HIV & GBV Prevention for Intersex People

HIV & Gender-Based Violence Prevention for LGBTI People

Advocating a Rights-Based Prevention Approach!
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1. Introduction

1.1 Who is this booklet for?

This booklet is for intersex people who want to find out more about being intersex, about preventing HIV and violence and mitigating their impacts.

Within the grouping of sexual minorities, specifically LGBTI people, the “I” – Intersex, has been given the least attention by LGBTI advocacy organisations. It is also very misunderstood, often seen as a sexual orientation or gender identity issue, even by those advocating for the rights of sexual minorities. This booklet attempts to inform and debunk myths about being Intersex.

HIV and gender-based violence are still applicable to you, and you need to be equipped with the correct information on how to protect yourself and your partners. This booklet will give you information that will help you to ensure that you exercise your rights through relevant information and HIV and gender based violence prevention services in your community – whatever your sexual identity and practices!

This booklet is also useful for service providers and staff of NGOs and CBOs and anyone who works around HIV and gender based violence prevention and mitigation. The more you know about the challenges and needs of intersex individuals the better you will be able to design your

This booklet is a celebration of the lives of all intersex people, in Africa and around the world. It is especially dedicated to those whose Human Rights have been violated through unnecessary surgical interventions and various forms of discrimination.
programmes and services to meet these needs. Intersex individuals have the right to correct information and quality services – whatever their sexual identity and practices!

1.2 Different concepts – what does it all mean?

**AIDS**
Acquired Immune Deficiency Syndrome, a disease in which there is a severe loss of the body’s cellular immunity, greatly lowering resistance to infection and malignancy. The cause is a virus (the human immunodeficiency virus, or HIV) transmitted in blood and in sexual fluids.

**Androgyny**
Not having clear masculine or feminine physical characteristics or appearance.

**Asexual**
Lack of (interest in and desire for sex) sexual attraction.

**Bisexual**
A sexual orientation and identity. Bisexual people have an attraction to people of the same and opposite sex on various levels (emotionally, physically, intellectually, spiritually, and sexually). Not necessarily at the same time and not necessarily an equal amount of attraction.
**Cisgender**
Cisgender people are those whose gender identity matches their sex at birth e.g. a cisman would be a person who is born male and presents himself as masculine and a ciswoman is a person who is born female and presents herself as feminine. The Latin prefix *cis* stands for ‘on the same side,’ while the prefix *trans* stands for ‘on the opposite side.’ This has a more positive connotation than ‘normal’ or ‘non-transgender.’

**Coming out**
A term describing the complex process where an individual realises they are not heterosexual and the process of resolving related conflicts due to heteronormativity (where heterosexuality is being internalised and viewed as the norm). Coming out is a process of how one wants to be identified.

**Condom-compatible lubricants**
Water and silicon-based lubrications which do not increase the risk of a condom tearing.

**Dental dams**
A latex sheath (square) that serves as a barrier of protection against the transmission of sexually transmitted infections (STIs) during oral sex or tribadism (where genitals rub directly against each other).

**Discrimination**
The unjust or prejudicial treatment of different categories of people on the grounds of race, age, sex, sexual orientation, gender and gender identity and presentation.

**Female condom (Femidom or Woman’s condom)** A device that is used during sexual intercourse (worn inside the woman’s vagina) as a barrier contraceptive and to reduce the risk of sexually transmitted infections.
FTM/Trans man
A transman, or female-to-male, starts his life with a female body, but his gender identity is male. Always use male pronouns in reference.

Gay
A male same sexual identity and orientation. Attraction between two males on various levels (emotionally, physically, intellectually, spiritually, and sexually).

Gender
Socially constructed characteristics assigned that may vary according to the times and the society or group one belongs to, and which are learned or assigned to women and men. It is a broader concept than the mere biological differences between men and women, and includes masculine and feminine traits. More power is afforded to males.

Gender-based violence
GBV encompasses various forms of violence directed at women, because they are women, and men, because they are men, depending on the expectations of each in a given community. For LGBTI people the violence is directed towards them because of their challenging notions of sexuality and gender identity and presentation.

Gender dysphoria
The medical diagnosis for someone who experiences a disconnection between their assigned and preferred gender. Some transgender people disagree with the categorisation of gender dysphoria as a medical condition because it relies on an understanding of what “normal” gender is.
**Gender equality**
A social order in which women and men share the same opportunities and the same constraints on full participation in both the economic and domestic realms.

