

# **Faith, Cultures and Sexualities**

**A pilot study on the impact of Islamic beliefs, traditions and customs on Muslims who have sex with other males**

## **Study Report**

**Naz Foundation International**

**International HIV/AIDS Alliance, Brighton, UK  
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## **Naz Foundation International (NFI)**

Naz Foundation International (NFI) is an international MSM agency headquartered in the UK, but working in South Asia on policy, advocacy and support on male sexualities. We provide technical, institutional and financial support to MSM networks in South Asia aiming to develop self-help responses to sexual health needs.

NFI has conducted a broad range of situational and needs assessments among MSM in a variety of cities in the countries of South Asia, along with developing a range of implementation and management tools, training programmes, and other resources. We have assisted in the development of some 28 MSM sexual health community-based projects in the region.

Shivananda Khan is the Chief Executive and founder of Naz Foundation International and has been the principal researcher and developer of these studies and tools.

For more information on NFI please see their website [www.nfi.net](http://www.nfi.net).

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## Executive Summary

This report presents findings from a pilot study exploring the impact of Islamic beliefs, traditions and customs on South Asian Muslim males who have sex with males. The study was carried out by Naz Foundation International on behalf of the International HIV/AIDS Alliance. The study found that Muslim *kothi*-identified men who have sex with men<sup>1</sup>, experience a daily conflict between sexual practice, gender orientation and their Muslim beliefs. This leads to an emotional life that swings constantly between pleasure and depression.

Each day the study respondents are confronted with tensions between their own desires and the practice of being a Muslim. This is a situation that offers no resolution as they struggle to maintain some sense of emotional balance. Whilst the need for affirmation was felt strongly, many participants felt disempowered, denied, and socially excluded, from family, friends, society, and from the mosque. They reported feeling that they could never be true to themselves. Faced with this situation many *kothis* found ways of expressing their pain that were harmful. Self-harm was found to be a significant problem with almost half of respondents, forty two percent (26/61) having experienced suicidal thoughts. Fifteen per cent of respondents (9/61) had attempted suicide with a further thirty nine per cent (24/61) having deliberately self harmed through cigarette burns, razor blades, or other instruments.

With high-risk behaviours and multiple partners *kothis* live lives that are highly vulnerable to abuse, violence and human rights violations. Against this background *kothis* experience HIV and sexually transmitted infections as a punishment that they deserve simply for being who they are. With lives that are fundamentally disempowered, with a psychological framework that tells them that they are “bad Muslims”, and a belief that they deserve to be punished, participants in the study questioned the point of practising safer sex. Moreover *kothis* live in an environment where transmission risks are not confined to a small group of self-identified *kothis*, but affect their sexual partners. These partners are often from the general male population and may be married and/or have other female sexual partners. It is not difficult to imagine the consequences of such inner turmoil and despair.

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<sup>1</sup> The Annex to this report offers a detailed discussion of terms pertaining to male-to-male sexuality in South Asia



## Background to study

Male-to-male sex is a significant phenomenon in South Asia. One of the primary constructs of these sexual practices and behaviours is based on gender/sex roles and identities arising from constructions of masculinity and femininity. To be a feminised male, such as self-identified *kothis* and *hijras*, leaves one extremely vulnerable to regular experiences of stigmatisation, social exclusion, violence and sexual abuse. The driving force of such personal and social abuse arises, not from their involvement in male-to-male sex, but that of the gender/sex roles that they perform. In other words it is the performance of ‘male femininity’ that is seen as problematic. The term “boys will be boys” is often used when speaking of the masculine male who penetrates. Similarly *masti*, or mischief, is used to describe the manner in which these men fulfil their sexual needs. As a “real man” he merges easily and invisibly into the general male population.

Such experiences for the feminised MSM create conditions of high risk in the context of HIV/AIDS and sexually transmitted infections. Disempowerment, vulnerability, and isolation often frame sexual encounters and partnerships. This vulnerability has many causes. It arises from sexual practices and because of the construction of penetrative masculinity and sexuality. The social and cultural values that demean the feminine also play a part. In cultures that socially police its females and treat them as sexual objects this extends to feminised males who have sex with males.

For many, religious belief can provide a source of comfort and solace, as well as a position in community and society. But what occurs when desire, sexual practice and gender variance are believed to be at odds with religious belief? Many males who have sex with males, particularly those with feminised identities, find themselves in a situation of double jeopardy. On one the one hand their sexual and gender choices are highly stigmatised by society and on the other their religious belief also stigmatises their choices. This may be in part due to a lack of knowledge, misinterpretations, and incorrect information regarding what specific religions have to say about alternate sexualities and genders.

Naz Foundation International and the International HIV/AIDS Alliance work in South Asia among males who have sex with males, and are involved in exploring ways that can reduce vulnerability and risk. Too often, programmatic approaches have tended to focus on the actual behaviours of individuals, and very little attention is placed on the psychosocial and religious framework in which male-to-male sex occurs. We need to find ways of effectively addressing psychosocial needs as a key element in building an enabling environment in which risk reduction strategies for the prevention of HIV/AIDS can be sustained.

## Purpose of the study

Against this background this study forms the second part of a project exploring the impact of Islamic beliefs, traditions and customs on South Asian Muslim males who have sex with males. The first part of the project consisted of a literature review on Islamic texts and other writings on the issue of Islam and its views on homosexuality. The report arising from this review was completed in October 2005 and is intended to be used as a companion document to this study<sup>2</sup>.

The second part of the project involved conducting a qualitative study on the impact of religious belief and knowledge on individual Muslim males who have sex with males. The aim of the study was to gain an insight into how the apparently diametrically opposed value systems of religious belief and socially disavowed sexual practices are expressed within individual Muslim males who have sex with males. Islam was selected as the first, of what is hoped to be a series of such studies reflecting other religions.

## Key themes and questions

Given the above the key question was “How do religious and cultural beliefs impact on males who have sex with males in South Asia?” Other questions to explore were:

- What does religion say about male-to-male sex?

