

Body-maps as empowerment tool for refugees and people with migration background living with HIV

Christiana Nöstlinger, PhD
Department of Public Health
Research Group HIV & Sexual Health



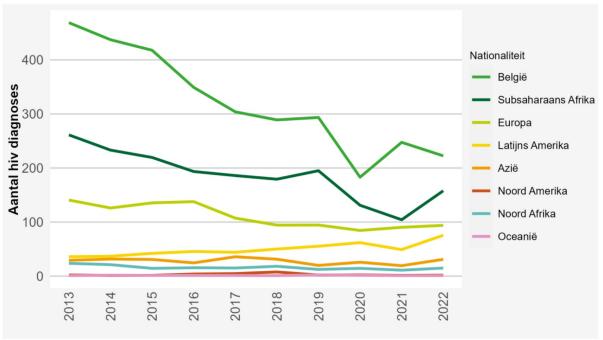
29/11/2024



- HIV epidemic in Belgium is not yet contained (1.8 new HIV cases/day reported in 2023)
- Heterosexual transmission group: 49% (among them, 43% are of sub-Saharan African origin).
- Migration: not a risk
 factor for HIV, but a social
 health determinant

Background and context

Figuur 5: Evolutie van het jaarlijks aantal nieuwe hiv-diagnoses, per nationaliteit (gegroepeerd), België, 2013-2022



- Mental health of people living with HIV is a major concern
- Almost twice as likely to ever have been diagnosed with depression than the general population (26% versus 15%)
- Intersecting stigmata: HIV, migration, and mental health (internalized stigma; trauma during migration trajectory, post-migration living conditions)

3 INSTITUTE OF TROPICAL MEDICINE ANTWERP

Background and context

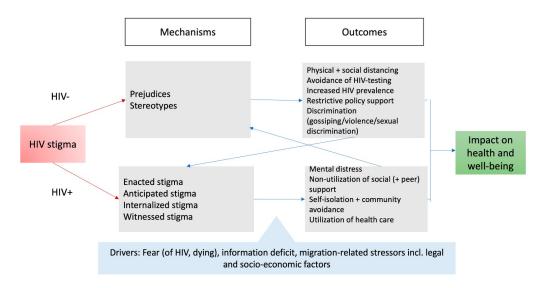


Figure 1. Contextualized HIV stigma framework for African communities in Belgium.

"It brings you down...even more depressed, because the people you consider to be your family and friends who should support you, reject you..." (Quote, woman living with HIV)

Body Mapping: Origins

- Rooted in social activism, used for clinical practice, therapy and research ("story-telling") for various clinical conditions and in different settings
- HIV: Originated in South Africa to counteract stigma and fear by recognizing personal stories of living with HIV
- Art-therapy for women living with HIV (Solomon, 2002; Devine, 2008; MacGregor, 2009)



Body Mapping: How?

- Body mapping involves tracing around a person's body to create a life-sized outline, which is filled in during a creative and reflective process, producing an image representing multiple aspects of their embodied experience.
- Facilitated and structured process of personal reflection and meaning-making relating to one's lived experience of illness.
- Case study: 3-day workshop in Antwerp with 10 participants, guided by an experienced facilitator/artist; psychologist as co-facilitator (ChN); anthropologist as observer (JL). Each body-map comes with its own narrative \rightarrow exposition (closure event).
- Setting: patient support group "Muungano" > trust-building, safe space!



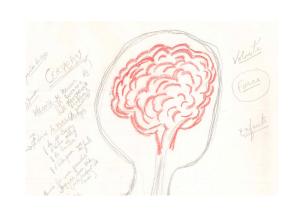






Emerging themes

- Culture of silence: Secrecy of HIV
- Stigma and discrimination
- Resilience and personal growth









Secrecy around HIV

- Feeling of shame and guilt around HIV created difficulties to talk about HIV
- Particularly in own community (dense social networks, anticipated and experienced discrimination and social exclusion)
- Evoked stress and anxiety for the participants
- Support mechanisms such as positive coping, seeking support disrupted by nondisclosure

