

TRIP REPORT

To: Guy Stallworthy
PSI Myanmar

From: Shivananda Khan
Naz Foundation International

Date: 6th September 2003

Travel Dates: 3rd – 10th August

Background

PSI states in its Biennial Report 2001-2002

“...improving the health of the low income people it serves by promoting healthy behaviour and sustaining impact over time. Everything done by PSI staff around the world supports that overriding objective.”

As a part of “promoting healthy behaviour and sustaining impact” in response to sexual health and HIV/AIDS concerns in Myanmar, PSI promotes condom use as a risk reduction strategy. This not only done through a range of vendors, advertising, and a variety of publicity strategies, but also through education and awareness programmes among “target groups”, and through peer educators and field staff working with these groups.

MSM is considered a ‘target group’, and PSI in Yangon and Mandalay have 2.5 self-identified MSM (*apwint/apone*) as “peer educators”.

PSI Myanmar has known of NFI’s work with vulnerable male populations in South Asia over these past few years. In 2000, PSI Myanmar staff attended the 2nd NFI Regional MSM Consultation Meeting held in Hyderabad, India. Myat Win, an MSM peer educator, had also previously attend an NFI training of trainers programme at its India office in Lucknow, India.

I was invited to Myanmar to conduct observations of MSM dynamics and see whether NFI’s work with MSM in South Asia can be adapted to the Myanmar situation as well as to discuss with PSI staff the potential for developing a national MSM sexual health promotion programme and scaling up its activities.

Masculinities, male sexualities, and male-to-male sexual dynamics in Myanmar

INTRODUCTION

The Field Trip was between the 3rd – 10th August 2003.

Site visits were conducted in both Yagoon and Mandalay. These were at certain downtown areas, such pedestrian bridges across main roads, public toilets and parks, along with a number of tea-shops, market places, nightclubs and shopping plazas, and one male brothel. This enabled a broad range of observations of site dynamics and discussions with a number of site participants that cut across socio-economic classes. I was also able to visit the Taungpyone Festival twice: once during the daytime, and once during evening hours.

Many of these public spaces are primarily used by *apone*-defined males (comparable to what were defined as *civil-kothis* in Bangladesh) along with a range of male sex workers (who presented themselves as either *thange/gigalo*, or *apone*) with perhaps a few *apwint*-defined males (comparable to *satla/aqua* kothis in India and Bangladesh). All of them were young men primarily below the age of 30, with customers ranging in age from late teens to middle age. Several students were also among these groups.

Other spaces visited were beauty parlours in both cities managed by self-identified *apwint* hairdressers and beauticians, and an *apwint* brothel.

Discussions were with a broad range of self-identified MSM across economic classes, but primarily between what perhaps could be loosely defined as lower middle class to upper middle class, and included *apwint* identified hairdressers and beauticians, as well as *apone/thange* identified sex workers, *apone* identified males who sought other males as sex partners, a brothel owner and his self-identified sex workers, and several hotel staff. I also participated in a social group of self-identified MSM, primarily *apwint*, but also *apone*.

During these visits and discussions I was accompanied by Myat Win, and on several occasions, by Dr. Tin Htut also. They act as my interpretators, as well as sources of additional information during these site visits.

I also held a range of discussions with PSI staff in both Yangon and Mandalay and visit a GP who provides syndromic management of STIs among MSM (primarily *apwint* and their partners) in Mandalay.

A general discussion was also held with members of Compass who have been contracted to conduct an ethnographic and behavioural assessment among MSM in Yangon.

SUMMARY OBSERVATIONS

I had been unable to find any literature on these issues specific to Myanmar. I had access to the Field Trip Report on the Taungpyone Festival by Dr. Owen Wrigley, had held personal discussions with Dr. Carol Jenkins, and also discussions with Myat Win during his visit to Lucknow for the NFI Training of Trainers course. Along with this I had had the opportunity to discuss these issues with PSI Myanmar staff at the 2nd NFI consultation meeting in Hyderabad, India. All gave indications of significant similarities between Myanmar constructions of masculinities and male-to-male sexual

practices and identities with south Asian male sexual dynamics as uncovered by NFI studies and a range of other literature.

This similarity was confirmed by direct observations at a range of sites in Yangon and Mandalay, a field trip to the Taungbyon Festival, and discussions with both PSI MSM staff along with a number of self-identified MSM as well as several male sex workers with differing gendered identities. The major observable difference in all public spaces was that the obvious general presence of females throughout the day and evening and a more generalised social mixing of males and females. What impact this has on male-to-male sexual dynamics would be something to explore.

In other words it seemed clear to me that Myanmar masculinities, male sexualities, and male-to-male sexual dynamics were also significantly gendered rather than based on sexual orientation, framed by concepts of “real men” (*thange*) who sexual penetrate those who are deemed less masculine or female-like (primarily *apwint* identified), with a broad spectrum of other males who desire sex with males who were named *apone* by *apwint*. Within all of this were complex dynamics and self-identities of differing male sex workers that ranged from *thange* type males (identified as *gigalos* by *awint*) to cross-dressing *apwint* with breast enhancements, to those *apwint* who desired gender reassignment.

It was clear also that, like in south Asia, *apwint* identified males had access to their own coded language, lived in a culture that was socially tolerant (but not always), were also stigmatised however, and for those from low-income networks, socially excluded and marginalisation if they were not within the accepted professions for such males, i.e. beauticians, hairdressers, and dress design.

Male-to-male sexual behaviours, sexualities, identities, and gendered frameworks in Myanmar were complex, interwoven, porous, and often differed from actual practices. That is self-identified *apwint* also penetrated their male sex partners, while some *thange* type men were penetrated. The *apone*-identified males both penetrated and were penetrated. It certainly was not the reductionist heterosexual/homosexual binary of two exclusive groups of males separated by desire, behaviour and so-called sexual orientation. It seemed that sexual behaviour and desire was much more polymorphous than this, and to hold onto exclusive categories was dangerous for any sexual health programme.

There also appeared to be substantial levels of male-to-male sex, mostly invisible. Such behaviours were across the social and economic spectrum, not only amongst the general male populations, but also in all male institutions, including monasteries and seminaries. The most visible section of MSM networks is of course the self-identified *apwint* who would wear make-up, cross-dress publicly, and use feminised gestures and body language. Some would also use hormone pills (a few would use injections depending on income levels) for breast enhancement. Out of the forty or so *apwint*-identified males I talked with during this brief visit, only two expressed a desire for gender reassignment. The others appeared to be content with their possession of penis, stating that they also got penile pleasures as much as anal pleasures.

Preliminary definitions

a. *apwint*(or their local equivalent)

Males who feminise their behaviours and dress (usual in specific situations/contexts) and who state that they prefer to be sexually penetrated anally and/or orally. *Apwint* are supposed to act out the “feminine role”.

It should be noted that some *apwint* at times penetrate their supposed *thane* sexual partners. However this is usually denied by both *thane* and *apwint*.

Many male sex workers are self-defined as *apwints*, but not all *apwint* are sex workers. Neither are all sex workers *apwint* identified.

In terms of identities, the term *apwint* should be seen in the context of gender construction, rather than as a sexual identity. However, it is clear that sexual and emotional desire exists for what is termed “real” men. Often such male partners are called “husbands”.

Many *apwint* are in “feminised” occupations such as hairdressing, beauty parlours, and fashion/dress design, but not all.

Apwint identity for many is very much a performative identity in certain social, situational and locational contexts, while others may well consider its public personae as a full time identity and behaviour leading to some desiring gender reassignment surgery, or full time cross-dressing and breast enhancement.

However, despite appearances, most *apwint* do not want to become women, but use femininity and breast development as a tool to attract manly partners for pleasure as much as for business.

Many *apwint*-identified males, particularly those from low-income groups, will sell sex. With low prices, multiple partners in a single day is common. Older *apwint* will buy sex from young *thane/apone* males either through gifts, financial supporting the *thane/apone* partner, or with one-of payments for *thane/apone* male sex workers. Some *apwint*-identified males call such sex workers as *gigolos*.

b. *thane* (or their local equivalent)

A term given by *apwint* to what they deem as “real” man, masculine men, males who sexually penetrate them.

Thane do not label themselves as such. They are normative men in the construction of masculinities in Myanmar, and come from the general male population. As a man they can penetrate another male without losing their sense of masculinity. They will often be married, and/or access female sex workers as well.

For *apwint* identified males, all men are *thane* and are potentially sexually available.

A caveat needs to be entered here. Some such men also like to be penetrated for its pleasurable aspects, but such behaviour will be kept strictly secret and such men will maintain their *thane* personae.