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2 A Glimpse of the Beloved: A Reading of the Texts, October 2004

- What impact does one's religious teachings have on one's sexual/gender behaviours and identities?
- What are the psychosocial implications of these teachings and beliefs?
- How does one incorporate religious identities into one's sexual/gender identities?
- How is any conflict between knowledge, belief and practice managed and what are the consequent experiences?
- What knowledge does one have of one's own religious teachings?

Because of the nature of the subject matter of the study, along with the fact that study participants would be drawn from the membership of local self-help HIV/AIDS prevention projects, it was decided not to explore the level of knowledge around sexual health issues. Based on the experience of NFI it was believed that significant levels of existing knowledge would be a safe assumption. It was also felt that to have additional issues raised in interviews and FGDs would lengthen the time for these processes beyond a significant comfort level.

Further this study did not seek expert opinion from religious teachers. Rather it is concerned with the ideas of the average male who considers himself a Muslim and who is also involved in male-to-male sex. In particular the study focuses on those with gendered identities, such as *kothis*. A number of themes with related questions were developed for use in the study. These are listed below.

### Knowledge of Islam

- Do you define yourself as Sunni, Shi'ite, or Sufi Muslim (or any other)?
- What do you know about Islam?
- Where did you get your knowledge of Islam?
- What is your knowledge of the *Quran*, *Hadith* and *Sharia*?
- Did you or do you read the *Quran* yourself? In Arabic? In another language?
- Did you try to find any non – Muslim writer's translation of *Quran*?
- Have you gone through the *Sharia*? The *Hadith*?

### Islam, masculinity and sexuality

- What do you think Islam has to say about:
  - Being a man/Being a woman
  - Being a *kothi*/Being a *panthi*
- How do you perceive yourself as a man?
- What is the difference between being penetrated and penetrating according to what you know Islam says?
- What do you about Islam and sex between men? Between a *kothi* and a man?
- What are considered shameful body parts in Islam.
- What do you consider unclean sexually?
- What does Islam say about sexual practices and cleanliness?
- Where did you get this knowledge?
- Where did you get this knowledge?

### Islam and the sexual self

- How did you feel about your first sexual experiences?
- At what age did first realised that you desired to have sex with a man?
- At what age did you realise you were a *kothi*?
- How do you feel about being a Muslim and having sex with a man?
- As a *kothi*?
- Who knows about your identity? About your sexual behaviour?
- How do they respond to you?
- What does love mean to you?
- Which is more important to you: being a Muslim or being a *kothi*?

## Religious, family and cultural expectations

- What do you believe Islam expects of you as a man? As a *kothi*?
- What do you think about marriage? Do you want to get married? Why?
- According to Islam what are the roles of a:
  - Father
  - Mother
  - Son
- Where did you get this understanding?
- According to Islam how should a husband behave towards his wife?
- How should a wife behave towards her husband?
- What is the importance of marriage in Islam?
- What makes a good man? A good husband?
- What is your relationship with your father? Mother? Brothers? Sisters?
- If married, what is your relationship with your wife? Children?
- How does your marriage affect your standing in the society?
- Why do you think there is so much violence against *kothis*?

## Impact of Knowledge

- How important is Islam in your life? Why?
- How does Islam affect the lives of Muslims?
- How much do you follow Islam in your life? What do you do?
- Who is a good Muslim? Who is a bad Muslim? Why?
- What does a Muslim identity mean to you?
- As Muslim, how do you feel about yourself?
- Do you feel ashamed or guilty about being who you are?
- Has these feelings affected your sexual behaviour?
- Have you ever felt suicidal because of your religious beliefs?
- What do you pray to Allah for?
- Do you look for positive examples in Islam/*Quran* that support your identity/sexuality?
- What information do you need? Who can you get this from?
- What information would you like to have on alternate sexualities in concern with Islam?

## Methods

A literature review was conducted on religious texts and other writings, exploring what was said and believed about masculinity, sexuality, gender, and same-sex behaviours, along with religious duty, social obligations, and family expectations. Following this it was decided that the study would be conducted through focus group discussions (FGD), semi-structured one-on-one interviews, and questionnaire exploring a range of issues. Linking with partner agencies of NFI at each study site, a focus group discussion with 10 Muslim identified men, and 5 semi-structured one-on-one interviews were conducted. This gave a total study cohort of 60 individuals, 4 focus group discussions and 20 interviews. A quantitative questionnaire was also administered to each person involved in the study. Each focus group discussion lasted approximately 2 - 3 hours, with a similar amount of time for each interview. The focus group discussions and interviews were conducted in local languages, and where necessary, the partner project provided a translator. The methods used to elicit information during focus group discussions were free-listing and ranking, along with group discussion. Free listing has a number of advantages in such discussions that include:

- Respondents can stimulate one another's thinking through the free exchange of ideas.
- Often visual representation can clarify more clearly what is being said.
- Easier to refer to specific statements being made over a period of time
- Cross-checking and verification is much easier
- Useful tool for reference

## Study instruments

Guides were developed for the FGD and interviews, along with a quantitative questionnaire, and field-tested in the first study site of Lucknow. Following the study, a discussion was held with study participants, the principal investigator and the Project Monitor to discuss whether there should be any amendments to the Guides and questionnaire. It was decided that these instruments fulfilled their function adequately and that there was no need for any amendments. These were then used for the remaining sites<sup>3</sup>.

## Study sites & Study partners

The study was conducted in three cities in India that had significant Muslim communities and one city in Bangladesh. The study partners were as follows; In Lucknow the study partner was Bharosa; in New Delhi it was Dart; in Hyderabad it was Mithrudu and in Dhaka it was Bandhu Social Welfare Society.

