



Mpox, HIV and the Crime of Gay Sex

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The WHO has once again declared the mpox outbreak a [public health emergency](#) of international concern. This time, it's due to the outbreak of Clade 1 in numerous African countries, the same countries that have been neglected for decades and didn't receive vaccines after the 2022 global outbreak. The best prevention is the vaccine, which has not been equitably distributed throughout the world. Mpox, like HIV before it, reveals the ongoing injustices that impact different regions and different communities.

Mpox can be sexually transmitted, and the majority of cases in the 2022 outbreak were among gay men. There were a few deaths, and most were due to untreated HIV. Gay men and people living with HIV are particularly vulnerable to mpox, but looking at the government response in various African countries you wouldn't know that. That's because many governments refuse to acknowledge that it's transmitted by gay sex. They don't want to acknowledge that gay sex is happening, yet the majority of African countries have laws criminalizing same-sex sexual behavior. Gay men are not just in danger from an outbreak, but they are in danger from homophobic governments and the stigma being fueled by media and religions.

We need to put mpox in the context of criminalization, and that must inform our strategies, our response and our activism. The African CDC provided assurances that there is "no discrimination." Obviously, that is laughable, as there is a growing anti-LGBTQ rights movement across Africa, and we've seen countries pass more severe laws against gay sex.

Over 40 years of HIV have demonstrated the limitations of public health strategies when the group most impacted are considered criminals. If one has mpox symptoms, they risk exposure by going to a doctor with anal lesions or when asked to reveal their sexual partners. The fear of arrest or harassment is a real and constant threat for queer people in this region. If one can't expect their rights or privacy to be protected, then how can they go to a health provider to access treatment or vaccinations? What are their options?

Since the 2022 outbreak, mpox has been associated with gay men. Sensational and stigmatizing reports have sprouted up all around the globe. If one presents with mpox lesions on their face or hands, it is a literal stigma and can lead to discrimination, rejection and a loss of employment or housing. Stigma from the media and a growing anti-LGBTQ movement are a toxic cocktail. They can generate scapegoating and could lead to violence against LGBTQ people. We need plans in place to ensure the rights of LGBTQ people are protected and that stigma and misinformation are

confronted and dealt with.

Criminalization is bad for public health. If the group that is most disproportionately impacted cannot adequately access treatment or prevention services, an outbreak has no hope of being contained. This is yet another lesson learned from the HIV pandemic. People living with HIV are particularly vulnerable to mpox, especially if they are not on treatment. We need a plan to ensure people living with HIV have access to vaccines and can do so without fear of stigma or discrimination.

Queer activists in places such as, Uganda, Kenya and Ghana have already had to defend against anti-LGBTQ attacks, now they must also advocate for vaccinations and treatment for the community. The conditions are very hostile, and they take substantial risks every day to fight for our communities. Queer communities in Africa must be invested in. We cannot advance an mpox response without a clear strategy to ensure equitable vaccine access and the protection of human rights.

Gay sex is not a crime. Denying people access to healthcare is. Queer Africans are in a fight for their lives; against diseases, violence and structural homophobia. We must ensure that any mpox response reflects the lessons learned from HIV. It's essential that vaccine access for queer communities is prioritized and that adequate resources get to our communities. Scientifically we have the tools to prevent and treat mpox, just like HIV, but the real dangers are criminalization and stigma.