Thane behaviour is not based on sexual but gendered identity. The sexual role of a man is to penetrate women or other males.

Some *thane* type young males will sell sex to *apwint/apone* type males.

c. *apone* (or their local equivalent)

An *apwint* term for those who sexually penetrate and are also penetrated. Such males are not usually visibly identified, wearing normative masculine clothing. These males may sexually desire other males, will have sex with *apwint* as the penetrating partner, or sex with *thane* as the penetrated partner, or with each other in a mutual sexual role exchange.

Some *apone* type males will also sell sex to other males.

d. gay-identified men

While there are gay-identified men in Myanmar, they come from upper-middle class and English literate section of Myanmar society. I was unable to access any for discussions.

There are many reasons as to why males say they have sex with other males. These include:

- Desire for specific sexual acts that they say women will not do (i.e. anal and/or oral sex)
- Desire for sex with another male
- Perceived “body heat” and need for immediate discharge
- Financial reasons
- No access to females
- Cost consideration
- Fun and/or curiosity

Civil Society

Myanmar’s civil society is underdeveloped. Politically the situation in Myanmar is fragile. A military government is power, and the political situation is unstable. Freedom of movement is curtailed, and there are significant levels of social coercion and investigation. Human rights abuse is common.

Section 377 of the police code is the same as that in the countries of south Asia, which declares that “unnatural sex acts” are illegal.

The Myanmar government and other sections of society are sensitive to the issues of “western influence”, “corruption of Myanmar society”, and other issues which makes it very difficult for an independent NGO/CBO to be empowered to work directly with MSM.

NGO development, along with community-based self-help organising, has very little history in Myanmar. Government bureaucracy and regulations makes it even more difficult to consider trying to develop such an institution.

This will mean that for the development of an effective response to the sexual health needs of MSM in Myanmar, PSI will need to play a much more pro-active role than it has done so in the past. It also requires PSI to reconfigure itself and see social marketing in a much broader context that has been previously the case. It will need to explore how social marketing needs to be contextualised within frameworks of community-building, empowerment, and developing enabling environments that allow appropriate sexual health services to be developed for socially stigmatised and excluded populations.

See ANNEX ONE

Current PSI Myanmar sexual health response to MSM needs

The term MSM was developed to represent those men who have sex with men who do not have any sexual identity. However, PSI staff tend to use the term as an identity label and not as a behavioural framework. This creates a belief that there is a closed and exclusive group of men who have sex with men (usually *apwint*) separated from the general male population. A significant consequence of this belief is that many male to male sexual dynamics are further invisibilised and ignored. Thus men as a group – *thane* penetrating partners of *apwint* - are ignored. Hence in the “targeted group interventions” of male occupational groups, anal sex is not discussed.

Male to male sex is a significant behaviour amongst Myanmar males, yet the number of “peer educators” is extremely small, 2.5 for both Yagoon and Mandalay.

The lack of understanding of male to male sexual behaviours, Myanmar masculinities and male sexualities is clearly evident amongst PSI programme staff.

The MSM intervention strategy is poorly thought through and relies too heavily on the very few MSM staff to implement. The programme’s key approach is networking outreach with a number of *apwint/apone* social networks and groups providing HIV/AIDS awareness and condom promotion. With this is also the utilisation of a national religious festival where significant numbers of *apwint* participate, as well as accessing a range of *apwint* beauty parlours. As a consequence, follow through work, development of sustainability of behaviour, and effective outreach is almost non-existent.

What education materials and condom packages that are available were clearly designed for the general male population and not specific to the needs of certain self-identified MSM networks/groups, i.e. *apwint*.

However, PSI’s promotion of lubricant jelly is an excellent indicator of its “will to serve”.

Despite these limitations, PSI MSM staff have developed very good personal networks with a broad range of MSM networks in both cities.

RECOMMENDATIONS

- Training programmes developed for all PSI staff on masculinities, sexualities and male sexual behaviours in Myanmar.
- PSI Myanmar should consider a substantial scaling up of their current MSM sexual health programmes in Yagoon and Mandalay.

It is suggested that PSI Myanmar explore the possibility of implementing a twin-track approach to male sexual health:

- a. Focused interventions with *apwint/apone* identified males which provide community building, outreach activities, and clinical services
 - b. Ensure that all male “targeted interventions” include unprotected anal sex as a risky practice in their BCC component.
- Training of STI clinical staff to address the needs of male-to-male sexual behaviours, particularly anal sex.

- Expansion of the MSM sexual health intervention to include other PSI Project areas.
- For the development of an effective response to the sexual health needs of MSM in Myanmar, PSI will need to play a much more pro-active role than it has done in the past. It will require PSI to reconfigure itself and see social marketing in a much broader context that has been previously the case. It will need to explore how social marketing needs to be contextualised within frameworks of community-building, empowerment, and developing enabling environments that allow appropriate sexual health services to be developed for socially stigmatised and excluded populations.
- PSI will need to play the role of an implementing agency to support the initiatives outlined above.
- PSI to develop a range of BCC materials specific to the needs of *apwint/apone* males which they can identify with and for personal distribution rather than mass.
- Along with this, all materials should include anal sex as a high-risk behaviour.
- More ethnographic research needs to be done in specific locations to identify the broad range of male-to-male sex networks, psychosexual understandings, sexual practices and levels of risk, along with levels of STIs and HIV.
- PSI will need to take the lead role in advocating support for MSM sexual health interventions working with government, the bureaucracy, legal, judicial and law enforcement agencies, along with other social institutions.

See

ANNEX TWO:	Developing sexual health services for vulnerable male populations in Myanmar
ANNEX THREE:	NFI Position Paper – Field staffing for self-help agencies working with vulnerable male populations in promoting sexual health
ANNEX FOUR:	Sexual Health Promotion model for vulnerable male populations
ANNEX FIVE:	Possible PSI MSM Intervention Organogram
ANNEX SIX:	Organogram for Bandhu Social Welfare Society, a national MSM sexual health agency in Bangladesh

ACTIVITIES

Apart from meeting PSI staff in the Yangon and Mandalay offices, I has was given the opportunity to meet and interview a range of males involved in male to male sexual behaviours, observe a number of sites where males can meet other males in both Yangon and Mandalay, as well as visit the Taungbyon Festival and talk with several *nat-ka-daw* present there.

Meetings

Yangoon:

Guy Stallworthy, Country Director

Richard Harris, Deputy Country Director, Communications

Other key staff

De-briefing session with key PSI Yangon staff

On-going discussions with Dr. Tin Htut and Myat Win during the visit.

Mandalay

Dr. Tin Oo and key staff

De-briefing session with key PSI Mandalay staff

On going discussions with Day Day and Casper, MSM field staff in Mandalay.

A presentation on male sexualities, behaviours and sexual health to PSI staff in Yangon and Mandalay offices were given.

Sunday, 3rd August

Discussions with 5 *apwint*-identified beauticians and hairdressers and one-tea boy.

Visit to *apwint* brothel, observation and discussion with three *apwint* sex workers and others.

Monday, 4th August

PSI: Introductions to PSI Yangon office staff

Discussions on MSM issues with Dr. Tin Ag, PSI Research Officer

Discussions with Richard Harrison, PSI Deputy Country Director, Communications and Dr. Myo BCC specialist. Review of PSI BCC materials

Visit to Yangon Project Office. Participate in social group meeting of MSM – primarily feminised males. Discussions on sexual practices, sexual debut, and other issues.

Site visits to

Cruising MSM cruising site: primarily *apone* and *gigalos*

Visit nightclub: Observe (female and male sex workers present)

Tuesday, 5th August

Fly to Mandalay

Visit PSI Mandalay office and introductions to staff

Discussion with MSM staff, Day Day and Casper

Meet with GP who is treating some MSM (primarily feminised males) for STIs: discussion on STI treatment issues (syndromic management)

Site visits to two Beauty Parlours: discussions with two *apwint* beauticians. Also discussions with young adolescent beautician assistant and two male sex workers, all *apwint* identified.

Meeting with MSM entertainment group who dance at social functions.

Site visit to cruising site: Masharmyatmuni Pagoda Park.

Visit nighttime markets and another cruising site: Discussion with MSM (*apwint*-identified) monk.

Wednesday, 6th August

Travel to Taungbyone Festival and hold a range of discussions with 4 *nat-ka-daw* fortune tellers who were all *apwint* identified.

Visit PSI booth at the Festival and general observation of the festival goers and environment.