## Participant selection

The study partners recruited participants through their own project networks via a snowballing process. Participants were primarily *kothi*-identified, but in Dhaka, two *kothis* brought along their *panthi* partners. The numbers participating in the FGDs for New Delhi and Dhaka were 13 and 11 respectively, which was above the recommended number. This was because other participants brought along friends, and it was felt at that time that it would not be appropriate to ask them to leave. Cohorts were of a limited size, up to ten participants in a focus group discussion, 5 interviews, and a questionnaire administered amongst them. This gave a total of 75 respondents. In the cities of Dhaka, Delhi, and Hyderabad, translation was provided by the local partner agency for the FGDs, the interviews, and the questionnaire. All participants were 18 years old or above and informed consent was obtained prior to the research being conducted.

**Table 1: Number of study participants**

City	FGD participants	Interviews
Hyderabad	10	5
Lucknow	7	5
New Delhi	13	5
Dhaka	11	5

## Thematic data analysis

While data analysis of the questionnaire was done using MS Excel the data drawn from the interviews and the FGD was analysed manually following thematic divisions identified in the guides.

*Thematic analysis is a process for encoding qualitative information. The coding requires an explicit “code.” This may be a list of themes; a complex model with themes, indicators, and qualifications that are causally related; or something in between these two forms. A theme is a pattern found in the information that at minimum describes and organizes the possible observations and at maximum describes and interprets aspects of the phenomenon...A theme may be identified at the manifest level (directly observable in the information) or at the latent level (underlying the phenomenon). The themes may be initially generated inductively from the raw information or generated deductively from theory and prior research. The combination or integration of a number of codes in a study is often called a codebook...(Boyatzis, 1998, pp. 4-5.)<sup>4</sup>*

<sup>3</sup> Copies available upon request from the author,

<sup>4</sup> Boyatziz, R.E. 1998. *Transforming qualitative information: Thematic analysis and code development*. Thousand Oaks, CA: Sage Publications.

Briefly, the study explored how much the study participant knew and understood the teachings and texts of Islam in relationship to male-to-male sex, gender roles, and religious expectations, along with socio-cultural expectations.

Thematic divisions of the FGD and interview guidelines were followed as the common framework of analysis. Issues under each theme were considered as sub-themes for analysis. This approach facilitated the analysis of each group within a compatible framework. Statements made were analysed for content, meaning, and significance, according to specific theme and sub theme. These commonalities and differences were then recorded on a spreadsheet, which allowed comparisons within the groups as well as between groups. With these comparisons, the analysis was further refined to commonalities across groups and differences between groups. With regard to the interviews, individual differences could also be noted.



## Results/study findings

### Socio-economic status

The age of participants ranged from eighteen to forty, with eight in the eighteen to twenty age range, seven in the twenty one to thirty age range, and sixteen in the thirty one to forty age range

Fifty two respondents had attended school whereas nine had not. Twenty-three participants finished primary education, 16 completed secondary, 2 completed higher education, and 11 completed college. Twenty three participants went to government school, twenty eight to private school, and 7 to a madrasa (which provides religious studies). Seven participants lived alone, fifty one with their families, and two with relatives. Forty nine (49/61) participants (80%) were employed in a range of primarily low-income work, while fourteen respondents (23%) reported doing sex work. 19 participants (33% - 19/57) reported incomes below 2000 Rps (or Taka in the case of Dhaka; equivalent to below US\$45 in India and US\$30 in Dhaka) per month, while 37 participants (65% - 31/57) stated they earned between 2000 – 5000 Indian rupees (or 2000 – 5000 Taka) per month. Only 1 person stated that they earned more than 5000 Indian rupees per month. Out of the 61 participants, 46 stated they were not, and had not been married. 15 participants were married. It should be noted here that marital status does not reflect choice, but rather the age of the respondent.

### Knowledge of Islam

All participants identified themselves as practising Muslims. Fifty nine participants (97% - 59/61) reported that Islam was very important in their lives, thirty five participants reported doing *namaz* (prayers) at least once a week, while four stated that they did *namaz* 5 times a day. Along with this, thirty six respondents (59% - 36/61) stated they went to the mosque only on Fridays, 7 reported going to the mosque every day.

Most of the study participants believed that they had a good knowledge of Islam and its beliefs and teachings. This knowledge was based on familiarity with religious practices along with what they have been told or taught by religious teachers, respected elders, and family elders. Specific knowledge of content and meaning was low. The primary source of information on Islam was through the mother (78% - 45/61), followed by the father (64% - 39/61), and a religious teacher (33% - 20/61).

Sixty two per cent (38/61) stated that they had read the *Quran*, but only eight participants had read it in their own language, while the remaining thirty had read it in Arabic. However reading in Arabic does not mean that one understands what one reads, since the traditional method of teaching the *Quran* is to learn the Arabic text in the *Quran* itself, and not Arabic as a language. Similar issues were expressed in terms of reading the texts on the *Sharia* and the *Hadith*.

Further there appeared to be a great deal of misunderstandings and misinformation regarding the differences (and similarities) between Sunni and Shia Muslims. As one Sunni respondent stated, “Shi’ites go to Durgah which is against Islam”, or as another said “ Shia’s religion ask them to hurt Sunnis. I have heard that.” Such differences could easily lead to significant tensions between these two systems of Islamic practice, something that does occur across the Muslim world.

### Islam, masculinity, and sexuality

Masculinity was defined in terms of being a “real man” as understood within normative constructions in South Asia, with masculine traits of leadership, breadwinner, marriage, reproduction, large penis, facial and body hair, wearing manly clothes, and leadership. Islam speaks of clear gender distinctions between men and women and the specific gender roles they have. Men are seen as superior to women. Similarly, femininity was defined in terms of beauty, physical form (breasts and vagina), being married, wearing woman’s clothes, obedience, silence, housework, and being a follower, and being confined to the domestic space. Significant males in her life define a woman’s selfhood: father, husband, and/or brother. All participants recognised normative gender and gender differences between men and women as understood

in South Asia, that is gender being defined by clothing, mannerisms, space, biology, language, sex roles, and performance. According to participants these differences were biologically and religiously ordained, as “being the will of Allah”.

**Table 2: Gender differences**

The table produced below gives the results of the focus group discussions identifying distinct gender roles and identities.