**Gender identity**
Refers to a person’s persistent and consistent sense of being male, female or androgynous. An internalised representation of gender roles and an awareness from infancy which is reinforced during adolescence.

**Genderqueer**
An umbrella term for gender identities other than man and woman that are outside of the gender binary (male and female) and heteronormativity. Genderqueer people may think of themselves as both man and woman (bigender), neither man nor woman (agender), moving between genders (genderfluid), and/or third gendered.

**Gender role**
Socially constructed or learned behaviours that condition activities, tasks, and responsibilities viewed within a given society as “masculine” or “feminine”.

**Hegemonic masculinity**
This is the ‘normative’ ideal of masculinity to which men are supposed to aim. It is not necessarily the most prevalent form of expression, but rather the most socially endorsed. It is supported by the heteronormative model.
**Heteronormative**
A social construct that views all human beings as either male or female with the associated behaviours and gender roles assigned, both in sex and gender, and that sexual and romantic thoughts and relations are normal only between people of opposite sexes and all other behaviour is viewed as “abnormal”.

**Heteronormative model**
The typical heteronormative family consisting of a father (male bodied person), mother (female bodied person) and offspring (+a dog and cat and white picket fence).

**Heterosexual/straight**
Attraction between two people of the opposite sex on various levels (emotionally, physically, intellectually, spiritually, and sexually) where the sex of the attracted person is the key to the attraction.

**Homophobia**
Irrational fear of homosexual feelings, thoughts, behaviours, or people and an undervaluing of homosexual identities, resulting in prejudice, discrimination and bias against homosexual individuals.

**Homo-prejudice**
Prejudice against people of diverse sexual identities.

**Homosexual**
Attraction between two people of the same sex on various levels (emotionally, physically, intellectually, spiritually, and sexually) where the sex of the attracted person is the key to the attraction.
**Human rights**
The basic rights and freedoms that all people are entitled to regardless of nationality, sex, age, gender, health status, sexual orientation, nationality or ethnic origin, race, religion, language amongst others.

**HIV Human Immunodeficiency Virus**
A retrovirus that causes AIDS by infecting helper T cells of the immune system. The most common serotype, HIV-1, is distributed worldwide, while HIV-2 is primarily confined to West Africa. It is one of many sexually transmitted infections.

**HIV prevention**
Various ways of preventing HIV transmission, e.g. new technologies, condom and lubrication use, abstinence, PEP (Post exposure prophylaxis), PREP (Pre exposure prophylaxis) etc.

**Internalised homophobia**
When a homosexual individual internalises (make it their own) the shame and hatred projected onto gays and lesbians by a homophobic society.

**Intersex**
Born with ambiguous genitalia, or sex organs that are not clearly distinguished as female or male.
**Lesbian**
A female sexual identity and orientation which is an attraction between two females on various levels (emotionally, physically, intellectually, spiritually, and sexually).

**MTF / Trans woman**
A transwoman, or male-to-female, starts her life with a male body, but her gender identity is female. Always use female pronouns in reference.

**MSM**
Men who have sex with men. A sexual practice irrespective of sexual orientation or gender identity. An MSM can be hetero-, bi- or homosexual or trans. This term is more technical and is not necessarily an identity.

**Patriarchy**
A system of society in which the father or eldest male is head of the family and descent is traced through the male line. The wives / females are viewed as dependant. Roles assigned to men are considered superior and valued above female’s roles. Patriarchy forms the basis of discrimination against minorities like LGBTI people.

**Serodiscordant couples**
Refers to an intimate couple where one partner is HIV positive and the other HIV negative.
**Service providers**

In this handbook, service providers refer to anyone who could come into contact with sexual minorities accessing services for prevention, treatment and care. This could include nurses, doctors, and counsellors providing voluntary counselling and testing (VCT) and/or HIV counselling and testing (HCT) or supportive services. It also includes the management staff responsible for designing and monitoring the services. It could also include those who provide an indirect service, e.g. secretary, whom the LGBTI client will have contact with.

**Sex**


**Sexuality**

How people experience and express themselves as sexual beings, within the concepts of biological sex, gender identity and presentation, attractions and practices. Culture and religion have a huge impact on how individuals see themselves as sexual beings, especially within relations of power.