Presentation with PSI Mandalay office staff on sexualities and male-to-male behaviours

Re-visit Taungbyone festival for night observations. Hold discussions with 3 *nat-ka-daw*.

Thursday, 7th August

Return to Yangon

Visit PSI Yangon office

Lunch time discussions with Guy Stallworthy, Country Director.

Visit Compass office and discuss with Compass staff and interviewers regarding their ethnographic study of MSM.

Site visits to a number of market places in the afternoon.

Visit to cruising site and local nightclub for observations.

Friday, 8th August

Debriefing session held with PSI Country Director and lead staff.

Lunch with Country Director and Deputy Directors.

Presentation to PSI Yangon staff on MSM sexualities and sexual health risks in the Myanmar context.

Site visits in the evening to other cruising sites, including tea-shops, a market place and a nightclub.

Saturday, 9th August

Rest day. On-going discussions with Myat Win on MSM issues and concerns, and transfer NFI documents to PSI computer system.

Sunday, 10th August

Return to Bangkok for onward flight to Bangladesh.

ANNEX ONE

OBSERVATIONS IN MYANMAR

Shivananda Khan, NFI

Myanmar is a male dominated society, but unlike much of south Asia there appears to be a general social acceptance of gender mixing between males and females in public social spaces. However, despite this, it also appears still to be a homosocial and homoaffectionalist society¹, where sexual boundaries between males may be easily crossed.

Some of these acts can perhaps be called homosexual (mutual emotional and sexual desires), but the visible framework appears to be primarily gendered in terms of identities and sex roles, i.e. feminised males (*apwint*) with manly partners (*thange*). For many of these manly partners these sexual encounters appear to be primarily focused on semen discharge. They are not having sex with another man – but with an *apwint*.

While at one level there is this public framework of *apwint/thange* encounters, another dynamic also exists more invisible generally, but accessible at certain sites in any city. This is the *apone* framework - males who sexually penetrate as well as being penetrated - where sexual desire for another male and pleasure operate without a gendered framework.

There may also be males who are gay-identified, but this would only exist amongst social elites, upper middle class males with access to English, literature and internet.

While sexual partners of various identity/behavioural frameworks are accessed in public sites such as toilets, parks, tea-shops, bridge crossing, and other sites, other access points included beauty parlours, shopping plazas, friends homes, nightclubs, and even male type brothels. Religious festivals are also venues for attracting male partners.

It has to be noted however, that gendered identification is not a central indicator of actual sexual practice. Thus discussions with several self-identified *apwint* indicated that they also sexually penetrate at times, although this was not their primary desire. Further penile pleasures and semen discharge is not uncommon among them.

Self-identified male sex workers are from across the behavioural/identity spectrum. Thus *apwint*, *apone* and *thange* type males sold sex. But also older *apwint*, *apone* and *thange* type males bought sex. The buying of sex could be through a cash transaction, or through gifts, meals, an entrance to a nightclub, or assistance with education. Invisible male sex work also exists in terms of hotels, nightclubs, teashops and other venues where males can readily be accessed.

¹ Primary social relations are between the same gender (homosocial). Homoaffectionalism in the sense that the term is used in this text means social acceptance of the public display of male-to-male or female-to-female affection. For example, it is not uncommon in Myanmar to see two males holding hands or arms around each other as they walk. Often male friends will also share beds when sleeping, wrapping themselves around each other. (See Hardman's Homoaffectionalism, 1993, and Khan's Under the Blanket in Aggleton's Bisexualities and AIDS, 1996, where he points out that the boundary between homoaffectionalism and homosexual behaviours is very "thin" particularly in shared spaces and "under the blanket".)

In terms of possible symptoms of STIs amongst *apwint*, there appears to be a significant levels of anal bleeding, itching and burning sensations around the anus, pain while urinating, and other symptoms leading to increased vulnerability in terms of STI/HIV infection, with high levels of inappropriate self-treatment for these symptoms. A lack of appropriate clinical services was evidenced along with probably a lack of trained clinical staff particularly in regard to anal symptoms and issues. Self-treatment is common.

It needs to be realised that male-to-male sex in Myanmar is not an exclusive behavioural framework for many that are involved in MSM activities. Marriage is a masculine as well as a social issue, so significant numbers of MSM, particularly *thane* and *apone* type males, as they become older, will get married. A constant refrain from some of the MSM accessed was that many men like male-to-male sex, because they feel they cannot ask their wives for anal or oral sex, and go to *apwint/apone* males for such sex. Further constraints on male-to-female sex was that the price of female sex workers was higher than that of male sex workers, or that wives are not always sexually available through appropriate accommodation, religious and cultural customs, and so on.

A comment:

The price of male sex workers appeared to be lower than that of female sex workers. There could be two reasons for this:

- 1. The numbers of male sex workers could be higher and thus depress the market price*
- 2. The demand for male sex workers could be low which can also depress the market price*

Sexual health issues for males (and females) through the primacy of male sexual behaviours, particularly male-to-male sexual behaviours, should be seen as a major and urgent concern. The fact that the STI treatment services in Myanmar does not appear to address anal transmission of STIs, is a cause for deep concern.

Appropriate service delivery of STI testing, treatment, care and counselling will need to be developed as a urgent necessity in order to formulate strategies that can effectively deal with different sexual behaviours in a confidential and sympathetic manner. Promotion of sexual health amongst males who have sex with males will be particularly challenging, but necessary, because of the issues raised in this report. Not only this, but addressing anal sex as a general risky behaviour amongst all males should also be seen as a priority.

The lack of understanding and knowledge of many of the NGOs, INGOs, STD clinics, donor agencies and other institutions regarding the constructions of male to male sexual behaviours and the frameworks of behaviours and/or identities create many barriers to the development of appropriate and effective intervention services.

It must be recognised that in a Myanmar sociocultural context, Western constructions of homosexuality and heterosexuality do not "fit", and can actually lead to an increase in the invisibility of the behaviours. It can also increase the level of potential harassment and fear.

However, what was also apparent was the recent construction of the term "men who have sex with men" as an identity label by PSI staff. The term MSM was originally invented to access males who do not generate an identity label around their sexual practices, desires and behaviours, but is now being seen as an identity label in itself. This is dangerous in terms of HIV prevention work, as then MSM is seen as an

exclusive group rather than as a range of behavioural frameworks, a spectrum of masculinities and sexualities. Such an approach to see MSM as a “target group” will also create increased invisibility for certain frameworks of male-to-male sex.

In certain contexts it may be necessary to separate behaviours from identities. In developing appropriate responses, there may well be a need to focus on both risk behaviours (for the “penetrating partner” – the *thange*) as well as “at risk” *apwint/apone* (for the “penetrated partner”) as two distinct frameworks. It would be difficult to incorporate both within one intervention strategy since *thange* type males who do not identify themselves through their sexual behaviours would most likely not access such a targeted service. At the same time it is also essential to target those highly vulnerable male populations who do self-identify within one or more of the gendered/sexual categories, i.e. *apwint* and/or *apone*.

Sexual behaviours between males is certainly not a practice of only a small minority in Myanmar, but is much more complicated than the so called heterosexual-homosexual mutually exclusive categories would indicate.

The MSM Context in Myanmar

In the broader context perhaps we should be talking about male-to-male sexual behaviours rather than men who have sex with men (MSM) for the word “men” can also be problematic culturally. The question is “What is a man?” “How is a man defined?”. This of course leads to the proposition that for an effective response to HIV/AIDS issues and concerns with regard to males who have sex with males, we need a better understanding of Myanmar constructions of masculinities and sexualities.

While for some MSM there are frameworks of male to male desire, identities and visibility which may make it easier to produce size estimations, for the majority who sexually access these males and whose desires are around discharge rather than gender/sex roles, and who perceive themselves as ‘manly’ and ‘normal men’, it is would be very difficult to quantify.

In summary what we can say about male-to-male behaviours in Myanmar is that

- For many males involved in male-to-male sex, MSM is not a sexual/gender identity but an act, a behaviour.
- Such behaviours are not contextualised within a heterosexual - homosexual paradigm but within a gendered framework and role-play, where a feminised gender performance signifies the preferred role to taken in the sexual act.
- This gendered framework is constructed within an *apwint/thange* dynamic, where the *apwint* perceives himself and his desire for other males in the context of gendered roles in Myanmar, i.e. the “female” partner. *Apwint* identify as feminised males, constructing their social roles, mannerisms and behaviours in ways that attract what they call *thanges* - “real men”.
- In this context many *apwint* are visible in a range of public environments and neighbourhoods, but *thange* are not, for they could potentially be any “manly” male.
- A proviso: not all *apwint* cross-dress, and not all *apwint* identify as gendered males. For many *apwint* behaviours are seen as male attractors. Such *apwint* do not desire to become females, or even identify as feminised males. They utilise the behaviours of *apwint* as a means to an end.
- This does not mean that Myanmar does not have any gay-identified men as it is understood in the West. They do exist but are even more invisible as they would tend to be amongst the social elite.

