Disinfecting homophobia

Medical students encouraged to take healthier approach toward gender-diverse populations

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Homosexuality is abnormal. That is what Thitaree Suttiphan, a fourth-year student at Boromarajonani College of Nursing, Lampang, used to think before she attended a pilot course linked to the development of a "gender sensitivity curriculum" for medical and nursing students in Thailand.

"I felt it was not right," recalled the 21-year-old.

The stigma attached to homosexuality has long been rooted in Thai society and it will take a long time to change these attitudes, said Payom Tin-Uan, chair of the Student Affairs Unit of the college.

But for nurses and doctors, having a fair and open attitude toward all patients is necessary.

Since 2006, a gender sensitivity curriculum has been developed to ensure medical students provide care and treatment to all patients regardless of their sexual orientation.

Some medics have a low opinion of "men who have sex with men" (MSM) and "women who have sex with women" (WSW), said Dr Rutt Chuachoowong, a physician at Bangkok's Silom Community Clinic for MSM
These ideas can be expressed in a very subtle manner. "It might be just the
glimpse of a sudden reaction, selection of words and the tone of their voice," said Dr Rutt, who is also a senior research scientist at Thailand's Ministry of Public Health (MoPH) and the US Centre for Disease Control (CDC) and Prevention Collaboration.

"But a judgmental attitude toward these patients could make them afraid of
revealing their gender identity or the exact nature of their health problem -
and consequently an opportunity for proper treatment of their symptoms
would be lost."

The 16-hour gender sensitivity course was piloted at Boromarajonani colleges
of nursing in Lampang, Chiang Mai and Phayao. Over a hundred students
volunteered for the course.

"Learning about gender-diverse populations can't be found in the regular
curriculum," said Pramual Thawyod, a student at the college.

"But society is changing. We need to open our eyes and learn to accept these
changes. Every life has meaning. Being able to understand others will help
solve their problems."

In the pilot curriculum, students learned about the variety and diversity of
human sexuality and gender roles, including homosexuality; identity
formation of MSM and WSW; an overview of the history of anti-
homosexuality; and its consequences on today's homosexuals.

Sujin Yooprangthong, a training specialist at PSI Asia Thailand, a non-
government group working on HIV/Aids prevention, said medics need to
understand the context of transgenders and other MSM for an accurate
diagnosis and to ensure proper treatment.

"I was hesitant at first to tell nurses and doctors that I have a different
sexual preference," said Mr Sujin, who is an MSM. "But then I realised that I
would never get cured if I didn't tell them the truth."

"However, it was too much when the nurses raised their voices, saying, 'Oh,
so you have anal sex!'"

Whether the number of MSM is small or large in society, they should be
treated fairly and equally, said Srisuman Sartsara, a former national
consultant to Unesco Bangkok's HIV/Aids and School Health programme.

Ms Srisuman said her ultimate goal is to see the curriculum on gender
sensitivity implemented in the core curriculum of nursing colleges
nationwide. However, the stigma of homosexuality in management remains a
challenge.

"Some people still think that homosexuality is a disease and can be cured.
They may also think that the number of these people is small, so why should
this investment be made?" said Srisuman.

Prissana Naunboonruang, chair of the research unit at Boromarajonani
College said: "Some people might not even realise that they have biases in
their attitudes. But they can be changed through receiving fair information
and by group interactions about these biases and beliefs."
According to research, the spread of HIV is partly caused because patients are afraid to reveal their sexual orientation, which results from the stigma attached to MSM and transgenders in Thai society, said Ms Prissana.

In Bangkok, there has been a huge growth in the prevalence of HIV among MSM. A study last year showed a rate of 30.7 percent, rising from 17 percent in 2003 and 28 percent in 2005. In Chiang Mai, 17 percent of MSM were living with HIV in 2007, an increase from 15 percent in 2003.

The nursing curriculum needs to be updated, commented Assoc Prof Suvinee Wivatvanit of Chulalongkorn University.

"Some medical personnel may think that the illnesses linked to homosexuality should not happen and that [homosexuals] cause trouble for themselves, and as a consequence bring trouble to nurses and doctors," said the head of the gender project.

"Fixing such attitudes at the end of the hallway is too late. We need to raise awareness and prepare our medical personnel while they are still young."

Homosexuality is now no longer abnormal to Thitaree, the senior nursing student.

"Nothing is 'good' and nothing is 'bad'. It's only how people frame it," she said.

This month, the Higher Education Commission has been discussing a ban on transvestites and openly gay men from enrolling in medical schools.

The project was initiated by Unesco Bangkok and sponsored by UNAids and the US Fund in Trust in cooperation with Thailand’s MoPH and the US CDC.

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