Male	Female	Kothis
<ul style="list-style-type: none"> <li>Looks after his family.</li> <li>Earns money.</li> <li>Teaches his children right and wrong.</li> <li>Should have a beard.</li> <li>Dress like a man.</li> <li>Sexually penetrates.</li> <li>Gets married.</li> <li>Can have four wives.</li> <li>Pleases his wife.</li> <li>Performs heavy work.</li> <li>Needs to do sex regularly.</li> <li>Can't control sex drive.</li> <li>Has a penis.</li> <li>Can last a long time in sex.</li> <li>Has short hair.</li> <li>Is a good Muslim and does <i>namaz</i> regularly.</li> </ul>	<ul style="list-style-type: none"> <li>Has breasts and vagina.</li> <li>Wears women's clothes.</li> <li>Is sexually penetrated.</li> <li>Wears beautiful clothes.</li> <li>Is obedient to her husband.</li> <li>Pleases her husband.</li> <li>Listens to her husband.</li> <li>Does all the housework.</li> <li>Has long hair.</li> <li>Should do <i>purdah</i>.</li> <li>Is a good Muslim and wears <i>burkah</i>.</li> <li>Does not smoke or drink.</li> <li>Can only have one husband.</li> </ul>	<ul style="list-style-type: none"> <li>Biologically male but feminine personality.</li> <li>Talks and walks like a woman.</li> <li>Is sexually penetrated.</li> <li>At times wears women's clothes.</li> <li>Likes manly men.</li> <li>Mixes mainly with women.</li> <li>Has a penis but is ashamed of it.</li> <li>Less vigorous than a man.</li> <li>Plays feminine role.</li> <li>Prefers not to marry but is forced to.</li> </ul>

Whilst this is interesting it is difficult to separate out religions values and socio-cultural ideas in regard to gender and gender differences. Both are intertwined in mutually reinforcing systems expressed by religious teachers, family members and other socialising agents. From other studies, such gendered differences are internalised and accepted as the natural order of things by an early age.

**Table 3: Self-labelling**

Self identified label	Lucknow N=12	Delhi N=18	Hyderabad N=15	Dhaka N=16	Total N=61
Kothi	7	15	14	12	48
Panthei	0	0	0	3	3
Double decker	5	3	1	1	10
Heterosexual	0	0	0	0	0
Homosexual	0	0	0	0	0
Gay	0	0	0	0	0
Other	0	0	0	0	0
No response	0	0	0	0	0

For *kothi*-identified participants, their sense of self is primarily identified with the feminine and as persons to be sexually penetrated. Several of these participants also expressed a range of other concepts in regard to understanding themselves as biological males and their *kothi* identity, which ranged from “socially we

are a man, but personally we are *kothis*,” to “we are men at home, but *kothis* outside”. For men identified as a *panthi* (this is the *kothi* term for “real man”) there is no difference between their sense of being a normative male and their sexual practice. They penetrate and therefore they are a man. The sex of the object of penetration is not relevant. That person is not a man.

The term *double-decker*, is a recently emerging label for an identity premised on mutually exchangeable sexual roles. Thus the person who penetrates can also be penetrated. *Kothis* tend to denigrate this label, and insist such persons are really *kothis*, but do not want to admit this, as it is a stigmatising label.

All participants agreed that a man having sex with another man, whether penetrating or being penetrated, was against Islamic teachings, sinful, and is strongly condemned. Some respondents believed that either act was equally sinful, while others stated that being penetrated was more sinful, and others stated that the person penetrating is committing the bigger sin. All participants agreed that being a *kothi* was against the natural order of things and unIslamic. In the teachings there is only men and women, who should behave in the proper way that their biological sex determines.

Islam reflects and reinforces these values, as various texts speak of “men without vigour” who are less than men. *Kothi*-identified participants (79% - 48/61) primarily saw themselves as less than a man, but more than a woman, while expressing their sexuality in terms of being penetrated, and therefore “woman-like”. Male-to-male sex is shameful, but being penetrated, whether anally or orally is even more shameful. Giving oral sex was seen as highly shameful because the mouth is used to pray and recite the *Quran*. Thus those who do these acts expressed strong feelings of sinfulness and shame as receivers more than those who penetrate. *Kothi*-identified participants particularly felt ashamed to give oral sex because of this, and would prefer being receptive to anal sex rather than oral sex as this would be a less sinful act.

For many participants sexually transmitted infections were seen as a punishment from Allah. Punishment and shame were reoccurring themes. For most *kothi* identified participants becoming infected with HIV, or other sexually transmitted diseases, was a deserved punishment since this behaviour was going against Allah’s will. To use condoms was incorrect since this would interfere with their punishment.

Along with this several *kothi*-identified participants expressed a preference for having sex with a Muslim rather than a non-Muslim. This was because they believed it was less sinful. Moreover they believed Muslims were cleaner around the penis because they were circumcised. All participants expressed negative feelings of shame and guilt about their sexual acts and desires while many stated that they were too “addicted” to this for them to stop. They expressed a range of ways of trying to deal with this sense of uncleanliness, such as the need to take a bath, offer *namaz*, make sure their sex partner was ‘clean’, preferring anal sex to oral sex, and learning to cope with their sense of shame.

## Islam and the sexual self

Forty eight participants out of sixty one defined themselves as *kothis*, three as *panthis*, and ten as *double-deckers*. Sixty out of sixty one participants stated that they were sexually active with other males, irrespective of marital status. While four participants stated that they had sex with another male every day, thirty nine stated that they had male-to-male sex more than once a week, and thirteen stated more than once a month. Only four stated that they had male-to-male sex less than once a month. When asked to estimate the number of sex encounters with males, the total number in a week as a combined figure of all the participants was 191, while that for a month was 863. This is a significant rate of sexual activity. In terms of what was the normal sexual practice, fifty four participants reported being anally penetrated, eighteen penetrating, twenty giving oral sex, and fourteen receiving oral sex. This reflects the self-identifying labels.