- Nor does the above mean that *apwint* do not penetrate, or that *thange* are not penetrated. Some do cross over these gendered sex roles. Usually this crossover tends not to be discussed and thus invisibilised.
- Similarly for an *apwint* to admit to having sex with another *apwint* is also considered shameful, and crosses the "incest" boundaries, i.e. *apwint* will state that they perceive each other as "sisters".
- *Thange* or "real" men, do not see themselves as homosexuals or less masculine because of their sexual involvement with *apwint/apone* males. They penetrate those who are not "real men" - they are *apwint*. Their personal sense of manliness is maintained.
- Thus in Myanmar we have a spectrum of masculinities and sexualities with porous boundaries.
- With such a gendered dynamic it may be possible to count the number of *apwint/apone and male sex workers* at a range of public sites, but this doesn't address the whole range of male-to-male sexual encounters. Nor does this address the number of "manly" partners these *apwint/apone* access.
- Beside the *apwint/thange* frameworks, there is also another dynamic of male-to-male sexual behaviours, which because of a shame-based culture cannot be readily accessed. This includes inter-family male-to-male sex, sex between friends, and sex in male only spaces, such as within monasteries, prisons, boarding institutions, and the military.
- Such behaviours could be significantly high since there is a limited social construction of heterosexuality - perhaps we can call this behaviourally "heterosexual" - and where sexual access to females is very limited.
- What appears to exist in Myanmar for many, like the south Asia, is a core personal identity in terms of gender role, marital status and class. Identities are not based on sexual object choices or sexual orientation.
- Another framework also exists in which same sex/same gender frames sexual encounters, but this seems to be more based around trans-generational patterns.
- *Apwint/thange* sexual relationships are based on gender roles - a "husband and wife" relationship. *Apwints* are not friends with their *thanges*, but "wife". This is a relationship based on same sex/different gendered identification dynamic. *Apwint* make friends with other *apwint* with whom they "never" have sex. For *apwint* this would be like having sex with their sister.
- Male to male sexual desire should be contextualised differently from male-to-male sexual behaviour.
- No organising exists amongst *apwints*. There were localised social networks in specific sites and locations and among different groups. Often these social networks are framed by beauty parlour locations as well.
- Social and economic class appears to be a significant factor in terms of relationships and maintaining invisibility, where those from middle class backgrounds would most definitely not socialise with those from lower-income backgrounds. Also *apwint* from these backgrounds were much more *apwint* and more visible.

Gay identities and organisations

No gay organising or group appears to exist.

Situational Identities

Within the context of Myanmar, which is perceived to be a highly religious and conservative town, the beliefs and practices may lead many MSM to act out situational identities. That is, within the family home, streets and neighbourhood they may perform as young (or not so young) men, while in specific environments,

perform as *apwint* with other *apwint*, or to draw the attention of potential male sexual partners.

Situational identities acted as a device to invisibilise identity choices, desire and behaviours, maintain social and family stability, and reduce levels of potential harassment and violence (of which none was observed by the Investigator).

Social Contexts

Myanmar is still mainly bounded by traditional and conservative value systems expressed through religious and cultural norms and expectations.

Buddhism is the national religion, and in a country with severe poverty and lack of educational opportunities, many young males are placed in monasteries for an opportunity of food, housing, and some education.

Civil society is under-developed and there are few social traditions of self-help organising, or of non-governmental organisational development.

There are certain occupational and social roles where *apwint* are tolerated. Primary amongst these include:

- Beauticians and hairdressers
- *Nat-ka-daw* - “fortune tellers” (see Dr. Owen Wrigley field report to PSI on the Taungbyon Festival)
- Dress makers

These are all considered feminine occupations.

Those involved in these occupations also have significant networks amongst other *apwint*.

Religious festivals

In Myanmar, Buddhism is the state religion, and monks and nuns play a significant social and political role.

But within the social and religious practice of Buddhism are strains of an animist history which contextualise a range of religious festivals, such as the Taungbyon Festival near Mandalay held once a year (see Dr. Owen Wrigley’s report on a field visit to this festival).

Alongside these festivals is the tradition of the *nat-ka-daw*, where feminised males act as interpretators of the future, providing a range of psychological support systems for the uncertainty that lies ahead for many. Here the femininity of such males is tolerated, and to some extent, celebrated. For example, at the Taungbyon Festival a significant number of participants are cross-dressing *apwint* who access the *thange* males attending the Festival in fairly open display of high-risk sexual encounters.

Further, a range of Pagoda Festivals, feminised males are also performers, who will perform traditional dances.

Monasteries

With the high degree of poverty and a lack of educational opportunities, many families will send “surplus” children to monasteries as novices.

Anecdote

My father sent me to the monastery to become a monk because he believed this would make him more manly, and would not longer behave as an apwint. All it meant was that I could get a lot more sex.

Despite the more socially tolerant behaviour of gendered males – where they fit into socially tolerated occupational roles, i.e. beauticians, hairdressers, dressmakers and fashion designers, and theatre, family physical violence against an *apwint* type son is common.

From the few discussions with a range of differing MSM, sexual debut patterns also appear to follow the south Asian frameworks.

Sexual debut

Apwint identified males reported very early sexual debut somewhere between seven years of age to eleven. Usually their first sexual encounter was with a family relative or neighbour. *Apone* identified males stated that their sexual debut tended to be between the ages of eleven and thirteen, and usually with a family relative, class, mate, or neighbour. *Thange* type males reported their debut as being between thirteen to fourteen years to sixteen or seventeen. This debut could be with a female or a male.

Sexual networks

Apwint/apone social and sexual networks seemed to be localised at specific sites and locations, each network somewhat separated from another with different individuals operating within them. The Investigator was informed that for many *apwint* type of individuals they tended to stay within their specific townships, utilising local beauty parlours run by *apwint*, and specific “cruising sites” in that township for places to meet *thange* type men.

Apone and *gigalo* type males tended to go to down-town locations, parks, toilets and certain road crossing, as well as nightclubs to seek male sex partners and/or clients.

These are not hard and fast boundaries though.

Support and friendship systems

For *apwint*, key support and friendship systems were provided by other *apwint*.

Apwint see all “real” men as potential *thange*, and often treat them as such. It was seen as rare for an *apwint* to develop a non-sexual friendship with a “real man”.

Apwint support systems tended to be expressed within a narrow arena of friendship networks, usually in a specific environment, although sometimes *apwint* will visit other *apwints* at their homes, particularly so when that *apwint* has a room to himself. Here again this space can often becomes sexualised, as *apwint* friends will bring their *thange* to access the privacy of the space.

Poverty and sex work

Myanmar is one of the poorest countries in the world, where industrial development is low and opportunities for relatively well paid employment is also low. The majority of *apwint*-identified males selling sex were from low-income groups or were unemployed.

For many literacy levels were low as were the number of years of education.

Poverty along with a lack of job opportunities is a major issue that could be a significant factor that drives much of male sex work. However, the growth of satellite television, access to internet, and the appearance of a fairly liberal market economy along with the consumer goods that go with also generates a range of possessive desires that could encourage male sex work as a means to obtain these good.

ANNEX TWO

Developing sexual health services for vulnerable male populations in Myanmar *Shivananda Khan, NFI, August 2003*

The challenge of HIV/AIDS confronts all countries and communities globally, and whilst the countries of Africa are confronted with increasing numbers that are dying from AIDS, the Myanmar stand before the abyss of an uncontrollable epidemic. It is clear that Government, non-government, and community-based agencies, as well as many other institutions, must work together to face this challenge if there is to be any hope of effective strategies to control and manage HIV transmission so as to reduce the levels and rates of infection and thus AIDS.

For Myanmar to develop an effective national strategy for HIV/STI prevention amongst vulnerable male populations, it must address all risky behaviours and practices. No country can afford to ignore or deny what occurs within it, whether it is a particular risky sexual practice or a stigmatised identity that is deemed to be immoral, illegal, or supposedly against its culture. Such denial and stigmatisation creates ideal conditions for an increasingly rapid spread of HIV infections across the country.