**Sexual fluidity**

Sexuality varying across time and situation, particularly for women. Fluidity offers a more inclusive definition than the more limiting conventional labels we have become accustomed to using to define sexual identity. Sexual fluidity, quite simply, means situation-dependent flexibility in women’s sexual responsiveness. This flexibility makes it possible for some women to experience desires for either men or women under certain circumstances, regardless of their overall sexual orientation. In other words, though women—like men—appear to be born with distinct sexual orientations, these orientations do not provide the last word on their sexual attractions and experiences.
**Sexual identity**
The overall sexual self identity which includes how the person identifies as male, female, masculine, feminine, or some combination, and the person’s sexual orientation.

**Sexual minority**
A group whose sexual identity, orientation or practices differ from the majority of the surrounding society.

**Sexual orientation**
Attraction between any two people on various levels (emotionally, physically, intellectually, spiritually, and sexually). Attraction to the other person’s sex and/or gender presentation is the point of departure.

**Sexual practices**
All behaviour that creates sexual pleasure, practiced by one or more than one person, individually, or together.

**Stigma**
This is when a certain individual, with certain characteristics, e.g. HIV positive individual or trans woman, is rejected by their community or society because of that characteristic which might be considered as “abnormal”. These individuals’ lives might be at risk, possibly being threatened and abused.

**Transgender**
An umbrella term which is often used to describe a wide range of identities and experiences, including transsexuals, FTMs, MTFs, transvestites, cross-dressers, drag queens and kings, two-spirits, gender-queers, and many more.
Transphobia
The irrational fear of, and/or hostility towards people who are transgender or who otherwise transgress traditional gender norms. Because our culture is often very transphobic, transgender people can often have internalised transphobia and experience feelings of insignificance and self-prejudice.

Transsexual
A transgender person in the process of seeking or undergoing some form of medical treatment to bring their body and gender identity into closer alignment. Not all transgender people undergo reassignment surgery.

Transitioning
The process of changing one’s gender presentation to align with one’s internal sense of one’s gender. For transgender people this may sometimes include sexual reassignment surgery, but not always. It could include hormonal therapy.

Transvestite
An individual who dresses in the clothing of the opposite sex for a variety of reasons and who has no desire to change or modify their body.

WSW
Women who have sex with women. A sexual practice irrespective of sexual orientation or gender identity. A WSW can be hetero-, bi- or homosexual. This term is more technical and is not necessarily an identity.
2. FAQs - what does it all mean?

What is intersex?

Technically, intersex is defined as “congenital anomaly of the reproductive and sexual system.” There is no single “intersex body”; it encompasses a wide variety of conditions that do not have anything in common except that they are deemed “abnormal” by society. What makes intersex people similar are their experiences of medicalisation, not biology.

Generally speaking, intersex is not an identity category. While some intersex people do reclaim “intersex” as part of their identity, most regard it as a medical condition, or just a unique physical state. Most intersex people identify and live as ordinary men and women, and are gay, lesbian, bisexual, or straight.

Just a note…

Intersex is not the same as sexual orientation or transgender. A sexual orientation is about whom you love and feel attracted to, on various levels, over a period of time. Gender is an internalised representation of a gender role. Intersex is a biological variant. The link between the three is the experiences of discrimination shared.

Intersex and trans people can have any sexual orientation.

Are intersex conditions harmful?

In general, intersex conditions do not cause the person to feel sick or in pain. However, some intersex conditions are associated with serious health issues, which need to be treated medically. However, surgically “correcting” the appearance of intersex genitals will not change these underlying medical needs.
**Intersex or hermaphrodite?**

In biology, “hermaphrodite” means an organism that has both “male” and “female” sets of reproductive organs (like snails and earthworms). In humans, there are no actual “hermaphrodites” in this sense, although doctors have called people with intersex conditions “hermaphrodites” because intersex bodies do not neatly conform to what doctors define as the “normal” male or female bodies.

We find the word “hermaphrodite” misleading, mythologising, and stigmatising. Although some intersex activists do reclaim and use this term to describe themselves, it is not an appropriate term to refer to intersex people in general. In short, snails are hermaphrodites; humans are not.

Also, please avoid using the word “intersexual” as a noun; we prefer “intersex people” or “people with intersex conditions/experiences.”

