Enhancing Sensuality for Safer Sex Among Men in India

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1 Introduction
This article explores the link between ‘pleasure’ and ‘health and development issues’, two concepts that seem unrelated but in reality are very much linked. Drawing on personal experiences, participation in a number of sexual health studies in West Bengal, observations, secondary research and interviews with key informants in and around Kolkata, this article explores the relationship between sensuousness and safer sex among men who have sex with men (MSM) living in Kolkata and its suburbs. I suggest that making sex safer for MSM calls for an approach that introduces elements of sensuousness. Such an approach seeks to reduce the appeal (pleasure quotient) of aggression, power play and unprotected penetration (if not penetration itself), as it increases the appeal of safer sexual activities and greater gender/sexual equity. The primary function of work on elements of sensuousness is to make ‘safer sex’ equal to ‘mutually pleasurable sex’. I begin by exploring sexual attitudes and behaviour among MSM in this context. I then address the struggle to change the broader contextual factors that make sex unsafe for men, and look at approaches to promoting safer sex in which pleasure plays a primary role.

2 Sexual attitudes and behaviour among MSM
Discussions with key informants, activists and colleagues revealed a number of aspects of sexual attitudes and behaviour that create significant risks in sex between men. The discussion below highlights some of the main issues that emerged.

2.1 The language of male-to-male sex
The language used to describe male-to-male sex in India is largely aggressive and often associated with violence and power. Most of the words that describe penetration (oral, vaginal or anal) refer to a violent or aggressive act, which one partner ‘does to another’ – using words like marwana (to penetrate), gand marwana (to anally penetrate), ghusana (to put inside), poda bamboo (to put a bamboo up the anus) – words that connote beating or torturing another person. Terms that refer to mutually satisfying sexual intercourse between two or more consenting individuals rarely feature in the everyday slang in which sex between men is generally talked about. Even sexual partners refer to the parts they play in their sexual union differently – the partner who plays a dominant role or the partner who plays the penetrative role (who in most cases are the same) often uses the words like marwana, ghusana and so on to refer to their sexual union. On the other hand the partner who plays the submissive or receptive role (again in most cases the same individual) would refer to the sexual union in subtler words or use the same words in a subtler sense – for example pichona kora (to penetrate anally), pichona neoyo (receiving from the backside), shaman neoyo (receiving from the front side), bithore dhokano (penetrating inside), sedhiye deoa (penetrating inside), dhurano (to get penetrated – this term is usually used by people with more feminine identities such as hijras and kotis).

2.2 Sexual aggression as masculinity
There is a commonly held belief that a penetrative partner (parikh) is not macho or aggressive enough to be called a ‘man’ if his sexual partners do not feel pain when having sex with him. Additionally, in many cases, it is seen that an individual would tolerate or bear pain inflicted by his sexual partner as he thinks his partner (dominant/penetrative) has the right to do so, as another key informant pointed out:

I know of a so-called feminised man who thinks his parikh [male sexual partner], just like other males, has the power and right to do what he pleases. And he (the feminised man in question) should be submissive, tolerant and bear the pain inflicted by his sexual partner as women supposedly do. (Paromita Banerjee, Kolkata-based gender issues activist; Praajak/MANAS 2003)
Even the concept of rape is glorified and many men think that by raping or sexually molesting someone a man would heighten his feeling of masculinity and also portray the strength of his masculinity. This unhealthy association between masculinity and aggression often leads many submissive or receptive individuals to develop a craving or fascination with being raped. They often consider aggressive sexual partners as more masculine and hence more desirable than others.

2.3 The effects of stigma

Fear of stigma and discrimination makes male-to-male sex clandestine, hurried (ironically often in public spaces), with no scope for relishing the experience or making it safer. Our socialisation process teaches us that sex is ‘dirty’ and sex between males is even dirtier. Hence we are never taught to relish it. But we all experience and understand that sex is ‘pleasurable and satisfying’. This contradiction often makes us associate sex as something to be quickly enjoyed for momentary pleasure and nothing more than that.

The stigma attached to homosexuality often leads us to hide sexual intimacy even more. We feel restrained to even talk about it, let alone have an elaborate ritual such as going on a date, which may ultimately lead to a pleasurable and safer sexual encounter. Hence in most cases of male-to-male sex there is hardly any scope for developing romance or intimacy or closeness among the sexual partners. This lack of understanding of the mental set up of one’s sexual partner reduces the chances of negotiating safer sex. In the words of a key informant:

When one meets a good [looking] guy in a train or bus, one tries to have sex by whatever means wherever possible, so one can hardly think of condoms or lube sachets then.