Regarding sexual debut, thirty four participants (56% - 34/61) reported their sexual initiation by the age of fourteen years, of which three stated that they began having sex before the age of ten years. Twenty participants began having sex between the ages of fifteen years to eighteen years, while seven began having sex after the age of nineteen years. *Kothis* tend to be initiated into sex at a much earlier age than other males who have sex with males. When asked to identify their first sexual partners, ten participants reported their brothers, nineteen reported neighbours, eighteen their friends, and thirteen others did not

respond. In terms of the first sexual practice, twenty eight respondents (46% - 28/61) reported being anally penetrated, sixteen reported thigh sex, eight masturbation, and ten oral sex. However, while thirty four reported good feelings about their sexual debut, sixteen stated that they felt bad, and a further eleven stated that it was not so bad.

Sexual debut with relatives and neighbours was common, with a surprisingly high number of brothers accessing their young brothers. It should be noted that single room accommodation is unusual in low-income families, so many brothers share beds. This sexual behaviour amongst males in shared beds has been noted in a range of NFI studies.

**Table 4: First sexual act**

Sexual act	Lucknow N=12	Delhi N=18	Hyderabad N=15	Dhaka N=16	Total N=61
Anal (penetrate)	1	3	2	0	6
Anal (being penetrated)	3	10	8	7	28
Oral (give)	3	1	0	1	5
Oral (receive)	3	1	0	1	5
Masturbation	2	2	2	2	8
Thigh sex	3	4	3	6	16
Other	2	1	0	0	3
No response	0	0	0	0	0

We notice here that a significant proportion of the young males were being anally penetrated in their sexual debut. Combined with a growing sense of femininity, this eventually brings about a conflation regarding desire, sense of self, and identity. For *kothi* participants, the age of recognising their desire was between 8 years to 19 years.

**Table 5: Frequency of sex**

Frequency	Lucknow N=12	Delhi N=18	Hyderabad N=15	Dhaka N=16	Total N=61
Every day	0	0	4	0	4
More than once in a week	8	9	8	14	39
More than once in a month	3	7	3	0	13
Less than once in a month	1	2	0	1	4
No response	0	0	0	1	1

With significant frequency of sex acts, the relatively high level of male sex work (23% - 14/61) as a survival strategy, and anal penetration being the most common (and preferred) sex act, there is a situation of high risk and vulnerability.

As practising Muslims, participants felt “very bad”, concerned about what would happen after their deaths in terms of Allah’s judgement, and whether they would be punished and go to hell.

Most *kothi*-identified participants believed that Allah had made them the way they were in terms of sexual desire and gender choice. They felt it was impossible to change to “become a normal man”, and for them the question they always asked was “Why did Allah make me this way?” Several said that Allah made them like this, and therefore they could not help themselves, and as long as they do their religious duties, Allah would forgive them. Others felt that by getting married and having children would make things easier, because then their family will take care of them when they get old, and their son would read the *Quran* over them when they die.

All *kothi*-identified respondents also reported high levels of abuse, condemnation and stigma by others because they were *kothis*. Thus they constantly yearn for love, a regular partner, perhaps to live with a

man who loves them. But there was also recognition that such love would always be disrupted because of the need for their partner, if not themselves, to get married as family and society demands. In regard to seeking knowledge of Islam's attitudes towards male-to-male sex, 26 participants (43%) asked another person regarding this and of these participants, 19 (73%) stated they were unhappy with the response.

Finally, in response to what participants felt was more important to them, being a *kothi* or being a Muslim, only 2 stated that both were equally important. The remainder believed that being a Muslim was more important. For many participants, expressing a Muslim identity was also a political statement where in India, Muslims are a minority, and where in other regions Muslims feel under threat from what they deem a "global conspiracy" against them. Thus feeling vulnerable as Muslims, expressing themselves as Muslims allows them to become a part of a larger community.

*We are born as a Muslim and we are like this. We have a complaint against Allah. Why He made us so? At first we feel good. We'll have a very bad death. There will be nobody to take care of us. Who will read the Quran for us after our death? Kothi who is married is very lucky, and will be forgiven but what about us. Nobody will be there to take care of us. We can be forgiven because of our children.*  
Interviewee

## Religious, family, and cultural expectations

Religious, family, and cultural expectations were seen as a whole and reflected the community-based framework of Islam. Thus for men, expectations were based on normative gender role and performance as a man, often in opposition to that for women. *Kothis*, of course, have no social role or space.

Thus, a man should fulfil his duties and obligations, act like a man, marry and give his children a good education, financially support his family, take care of his parents and his wife, and be a good Muslim. As a part of his religious duties he has an obligation to give his children good Islamic knowledge and teach them how to behave as good Muslims, as well as help them to get married.

*Father should teach child about Islam, all good and bad things, look after them and get them married. Door of paradise is beneath his feet. Mother breast-feed child. She does not want her child to be hurt, the paradise is beneath her feet. Son should follow Islam. Look after parents.*  
Interview

Gender boundaries should be kept strictly enforced. Females are to be socially policed and inaccessible from other males after reaching menarche except to their male relatives, until marriage. Islam also teaches different family and social roles for husband and wife, where the man's duties tend to be focused on external relations and ensuring that children learn and understand their moral obligations according to their gender, while the wife is responsible for domestic arrangements. One's wife should behave well towards her husband, obedient to his wishes, listen carefully to what he wants, and looks after the house and family needs. The wife must be respectful of her husband's wishes. In defining what makes a good husband or wife, the consensus was that both should follow the expected gender and social roles as demanded by Islam. Being faithful, behaving well towards each other, respecting each other, and not being violent to each other.

Marriage is both socially and religiously compulsory. It is the duty of the parents to make sure that their children are married, and it is the children's duty to obey their parents in their wishes, and to take care of

them in their old age. By refusing to get married a person is not being a good Muslim. Marriage therefore, is a duty to Allah, a duty to family, and a duty to society. Choice is not an issue.