**How does it happen?**

Intersexuality can be caused by a variety of medical syndromes, however, more commonly than not, doctors do not know why people are born intersexed.

**Are intersex people “third sex”?**

Many people with intersex conditions identify solidly as a man or as a woman, like many non-intersex people. There are some who identify as a member of an alternative gender, like some non-intersex people do. While we support everyone’s right to define her or his own identities, we do not believe that people with intersex conditions should be expected to be gender-transgressive just because of their physical condition.

**What is the difference between “sex” and “gender”?**

Social scientists make careful distinctions between these two terms. “Sex” generally refers to biology, to the actual form of the human body (what’s in the pants), including such factors as chromosomes, genital configuration, and secondary sex characteristics, while “gender” refers to the social constructions, meanings and characteristics associated with expectations of men and women.
What is transgender?

“Transgendered” is an umbrella term, generally used to include any person who feels their assigned gender does not completely or adequately reflect their internal gender. Transgendered people may or may not take steps to live as a different gender.

Are intersex people part of the transgender community?

While some people with intersex conditions also identify as transgender, intersex people as a group have a unique set of needs and priorities beyond those shared with trans people. Too often, these unique needs are made invisible or secondary when “intersex” becomes a subcategory of “transgender.”

For example, people who talk about intersex in the context of transgender often stress the risk of assigning a “wrong” gender as an argument against intersex genital surgeries. While this is a valid concern, it overlooks the fact that intersex medical treatment is painful and traumatic whether or not one’s gender identity happens to match her or his assigned gender. It is for this reason that we prefer to have “intersex” spelled out explicitly rather than have it “included” in “transgender” umbrella.

How is intersexuality normally dealt with?

Typically, when an intersexed person is born non-consensual, non-medically necessary surgery will be performed on their genitals in order to make their sex organs appear male or female. This surgery has been proven to be bad for an intersexed person’s emotional, physical and sexual health.

Intersex activists advocate for a different approach that includes waiting until the child goes through puberty so the intersexed person can determine for her/himself whether to have genital surgery. Typically most intersexed people who are given the option to have genital surgery choose not to have the surgery performed.

It has been proven that non-consensual, non-medically necessary genital surgery is not the answer. Counselling and education for both the family and intersexed person is needed in order to better understand intersexuality.
3. Being me - responsibly!

Protecting myself from HIV

Many intersex individuals have sexual relations. It is important to protect yourself against STI’s, including HIV.

Below find information and ways of making responsible decisions about having sex:

• Remember that HIV is not caused by sex – it is caused by a virus.
• HIV is spread through body fluids transferred from one partner to another during a sexual activities (see below);
• For infection to occur, two elements are needed – high risk body fluid and an entry point into the HIV negative partner’s bloodstream;
• Responsible sex is preventing risky body fluids from an HIV positive person making contact with a mucosal surface of an HIV negative person and entering their bloodstream;
• Such contact could include:
  ◦ Semen, blood or vaginal fluid on any broken skin
  ◦ Semen, blood or vaginal fluid in the eye
  ◦ Semen, blood or vaginal fluid in the mouth, especially if the receptive partner has any oral lesions (cuts), sometimes not even known about
  ◦ Semen or blood in the rectum
• Always negotiate for the use of protective barriers when you have sex, especially for the first time, with someone whose sexual history and HIV status you do not know for sure;
• Use condoms correctly and consistently when having penile-vaginal, penile-anal, oral-penile sex and ensure that you use enough water-based lubrication during penile-anal sex;
• Use condoms and a water-based lube correctly and consistently when sharing sex toys;
• Avoid the use of any oil-based lubricants, for example body or hand cream, vegetable oil, petroleum jelly, which when used with a condom, could cause the condom to tear within seconds of use;
• Use dental dams or latex sheets correctly and consistently for cunnilingus (oral sex) and anilingus (anal rimming). Alternatively, use a flavoured condom cut along the side or non-microwavable cling wrap that is kept in place with water-based lubrication;

• Use finger cots correctly and consistently for fingering. Alternatively, use a condom over your finger(s);

• Use non-powdered latex gloves for fisting or fingering;

• Avoiding any exchange of HIV containing fluids, e.g. blood, vaginal fluids, semen and possible HIV containing fluid, pre-ejaculation;

• Ensure screening for HIV and other STI’s every six months.

