Forbidden Love and Deadly Diseases
A Dynamic Frame Analysis About Homophobia and HIV in Uganda

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Abstract
This thesis has strived to analyze how institutionalized frames may affect how another topic is discussed in a political context. This presented framing strategy is referred to as frame bridging. The aim was to analyze whether the framing of homosexuality in Uganda has affected its HIV policy. It is based on the constructivist understanding of policy as something created in dynamic social processes, which can be strategically framed intentionally or have unintentional consequences. Uganda is a compelling case since its homophobia is institutionalized to a degree that makes it difficult for people in to express gay-positive sentiment. Dynamic frame analysis was chosen as method. The material analyzed consisted primarily of statements from key politicians and official policy documents from the Ugandan government between 2009 and 2017. Firstly, the frames that exist upon homosexuality and HIV in Uganda were distinguished. These frames, illustrated tensions between the West and Africa, conflicting roles on masculinity, HIV as consequence of immoral behavior. Secondly, the frames within HIV policy were scrutinized. These frames outlined HIV as a consequence of promiscuity, as a problem especially to those with ‘risky sexual behavior’ or it failed to at all acknowledge e.g. men having sex with men. This thesis demonstrates that a frame bridging is present although it is not overt but rather implicit. The HIV policy is heteronormative and renders sexual minorities invisible. A possible explanation is that the exclusion of men having sex with men in HIV policy is strategic and due to aid dependency from Western donors. Since actors are confined in their social realities, Ugandan politicians may not be explicitly homophobic in HIV policy since they must acknowledge the Western donors’ influence. This thesis has illustrated that the relationship between homophobia and HIV ultimately turns in to a discussion about tensions between an ‘open’ West and a ‘deprived’ Africa.

Keywords: HIV, Homophobia, MSM, Uganda, Frame analysis, Framing, Frame Bridging, the Anti Homosexuality Act
**Acronyms**

AIDS - Acquired Immunodeficiency Syndrome

HIV - Human Immunodeficiency Virus

MSM – Men Having Sex with Men

NPAP - National HIV and AIDS Priority Action Plan

NSP – National Strategic Plan

UAC – Uganda AIDS Commission
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“There is something really wrong with you if you are gay [...] how can a man fail to be attracted to all these beautiful women and be attracted to a man?” (President Museveni, 2014b).

1. Introduction

Homophobia may take its form in negative comments, physical abuse, discrimination or demonization in media. It may also be expressed through state-led action, through punitive laws or other social institutions (Avert, 2015). Homophobia constitutes an obstacle in combatting the global HIV epidemic, and negative attitudes towards the LGBTQ+ community are closely interlinked with the struggle of the stigmatization of HIV. Particularly affected by the stigmatization are men having sex with men (Ayala and Santos, 2016:1), which will be referred to as MSM throughout this thesis.

When HIV had its outbreak, MSM were portrayed as responsible for the transmission of the disease. This sparked homophobia and depicted homosexuals as inherent bearers of HIV. Institutionalized homophobia affects the lives of LGBTQ+ people and creates barriers when trying to assess care or treatment for HIV (Avert, 2015). The correlation between homophobia and the dissemination of HIV is widely covered in previous literature. However, most scholars neglect to consider whether the homophobia is institutionalized and how this may affect other interrelated discourses, in this case that of HIV.

1.1 Aim and Research Question

The HIV epidemic, has its highest concentration in Africa, which grossly affects the wellbeing of large populations (Avert, 2017). By 2030, the sustainable development goals wish to see the end of the HIV epidemic (United Nations, 2015). Certain groups are more vulnerable to the disease because of the stigma, such as MSM. Therefore, it is essential to study how these issues interlink, since it may help us better understand what could be done in order to combat the disease. The goals issued by the UN do not explicitly mention sexual minorities. This diminishes the impact homophobia may have on homosexual people living with HIV’s situation. Furthermore, homophobia may have substantial economic costs (Taylor, 2016) and consequently create obstacles to development. It is necessary to study how homophobia can affect the way in which HIV policy is framed, this since it may directly impact transmission of the disease.
Through a dynamic frame analysis, this study aims to examine how an institutionalized frame of homophobia, with Uganda as a case study, may affect the framing of HIV policy. In order to answer the research question below, one must firstly identify which frames are present amongst Ugandan leaders’ attitudes on homosexuality. This will then be contrasted the framing of HIV in order to understand whether they intersect or not.

*Has a frame bridging between homosexuality and HIV occurred in Uganda? If so, how?*

### 2. Theoretical Background and Framework

#### 2.1 Literature Review

There is a wide array of articles covering the topics of homophobia and HIV; specifically literature that focuses on the relationship between the phenomena. In the following section a selection of relevant literature will be summarized and scrutinized. It is important to note that certain actors and authors utilize HIV and AIDS interchangeably. According to the UNAIDS terminology one should avoid this misinterpretation and AIDS should only be used when referring to the late stages of the disease (2014). However, I cannot neglect that much of the literature and the statements analyzed fail to separate the two. Therefore, I will sometimes use the term of AIDS, even though it is not to be considered directly synonymous to HIV.

##### 2.1.1 HIV, Stigma and Homosexuality

Homosexual transmission of HIV does not account for the majority of infections globally. The international approach to the HIV epidemic has accordingly been to challenge the association between homosexual relations and HIV (Altman, 2012:15). It is dangerous to depict the gay community as the only one vulnerable to the disease (Altman, 2012:17). When labeling HIV as being synonymous to gay, homophobia is likely to occur or be reinforced. Richards illustrates how the distribution of HIV cases in the United States have led to an increase in homophobia over time. In the fear of AIDS, anti-gay harassment has become normalized. Homophobia was disseminated within press and media during the 1980’s, which in turn has affected general discourses in the United States to this day. In Richards’ quantitative study HIV incidence proves a constant effect on attitudes towards the civil rights of homosexuals (2006). Herek et al. defines HIV-related stigma as a prejudicial practice towards the person living with HIV. The prejudice can be expressed through different types of
discriminating practices such as ostracism or legislation, which deprive persons diagnosed with HIV or AIDS. Hence, HIV is associated with a group, who are most likely to attract the disease, which has traditionally been MSM. Herek claims that the HIV epidemic did not itself cause prejudice and hostility but that it instead has been used as a mechanism through which people could express their already present prejudicial opinions (2013:41-48).

MSM is one of the few remaining groups where the spread of HIV is worsening worldwide. Homophobia and sexual stigma can limit access to treatment and care as well as the uptake of HIV prevention. Furthermore, criminalizing homosexuality encourages human rights abuses, discrimination and violence. Initiatives that are directed towards gays and bisexuals can have positive impacts such as encouraging condom use. If the sexuality in itself is stigmatized, this type of directed health promotion becomes an effort impossible to accomplish (Ayla and Santos, 2016:1). Criminal law can influence media and in turn societal believes (Worth et al., 2005:15) making stereotyping a problem. Homosexuals are often stereotyped to have promiscuous sexual behavior (Fyfe, 1983:552), which facilitates linking together homosexual sex with risky sex behavior. However, one could argue that one often misrepresents HIV epidemiology and renders gay, bisexual and other MSM invisible. An example of this invisibility is the Political Declaration of HIV, endorsed by the UN in 2016. The declaration fails to address the severity of the HIV epidemic in this specific vulnerable group. When failing to include MSM in the HIV narrative, one ultimately fails to recognize the human rights abuses that people within this group is subjected to, due to their minority status (Ayla and Santos, 2016:4).