Married respondents believed that being married enhanced their standing within society, getting respect and treated as elders. It also enhanced one's sense of manhood, both personally and socially.

*My status has increased in the society. It is reply to those who thought that I am not a real man.*  
*Interview*

## Impact of knowledge

There was great pride expressed as a Muslim, despite all the problems participants faced in regard to the sexual practices, behaviours and identities. A practising Muslim, fulfilling his religious obligations, has a place in society and is recognised as a part of the community. Being a Muslim meant following rituals and traditions. For example offering *namaz*, going to the mosque regularly, fasting when one is supposed, celebrating the range of festivals, and going on *Haj*. In that sense being a Muslim is around observing and performing one's religious duties and obligations as laid out in the *Quran*, *Sharia* and *Hadith*. It is also being observed by others and Allah in fulfilling these duties. One doesn't question, one accepts.

In contrast, having same-sex desires, displaying *kothi* characteristics and being sexually penetrated was seen in opposition to Muslim identity. This led to expressions of guilt and deep shame and feelings of depression. Islamic concepts of heaven and hell were a felt reality in their lives and at times created considerable tension and fear. The feelings of pain and loneliness that so many stated they experienced were felt to be deserved and could not be avoided.

*Kothi*-identified participants would like to change, but felt they could not, and believed that they were in a constant state of sinfulness. They perceived their lives as an either/or situation and as a constantly losing proposition. Either they stop their sexual practices and behaviours and become a "proper Muslim", or they stop being a Muslim. For them there was no way out. They reported trying to alleviate this through fulfilling their religious obligations such as offering daily *namaz*.

Feelings of anxiety, fear and depression were exacerbated by fears of growing old and unattractive and of being alone. The social compulsion of marriage was also feared. This is particularly true for *kothi*-identified participants who find their masculine partners getting married and leaving them. There appeared to be very few positive feelings about being a *kothi*. While *kothis* primarily formed social and friendship networks with other *kothis*, loneliness, the yearning for a lover and to have an opportunity to "marry a man" and be "a good wife to him" seemed common feelings. Much of the depression and self-damage appeared to arise from losing a "husband" when he got married to a woman.

Self-harm was a significant problem with almost half of respondents, forty two percent (26/61) having experienced suicidal thoughts. Fifteen respondents (9/61) had attempted suicide with a further thirty nine per cent (24/61) having deliberately self harmed themselves through cigarette burns, razor blades, or other instruments.

**Table 6: Self damage**

Response	Lucknow N=12	Delhi N=18	Hyderabad N=15	Dhaka N=16	Total N=61
Yes	4	4	5	11	24
No	8	14	10	5	37
No response	0	0	0	0	0

**Table 7: Have you ever felt suicidal, or tried to commit suicide?**

Response	Lucknow N=12	Delhi N=18	Hyderabad N=15	Dhaka N=16	Total N=61
Yes	4	5	6	11	26
No	8	13	9	5	35
No response	0	0	0	0	0

Finally, participants stated that they would like to have more information on Islam and what it says regarding masculinities, sexualities and same-sex behaviours, being careful to recognise the differing interpretations of the texts. Further they would also like to have positive examples that are meaningful to them, perhaps of historical figures from Muslim history. A further expressed need was that of being able to access counselling specific to their religious needs. Most participants would have liked the opportunity to speak with knowledgeable persons who would respect them as they were, and not judge them.

**Table 8: Emotional support**

Source	Lucknow N=12	Delhi N=18	Hyderabad N=15	Dhaka N=16	Total N=61
Kothi friends	6	13	13	14	46
Panthi friends	0	0	1	0	1
Parik friends	0	0	0	0	0
Other friends	4	4	1	2	11
Family	1	0	1	0	2
NGO	1	0	0	0	1
Others	1	2	0	0	3
No response	1	1	0	0	2



## Final comments

For most Muslim *kothis*, their lives are a constant contradiction between what is expected of them as biological males, and their own lived experiences. There is no balance, no resolution, but an experience of denial - denial of themselves as Muslims, and denial of themselves as men. An external experience of abuse, violence, stigmatisation, along with social exclusion, constantly reinforces an inner experience of denial, self-stigmatisation, and disempowerment.

It is clear that for most *kothi*-identified males, these beliefs and experiences, along with the conflicts between their inner feelings and emotions with the religious, family, and cultural compulsions that face them, rapidly became a source of pain, loneliness, shame and fear, bringing social exclusion, marginalisation, suicidal tendencies, and a sense of hopelessness. School dropout for young feminised males is a common experience. *Kothi*-identified males believe that often they are more handicapped than women because they have no social role. These feelings can only increase their vulnerability to sexual violence and HIV/STI infections.

And of course, as this study showed, if there is a belief that being a *kothi* in terms of desire, behaviour, and practice is sinful and deserve punishment, and that disease is seen as punishment, this has enormous implications for promoting safer sex behaviours. With no place in the world that gives them meaning and significance, then they only way that *kothis* can affirm themselves is through their sexual practices, along with performing Islamic worship and hope that Allah will forgive them on Judgement Day.

*Kothis* are performing identities, not only in terms of body language, at times dress, mannerisms, language and preferred sexual practice that are at odds with the way religion, culture and society determine how men should behave. They are less than men, and Islam reflects a central belief in a strong gender division of function and place, with rules that define each person based on biological sex. Further, it is a religion that is based on the function and stability of the community as a whole, and not so much on a personalised belief and relationship with Allah. Thus how you behave and how you are perceived intertwine into a complex whole which then defines you as a Muslim.

For *kothi*-identified males, this is an enormous challenge, and the response to this often becomes sexual, with high-risk activities, multiple partners, and unprotected sex.

Unless a way can be found to reconcile these two apparently contradictory systems of thought and lived experience, to find a way to reduce self-hatred and denial, to enable empowering processes that affirm their well-being, righteousness, and humanity, to provide a way that will allow them to accept themselves as sexual beings with alternate choices, and as Muslims, it will be extraordinary difficult to promote well-being and sexual health amongst males who have sex with males who are also practising Muslims, particularly those who self-identify as *kothis*.