Male to male sexual frameworks and behaviours is of major concern because it has been denied and invisibilised in Myanmar. Yet significant evidence exists that such behaviours are substantive and have major consequences for any reproductive and sexual health programme if ignored.

The dynamics of risky male sexual behaviours, gendered identities and sexual networking in Myanmar are very similar to those existent in South Asian countries. However Myanmar has a poorly developed civil society and lacks appropriate community-based self-help frameworks for implementing HIV/AIDS prevention programmes for vulnerable male populations. Despite this, it is believed possible that the models and tools that NFI has already developed for local management of such programmes in South Asia can be adapted to the Myanmar situation.

In the current situation it would be very difficult to develop independent CBOs that can be recognised and accepted by the Government of Myanmar. It would thus be necessary for PSI, should it wish to scale up its prevention activities amongst vulnerable males, to actively consider implementing a specific male sexual health national strategy with appropriate management mechanisms that create an enabling and empowering environment for localised self-management and service delivery. Such ownership by local populations of vulnerable males is key towards sustaining health-seeking behaviours and reducing the potential spread of HIV/AIDS.

Key factors in developing such localised self-help services include:

- Access to safe spaces for vulnerable males that encourage community-building through socialising and networking activities as well as provide a range of programmes that address issues of low-self and empowerment
- Access to appropriate and sympathetic clinical services and counselling
- Outreach to vulnerable male populations and providing referrals to services along with networking and friendship building

Along with this tripartite strategy, there will be need to be considerable advocacy to support such an initiative, and training and sensitisation programmes that address stigmatisation, exclusion and human rights concerns.

Thus there are two parallel processes which are essential to the development and implementation of a male sexual health strategy that addresses the needs of vulnerable male populations:

- Community building and ownership by males who have sex with males for others who share similar frameworks, where the process utilises the already existent emergent community networks amongst some males who have sex with males, though accessing the shared sense of self, gender identity, and behaviours. This programme would also need to address the issues of female partners as much as male partners.
- Ensuring that **all** reproductive and sexual health programmes, STD treatment centres, and HIV/AIDS prevention programmes, incorporate the issues of anal sex behaviours (both between females and males, as well as between males) into their education, treatment, and service provision. This enables access to those males who penetrate other males but do not belong to any behavioural/gendered identity community.

This document is about the former strategy, working primarily with *apwint* and *apone* networks towards establishing self-help strategies for the prevention and treatment of STIs/HIV/AIDS.

Purpose

To reduce the risks of STD/HIV infections among vulnerable male populations in Myanmar.

Goal

To enable and empower males with high risk sexual activities to practice safer sex as a normative behaviour and increase their access to appropriate STD treatment services and sexual health products.

Belief

It is understood that safer sex practices amongst vulnerable males can only be encouraged and maintained over the “long haul” if such health seeking practices become a normative behaviour amongst themselves and with their sexual partners. To achieve this goal, it therefore requires such safer sex practices to be adopted as a shared community response, which thus requires the whole “community” to be involved in promoting and adopting such practices. However, this pre-supposes that such a community exists amongst such vulnerable male populations. This is not a valid assumption in Myanmar.

However, emergent sexual/social networks of *apwint* in a variety of locations do exist and these should be utilised as central components in building an emergent community. Such a community would not be based so much on location, occupation, caste, or religion, but rather would act as a *psychological community* framed by the *apwint* gender identity. This is also possible within *apone* dynamics some of whom also have friendship networks with *apwint*.

Through the *apwint* and *apone*, *thane* (the penetrating partners who come from the general male population and identify with “man”) can also be reached. Such men can also be educated through the targeted group strategy of PSI.

Behavioural Summary

In Myanmar, the vast majority of males who have sex with males fall within a range of behavioural and gendered dynamics. These are:

a. *apwint*(or their local equivalent)

Males who feminise their behaviours and dress (usual in specific situations/contexts) and who state that they prefer to be sexually penetrated anally and/or orally. *Apwint* are supposed to act out the “feminine role”.

It should be noted that *apwint* also at times penetrate their supposed *thange* sexual partners. However this is usually denied by both *thange* and *apwint*.

Many male sex workers are self-defined as *apwints*, but not all *apwint* are sex workers. Neither are all sex workers *apwint* identified.

In terms of identities, the term *apwint* should be seen in the context of gender construction, rather than as a sexual identity. However, it is clear that sexual and emotional desire exists for what is termed “real” men. Often such male partners are called “husbands”.

Many *apwint* are in “feminised” occupations such as hairdressing, beauty parlours, and fashion/dress design, but not all.

Apwint identity for many is very much a performative identity in certain social, situational and locational contexts, while others may well consider its public personae as a full time identity and behaviour leading to some desiring gender reassignment surgery, or full time cross-dressing and breast enhancement.

However most *apwint* do not want to become women, but use femininity as a tool to attract manly partners for pleasure as much as for business.

Many *apwint*-identified males, particularly those from low-income groups, will sell sex. With low prices, multiple partners in a single day is common. Older *apwint* will also buy sex either through gifts, financial supporting the *thange/apone* partner, or with one of payments from *thange/apone* male sex workers. Some *apwint*-identified males call such sex workers as *gigolos*.

b. *thange* (or their local equivalent)

A term given by *apwint* to what they deem as “real” man, masculine men, males who sexually penetrate them.

Thange do not label themselves as such. They are normative men in the construction of masculinities in Myanmar, and come from the general male population. As a man they can penetrate another male without losing their sense of masculinity. They will often be married, and/or access female sex workers as well.

For *apwint* identified males, all men are *thange* and are potentially sexually available.

A caveat needs to be entered here. Some such men also like to be penetrated for its pleasurable aspects, but such behaviour will be kept strictly secret and such men will maintain their *thange* personae.

Thange behaviour is not based on sexual but gendered identity. The sexual role of a man is to penetrate, women or other males.

Some *thange* type young males will sell sex to *apwint/apone* type males.

c. *apone* (or their local equivalent)

An *apwint* term for those who sexually penetrate and are also penetrated. Such males are not usually visibly identified, wearing normative masculine clothing. These males may sexually desire other males, will have sex with *apwint* as the penetrating partner, or sex with *thange* as the penetrated partner, or with each other in a mutual sexual role exchange.

Some *apone* type males will also sell sex to other males.

d. gay-identified men

While there are gay-identified men in Myanmar, they come from upper-middle class and English literate section of Myanmar society. I was unable to access any for discussions.

There are many reasons as to why males say they have sex with other males. These include:

- Desire for specific sexual acts that they say women will not do (i.e. anal and/or oral sex)
- Desire for sex with another male
- Perceived “body heat” and need for immediate discharge
- Financial reasons
- No access to females
- Cost consideration
- Fun and/or curiosity

This means that in all male-institutions, male to male sex may well be prevalent. Such institutions will include prisons, juvenile homes, military establishments, monasteries, boarding schools and such like.

Whilst self-identified *apwint* may participate in a number of over-lapping social/friendship networks, these tend to be small and site-based, or through occupational frameworks, rather than within frameworks of “community”.

Similarly *apone* type males will socialise within specific locations, with each other and with other males at such sites.

Thange are involved in different social networks that are more to do with non-sexual friendship networks, locality frameworks, employment affiliation and so on. These tend to be neighbourhood, work, age, and village origin based.

What the above indicates is that male to male sexual behaviours and networks are highly complex, interactive and porous. To try to deal with male-to-male sexual behaviours as a unitary construct is very reductionist and leads to significant gaps in service delivery and take-up. In such an approach many frameworks of male-to-male sexual behaviours will be completely missed.

The most visible framework is the *apwint* construct with their social networks through beauty parlours, dress shops, and specific street locations, while at specific sites male sex workers (primarily *apone* type males, but also *apwint*).

The development of a male sexual health strategy addressing vulnerable male populations should thus begin by working with *apwint/apone* frameworks as the most easy to reach male networks with high risk behaviours.

However to use the model of community building and mobilisation as a methodology towards empowerment and development of safer sex as a normative behaviour

within an imagined community would require the construction and development of a community. This means defining what community means, and how affiliations to a community are developed, nurtured and maintained.

Community Building

What sort of community is needed then? On what basis is this imagined community emerging? Can such a community develop? What do people share in such a community?

In the male to male sexual environments in Myanmar, the only emergent groupings that sexual health projects targeting male to male sexual behaviours would be able to currently work with in developing such a community, are the self-identified *apwints* site based male sex workers. This paper explores the issues of *apwint/apone*. However, *apwint/apone*, in the main, do not form a community.