Sexual stigma can constitute an obstacle to the health of MSM and also help legitimizing crimes against them. Sexual stigma can prevent MSM from seeking help in fear of being forced to disclose their sexual behavior. This since admittance to having homosexual sexual relations induces the risks of being persecuted or even imprisoned (Arreola et al., 2014:232). Laws that prevent people in risk groups from testing themselves for HIV should be revised if one wishes to prevent continuation of the epidemic. If punitive measures for marginalized groups seized to exist, the epidemic would probably halt at a faster pace (Jürgens et al., 2009:164-169).
2.1.2 Homophobia and Masculinity

Throughout this thesis, homophobia will be a term frequently used. Consequently, it is essential to discuss what homophobia actually entails. Homophobia can be considered a contested concept with great theoretical uncertainty (Plummer, 2014:127). Other terminologies of the phenomenon have been proposed such as homohysteria, heterosexism, and anti-gay to name a few (see e.g. McCormack and Anderson, 2014). However, these will not be discussed further due to the limits in time and scope of this thesis.

In order to understand homophobia one must analyze the complex gender taboos, which construct the way in which meanings, definitions and theories are framed within homophobic discourses. Homophobia is in many ways similar to misogyny, but instead of an inter-gender divide, homophobia establishes an intra-gender divide between real men and those inferior (Plummer, 2014:130). It is crucial to position sexuality in relation to gender norms or ‘taboos’ (Plummer, 2014:132). Homophobia is central when socially organizing our cultural definition of manhood. Homophobia is not merely an irrational fear of homosexual persons but is rather constructed through notions of masculinity; it is about the fear of having other men ‘unmasking’ one’s ‘manhood’. Men must constantly conform to gender boundaries and be careful not to display any sign of femininity. There is a constant fear of being labeled as homosexual, which makes men amplify their traditional roles of masculinity (Kimmel, 2005:214). As mentioned previously, HIV is often seen as synonymous to being gay; HIV is furthermore inherently linked to fear and rejection. Being HIV-positive could be seen as a marker of manhood and masculinity, since it entails having taken a risk. Testing positive becomes a proof of courage and allows MSM to enter a brotherhood, built on the foundation of masculinity (Thomas et al., 2014:157-161). Homophobia constructs the homosexual man as the ‘Other’, which is then excluded from the collective (Kimmel, 2005:216). Homophobic Othering frames the homosexual as a threat to the moral universe (Goleman, 1990:1). Homophobia is a rejection of the different (Thomas et al., 2014:159) and functions as a mechanism that unifies sexual orientation, desire, identity and social constructions of sexual acts into a dichotomy separating gay from straight (McCormack and Anderson, 2014:111).

Homophobia can also be internalized because individuals internalize these stereotypes as part of their personal values (Petros et al. 2006:73). Power is never the property of the individual but it belongs to a group, this power remains in existence as long as the group stays together
Through language, one can construct the ‘Other’ as an object of hate that contributes to our notions of group identity. However, there is a practical possibility to shift current discourses on homophobia. Homophobia could be literally talked out of existence; since that is the way it became a part of established vocabulary in the first place (Harvey, 2012:195). Homophobia can nevertheless be covert, meaning that anti-homosexual sentiments are understood yet not articulated explicitly (Plummer, 1999:134). ‘Masculine’ behavior is thus the explanation and the excuse, which legitimates a subordination of those inferior and incompatible with the norm.

Furthermore the existence of a hegemonic masculinity, which only a minority of men can attain, affects the way in which men positions themselves. These men have to constantly evaluate themselves in relation to this hegemony (Connell and Messerschmidt, 2005:832). African manhood has historically been defined in contrast to that of European masculinity. African men were seen as “boys”, socially immature and inferior to the “adult” white men (Barker and Ricardo, 2005:12). One must take into consideration that there are plural definitions of masculinities in Africa. The construction of manhood fluctuates and is locally conceptualized. When analyzing gender in Africa, gender hierarchies that take the subjugation of certain men into account is too often neglected. One should not neglect how ideas of masculinity are plural and contradicting. The relationship between sex, manhood and identity does furthermore directly impact HIV prevention measures. One cannot combat HIV if not acknowledging the social structures that define manhood which men must conform to (Barker and Ricardo, 2005).

2.1.3 The African Context

Homosexuality in Africa has come to play a vital part in public debate. This has encouraged a homogenization depicting Africa as homophobic, often seen to be opposed the progressive and tolerant West. This homogenization is problematic and neglects the existence of internal debate and disagreements on the topic of homosexuality in Africa (Awondo et al., 2012).

The anti-homosexuality bill drafted in 2009 sought to intensify already punitive measures for homosexual acts in Uganda. The penalty for being homosexual would increase from seven years imprisonment to lifelong imprisonment and for acts of aggravated homosexuality, meaning having had committed e.g. serial offense would be penalized with death. Aggravated homosexuality also included e.g. HIV-positive status, meaning that if caught having had
infected another person via homosexual sexual relations, this would lead to a life long sentence, regardless of disclosure or lack of knowledge of ones status (Persad, 2010:138-140). The Ugandan constitution does not include sexual orientation as a right under their law on equal protection (Persad, 2010:143). Uganda’s anti gay bill could be considered a case of how certain politicians frame homosexuality as a foreign policy issue. The case of Uganda demonstrates how homosexuality is a way in which one can claim moral authority and national autonomy against the neocolonial West. Many international human rights missions seize to abolish laws such as the Ugandan law, which has fueled these tensions (Awondo et al. 2012:154). Sweden and other major aid donors for Uganda threatened to stop assisting the country if the anti gay bill was not at least toned down (Ireland, 2013:50). These criticisms seem to have enforced the homophobia in Uganda, making the bill vital to distance oneself from Western culture and its ideas of what constitute “real” freedoms (Boyd, 2013:698).

Debates often raise the question whether homosexuality is “un-African” and many politicians use this argument to frame the issue as an import from the West (Barker and Ricardo, 2005). To argue that this is the only opinion on homosexuality in Africa would nevertheless be ludicrous. The criminalization of homosexuality could partly be seen as a colonial legacy from former Western colonial rulers. Thus, homophobia was thus in a sense, imposed by the West (Awondo et al., 2012:148). Colonialism has played a part in shaping laws and sentiment regarding homosexuality in Africa today (Ireland, 2013). Consequently, it is important to not paint a simplistic picture of homophobia as something African, but rather understand how discourses have been very much influenced by a Western bias. I will do my very best to not reproduce the stereotypical image of a homophobic Africa and a tolerant West in this thesis. Additionally, it is inherently problematic to claim that certain expressions and statements make a country or a continent homophobic. Therefore, I will be very careful to not make such assumptions.

Discourses around HIV and AIDS may be influenced by homophobic rhetoric. The relationship between homosexuality and HIV is often used as an example of an immoral behavior that provokes societal deterioration. This legitimatizes negative sentiments toward the LGBTQ+ community. An increase in homophobia can thus be understood as a response to ravages of AIDS, although many of the victims are heterosexual (Awondo et al., 2012). In June 2008, the government of Uganda refused to fund HIV programs for MSM. Furthermore the proposed bill saw that homosexual ‘activity’ while being HIV positive was to be
considered an act of “aggravated” homosexuality, which was “especially dangerous” (Ireland, 2013:48). Denying MSM HIV-related help might aid the epidemic in spreading, which will then affect the Ugandan society as a whole. Therefore, it is counterproductive to isolate MSM from national AIDS programs (Hladik et al, 2012).