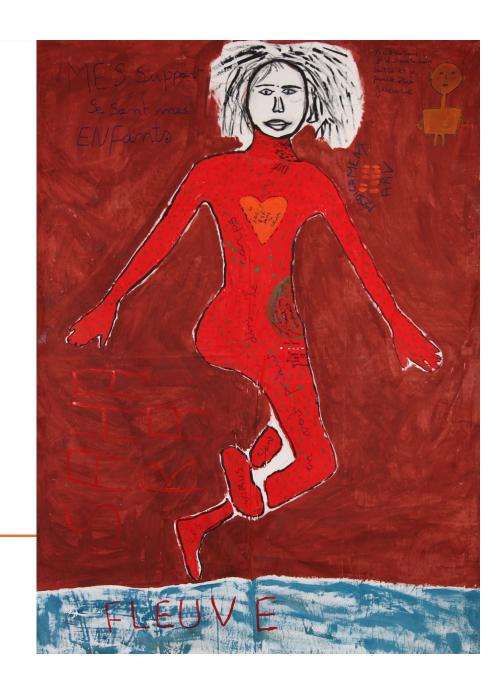


Secrecy around HIV

"The entire surface around my body is brown, the same color as the Sahara when the sun is going down. If you sleep in the sand there, it's wonderful. I want to walk without shoes again. I have painted blue for water because we need water in the Sahara. I miss my country, there is too much stress here. I have medication left for one month. The Social Welfare doesn't want to pay for it. I don't have a house anymore, I live with friends from back home. They don't know my situation, I am hiding my medication. If they knew that I'm HIV, I'm dead."

(female artist living with HIV, undocumented status)





Stigma and discrimination

- Social and psychological HIV-related stigma cuts across all dimensions of life
- Experienced both within own communities and from HIV service providers (not HIV specialist, multidisciplinary team in many cases only source of HIV-related support)
- Intersecting forms of stigmata: being HIV positive, a black migrant and asylum-seeker
- Internalized HIV stigma, leading to feelings of depression



Stigma and discrimination

"I got disrespect from people who don't know me, yet they judge us. For us, HIV is linked to sex, bad characters." (male artist).

"I saw a gynecologist who told me 'Why do you want to have children? You will die anyway. Your children will be unhappy!"" (female artist).





Resilience and personal growth

- The body-maps also expressed personal growth in coping with HIV (fuelled by the group experience, role modelling)
- Participants gained self-confidence during the workshop
- Some shared the hope for a brighter future as future parents and successful migrants
- Restored a feeling of self-esteem and empowerment. Some took the step to voluntarily disclose their status at the exhibition of the paintings concluding the workshop.



Resilience and personal growth

"HIV uprooted me from my comfort zone, but also brought me leadership skills. I'm now the strongest woman I know!" (female artist).

"I have painted the three children who are in my belly [after having undergone a hysterectomy], they are my hope, my future." (female artist).

"My two year plan? I want to get a job, the Belgian citizenship and a wife to marry" (male artist).

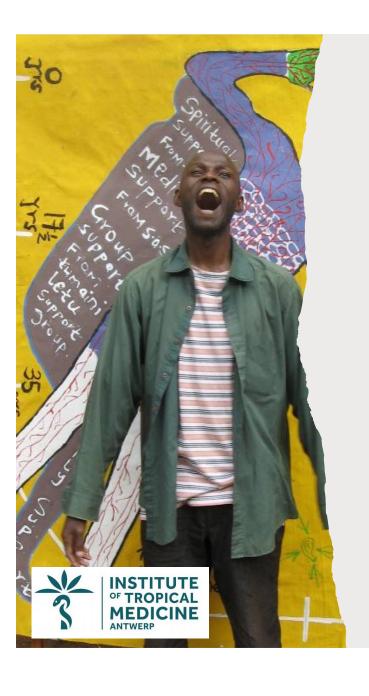




Conclusion

- Body-mapping powerfully demonstrate the influence of structural factors on the ability of participants to cope with HIV
- The culture of silence among African migrant communities in relation to HIV limits access to social and community support
- Participants felt that body-mapping was a valuable tool for supporting them in coping with HIV and in HIV disclosure
- Body-mapping and the embodied way of story-telling has the potential to be used globally in healthcare and other contexts, more research needed on its benefits





"I always thought that only words can be used to express oneself...now I know that pictures can speak louder than words"

(Body mapping workshop participant)



Thank you for listening!

Acknowledgements:

Xavier Verhoest (ArtToBE)

Jasna Loos (ITM, University of Antwerp)
& all workshop participants and
the Flemish Ministry of Welfare, Public Health
& Family







Contact: cnoestlinger@itg.be