

Advocacy, policy and support on male sexualities

What do we know?

*Male-male sexualities in Asia and the Pacific -
addressing HIV and AIDS, social exclusion,
vulnerability and risk*

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...and the last shall be...last?

25 years on and we are told that we still don't seem to know

- Who is having sex with whom
- How many are vulnerable and at risk
- How many are living with HIV
- How many have died and are dying

You know - perhaps. But then who listens to us, for when we do tell “them” they never believe us anyway.



Denial, ignorance, illegality, myths, fears, violence, abuse, exclusion, create a discourse that not only stigmatises much of male-to-male sexual behaviours in society and increases vulnerability and risk to HIV and other sexually transmitted infections, but also increases invisibility

At the same time, too often current discourses on sexual identities, sexual orientation, and “sexual minorities”, can increase the invisibility of much male-to-male sex, risk and vulnerability and those involved with it.



There is very little reliable data on male-male sex and HIV risk and vulnerability

Male-male sex and sexualities is very poorly understood.

WHO tells us that between 3% and 5% of Asian men regularly report sex with other men, but in cultures of gender segregation, social policing of females, and male-male bonding this could be higher

It appears that a majority of men who have sex with other men do not consider themselves to be gay or homosexual/bisexual. A primary pattern is based on men-not men, and in societies where marriage is socially compulsory, sex with females as well is also common.

A significant number of MSM appear to identify as 'men' - or in Western parlance - as 'heterosexual'

In one size estimation study conducted in the Indian state of Uttar Pradesh by a “reputable” research organisation, it was “found” that there were only 1073 MSM in a total population of 160 million!

This may sound strange, but it has serious implications because funding decisions are often made on such size estimations.

HIV Prevalence

	'MSM'	'transgender'
Phnom Penh, 2000	12.8% (166)	36.7% (40)
Beijing, 2002	3.1% (481)	
Dhaka, 2004	0% (399)	0.2% (405)
Dili, 2003	0.9% (110)	
Mumbai, 2003	18.8% (not known)	
Karachi, 2004	4% (400)	
Kathmandu, 2004	5% (83)	2% (199)
Jakarta, 2002	3.3% (529)	
Baroda	5% (not known)	
Bangkok, 2003	17.3% (1,121)	

From the Monitoring the AIDS Pandemic (MAP) report, 2005

But a 2005 study in Thailand shows the prevalence rate has grown to over 28%

Who knows what is happening elsewhere.

Frameworks of male-to-male sex in Asia and the Pacific

Sexual diversity and polymorphous behaviour

Includes:

- **Gendered frameworks,**
- **Situational and occupational identities, sexual practices, and sex roles**
- **Intergenerational**
- **Sexual identity/orientation**
- **Accessibility to sexual partners**

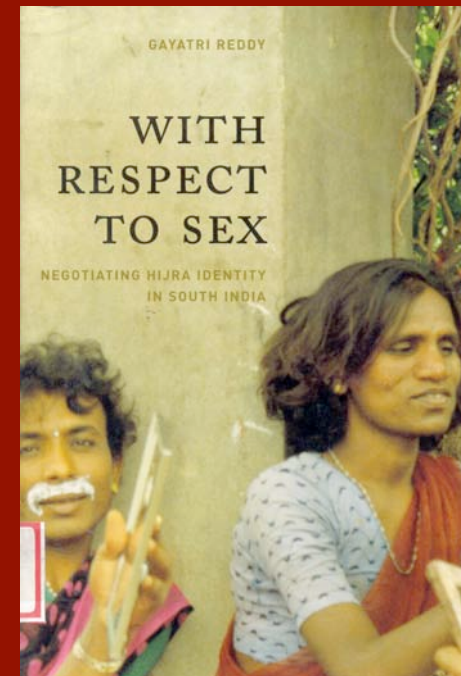
Class, education and poverty often frame practices, behaviours and identities

Who is MSM?

kothis, zenanas, malaishas, metis, bakla, fa'fa'fini, hijras, long hairs, short hairs, panthis, bisexuals, homosexuals, gay-identified men, male sex workers, adolescent males, men who identify as 'real men', and others.



....and of course not to forget male-to-female transgenders, hijras, katoey, waria, and others



In a regional male population of over 3 billion, how many millions of males are involved in male-to-male sex with risky practices?

Perhaps over 150 million!

And how much coverage of HIV services is currently being achieved amongst MSM?

Perhaps 5% or less.

Aren't you angry by now?

Issues

- **Invisibility and denial**
- **Stigma, discrimination and social exclusion**
- **Violence, abuse and rape**
- **Gendered violence**
- **Illegality**
- **Self-stigmatisation, low self-esteem and disempowerment**
- **Conflict in state policies**



- **Denial of social justice and human rights**
- **Low to non-existent financial and social investment in HIV prevention, treatment, care and support**
- **MSM seen as a “target group” - an identity, not as a behaviour**
- **Male commercial sex work ignored**
- **Apart from possibly infecting each other through high-risk activities, many MSM are also married, and/or have sex with other females.**



Males who have sex with males (MSM) whether their self-identity is linked to their same sex behaviour or not, have:

- **The right to be free from violence and harassment;**
- **The right to be treated with dignity and respect;**
- **The right to be treated as full citizens in their country;**
- **The right to be free from HIV/AIDS;**

MSM who are already infected with HIV have the right to access appropriate care and treatment equally with everyone else, regardless of how the virus was transmitted to them.

Thank you for your attention