There is a paradox regarding the relationship between HIV transmission and MSM as access to information is the hardest to attain in places with the highest levels of stigma. It is thus impossible to find disaggregated data, which makes it difficult to understand to which extent the problems of HIV are due to stigmatization of e.g. homosexual sexual relations. In Uganda, projects that aim to identify groups at risk of HIV or that are directed towards sexual minorities have been suspended due to risks for researchers and participants (Nordling, 2014).

2.1.4 Ugandan Discourse

Many themes have been covered in this section, in order to understand the ways in which homophobia and HIV interact. I have yet to find an article that has examined the ways in which framing is used to connect the two concepts. The closest is Lydia Boyd’s article, which analyzes Ugandan discourses on homosexuality. Boyd does not mention HIV, but focuses instead on the complex relationships between Western hegemony and the Ugandan resistance. Boyd claims that these discourses are constructed through an ambivalence of individual autonomy in relation to sexual agency and ethics through a local perspective. She emphasizes how one must acknowledge how a discourse is context dependent. In her study, Boyd analyzes different statements from religious leaders and politicians. These discourses are heavily influenced by the Western concept of individuality, which African subjects are expected to recognize. Boyd brings up an example where a Ugandan pastor framed his antigay rhetoric to be a response to this ‘foreign’ practice. Furthermore, this pastor argued that the universal right to be homosexual as framed in the West poses a particular threat to Ugandan values. Additionally, homosexual relationships were by many of the interviewed seen as a type of recruitment. Homosexuality is considered a practice through which homosexuals introduce younger adults or even children to their ‘immoral’ lifestyle. An interesting finding of Boyd’s is that of how homosexuality often is portrayed as a male same-sex sexuality, which renders e.g. lesbians invisible. She argues that this perhaps is a symptom of gendered hierarchies and norms. Conclusively, Boyd painted a picture of how anti-gay activists have managed to construct homosexual persons as a direct menace to the Ugandan
society (2013). The way in which Boyd analyzes discourses has inspired this thesis and consequently the way in which I will conduct my research.

In conclusion, it is evident that homophobia and HIV are interlinked in many ways. Moreover, one cannot and should not analyze these two phenomena in separation from stigmatization and institutionalized norms such as for instance gender hierarchies. The ideas of stigma and what constitutes a normative sexual behavior influence discourses in which stereotypes and prejudice are reproduced. This study aims to contribute to previous research by further analyzing how an institutionalization of prejudice, in this case homophobia, affects discourses and policies regarding HIV.

2.2 Theoretical Framework - Dynamic Frame Theory

Dynamic frame theory aims to aid researchers analyze the roll of ideas in political contexts. The theory claims that the construction of a certain problem is as essential as solving this very problem. Ideas can both hinder and enable actors’ possibilities to address a specific issue. The theory can be seen as a way to understand policymaking as a dynamic and interactive process, which then affects actual policy outcomes and discourses (Erikson, 2011:9). Framing refers to processes associated with assigning them meaning or the interpretation of relevant events and conditions that may mobilize potential adherents and constituents or demobilize antagonists (Snow and Benford 1998:198). There are no objective truths; all ‘truths’ are dependent on a social context in which we commonly agree upon their meanings. Benford adds that meaning is problematic; it does not come from one mind. Meaning is contested, negotiated, modified, articulated and rearticulated (1997:410).

Dynamic frame theory bases many of its assumptions on social constructivism, which will be a useful tool when trying to understand how discourses around HIV in Uganda are shaped and disseminated. Politicians cannot ignore the social realities they are confined in. Politicians must constantly acknowledge to which degree these social realities affect their possibilities to realize their ideas. Social realities may thus act as a hinder or enable policy change. Erikson argues that one of the main aspirations in politics is to find a solution to socially acknowledged problems; neither solutions nor the problems are in themselves objective. A problem can only be addressed when it is acknowledged to be a problem by the people within that specific context. When this happens, one could argue that the issue has become institutionalized; this is when political change is made possible. An analysis of an issue can
never act in separation from history and is thus created on the basis of previous discourses and understandings of the issue (2011:10).

The dynamic frame theory, developed by Josefina Erikson, draws inspiration from constructivism, feminism and historical institutionalism. As mentioned earlier, the notion of ideas being created as social and mutual understandings will heavily influence the way in which material is analyzed in this thesis. Erikson argues that through a meta-theoretical perspective, the author becomes a co-creator of the social reality, which might influence the result of the study. It is vital to be aware of the potential bias that might affect the analysis of the material chosen for scrutiny. Social structures are hierarchical and denote relations of power, resource allocation and normative hegemony. Class, gender and race are some of the most stable structural relations of hierarchy and inequality in modern societies (2011). This study will focus on sexuality, which could arguably be seen as another important aspect of this structurally created hierarchy.

A formal institution can be codified, which limits the way in which it may be interpreted. This could also be understood as a dominating idea that has reached the highest status in a society. The dynamic frame theory can act as a helpful tool when wanting to study ideas and their degree of institutionalization, rather than claiming that ideas are institutions themselves (Erikson, 2011:23). The process of institutionalization can be seen to firstly start with a frame, which is acknowledged by a few key persons with a political agenda. The second step happens when this frame is supported by a coalition of actors. The third level of an institutionalization is when the frame is present in official governmental and parliament documents. The fourth and final step is when the frame is included in the legal framework. Every step in the process of institutionalization strengthens the frame’s possibility to affect a policy’s final result (Erikson, 2011:24).

Benford argues that one cannot analyze the construction of a problem without examining the actors that have played a vital role in framing the issue (1997:418). However, Erikson points out a potential difficulty when including the actors in our analysis. One must find a balance between acknowledging the actors’ responsibility in influencing the frames and simultaneously understand how they are stuck within their socially constructed reality. Once again, we must acknowledge the complexity of ideas acting as enabling or hindering for policy change. Moreover, one must understand that actors may act strategically; utilizing the
discourses they are confined in to reach a desired result. When an idea is expressed it can however not be undone, a strategic framing might get unexpected and unwanted consequences (2011:26). Jurisdiction is also an important conceptualization between the framing of an issue and the context in which the frame is produced. The framing of a specific issue affects the way in which the problem is then dealt with, it is also critical as it decides how actors can address the issue (Erikson, 2011:42).

There are four strategies within frame theory, which are frame bridging, frame amplification, frame extension and frame transformation. Frame amplification means idealizing, clarifying or refreshing an already present frame. This strategy is effective since it means utilizing already existing cultural values, beliefs and so forth to amplify the frame of choice (Benford and Snow, 2000:624). Frame extension is about widening the frame so it includes several questions that potential adherents may appreciate. Essentially it makes the frame less specific in order to make the frame more attractive to a bigger crowd. Frame transformation entails when the changing of the question formulation in order to affect the ways in which the frame is understood collectively (Benford and Snow, 2000:625). The fourth and final strategy is a so-called frame bridging, meaning that actors merge two or several frames together. In Erikson’s dissertation, the author illustrates how this was the case with AIDS and prostitution in Sweden, where the urgency of the HIV epidemic was used as an argument to criminalize buying sex, since it could possibly hinder an outbreak (2011:96). Similarly, I suspect that this type of frame bridging is present in the case of Uganda but with homosexuality and HIV.