Dental Dam  Finger Cot  Water based lubricant

Protecting myself from violence

Intimate partner violence / domestic violence

Domestic violence in the LGBTI community is a serious issue. Domestic violence is, sadly, very underreported. What we know, is that LGBTI people, often have difficulty acknowledging the abuse taking place in their relationships, both to themselves and others, especially when the abused is still closeted and not out and open about his or her identity and relationship.

Are you being abused?

Any relationship features tensions from time to time but if the following controlling behaviours happen repeatedly you should consider speaking to a counsellor to explore ways to turn your life around.
Is your partner, ex-partner, a family member or someone in your home:

- Hitting you?
- Swearing at you?
- Forcing you to have sex or perform sexual acts against your will?
- Threatening to harm or kill you, your children, family members or friends?
- Putting you down by insulting and embarrassing you?
- Judging, criticising or bullying you?
- Making you feel confused, angry and teary?
- Causing you to feel sad, worthless, and dissatisfied?
- Harassing, following and/or repeatedly intruding on your privacy?
- Withholding finances and manipulating you with money?
- Threatening to “out” you to others?
- Do you wish that you could become more assertive?

**If you have said yes to one or more of the above, you are being abused.**
(www.womyn2womyn.co.za)

**Violence on the basis of sexual identity or gender presentation**

No intersex person should be discriminated against or hurt in any way. Unfortunately, many experience various forms of discrimination and trauma directed towards them. An intersex person’s identity, possible ambiguous genitalia and gender presentation puts them at risk of various hate crimes directed at them, for example rape on the basis of their gender presentation, the bizarre and false notion that their identity can be “corrected”.

Here are some tips to protect yourself and information on what to in case of an emergency:

- Stay safe by never walking alone; rather walk in a group, especially at night.
- When you visit a club, tavern or shebeen at night, ensure that you are not alone and that you are accompanied by a group of people whom you can trust. Never accept already open drinks, or leave your drinks unattended. Instead, ask someone that you trust to watch it for you if you have to leave it. Assess your vulnerability.
• Be aware of your environment and be more cautious when community members make hostile remarks towards you and try to get out of the situation as soon as possible.
• If you feel threatened in any way, report it to your local police and LGBTI or GBV organisation (for contact details see later in this booklet).
• If you experience any form of violation or discrimination, seek help immediately (you can call a friend) or at your local LGBTI organisation, who will assist you further, to help you be safe and to receive the necessary counselling and or support, especially if you don’t feel comfortable reporting it to the police immediately.
• When you report any violation against you to the police, make sure there is someone with you to support you and ensure you get the service you deserve.
• Follow up on the progress of your case, even if you feel like you don’t want to anymore.

A last note (but not the least..)
Some intersex individuals might exchange sexual favours just to be able to survive or for other reasons. Permanent employment is a struggle for many Intersex individuals. Others might even do sex work as a day job. If you are one of them, we want to remind you to take special care of yourself, since you may face double or even triple discrimination.

You might be at higher risk for HIV transmission and/or gender based violence, especially if you are forced to keep it a secret.

You are not alone – even if it might feel like it! We encourage you to make use of the support organisations listed at the end of this booklet.
## 4. Where can I get support and resources?