In Myanmar *apwint* are usually within small social/friendship personal networks, based upon sites and sexualised localities. Networks can overlap, with members within one network, also belonging to another network(s).

Apwints are stigmatised as feminised and penetrated males. They are perceived as not-women and not-men. In many ways the *apwint* is gendered as not-woman/not-man. Such characteristics enable *apwint* to recognise themselves as a “gender” apart, and to also recognise each other with shared characteristics of desire, behaviour and sexuality. However, it should be noted that for many *apwint* this gender play and practice is locational, and does not carry over into other situations and locations, i.e. in the home, with one’s wife, or at work, and so on.

Similarly male sex workers socially interact with each other at different locations, developing friendships, and may well have sex with each other.

Since the primary community frameworks and social identities within Myanmar revolve around family (the joint and extended family system), rural origins, i.e. shared village experiences, locational (where you live), work affiliations (truck-driver, Labourer, student, etc.), and marriage and children, making shared behaviour characteristic a basis for community building becomes a major initiative and a challenge to the social basis.

Apwint (and apone sex workers) are the most vulnerable in terms of male-to-male sex. Multiple penetrations, multiple partners, extremely low condom usage by their penetrating partners, low levels of knowledge, low access to STD treatment services, high levels of anal bleeding, and no lubricant use (apart from saliva - perhaps). Apart from these, the majority of *apwint/apone*, like their penetrating partners, will choose to marry and have children due to social necessity, and perhaps desire.

In terms of community building and development, *apwint/apone male sex workers* represent the most effective opportunity form changing behaviour practices. Their sexual choices enable them to access *thange* from different socio-occupational communities, as well as a cross-section of society. They are already, for the most, embedded within behavioural and identity social frameworks, and their shared characteristics can be the basis for community building.

For the non-identified penetrating male, the most obvious route towards encouraging safer sex behaviours would be to work through occupational and neighbourhood strategies. This means ensuring that those NGOs working with community/occupational based methodologies to promote HIV/AIDS awareness,

must also include anal sex behaviours and risks within their discussions, whether they be working with truck drivers, rickshaw drivers, adolescents, schools, colleges, slums, low income groups, or whatever.

What makes a community?

Recognising the strengths of community affiliations, as they exist, requires ensuring that *apwint/apone male sex workers* as a gender group/network are specifically targeted to draw them into an emergent community, where affiliation is based upon behaviour, language, and emotional characteristics, as well as on personal friendships.

The characteristics of such a community, could be considered to be:

affiliation to a shared consensus around desire

solidarity as a “community”

mutual support mechanisms

social support services

shared ideologies and social characters

socialising frameworks

mutual concerns and issues

shared needs

shared rituals

Thus the tradition of the *nat-ka-daw* at *Taungbyon* Festival can be drawn upon in terms of shared identities and rituals as a part of the strategy.

In this situation, community is not defined by some geographical space or locality, but rather as a sensibility, a psychological realm of shared concerns, sexual behaviours, needs, histories, identities, and desires.

Development

The following briefly outlines the components being used towards developing a sense of community affiliation, of mobilising *apwint/apone* networks, and networking of networks, creating frameworks in which safer sex and STI treatment can be promoted as normative “community” behaviours and sustained.

Phase One

Establishing an initial community network

As stated above, “public” *apwint/apone* form small friendship networks in a range of separated localities (such as beauty parlours) and public sex environment sites, which act as meeting places as well as sexual “cruising” grounds.

It is essential to identify these areas by mapping sites and the networks that operate within them before a project can be initiated.

Initial recruitment of a small group of appropriate and interested *apwint/apone* from these networks should be conducted. A training programme follows this recruitment which includes:

- a. STI/HIV/AIDS awareness
- b. sexual health
- c. psychosexual issues
- d. behavioural and ethnographic assessment techniques and modalities

A small assessment team is developed from this initial group and used to conduct the behavioural and ethnographic mapping of the intended constituency for a sexual health project.

The team operates from a small drop-in centre developed specifically for this purpose, and managed by themselves. They explore the specific locality (town or city, or area of a city), networking with the existent MSM social networks, conducting a behavioural and ethnographic survey, and mapping the sexual sites and any appropriate STI treatment services. Contacts are established with existent HIV/AIDS NGOs, government agencies, and other interested parties towards building a consensus on the need for action.

Individuals and groups from such MSM networks are referred to the drop-in centre for socialising meetings and a range of bonding events during this period. This helps to create a sense of affiliation across the city/town. The location of such a centre is critical in this process as it must be accessible across the particular area in which the eventual project would work.

Whilst the need for such an assessment is essential as a means of building a profile of male-to-male sex in the town/city, another primary reason for conducting the assessment is to network and build up friendships and affiliations by the core *apwint/apone* team.

Following the assessment analysis, the team (with perhaps additional members identified through the drop-in process), participate in a second training programme, which includes:

- a. designing a community based sexual health promotion programme
- b. service development and management skills
- c. budgeting and financial management
- d. monitoring and evaluation
- e. project design

Phase Two

Implementing and managing a sexual health service for males who have sex with males

While the ideal situation is to have *apwint/apone* manage such a project as well as being service users, a lack of appropriate skills may be an impediment to such a development. While capacity and skills building will be a necessity, such project may well require personnel who may not come from such MSM networks. It is critically important to identify which tasks should be done by MSM identified persons (such as fieldwork and socialising activities) and which can be fulfilled by non-MSM staff. In such cases these staff will need to be fully sensitised and trained in the specific psychosexual dynamics of the range of MSM behaviours and identities.

The process of conducting the situational analysis provides the seed bed for community building, where initially *apwint/apone* have been using the drop-in centre to socialise, meet each other, create an extended network, and access sexual health information and advice.

Phase Two upgrades and extends this service provision.

Through the experience of developing several such projects in South Asia, that such a male sexual health service provision should include three central components.

1. Field Services (outreach/networking)

Trained full-time staff (called Field Officers) drawn from these accessible MSM networks are fielded to work at specific sites and act as Team Leaders of a Field Team, which provides outreach/networking services. These services include:

- a. friendship building and networking amongst those attending a site, which includes *apwint/apone/thange*, their sexual partners, and others (e.g. tea-shop holders, rickshaw drivers, etc.)
- b. STI/HIV/AIDS information and education
- c. condom (and wherever possible lubricant) distribution and demonstration
- d. psychosexual advice, information, and counselling
- e. referrals to the drop-in centre and clinical services

The Field Team also includes Site Educators (Site Buddies) who are regular users at a site and are known to other individuals at that site. These “site buddies” act as “key informants/educators” for that site and introduce the Field Officer to others who use the site, their sexual partners (potential or otherwise), and others at around the site, such as shop-keepers, rickshaw, truck, or bus drivers, and so on.

They are key networkers, who also act as peer educators, sharing information amongst their friends and sexual partners, and referring individuals to the Field Officer and Centre services. They can also be used to monitor STI treatment compliance at the site, levels of safer sex behaviours, marital issues, socially market condoms, and so on.

As a measure of support and motivation, a monthly honorarium may be given to them.

Site buddies operate under the direction of the Field Officer, and report to him directly.

Site Volunteers

These are individuals at the site who are interested in the programme, and offer support and networking to the Friendship Team and Project in a voluntary capacity.

Neighbourhoods

Wherever practicable, and where safety is assured, individual members of a Field Team are also encouraged to operate within their own neighbourhood areas, networking, making referrals, and distributing information and condoms amongst their friends and neighbourhood sexual partners.

Each Friendship Team operates on a regularly basis on a small number of sites close to each other where daily visits are possible. Usually these will number 2 to 3 such sites. The intention is to develop familiarity, consensus building, community building, and mobilising towards safer sex practices and access to STI treatment.

An identity card is given to the Field Officer and Site Buddy, which can be used in terms of the local police, or other official who may question the work being done. It is also necessary to establish links with such authorities and gain their support for the work being done.

Condom and lubricant distribution

Many MSM may feel very ashamed to access condoms from regular outlets (particularly if they are young and/or unmarried), nor would they access family planning clinics. Provision of condoms and lubricants in ways that are affordable and easily accessible through site distribution can increase condom usage.

2. Centre-Based Activities

- a. *Drop-in service*

An essential requirement for building sustainability in risk reduction behaviours amongst highly marginalised and socially excluded male populations is safe spaces to meet to share personal problems, issues and concerns and build a community consensus.