Erikson argues that dynamic frame theory includes three vital criteria when analyzing ideas. Firstly, one must understand ideas as socially constructed, which are in turn created in dynamic processes. Ideas are thus both constructing and constituting. Secondly, actors must be seen as active participants in creating the meaning of a specific frame. Lastly, ideas are seen as both enabling and hindering in relation to actors. Erikson argues that previous research has failed to include all of these aspects (2011). Snow and Benford argue that it is vital to not only focus on the framings of movement elites, since this can lead to a bias, providing us with a skew view upon what a frame might look like. One must be careful not to oversimplify a frame (1997:421).
3. Methodology and Material

This is a qualitative case study of Uganda, where dynamic frame analysis has been chosen as method. This method is closely interlaced with the dynamic frame theory, which has already been presented in the theory section. Frame analysis is a method suited to analyze the role of ideas in politics; it focuses on both the formulation of policy and the actors (Erikson, 2011:10). In this section a discussion about frame analysis as method, the material chosen and why Uganda is a compelling case will be presented. Furthermore, interpretive research will be discussed followed by a section about how to operationalize the theoretical framework.

3.1 Dynamic Frame Analysis as Research Method

Frame analysis has emerged from sociology and has been especially influenced by the work of Erwin Goffman (1974). It has been used for methodology within political science when analyzing policy and is a constructivist tool to analyze ideas and the actors that formulate them. Frame analysis builds upon the notion that every single political question must be framed, and in turn one must analyze this process of framing in order to understand why for instance a decision has been made. Framing focuses on what the problem is constituted by, why this is the case, and which solutions have been proposed (Erikson, 2011). As mentioned in the theory section of this thesis, actors are vital when using dynamic frame analysis as method. Actors help shape policy, and sometimes they do so with strategic intentions. Strategic intention refers to the framing process as deliberative and goal directed. Frames can be developed to achieve a specific outcome, for instance to mobilize voters or acquire funding (Benford and Snow, 2000:624). However, one must understand that these actors may be confined within certain institutionalized frames. Hence, frame analysis is useful when wanting to explain why a certain idea dominates a discourse (Erikson, 2011:45). One must be careful when analyzing strategic intentions since they may be unintentional or covert. The frame analysis is in comparison to the discourse analysis better when analyzing a specific context and a specific idea. This is the case in this thesis, as it strives to look at how a frame bridging between institutionalized norms on homosexuality might have implications on Ugandan actors’ HIV-framing. A discourse analysis could instead be fruitful if one is interested to focus solely on the ideas; it lacks the focus on actors that frame analysis provides. Erikson argues that it is important to understand that ideas never can act in complete isolation but is dependent on the actors that reproduce them (2011:26).
This study strives to analyze how an institutionalization, when one frame is dominating the discourse, affects another frame. This will be referred to as frame bridging, where two different questions are merged together in order to reach a desired result in specifically one of them. Frame bridging is according to Benford and Snow one of the more prevalent strategies within framing (2000:624). In Erikson’s study, she examines how the framing of prostitution was bridged with that of HIV. By examining the chosen material, I will hopefully reach a conclusion to as whether a frame bridging has occurred, in which ways and whether it has been strategic. In this study, it is essential to understand that the discourse around homophobia might have been institutionalized to the degree where it is difficult for actors with an adversary opinion to express this. The focus will be to present whether the homophobic frame has influenced the way in which one discursively talks about HIV in Uganda.

3.2 Case Selection

Uganda is what we could consider a most important case, meaning that it has been strategically chosen to help us further our understanding about a specific empirical phenomenon. Uganda is a fruitful case since previous theories have failed to properly explain in which ways frames on homosexuality and HIV may coincide. This type of case selection aims to analyze an empirical setting where the phenomenon of interest is as transparent as possible (Ljungkvist, 2014), which is arguably the case in Uganda since their homophobia is what you could call state-sponsored. The anti homosexuality act was drafted by David Bahati in 2009 and sought intensify the already present homophobic laws. It was passed in parliament in 2013 with a clear majority and was signed into law in early 2014 by president Museveni. The legislation was deemed unconstitutional, but it could be argued to have great support both among members of parliament and the Ugandan people (BBC, 2014). The antigay bill does in itself mention infecting somebody else with HIV through homosexual sexual relations as a type of ‘aggravated’ homosexuality, meaning that it bridges the ideas of homosexuality with that of HIV. It is interesting to analyze how the antigay bill, even though deemed unconstitutional, might have helped further institutionalize homophobia in Uganda and how this institutionalization may have affected actors’ way of framing HIV. Uganda is also a compelling case, since it illustrates tensions between the West and Africa.
3.3 Material

This frame analysis will look at two different frames in Uganda, the framing of homosexuality and the framing of HIV. The aim is to first identify the frames within the two topics and to analyze whether a frame bridging has occurred. The time period that will be analyzed is between 2009 and 2017, because the anti gay bill was first drafted in 2009. Moreover, it is interesting to see whether the passing of the bill in 2013 and the signing of it into law by Museveni have led to a frame bridging.

I will shortly present the anti gay bill and then I will identify the frames present on homosexuality by examining statements from key persons in Ugandan politics. This will be contrasted to three official documents from the Ugandan AIDS commission, combined with a few statements made by Ugandan politicians and policymakers to see whether homophobic rhetoric is present in the framing of HIV. President Museveni will be of particular interest, this since he has been president in Uganda for over 30 years and thus is very influential. The majority of the articles chosen are from Ugandan newspapers, this in order to avoid a Western bias.

Normally, when using frame analysis as method, it is fruitful to analyze proposed bills in parliament. This has been difficult to accomplish, as most of the Ugandan bills are unavailable to the public. However, Erikson argues that political texts and bills may be difficult to analyze since they try to include as many reasons as possible for why their solution is desirable (2011:54). This must be acknowledged and I will discuss limitations of my interpretations as transparently as possible in the analysis. The chosen documents and statements from elected officials will be analyzed in order to understand which frames exist on the topic of HIV and homophobia and how they may or may not intersect.

3.4 Pragmatic Interpretive Research

According to Friedrichs and Kratochwil one must be pragmatic when doing qualitative research. One should not accept a positivist view of operationalization as something that should be fixed in the beginning of the process and then stay the same throughout the entire research. It is more productive to allow for adaption in the conceptual framework in order to best analyze ones empirical findings (2009:717). As mentioned in the theoretical framework section, researchers of qualitative studies must acknowledge that they are inherently confined
within their social realities. According to Schwartz-Shea and Yanow, one must recognize intersubjectivity since the researcher aids shaping the ways in which we analyze the world of study. This type of research is thus heavily dependent on choices made by the author, which should be thoroughly motivated throughout the process. Frame analysis as method is what could be referred to as interpretive research, since it does not set out to test key concepts defined before the research begin. In interpretive research, the focus is to analyze a specific context rather than seeking a generalized meaning which is applicable to general situations. Therefore, interpretive research can be seen as dynamic and flexible to circumstances, which is quite the opposite of quantitative research. This flexibility is strategic since the research may change initial methodological choices and questions throughout the process. One should be clear about how the material for the research is chosen. However it is not a problem if it is made in a non-randomized fashion as long as it is transparently motivated. Validity, reliability and replicability make sense when arguing that the social reality of interest is characterized by objective and stable truths. This could be argued to be incompatible with interpretive research, since it rather assumes that the social reality is contingent. The main issue with interpretive research is that of biasness, since the study is highly dependent on interpretation biasness is likely to occur. Nevertheless, one should not neglect the fact that humans can be aware of their biases, we can consciously analyze and reflect upon our social realities (2012).

