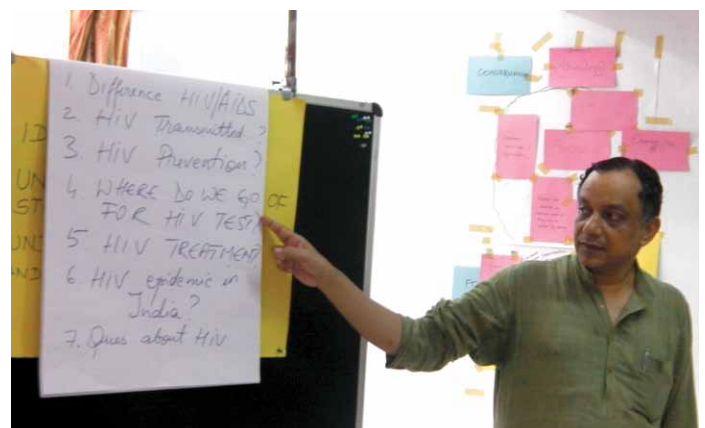
Box 1: Examples of workshop sessions²

Naming stigma through pictures: This exercise helped students identify, understand, articulate and question stigma as a social construct.

Stigma tree: This exercise had students visually map and reflect on the routes or causes, forms and effects of stigma. It made students analyze how it feels to be stigmatized and its various effects such as depression, loneliness, isolation and self-destruction.

Value clarification: In this session, students reflected on their levels of moral judgment around stigma and questioned their beliefs. For instance, there were clear ambiguities around statements such as ‘women should tolerate violence’, ‘premarital sex is a choice’ and ‘women who carry condoms are usually sex workers’.

The workshop covered the forms, drivers and manifestations of stigma. Stigmatizing attitudes and value judgements about PLHIV and key populations were confronted through discussion and debates. (See Box 1 for examples.)



1. ICRW, UNDP and STRIVE, 2013. A global HIV stigma reduction framework adapted and implemented in five settings in India. 2013. Summary Report. ICRW.

2. These sessions were adapted from the following toolkit: ICRW and UNDP, 2013. ‘Reducing Stigma in HIV: Training Module for Youth. Facilitator’s Guide’, New Delhi: ICRW.

Contact strategies to confront negative attitudes

Students and faculty visited community-based organizations (CBOs) working with PLHIV and key populations, including men who have sex with men (MSM), transgender individuals and female sex workers (FSWs) in the cities of Ahmedabad, Surat, Rajkot and Baroda. The majority of students had never knowingly interacted with a female sex worker and had social judgements about their profession. Most students held misconceptions about transgender people and almost no student/faculty reported ever having knowingly spoken with a man who has sex with men. Before the training, only a third of students agreed that MSM have the same rights as heterosexuals; 19% thought that being gay was immoral. The visits fostered collective reflection and greater acceptance.

Spreading the message of stigma reduction

With support from college management and the faculty, the trained students conducted a campaign among 300 college peers featuring:

- their own kits on stigma reduction
- a short film on HIV-related stigma
- engagement with other students to share their learning.

Key outcomes

Pre- and post-intervention surveys with the students revealed important attitudinal improvements:

- Blaming attitudes towards PLHIV regarding 'wrong' or immoral' behavior declined from 21% to 5%.
- Agreement that "PLHIV should be 'ashamed' of themselves" reduced from 67% to 35%.
- There was an overall positive shift in attitudes towards key populations.
- Students were more open to discussing sexuality and sex and felt that it was important to do so.
- The proportion of students who tested for HIV increased from 9% to 19%.

Lessons learned

Engage people at multiple levels. The project found that it was important to start with the 'gate keepers,' in this case senior management at the college, to ensure buy in. Training faculty members as change agents helped to mainstream stigma reduction and promote sustainability.

Use multiple approaches to shift attitudes and norms. The project employed a variety of activities, including workshops, contact strategies with key populations and sensitization campaigns. Peer-led approaches that use students as role models and change agents are important in an educational setting.

Address intersecting stigmas. Including stigma based on caste, class, economic status and religion helped individuals to understand and relate to the stigma and discrimination faced by PLHIV.



“ I did not know that even small children, like a little baby I met at the Reliance center, could be infected.”

“ I do not see any difference between them [MSM] and us, so who are we to accept them or reject them?”

“ I have learnt so much from this 17-year-old boy who is living with HIV. He takes care of everything at home; he studies, works and supports his grandmother. I take too many things for granted in my life. I get it so easy.”

STUDENTS AFTER CONTACT VISITS



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