The drop-in centre services are expanded from the original assessment period to include increased numbers of people now being referred to the Centre. Such a service should provide entertainment (such as TV, games, etc.) as well as access to individual psychosexual counselling, instruction on condom use, and information and advice on STIs/HIV/AIDS, as well as a safe space to meet each other.

b. Socialising meetings

A range of Centre-based social groups will need to be developed, each facilitated by a Field Officer drawing upon his own personal, social, and fieldwork networks. These groups also act as a space within which personal friendships and community building can be developed, experiences shared, and common purposes evolve.

They can also include specialised groups for:

sex workers
students
married MSM
thange
youth

Specialised groups meetings may well need to be developed in regard to differing gendered/sexual identities that may reflect class, education and identity. Thus *apone* type males may need a separate group space apart from cross-dressing *apwint*.

In other words, the drop-in centre has a multi-purpose use.

c. Sexual health education classes

Operating within a limited period, each class has a fixed agenda addressing sexual health issues and providing information and knowledge.

d. Personal skills development

A range of educational classes should be offered including literacy, social skills, life skills, health seeking knowledge, vocational skills, income generation skills, and so on.

The Centre-based activities address:

- i. personal and emotional needs including*
 - sexual abuse and violence
 - personal hygiene
 - friendship
 - identity and desire
 - emotional support
 - empowerment
 - personal skills development
 - personal health issues
 - support and care for those living with HIV/AIDS
- ii. social needs*
 - education
 - employment
 - economic development
 - human rights
 - family, marriage and children

- vocational skills
 - socialising spaces
 - iii. *Sexual health needs*
 - condoms
 - water-based lubricant
 - appropriate STI treatment
 - Psychosexual counselling
 - HIV/AIDS counselling
 - knowledge
 - empowerment
 - negotiating skills
- Other services could be developed

Advocacy

Police and local harassment are common factors amongst *apwint* who use public environments as social spaces, for sexual encounters, and to sell sex. It perhaps maybe possible to develop legal aid services, challenging human rights abuses, and providing counselling and support, a framework of service use and access can be developed which can be seen as a “community service”, encouraging affiliation to an “emergent gender/sexual community”.

3. STI treatment Clinic

Extremely problematic in mainstream services because of the stigmatisation of behaviours, *apwint/apone* have extremely few choices to access appropriate treatment services, particularly around anal sex behaviours. A Centre-based STI clinical service that provides syndromic management and prescription as well as access to subsidised medicine creates a safe space for *apwin/apone* and their partners to access and be assured of a supportive and sympathetic service. It is essential that an appropriate doctor be provided who understand the issues, particularly around anal sex behaviours and risks, and can provide a supportive environment.

These three interlinked and mutually supportive frameworks of service provision act as an enabling environment to create a holistic programme for risk reduction and safer sex promotion among vulnerable male populations.

Within such a development several additional strategies need to be employed concurrently.

1. Beauty Parlours

Many *apwint*-identified males are involved in the beauty parlour business as hairdressers and beauticians. They form small social networks with other *apwint* and have access to a range of *thange*, either as “husbands” and their friends, or as clients. They also have legitimate male customers.

Specialised outreach to such parlours in a locality will not only enable access to a broad range of *apwint* networks, but also could be useful tool to access male customers for basic condom awareness and marketing.

2. Night Clubs

While nightclubs in Yangon appear to be primarily female sex worker environments, there appears to be some anecdotal evidence to indicate that it is not unusual for male sex work to also occur where club staff as well as customers may be available. Joint outreach activities with programmes addressing female sex workers are a

possibility here. Fashion shows could be adapted to address sexual health promotion, empowerment and networking.

3. Nat-ka-daw

Myanmar has a strong religious tradition of the *nat-ka-daw* (see field trip report by Dr. Owen Wrigley) that are very apparent at the Taungbyon Festival and others. These are often are males who purportedly offer spiritual comfort, helpful advice and read the future for their customers. Many of them (if not most) are also *apwint*-identified, as are their students.

At these festivals, an amazing number of *apwint* type of males, many cross-dressed are present, and a range of highly risky male-to-male sexual activities occur with a high degree of social tolerance.

Developing strong links with the *nat-ka-daw* and gaining their assistance will enable developing national coverage of MSM issues through their own networks as well as within such festivals.

It should also be recognised that several persons from the bureaucracy and government also utilise the services of the *nat-ka-daw* for reading their futures.

4. Monasteries

Anecdotal evidence gained during the visit to Myanmar clearly indicate significant levels of male-to-male sexual activities within monasteries as well as by monks and novices outside such environments.

There needs to be a specific study on how Buddhism in Myanmar sees male sexualities and behaviours generally and specifically male-to-male sex.

Sensitive, quiet and diplomatic attempts to discuss issues of male sexual behaviours generally in the context of HIV/AIDS with heads of monasteries to see whether they can be quietly supportive for a male sexual health education programme that address all male sexual behaviours.

It needs to be noted that the monasteries may have some influence on the Government and administration in a country where Buddhism is the national religion.

5. Prisons and other all male institutions

In the current political and social climate, it would not be possible to speak of male-to-male sex within such environments, but perhaps a strategy that discusses male sexual behaviours in all its contexts in terms of HIV/AIDS awareness may be possible.

ANNEX THREE

NFI POSITION PAPER

Field Staffing for self-help agencies working with vulnerable male populations in promoting sexual health

Naz Foundation International
August 2000

A Field Team consists of a Field Officer with responsibilities to cover a specific number of sites, along with a number of Site Buddies who come from these specific sites.

Depending on the size and the socio-sexual dynamics of a site, the number of Site Buddies will vary between 1 and 3. A Field Officer may be responsible for 2 or more sites depending on the size and socio-sexual dynamics of the sites and the number of Site Buddies deemed necessary to cover each site.

The Field Officer manages the Site Buddies in his Field Team. A City Project may well have several Field Teams.

Field Officers would be selected because they have:

- personal MSM behaviours and identities
- desire to do community work
- an aptitude to learn
- comfortable with personal sense of sexual/gendered identity

Criteria for Field staff selection will be based on the following

- good communication skills
- an understanding of MSM issues and sociocultural contexts
- good working knowledge of sites
- good understanding of HIV/STIs
- ability to enable people to feel at ease and comfortable
- ability to develop friendship with MSM
- ability to write in local language, and if possible, English
- ability to speak openly on MSM sexualities and behaviours
- knowledge of the male and female body
- knowledge of psychosexual issues and counselling
- a proven commitment to the issues

Secondary skills

- reasonable vernacular literacy
- a minimum of education up to HSS standard

Field Officers must also be MSM themselves, and preferably come from the networks within which they are working with. It should be noted that the essential key for success in achieving the Programme's primary goal and purpose will be around community development and mobilising, and skills that are able to empower and develop such a frame- work are not necessarily based on educational capacity.

A Field Officer's personal style of dress, behaviour, language, and attitudes should be appropriate to the site (s) he would be working with it. He needs to be comfortable with a range of sexual choices and behaviours and partner selection, as well as different socioeconomic groups, ages, and classes.

Constant reinforcement of messages, skills, and knowledge would be undertaken for field officers by both the Field Coordinator and Centre Manager with appropriate support from the Programme management staff. This would require an on-going series on in-house training and refresher courses.

The role of the Field Coordinator is to develop the Field Teams, manage and supervise their work, ensure adequate monitoring procedures are followed, conduct regular site visits, evaluate the work of the field teams and individuals, and prepare monthly reports.

Criteria for Site Buddies selection will be based on the following

- Site Buddies must always come from the site/framework in which they have considerable knowledge. This knowledge should include
 - MSM using the site
 - local traders, assistants, transport workers, etc.
 - sexual activities at the site
 - safer sex behaviours and condom usage
 - personal friendships
 - areas of risk
- good communication skills with beneficiaries
- knowledge of MSM issues and sociocultural contexts
- proven knowledge of site
- reasonable working knowledge of HIV/STIs
- ability to enable people to feel at ease and comfortable
- ability to develop friendship with range of MSM
- ability to speak openly on MSM sex issues
- knowledge of the male and female body

Quality of Field teams and outreach skills

It must be noted that Site Buddies are much more than just peer educators. They are key to an effective community-building and development strategy for a sustainable behaviour change programme, where the population group is highly stigmatised, socially excluded and vulnerable. Further they also play a role in building an enabling environment for increasing health-seeking behaviours.

For effective outreach at the site, it is not essential that the Site Buddy is literate. What is essential is his networking and communication skills.

The site buddy is the key link between the field officer and the males utilising a specific site for sexual purposes. They provide detailed knowledge and understanding about the social and sexual dynamics, practices, relations with the police, and so on. The site buddies also distribute condoms and lubricant as well as generally sharing information and encourage their peers to practice safer sex, access STI diagnosis and treatment, as well as participate in the social groups and utilise the drop-in. Site buddies should only work at their site.