In conclusion, this study does not have a generalizing objective, but rather aims analyzing this specific case to understand why or why not a frame bridging between HIV and homosexuality has occurred. Causal theorizing is not the sole legitimate purpose of research, but studies that intend to further knowledge on a specific topic within a confusing field of research is also necessary. Utilizing causal theory does not necessarily mean that the study is scientifically relevant. In social science, one must understand that the contingency of our social world makes it impossible to hope for anything but contingent generalizations (Friedrichs and Kratochwil, 2009:716).

3.5 Operationalization

This section aims providing the reader with an insight into how the chosen material will be analyzed. Firstly, one must distinguish what a frame is, since this concept is vital for this thesis. According to Erikson, a frame is a system of belief that often defines a problem, what its causes may be and finally proposes a solution (2011:38). Furthermore, the three criteria by Erikson presented in the theoretical framework must be taken into account. They entail
understanding ideas as socially constructed and created in dynamic processes. Secondly, actors must be seen as active participants in creating the meaning of a specific frame. Lastly, ideas are both enabling and hindering actors in their endeavor toward reaching a desired result. These criteria will play an integral part when analyzing the material.

In a dynamic frame analysis, the frames can consist of several ideas within the phenomenon. The analysis becomes dynamic when different ways of framing the issue are compared with each other, it is especially important to acknowledge to which degree these frames are institutionalized (Erikson, 2011:24) The framing of homosexuality is to be considered an institutional frame, meaning that it is more complex and often determines in which ways policy frames can be formulated. A policy frame entails how actors construct a problem within a specific policy process. One could argue that the HIV framing is a policy frame very much dependent on the institutionalized ideas about homosexuality.

When analyzing the statements and documents, the questions below will be asked in order to identify what different frames there are on homosexuality and on HIV/AIDS. These are presented below and will be further discussed in the analysis.

**Figure 1.** The Frames Present in Uganda

<table>
<thead>
<tr>
<th><strong>HOMOSEXUALITY</strong></th>
<th><strong>HIV AND AIDS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Un-African</strong></td>
<td><strong>Promiscuous Behavior</strong></td>
</tr>
<tr>
<td><strong>Not Masculine</strong></td>
<td><strong>High Risk Sexual Behavior</strong></td>
</tr>
<tr>
<td><strong>Immoral Behavior</strong></td>
<td><strong>The Invisible</strong></td>
</tr>
</tbody>
</table>

**For statements on homosexuality**
1. Does the document/statement explicitly mention HIV or AIDS? If so, how?
2. What is defined as the problem? How is it constructed?
3. If proposing a solution, what is it?

**For statements/documents on HIV and AIDS**
1. Is the document/statement explicitly homophobic? If so, how?
2. What is defined as the problem? How is it constructed?
3. If proposing a solution, what is it?
4. Results and Analysis

Homophobic rhetoric has become institutionalized to a degree in Uganda that makes it difficult for opinions that are gay-positive to gain territory. Even though the anti gay bill was deemed unconstitutional, it was still passed through parliament with a great majority and can thus be argued to have contributed to a higher level of institutionalized homophobia in Uganda. Nevertheless, it is crucial to not make assumptions that gay positive sentiment is non-existent due to the lack of room to express these. The following section aims at examining the ways in which politicians and policy makers have framed the issues of homosexuality and HIV in Uganda. Firstly, it aims presenting analyses of which frames are present amongst Ugandan leaders’ attitudes on homosexuality. Secondly, it wishes to analyze how the framing of HIV and AIDS may look like and whether it is homophobic. The findings will be discussed and compared in order to answer the thesis’ research question about whether a frame bridging between homosexuality and HIV have occurred in Uganda and if so why.

4.1 Framing Homosexuality in Uganda

4.1.1 The Anti Gay Bill

The anti homosexuality act wished to prohibit any form of homosexual sexual relations and to forbid promoting such activity. In the bill, a homosexual is defined as a person who engages or attempts to engage in same gender sexual activity. Several offences are presented, such as the offence of homosexuality, meaning that a person commits a sexual act or touches another person of the same sex with the intention of committing “homosexuality”. What is of interest in this particular bill is the offence of “aggravated homosexuality”, where certain especially “dangerous” characteristics are to be found. If the “offender” is a person living with HIV, the person is committing the crime of aggravated homosexuality and is to be imprisoned for life. Other crimes of aggravated homosexuality entail guardians having homosexual sexual relations with children, serial offenders (when acts of homosexuality are repeated) and having sex with disabled people. When charged with the offence of aggravated homosexuality that person shall be forced to undergo HIV testing. Homosexuality is argued to be a horrible crime, which must be punished. Aiding and abetting others to engage in acts of homosexuality is also considered a crime. Owning or occupying premises where acts of homosexuality are performed is deemed unlawful. This bill and its definition of aggravated homosexuality is what inspired this thesis, since it explicitly mentions transmission of HIV or AIDS via homosexual relations as an especially atrocious crime (2014).
4.1.2 Framing Homosexuality as un-African

One of the dominant frames found in the material is the conflict between Western respectively African values. As mentioned in the literature review, the question regarding homosexuality has both been discussed as “un-African” and as something imposed by the West. David Bahati is one of the members of the Ugandan parliament responsible for drafting the anti gay bill. He has taken part in several interviews where the clash between a Western individualistic and human rights based view upon sexuality is questioned and compared to Ugandan or African values.

“Ugandan values are not up for sale […] Homosexuality is not linked to any genes but is a behavior, like any bad behavior we have in our society. It is against our values and something we need to stop. I don’t believe homosexuality to be a human right” (David Bahati in Al Jazeera, 2014a).

“Our society is being destroyed […] It is wrong for a man to sleep with a man […] we are actually questioning the motivation of the Western countries […] we cannot social imperialism. This law was originated by Ugandan people, passed by the Ugandan parliament to protect the sovereign country of Uganda” (David Bahati in Al Jazeera , 2014a).

The statements presented above illustrate how Bahati reacts when being asked about what he thinks of Western donors halting aid in reaction to the antigay bill. The donors’ primary concern was that health measures that they support via funding must be inclusive for all, even homosexuals. Uganda has been put under extreme pressure from their donors, which has sparked this tension (Al Jazeera, 2014b). The question of homosexuality is within this frame argued to be a new form of social imperialism, where the West utilizes their superiority to influence Ugandan politics and policy. As Boyd illustrated in her study, discourses regarding freedom are normally influenced by the Western concept of individuality (2013:700). The Western notion of homosexuality being a human right is here framed as a direct menace to Ugandan society and values. The question of homosexuality becomes an important symbol when wanting to break the chains from their colonial past. Interestingly, Bahati does also refer to homosexuality as a bad behavior, which is a reoccurring theme in this analysis.
"We used to have very few homosexuals traditionally. They were not persecuted but were not encouraged either because it was clear that is not how God arranged things to be." (President Museveni in The Monitor, 2009).