## Recommendations

It is highly risky to make appropriate recommendations to resolve the conflicts that Muslim *kothi*-identified males in particular, find themselves involved with, along with other Muslim MSM.

However, there is a clearly identified need that the study makes visible. It is clear that it is not enough just to promote risk reduction strategies amongst Muslim MSM. There needs to be considerable work around developing self-worth, empowerment, and love of oneself that would enable *kothis* to be a practising Muslim and *kothi*-identified.

The following recommendations have been made to address some of these issues:

- To increase knowledge of the Islamic texts and to provide access to the range of interpretations of these texts, particularly in reference to differing masculinities and sexualities. This would require ensuring that a range of documents is produced in local languages that contain such material.

- To ensure that appropriate counsellors are available to MSM sexual health programmes who work with Muslims that are skilled in psycho-social-religious issues and have a good knowledge of Islamic teachings and the range of interpretations of Islamic texts.
- To ensure that “hotlines” are available which can provide telephone counselling not only on issues of HIV/AIDS and sexual health, but also on a range of psycho-social and religious concerns which can also provide emotional support in times of emotional crisis.
- To ensure that advocacy programmes are adequately and appropriately conducted where Muslims who are MSM abide, which can address the violence, abuse and harassment that so many face, particularly among those who are *kothi*-identified

# Annex 1

## Construction of male same-sex behaviours in South Asia

Sexual identities, masculinities and sexualities take shape within psychosocial and historical processes, which in turn are contextualised by religion, culture and language. Different cultures will often contextualise similar words and phenomena so as to take on different meanings with inherent subtleties typical of that culture. This is true of the South Asia region. While consisting of several countries, the region has a shared history and certain cultural and religious values that enable us to determine some common denominators within the phenomena of male-to-male sex.

In this context, and from the evidence, Euro-American understandings and discourses on "gay identities", heterosexuality, homosexuality, bisexuality, or even the use of the term "sexual minorities" are misleading, and actual invisibilises to a significant extent the range and level of male-to-male sexual activities and those involved in them.

South Asian cultures are supremely patriarchal, gendered and hierarchal, so that the word MAN is defined not so much by biological age, but by gender roles and performance, religious rituals and family duties and obligations. Those who fall outside such normative masculinity would not be defined as MAN, but as NOT-MAN. In this situation, the penetrated sexual partner is seen as NOT-MAN, while the penetrator perceives himself, and is perceived by others, as MAN.

This perception is further reinforced by socio-cultural realities as the invisibilisation of sexual behaviours, gender segregation, social policing of women, an acceptability of male homosociability and homoaffectionalism, male dominance over public space and public discourse, a culture of shame where family and community respect and honour holds sway, compulsory and arranged marriage, pressure of reproduction (particularly of male children), an understanding of sex only in its reproductive sense, joint and extended families, and the negation of the self before the community/family. This behaviour is further defined by gender roles attributed to males and females within society that are deemed biologically driven, especially when important defining events in life like assumption of adult-hood are defined by such gender roles.

Thus in these cultures those males who are sexually penetrated would be perceived as less worthy, feminised, debased males, and would be highly stigmatised leading to a range of violence and abuses, as well as sexual accessibility without diminishing the masculinity of the penetrator. The male penetrator is not deviant and is a part of the general male population. It is the penetrated that is subjected to the perception of deviancy.

And within a homosocial and homoaffectionalist culture, along with the general invisibility of sexual behaviours, sexual boundaries between males can be easily crossed in appropriate spaces, at the appropriate time, "under the blanket", and "in the dark".

What seems to therefore exist is a range of masculinities and gender variance with differing contextualisation of sexual behaviours, sex partner choices, perceived sexual needs, pleasures and desires.

Thus for some MSM there are frameworks of specific male-to-male desire (based on object choice/gender), gendered identities and visibility. For others who sexually access these males, often desires are based around discharge and specific sex acts (and perhaps gendered sexual object choice), perceiving themselves as 'manly' and 'normal men'. Such males come from the general male population. It could be any 'manly' male given the right situation and context.

The frameworks of male-to-male sex, often substantially divergent, usually involve males who self- identify primarily as *kothi* who are generally penetrated and primarily reflect the visible face of male-to-male sex,

along with the more invisible males who take on the penetrating role in male-to- male sex (known as *giryas* and *panthis* by *kothis*). Males who are penetrated are usually perceived by *giryas* and *panthis* to be "not-men", which enables a *giryas* or *panthis* to maintain his sense of manliness and be seen as a part of the normative male society.

Male-to-male sex work is also a significant factor in many South Asian cities and towns (and perhaps villages also). A broad range of frameworks also exists here. *Hijras*, *kothis*, massage boys and men, male youth, and other males will sell sex to other males because of poverty and unemployment. Without a welfare system, and with significant levels of unemployment or low level incomes, male sex work can be a way out in terms of supporting the self and family. This is not to imply that males involved in sex work do not enjoy the sex with other males. Often they will also have a regular male or female partner.

While there are substantial networks of *kothis* in urban centres, from the very feminised and cross-dressing ones, to those who have moustaches and dress in shirt and trousers, their sexual partners could well be any masculine male, who tended to go unnoticed.

## MSM, vulnerability and stigma

It needs to be recognised that the male being anally penetrated by another male is highly stigmatised, both by the penetrator, as well as general society, and those who are perceived to be recipients of penetration are usually treated with contempt. A *giryas/panthis* or any man/male that is sexually penetrated, orally or anally, will make extensive efforts to hide his practice and/or desire, both from his friends as well as from *kothis/hijras* and others in their sexual networks to avoid such stigmatisation. It cannot be assumed that gendered sex roles are exclusively maintained at all times.

It further needs to be recognised that a similar crossing of "gendered" boundaries exists amongst *kothis*. It is also not unknown for some *kothi*-identified males to penetrate other males. But like the penetrated *giryas*, this behaviour would also be kept secret from other *kothis*.