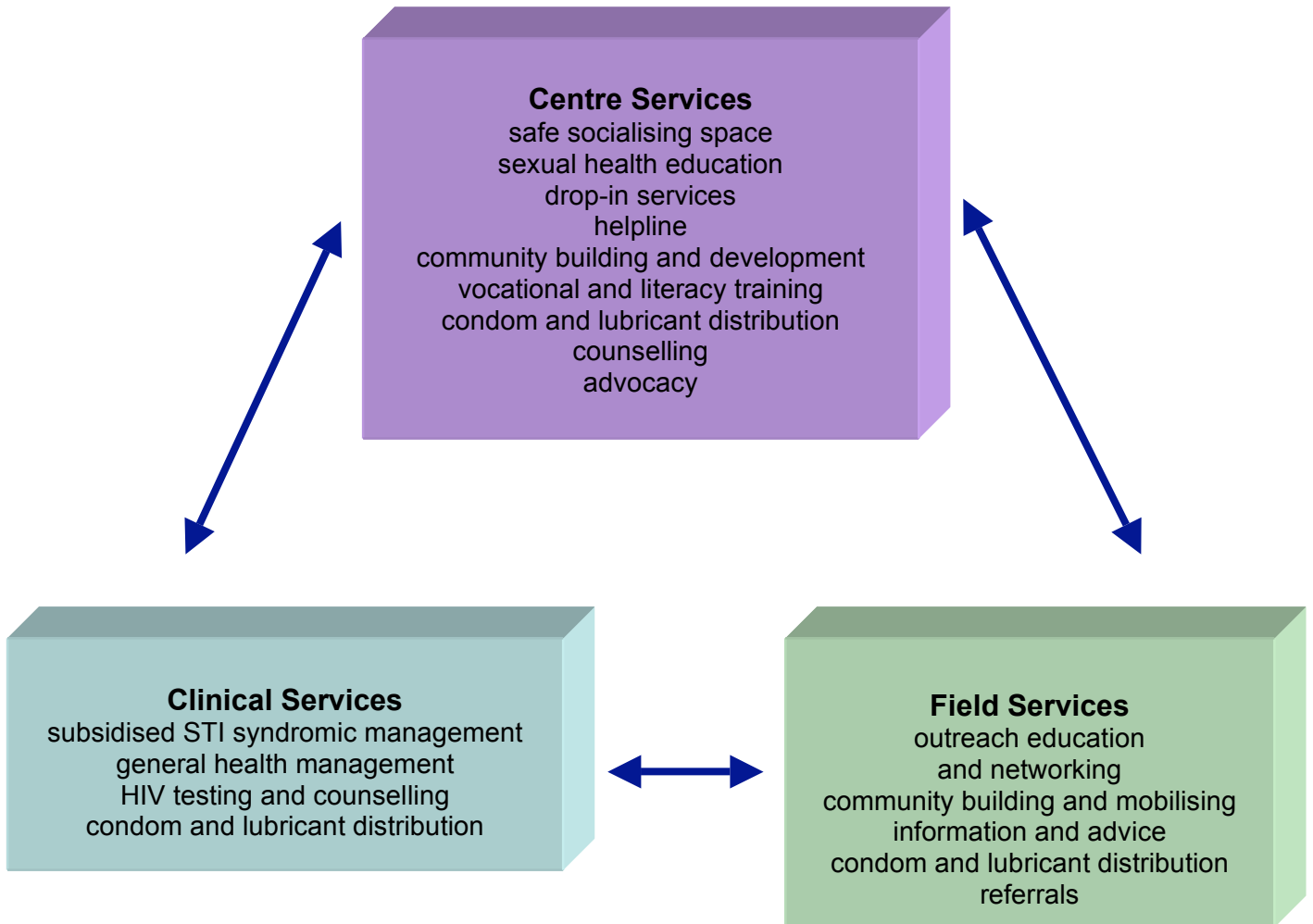
Field Officers cover more than one site, usually two or three. The field officer undertakes more intensive communication. This is based on making friends and relation building. Provision of BCC materials, information on HIV/AIDS and STIs, condoms, and so on, follow later. This is backed-up by the site buddy when the field worker is not on site.

Interactions in the field include low-key counselling as well.

Building up interactions in the field encourages people to visit the office and join in the office activities thus learning more about HIV/AIDS and STIs, access STI diagnosis and treatment as well as counselling if required, and generally begin to develop a sense of community.

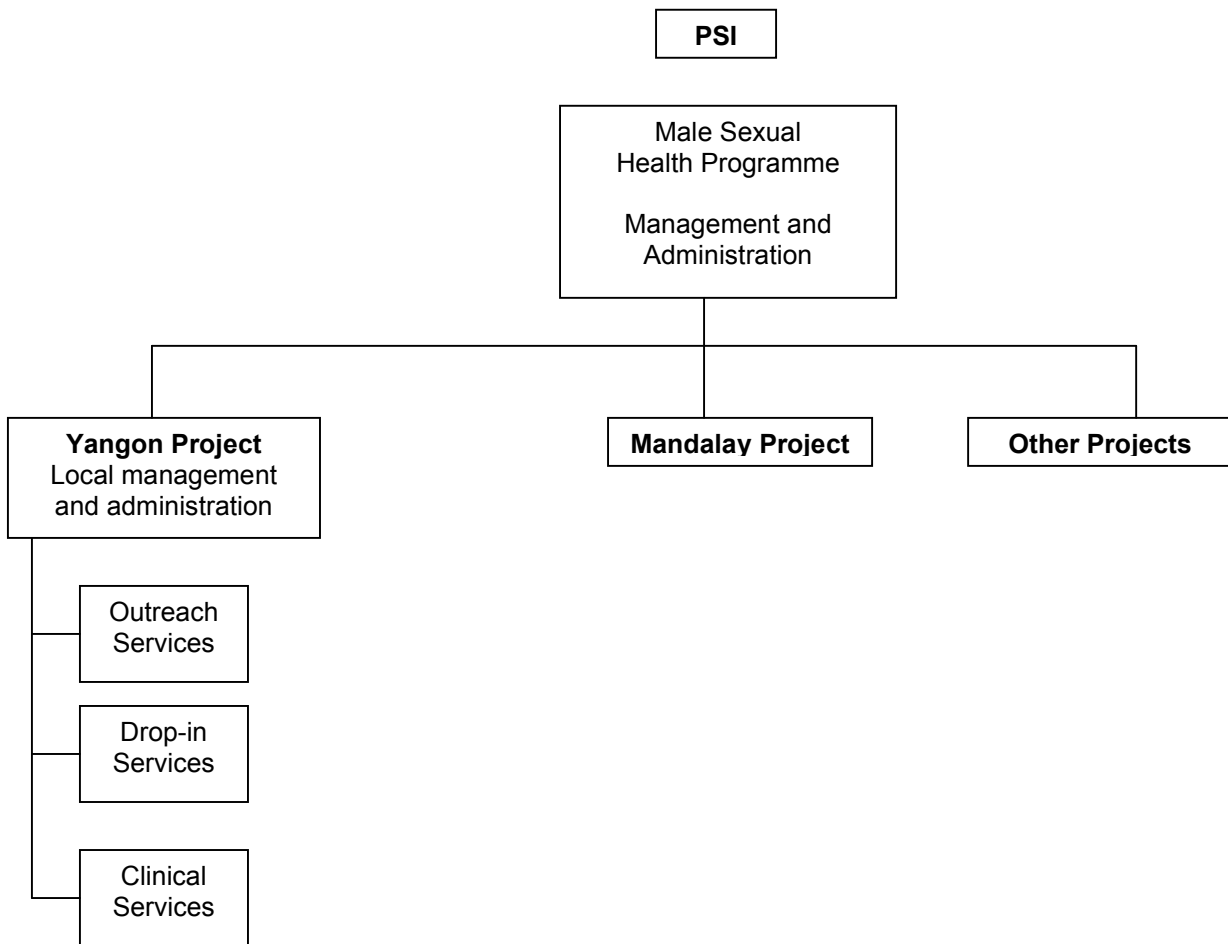
ANNEX FOUR

**Sexual Health Promotion Model
For Vulnerable Male Populations**



ANNEX FIVE

POSSIBLE ORGANOGRAM



ANNEX SIX

Bandhu Social Welfare Society Organogram

BSWS is a national CBO implementing a male sexual health programme for vulnerable populations