“It seems the topic of homosexuals was provoked by the arrogant and careless Western groups that are fond of coming into our schools and recruiting young children into homosexuality and lesbianism, just as they carelessly handle other issues concerning Africa.” (President Museveni in The State House of Uganda, 2014a)

“Respect African societies and their values,” he said. "If you don't agree, just keep quiet. Let us manage our society, then we will see. If we are wrong, we shall find out by ourselves, just the way we don't interfere with yours”. (President Museveni in CNN, 2014).

As demonstrated above, President Museveni explicitly frames the issue of homosexuality as something provoked by the West which Ugandan or African values are constantly compared to. These statements are very much in line with the rhetoric presented by David Bahati in his framing of homosexuality. Likewise, Museveni mentions “recruitment”, which illustrates yet again that homosexuality, is a bad behavior that one can be persuaded into. What is remarkable here is that lesbianism is mentioned but simultaneously separated from homosexuality, demonstrating how lesbians most often are not included in the framing of homosexuality, which is seen exclusive to male homosexuals.

4.1.3 Framing Homosexuality Through Notions of Masculinity

As mentioned, it becomes apparent that homosexuality is most often synomnized with male homosexuality. Boyd argues that this might be a symptom of gendered hierarchies and norms (2013:713). It is essential to understand how the framing of homosexuality is dependent on common understandings of what masculinity entails.

“There is something really wrong with you if you are gay […] how can a man fail to be attracted to all these beautiful women and be attracted to a man” (President Museveni, in Al Jazeera, 2014b).

This quote problematizes same sex attraction, and portrays homosexual men as being ‘defected’. This could be argued to be a framing of the homosexual man as the ‘other’
The homosexual man is rejected because he does not conform to traditional gender roles and masculine hierarchies, in which he is supposed to be heterosexual. This frame depicts the gay man as inferior the idea of what constitutes a ‘real’ man. By not conforming to masculine norms, one might be ‘unmasked’ by other men as illustrated above.

"It is not true that people are born homosexuals. We have had cases of people who were once homosexuals but are now living normal lives. People are persuaded into that way of life […] they know it is a matter of choice. The worst thing is the demands they are making that they should be given legal respectability and that our children should grow up knowing that there is an alternative to being heterosexual. If we all go that way, where will we get posterity? No children will be born.” (James Nsaba Buturo in The New Vision, 2009)

James Nsaba Buturo, a Ugandan member of Parliament, illustrated in the quote above another aspect of framing homosexuality in terms of masculinity. Firstly, Buturo claims that homosexuality is something you learn, and that it is not permanent but that it is possible to become ‘normal’. Homosexuality is presented to be an immoral choice, which can negatively impact children and ultimately the future of Uganda. By presenting an ‘alternative’ to being heterosexual, there is a risk that no children will be born. By choosing to be gay, one ignores ones masculine duty to reproduce. This homophobic Othering frames the gay man as a threat to Ugandan moral.

4.1.4 Framing Homosexuality as Immoral

The statements presented below illustrate how a frame depicting homosexuality as an immoral behavior may look like. This frame portrays homosexuality as choosing a harmful lifestyle, which is a perfect way to get infected with HIV.

"HIV is a disease that is largely avoidable by voluntary choice. There may be numerous prevention strategies that work including medical male circumcision, but for purposes of this article I am limiting myself to the moral aspects of it. Our society glamourizes non-marital sex and multiple sexual partners. Masculinity is determined by the number of women a man has conquered […] Infidelity, fornication, concurrent sexual relationships, homosexuality and prostitution, all of which are perfect recipe for HIV transmission, are man's and not God's invention” (Apophilia Agiresaasi, 2009).
“Developing and implementing policy and programs that provide AIDS education and awareness, prohibit stigmatization and advocate compassion would be the rational way forward. This would call for care while condemning homosexuality, adultery, fornication and prostitution” (Apophia Agiresaasi in The New Vision, 2009).

Agiresaasi, a representative in parliament, emphasizes how the disease could be avoided by choosing to lead a life characterized by what she believes is a moral life style. This statement is one of the few found in this research that so explicitly illustrates a frame bridging between homosexuality and HIV. Besides bridging HIV and homosexuality, Agiresaasi mentions norms of masculinity as dangerous to society. Homosexuality is compared with infidelity and prostitution to illustrate that it is an unacceptable behavior. The latter part of the statement does mention stigmatization as a problem when combatting HIV. Nevertheless, the proposed advocacy of compassion should exclude homosexuals, which illustrates that homosexuality is not considered a human right. Homosexuals are here, once again, perpetuated to constitute a threat to the Ugandan society.

As discussed in this first section covering the different frames on homosexuality amongst Ugandan politicians, several themes have been presented. It is apparent that the question of homosexuality masks a deeply embedded conflict between Western and African perceptions of what constitutes human rights and ‘moral behavior’. When scrutinizing the material, the presumed frame bridging between homosexuality and HIV or AIDS is not as evident as predicted. There is only one statement that explicitly links the two together, which is not enough to draw any conclusions from. This section has however provided some insight to which extent homophobia has become institutionalized in Uganda.

4.2 Framing HIV and AIDS in Uganda

In order to answer the research question in this thesis, one must look at Ugandan HIV and AIDS policy and whether it is explicitly homophobic. If this is the case one could argue that a frame bridging has occurred between the two phenomena. This section will be split into three sections presenting some frames visible in the official Ugandan policy documents on HIV and AIDS.
4.2.1 Framing HIV as Consequence of Promiscuity

This frame demonstrates how HIV is seen as a consequence of promiscuous behavior. This is interesting since it does not explicitly mention MSM or homosexuality, which has been the case in the framing of homosexuality. What is really interesting is the elements a promiscuous behavior really entails, since it is not disclosed.

“[…] Resist from immoral life-styles that may drive them to contracting the HIV/AIDS scourge. Promiscuity is still the main route through which the pandemic spreads and all other ways of preventing the scourge have been observed by the youth but the spread of the pandemic through sex remains the biggest challenge to society” (President Museveni in The State House of Uganda, 2012b).

Museveni does not clearly mention MSM in this quote, but focuses instead on ‘immoral’ lifestyle choices and how promiscuity can aid the pandemic spread. One could question whether Museveni has chosen to use these concepts instead of explicitly pointing to homosexuality in order to be more neutral. However, it is impossible to know what Museveni actually means when referring to ‘immoral’, and whether there are strategic intentions in framing this way is impossible to prove.

“Children grow without moral guidance, they need advice. For a young person to get AIDS is to betray their parents who have invested so much in them. If you don’t trust someone, why do you sleep with them? […] Ebikwyeka bye nsiika, muteeko kufulu (Put padlocks on your private parts),” (President Museveni in The State House of Uganda, 2014c)

Attracting AIDS, according to Museveni, is a betrayal and one must be vigilant to not put oneself at risk through risky sexual activities. The statement is not homophobic, but is a framing of HIV as a consequence of promiscuity.