Such stigmatisation around feminisation produces a range of human rights abuses, blackmail, violence, and male-on-male rape by local men, thugs and local police.

Not only does poverty, class and education levels stigmatise individuals along with the fact of HIV infection, but also the specific gendered role and identity that some MSM identify with. Thus are doubly stigmatised because as biological males they are sexually penetrated - and thus not perceived as men. Their feminisation, their crossing of the gender roles and barriers accepted as social norms, reinforces the stigmatisation, leading to exclusion and denial of access to services and to the social compact. This often results in such males who are living with HIV/AIDS to be stigmatised by others who are also living with HIV/AIDS but whose routes of infection are deemed "normal".

On the other hand, the masculine partners of *kothis* easily merge into the general normative male society, their sense of masculinity maintained because they are the penetrators, not of other men, but of "not-men".

Power inequality dynamics arising from South Asian constructions of masculinity, social attitudes towards feminised males and their sexual practices, sexual abuse, assault and rape, stigmatisation and poverty, discrimination and disempowerment, all configure the lives of most *kothis*. As a consequence they play a significant role in the emotional, sexual, physical and economic exploitation of feminised males, and give rise to a range of physical, psychological, and emotional problems, which further increase vulnerability and disempowerment. This disempowerment creates significant levels of suicidal impulses and self-damage, which are expressions of self-hatred and despair. And this of course leads to significant increases to risks of STI/HIV as well as impeding successful implementation of risk reduction strategies.

Many *kothis* not only face harassment, sexual violence and rape from law enforcement agents, but also from those whom they have called friends in schools and colleges, from those in positions of trust such as relatives, neighbourhood elders, elder friends, and teachers. Gang rape is not uncommon. And of course

such forced sex is always unsafe and often results in serious physical injury such as a ruptured rectum, internal haemorrhage and so on.

One of the central issues that have arisen from NFI research and understanding is that often it is effeminacy and not the factual knowledge of male-to-male sexual behaviour that leads to harassment and violence. This harassment and sexual violence results from the fact that many *kothis* do not live up to the expected normative standards of masculine behaviour. It is this belief that leads to the notion that those who are feminised can be exploited and abused and that being feminised somehow weakens the person, a notion often harboured by the *kothis* themselves.

Accepted notions around effeminacy are therefore one of the major factors that lead to disempowerment and opens *kothis* to abuse and assault and to a refusal of service provision. The fact that *kothis* themselves have internalised these notions so strongly, means that specific tools will need to be developed for *kothi* in order to empower them to start valuing their lives and enhancing their self respect so as to reduce their risks for HIV infection.

## Annex 2

### Further reading

NFI/Alliance, 2005. *A Glimpse of the Beloved – a reading of the texts*. Unpublished

NFI, 2002, 2004. *Against the Odds – the impact of legal, socio-cultural, legislative and socio-economic impediments to effective HIV/AIDS interventions with males who have sex with males in Bangladesh*.  
www.nfi.net

NFI, 2004. *MSM and Human Rights*, www.nfi.net

NFI, 2004. *MSM and HIV in South Asia*, www.nfi.net

NFI/CATALYST Consortium, 2002: *The Formulation of Reproductive and Sexual Health Among Young Men in Bangladesh*, to be published.

Aggleton, Peter, edited by: *Bisexualities and AIDS - international perspectives*, Taylor & Francis, 1996

Aggleton, Peter, edited by: *Men Who Sell Sex - international perspectives on male prostitution and HIV/AIDS*, UCL Press, 1998

Ahmed, Leila : *Women And Gender In Islam*.Yale University Press, 1992

Bouhdiba, Abdelwahab: *Sexuality in Islam*, translated by Alan Sheridan, Routledge & Keegan Paul Ltd, 1985

Dowsett, Gary: *Practising Desire - homosexual sex in the era of AIDS*, Stanford University Press, 1996

Ghousoub, Mai & Emma Sinclair-Webb, edited by: *Imagined Masculinities – male identity and culture in the modern Middle East*, Saqi books, 2000

Kakar Sudhir: *Intimate Relations - exploring Indian sexuality*, Penguin Books, 1989

Katz, Jonathon Ned: *The invention of heterosexuality*, Dutton, 1995

Khan, Badruddin: *Sex, Longing & Not Belonging - a gay Muslim's quest for love and meaning*, Floating Lotus, 1997

Mandelbaum, David G.: *Women's Seclusion and Men's Honour - sex roles in North India, Bangladesh and Pakistan*, University of Arizona Press, 1988

Mernissi, Fatima: *Beyond The Veil - male-female dynamics in Muslim society*, Schenkman Publishing Company, 1975

Murray, O. Stephen & Will Roscoe, edited by: *Islamic Homosexualities*, New York University Press, 1997

Nanda, Serena: *Neither man nor Woman - Hijras of India*, Wadsworth, USA, 1990

Pattnaik, Devdutt: *The man who was a woman – and other queer tales from Hindu lore*, Harrington Park Press, 2002

Piet-Pelon, Nancy, Ubaidur Rob, M.E. Khan: *Men in Bangladesh, India and Pakistan - reproductive health issue*, 1999, Karshaf Publishers, Dhaka

Ramet, Sabrina Petra, edited by: *Gender Reversals & Gender Cultures - anthropological and historical perspectives*, Routledge, 1996

Schmitt, Arno, and Jehoeda Sofer, edited by : *Sexuality And Eroticism Among Males In Moslem Societies*, Haworth Press, 1992

Seabrook, Jeremy: *Love in a different climate - men who have sex with men in India*, Verso, 1999

Vanita, Ruth and Saleem Kidwai, edited by: *Same-Sex Love in India - readings from literature and history*, St. Martins Press, 2000

Vanita, Ruth, edited by: *Queering India - same sex love and eroticism in Indian culture*, Routledge, 2002

Wikan, Unni : *Behind The Veil In Arabia - Women In Oman*, University of Chicago Press, 1982