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<thead>
<tr>
<th>Place</th>
<th>Name</th>
<th>Services</th>
<th>Contact</th>
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<tbody>
<tr>
<td>Cape Town, South Africa</td>
<td>Gender DynamiX</td>
<td>Transgender Advice Information &amp; Support, Advocacy &amp; Sensitisation Training</td>
<td><a href="http://www.genderdynamix.org.za">www.genderdynamix.org.za</a></td>
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<tr>
<td>Cape Town, South Africa</td>
<td>Intersex SA</td>
<td>Intersex Advice Information &amp; Support, Advocacy &amp; Sensitisation Training</td>
<td>Tel: +27 (0)82 788 4205 +27 (0)82 788 4205 <a href="http://www.intersex.org.za">www.intersex.org.za</a> PO Box 12992 Mowbray 7705 Cape Town, South Africa</td>
</tr>
<tr>
<td>Soshanguve, South Africa</td>
<td>Transgender &amp; Intersex Africa</td>
<td>Transgender Advice Information &amp; Support, Advocacy</td>
<td><a href="mailto:Transgender.intersex@gmail.com">Transgender.intersex@gmail.com</a> +27 (0) 73 432 4499</td>
</tr>
<tr>
<td>Uganda</td>
<td>Transgender, Intersex and Transsexual, Uganda</td>
<td>Transgender and Intersex Advice Information &amp; Support, Advocacy</td>
<td><a href="http://www.titsuganda.org">www.titsuganda.org</a></td>
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<tr>
<td>Gaborone, Botswana</td>
<td>Rainbow Identity Association</td>
<td>Transgender Advice Information &amp; Support, Advocacy</td>
<td>PO Box 592328, Gaborone, Botswana</td>
</tr>
<tr>
<td>Windhoek, Namibia</td>
<td>Outright Namibia</td>
<td>LGBTI Advocacy, Lobbying, Evidence Based Interventions &amp; Movement Building</td>
<td>+264 61 245556 +264 81 252 8259 +264 81 142 1514 <a href="mailto:info@outrightnamibia.org">info@outrightnamibia.org</a> <a href="mailto:outrightnamibia@gmail.com">outrightnamibia@gmail.com</a> <a href="http://www.outrightnamibia.org">www.outrightnamibia.org</a> 49 Pasteur Street Windhoek West Windhoek, Namibia</td>
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<tr>
<td>Place</td>
<td>Name</td>
<td>Services</td>
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<tr>
<td>Harare, Zimbabwe</td>
<td>GALZ (Gays &amp; Lesbians of Zimbabwe)</td>
<td>LGBTI Psychosocial Support, Health Services, Research, Peer Education, Advocacy &amp; Sensitisation Training</td>
<td>+263 (4) 741 736 <a href="mailto:info@galz.co.zw">info@galz.co.zw</a> 35 Colenbrander Rd Milton Park, Harare</td>
</tr>
<tr>
<td>Malawi</td>
<td>Centre for the Development of the People (CEDEP)</td>
<td>LGBTI Support, Health Services, Research, Peer Education, Advocacy</td>
<td><a href="http://www.cedepmalawi.org">www.cedepmalawi.org</a></td>
</tr>
<tr>
<td>Mozambique</td>
<td>Lambda</td>
<td>LGBTI Support, Health Services, Research, Peer Education, Advocacy</td>
<td>+258 41 62 66 <a href="http://www.lambda.org.mz">www.lambda.org.mz</a></td>
</tr>
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### Gender-Based Violence Support Organisations

Johannesburg (Contact the Head Office for satellite offices in rest of Africa)
- Genderlinks
  - Equal and effective participation of all citizens in terms of gender
  - +27 (0) 11 622 4732 www.genderlinks.org.za
  - 9 Derrick Avenue, Cyrildene, Johannesburg, 2198, South Africa

### Other organisations, information and support

Cape Town, SA
- SWEAT
  - Sex Worker Advocacy, Research, Outreach and Development
  - +27 (0) 21 448 7875 0800 60 60 60 www.sweat.org.za
  - 19 Anson Street, Observatory 7925, Cape Town, South Africa.

Cape Town, SA
- ALN (Aids Legal Network)
  - +27 (0) 21 447 84 35 www.aln.org.za
  - Suite 6F Waverley Business Park Dane Street Mowbray Cape Town 7700
SafAIDS Regional Office:
479 Sappers Contour, Lynnwood, Pretoria 0081, South Africa. Tel: +27-12-361-0889 Fax: +27-12-361-0899 E-mail: reg@safaids.net

Country Office - Zimbabwe:
17 Beveridge Road, Avondale, Harare, Zimbabwe. Tel: +263-4-336193/4 Fax: +263-4-336195 E-mail: info@safaids.net

Country Office - Zambia:
Plot No. 4, Lukasu Road, Rhodes Park, Lusaka, Zambia. Tel: +260-125-7609 Fax: +260-125-7652 E-mail: safaidzs@safaids.co.zm

Country Office - Mozambique:
Av. Paulo Samuel Kankomba n.2051, R/C Maputo, Mozambique, Telefax +258-213-02623, Email: safaidms@teledata.mz

Country Office - Swaziland:
No.2 Ellacourt Building, Esser Street, Manzini, Swaziland. Tel: +268-247-38623, Email: safaidsz@safaids.net, Website: www.safaids.net

www.safaids.net