In 2017, President Museveni initiated a new fast-track plan to halt the spread of HIV and AIDS in Uganda. In a presidential handbook the plan is presented with a list of five different objectives in order to combat the disease. These five steps determine the work of the national AIDS commission and the Ugandan society’s response as a whole. Under the first recommendation, Museveni directs attention to young people that every young person must take a stand against HIV. A way in which one can “take a stand against HIV” is to avoid “bad
influences” and “risky places”. Furthermore, the document urges young people to not have premature sex and to not fall under peer pressure. Alcohol and drug abuse is also pointed out as behaviors, which may influence ones decision-making and increase vulnerability to HIV transmission.

Moreover, there seems to be a conflict between promoting abstinence and “moral life style choices” whilst claiming that it is important to not stigmatize people diagnosed with HIV. Throughout the document, the problem of HIV is often constructed through the notion of it being avoidable by refraining from morally undesirable lifestyle choices. This incompatibility is not addressed in the document. Furthermore, Museveni calls upon Ugandan leaders to take a stand against HIV by for instance “provide clear and accurate information on how to prevent HIV”, simultaneously these leaders should “mobilize communities against negative social and cultural practices… that expose people to the risk of HIV” (2017:9). There is no mention of MSM or homosexuality, and one could thus pose the question whether homosexual sexual relations are to be considered a “negative cultural practice”.

4.2.2 Framing HIV as a Problem for Groups Engaging in High-risk Sex

In the national HIV and AIDS strategic (NSP) plan for 2015/2016-2019/2020 published by the UAC, problems of stigma and discrimination of people living with HIV and AIDS are acknowledged. The general goal is to end new infections, decrease mortality rates caused by the disease and decrease discrimination. The document explicitly mentions reducing the social impact HIV may have on people living with the disease and access to treatment must be universal (2015:I). The plan was as mentioned issued by the Ugandan AIDS commission but global partners and stakeholders have also participated in forming this plan, providing insight and consultation on the topic (2015:III). Uganda is, under international commitments, bound to adopt certain globally agreed upon strategies to combat HIV, such as the “zero-discrimination” policy (2015:1).

The problem of HIV is in the NSP identified as being caused by e.g. high-risk sexual behaviors, low individual risk perception and gender inequalities (2015:VII). The document does explicitly mention MSM as a particularly vulnerable population in regards to HIV (2015:5). The plan does recognize that one of the biggest causes of the continuing spread of HIV is due to factors such as gender norms, constructions of masculinity, stigma and discrimination (2015:8). This is interesting since one in the framing of homosexuality
discriminates sexual minorities, stigmatizes MSM and often promotes masculinity. One can argue that an obvious incompatibility between the two frames is made visible. The plan is not overtly homophobic but seems to rather emphasize the importance of reaching key populations with risky sexual behaviors such as MSM. For instance the plan mentions, “there are fewer interventions addressing vulnerable and key populations […] e.g. men who have sex with men” (2015:10). In the document, the anti homosexuality act from 2014 is explicitly mentioned and even problematized.

“These laws were made with good intentions, however, some sections in them, may undermine gains made in the HIV and AIDS response in terms of potential creation of stigma and discrimination, access to HIV services, violation of human rights and breach of fundamental medical code of practice of confidentiality. Fortunately, GOU issued a statement guaranteeing universal access to HIV services, which falls under the general health service provision with freedom from any form of discrimination, independent of sex, gender, sexual orientation, age, race, ethnic origin, social class, religion, and mental or physical disabilities. The affected populations by the Law will be treated like other clients. Furthermore, to avoid stigma and discrimination, data collected shall not specify sex orientation, which if breached by health professionals is criminalized”. (NSP, 2015:15).

The NSP contradicts the hypothesis of this thesis, since it seems to be much more inclusive than predicted. However, one could question whether this inclusion is voluntary or whether it was a demand from their international partners who took part in issuing the report. Several solution proposals are covered in the document, but given the scope and focus of this thesis not all of them can be presented. These proposals entail for instance, allocating resources in order to be less dependent on aid, target risk groups and encourage testing (2015).

This framing is particularly interesting since high-risk sexual behavior is defined as having multiple sexual relationships and an inconsistent use of condoms (2015:8). Here lies an ambiguity of what else may constitute a ‘risk’ behavior. As previously mentioned, meanings are constructed in social processes and traditionally MSM are considered as engaging in risky sexual activities. In the framing of homosexuality, it was made evident that homosexuality is immoral and constitutes the ‘perfect recipe’ for attracting HIV. Is gay sex then synonymous to engaging in high-risk sexual behavior? Perhaps high-risk sexual behavior is a term that can mask the fact that there is an inexplicit prejudice related to sexual orientation here.
The strategies formulated in the NSP are concretized in the NPAP. It is essentially a guide on how to align international support so it can match national priorities and to formulate a common national response to end HIV. The Uganda AIDS commission monitors the implementation of this response (2015:3). The document does in itself formulate the problem of HIV very similarly to the NSP, as something driven by for instance underlying socio-cultural factors, which hinder effective treatment and stigmatize people living with HIV (2015:18). Thus, I will not repeat what has already been enclosed but the NPAP is to be interpreted as having almost the exact same objectives as the NSP. I will instead present a few interesting points from the document, such as the call to “increase adoption of safer sexual behaviors and reduction in risky behaviors”. The NPAP also does emphasize focusing on high-risk sexual behavior as a way to reduce transmission of HIV. Furthermore the NPAP wishes to “incorporate sex education in open talks targeting adolescent boys and girls. Furthermore, one should “engage boys as peer leaders […] and support them to overcome tendencies of masculinity that hinder effective use of HIV prevention” (2015:10). The document mentions MSM explicitly, and underlines the importance of developing specific programs that target risk groups (2015:26).

4.2.3 The Invisible Frame

What is striking about this document is that it in certain senses is incompatible with the NSP and NPAP. The handbook is not explicitly homophobic, but does not mention MSM at all. One advice is of focus in the handbook, Museveni argues that one must include men in HIV prevention processes since they statistically have the poorest behavior in regards to test themselves and seek treatment (2017:5). In the document, Museveni calls for the help of parents in order to minimize the risk for their children being infected. One advice is as followed “create an enabling environment at home for your children to freely discuss issues of sexuality, body changes and HIV”. Another advice is to “understand and discuss the unique needs of young people especially adolescents such as body changes, attraction to opposite sex, among others”. These statements are contradicting since the latter is very heteronormative; the former claims that parents should discuss issues of sexuality with their children. Even though there is no explicit homophobia, one could argue that this is a way of rendering other sexualities invisible. By not including other sexualities, one does not create an ‘enabling’ environment for all. The NSP and NPAP do emphasize that discrimination in HIV policy is to
be avoided if wanting to halt the spread of the epidemic. This plan contradicts the goals issued in the official plans since it does not include MSM, a group especially vulnerable to attract the disease. As illustrated in the theoretical background, Plummer argues that homophobia does not necessarily have to be overt in order for it being present and commonly understood (1999:134). When excluding MSM and other sexual minorities from the AIDS strategy, one is covertly homophobic. One does also fail to admit the human rights abuses people within this group is subjected to due to their minority status (Ayla and Santos, 2016:4).

