

INTERSECTIONAL STIGMA AMONG MIGRANT WOMEN FROM SUB-SAHARAN AFRICAN COMMUNITIES LIVING WITH HIV IN AUSTRALIA.

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Background:

Stigma poses significant challenges for people from culturally and linguistically diverse (CALD) communities, particularly migrant women living with HIV. These migrant women experience intersecting stigmas shaped by race, gender, HIV status, and immigration status which hinder access to essential healthcare services. Despite the profound impact of these intersecting stigmas, limited research has been conducted on the lived experiences of migrant women from high prevalence countries living with HIV. This study explored the intersectional nature of HIV-related stigma among migrant women from sub-Saharan Africa (SSA) living with HIV in Australia.

Methods:

The study utilized semi-structured interviews conducted in-person or via Zoom with ten migrant women from SSA living with HIV with at least six months of stay in Australia. The audio recordings were transcribed, coded into NVivo 12, and analyzed thematically.

Results:

Findings indicated that stigma was experienced at the intersections of race, gender, HIV status, and immigration status. Three themes emerged: The first theme, '*race and migrant identity*' reflected participants' feelings of "otherness" and racial prejudice associated with being SSA migrants and living in Australia. The second theme, '*gendered experiences*', explored how participants felt judged for their HIV status, which was perceived as a failure to adhere to traditional social roles. The third theme, '*immigration and policy impacts*' captured how visa-related uncertainties exacerbate mental health struggles and feelings of instability.

Conclusion:

The study underscores how intersecting identities such as race, migrant status, gender, and HIV status shape the unique challenges experienced by migrant women from SSA living with HIV in Australia. The study's insights into intersectional stigma among migrant women from SSA living with HIV in Australia offer valuable implications for other high-income countries. These findings emphasize the need for tailored policies and culturally appropriate interventions that address the stigma faced by this vulnerable population within diverse socio-political contexts.

Disclosure of Interest Statement:

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