The presidential handbook is characterized by ambiguities as to what actually constitutes the main problem to halt the spread of HIV and what strategies one should have in order to reach this objective. If leaders must provide clear and accurate information, one could argue that MSM, as a specifically vulnerable risk group for HIV, should be targeted or at least mentioned explicitly in the plan. Stigma of this sort can constitute an obstacle to the health of MSM and prevent them from seeking help (Arreola et al., 2014:232). Another objective in the presidential plan, is to eliminate mother-to-child transmission of HIV (2017:14). This targets a vulnerable group explicitly, which is contrasting to the invisibility of MSM.

The fourth target entails “ensuring financial sustainability for the HIV response”. Under the fourth section, the following objectives are presented “mobilize additional domestic resources from public and private sectors for HIV” and “strengthen partnerships with development partners that contribute to the HIV and AIDS response”. This section of the presidential handbook does also acknowledge that 68% of the resources used to combat HIV and AIDS come from external sources (2017:16). The fifth and final advice from Museveni is “to ensure institutional effectiveness for a well-coordinated multi-sectorial response” meaning that one must strengthen e.g. the Ugandan AIDS commission’s capacity to coordinate a national response to the HIV epidemic (2017:17).

5. Frame Bridging – Homophobia and HIV/AIDS in Uganda

After careful scrutiny of the material, it is evident that there is a correlation between these two issues. As illustrated in the theoretical background, homophobia can negatively affect MSM living with HIV. Homophobic and heteronormative HIV policy might hinder MSM and other sexual minorities from accessing care. This thesis has illustrated the way in which politicians and policy makers talk about HIV and homosexuality intersect. However, this frame bridging is not as clear as predicted.
The two official policy documents, the NSP and NPAP, have been formulated with the participation of Western actors. In these, MSM were explicitly mentioned in a non-homophobic way, whereas the presidential handbook rendered them invisible and had several heteronormative statements. Furthermore, the handbook and a few statements made by president Museveni expressed the problem of ‘immoral’ cultural and social practices, which may assist HIV transmission. What these practices actually are is left for imagination. Even though the homophobic rhetoric is not overt, it is notable that the handbook ignores all of the objectives established in the NSP and NPAP in regards to MSM.

When comparing the framing of HIV in policy to the statements about homosexuality, it is obvious that there is a discrepancy between the two. Most of the statements in both frames come directly from President Museveni, who has been an important actor in framing both the topic of homosexuality and HIV policy. Museveni does not explicitly express homophobic sentiment in his presidential plan to halt AIDS and the official documents are contrary of the inclusiveness of MSM. When analyzing the material, an explicit frame bridging between homosexuality and HIV or AIDS was rather difficult to find. There is one single statement that frame bridges the two phenomena together in an unambiguous fashion. However, I wish to have demonstrated in this thesis that the relationship between the two is complex and does not necessarily have to be explicit for it to be present.

The anti-homosexuality act is in itself a symptom of homophobic rhetoric and does also provide some evidence that a frame bridging between HIV and homosexuality has occurred in Uganda. The crime of ‘aggravated homosexuality’ is to be considered specifically horrible. President Museveni signed this bill into law, meaning that he is in accord with this type of framing. In a context like framing HIV policy, which is much more politically sensitive, the President cannot overtly link together MSM with HIV or AIDS. Since there is a strong pressure from their donors to not discriminate people living with HIV on the grounds of sexuality. This is also illustrated in the NSP where one decided that HIV treatment should be accessible to all without discrimination. It is strategic for Museveni to exclude MSM from the narrative and instead promote heteronormativity. More neutral terms, such as ‘immoral’ cultural and social practices and ‘risky sexual behavior’ tells us that there is strategic interest to not overtly be homophobic. By using neutral terms one can avoid dispute over the aid they are so heavily dependent on. However, in the presidential plan, the president argues that it is
important for Uganda to be less reliant on aid when it comes to their HIV and AIDS response. Conclusively, I would argue that this masks a will to not having to adapt to Western norms and ideas of what HIV policy should look like. It would be interesting to see whether their HIV and AIDS policy would be more overtly homophobic, were they not so dependent on Western aid.

One could also argue that the construction of masculinity is another way which implicitly bridges the frame of homosexuality and HIV. In the framing of homosexuality, MSM are considered to threaten the moral universe since they ‘choose’ to be gay. They are thus neglecting their masculine duty to reproduce. The heteronormativity or rendering MSM and other sexual minorities invisible, is an inexplicit homophobic that will directly impact HIV prevention measures. As Barker and Ricardo argue, one cannot combat HIV without acknowledging the social structures that define manhood which men must conform to (2005).

Below are figures illustrating the ways in which the frames of homosexuality and HIV are bridged.

**Figure 2. Frame Bridging**
6. Concluding Remarks

The aim of this thesis was to analyze how institutionalized ideas may affect how another topic is framed within a political landscape; this frame strategy has been referred to as frame bridging. This paper examined whether the frame on homosexuality intersected with that of HIV. Uganda was chosen, since it is a country where homophobia is argued to be state-sponsored with homophobic rhetoric being deeply embedded in society. Primarily, statements from key politicians and official documents from the government have been used to determine which frames exist upon the topics of homosexuality and HIV. The frames presented illustrate tensions between the West and Africa, conflicting roles about masculinity, HIV as a consequence of risky and immoral life choices to name a few.

The research exemplified that a frame bridging has occurred, even though it was not as obvious as expected. When analyzing why this is the case, an explanation was provided claiming that this can be due to Uganda’s dependency on aid from Western donors. The strategy may not encourage homosexuality, but merely refuse to include MSM in the narrative to avoid conflict with donors. I would welcome future research to study other cases to see whether homophobic rhetoric in discourse inflict on HIV policy, since one cannot draw any general conclusions from one single context.

Since this study has focused on framings of political leaders, the results might oversimplify the framing of homosexuality and HIV. Future research should attempt to analyze discourse of non-movement elites. Furthermore, politicians or policy makers cannot ignore the social realities, which they themselves are confined in. This thesis has illustrated that one problem is the dependency on aid from Western countries. These countries then have demands incompatible with the institutionalized homophobic rhetoric in Uganda. These actors must accept, at least for now, that this affects the way in which they can frame their policies.

Throughout the research process it has come to my attention that homosexuality in the Ugandan context and in previous literature too often is defined as synonymous to male homosexuality. There is an obvious gap in research regarding lesbian or other queer minorities experience of oppression. Thus, I would like to encourage future research to focus on that of other queer peoples’ experiences in Uganda and globally.
In conclusion, these results are based on my interpretation of a strategically chosen material. They may be subjective and affected by the cultural context I am confined in, which should be problematized. This study has illustrated that questions about homosexuality and HIV ultimately become a discussion about the tension between the “progressive, open” West and the “deprived, homophobic” Africa. It is inherently problematic to perpetuate these stereotypes, which is why it is vital to understand that these key politicians may not be representative of the general population in Uganda. Institutionalized norms and frames in politics are difficult to challenge, that does not mean that no other narratives exist. Homophobia could be literally talked out of existence since that is the way it became a part of established vocabulary in the first place (Harvey, 2015).
References

News Articles


Taylor, J. (2016). *There's an economic cost to homophobia — and the numbers are staggering*. [online] Business Insider. Available at:


Policy documents


**Scholarly articles and books**


Erikson, J. (2011). *Strider om mening, en dynamisk frameanalys av den svenska...*
sexköpslagen. *Skrifter utgivna av Statsvetenskapliga föreningen i Uppsala* pp. 7-175.


**Other sources**