2.4 Penetration as sex

Our socialisation processes and psychological conditioning tell us that sex happens only between a man and a woman and that the man penetrates the woman. This makes many men believe that sex is not possible without penetration; penetration (oral and anal) comes to signify ‘sex’. This leads many MSM to believe that full sexual pleasure cannot be experienced without penetration (oral or anal).

For many feminised receptive partners, the pain they experience during penetration by an aggressive sexual partner usually gets associated with the pleasure of being able to seduce and satisfy a ‘man’. Often this sense of achievement overrides the pain experienced in such encounters. Another described the feelings of pleasure and satisfaction that men experience:

Feminine men, when penetrated, derive a strong sense of being a woman. They think that if a man prefers to penetrate them instead of a woman [biological female], then they must have something better than a woman ... it heightens the feeling of being a woman from inside.

It is also a very widely held belief that the anus is tighter than the vagina, hence it gives more pleasure to the penetrative partners. It is also perceived that women do not usually prefer or allow their male partners to anally penetrate them and also many males do not feel comfortable anally penetrating their girlfriends or wives. Hence they seek such pleasure either from female sex workers or from their male partners. Even female sex workers do not usually allow anal penetration. The same is also true in the case of fellatio. Our social and cultural conditioning may be one of the reasons behind such attitudes. Hence in order to enjoy fellatio and anal penetration many males seek male sexual partners.

The preponderance of penetration is also amply clear from the slang that is usually used in Bengali and Hindi (see earlier discussion). Most of these words refer to (violent) penetration and are usually used as symbols of aggression, power and gender/sexual inequity.

2.5 Sexual partners and status

The number of sexual partners is seen as an indicator of status. As one of my key informants put it:

Feminine MSM often boast about the number of men they had sex with in one day or evening or night. Having sex with a large number of men is seen as an achievement.

It is often perceived that the ability to have sex with many males is reflective of one’s seductiveness and pleasure-giving skills. Additionally, many feminised males derive a sense of importance and value if they are able to attract a large number of dominant male penetrative sexual partners who are young and masculine looking.
2.6 Penis size
There is a well-entrenched belief that a man’s masculinity is proportional to the size of his penis. Additionally, many receptive partners believe that they get more pleasure if their penetrative partner has a large penis. Hence male sexual partners with large penis sizes are preferred by many MSM as they are perceived to be more masculine and more pleasure giving. But often during such sexual encounters receptive partners suffer from tears and ruptures in their anus, which increases the chances of STI/HIV/AIDS transmission.

3 Other factors contributing to unsafe sex
3.1 Lack of sexual choices for MSM
For many MSM there is a severe lack of access to proper information on sex, sexuality and safe social and sexual spaces. In these circumstances, in many cases aggression, power, force or rape are often seen as an inevitable trade-off for gaining sexual thrills and satisfaction.

For many MSM this lack of information combined with a culture of aggressive sex reduces their ability to negotiate safer sex, especially during sexual encounters with aggressive sexual partners, during which the risk of anal tears is greater, and hence the risk of HIV transmission.

3.2 Low risk perception
The study also found that due to this lack or denial of access to proper sexual health information and services, STI/HIV/AIDS risk perception among MSM is very low.

When I interact with male sex workers who cater to male clients in Sonagachi [a well-known red light area of Kolkata], I see that many of their customers think that STDs would be cured through anal sex with boys. They also think that they would be able to do more powerful sex by practising sex with boys. In addition they also think that they would not get AIDS through such sexual behaviours.

3.3 Condom usage still low
Low risk perception combined with multiple other factors has resulted in little change in condom use behaviour among MSM in West Bengal, despite a decade of sexual health work with MSM in the state. A 2003 sexual health study among MSM populations in West Bengal (Prajak/MANAS 2003) found that:

- Among the 51 married respondents, only 1.96 per cent had ‘always’ used condoms during anal sex with other males in the last six months, while 31.37 per cent said they ‘never’ did so.
- Among the 195 unmarried respondents, only 10.76 per cent had ‘always’ used condoms during anal sex with other males in the last six months and 41.53 per cent ‘never’ did.

Similar figures were obtained through previous studies in West Bengal.

A number of respondents to this study also mentioned that many of their penetrative partners lose their erection after putting on a condom, and some of the penetrative partners themselves admitted that they sometimes suffer this problem. This is a clear indication that new approaches to changing attitudes need to be adopted to promote condom use.

4 Changing the larger environment: a long-term struggle
The preliminary findings of this study indicate two strong correlations in the realm of male-to-male sex in and around Kolkata: first, there is a negative correlation between ‘penetration, aggression, power play’ and ‘safer sex’, and second, there is a positive correlation between ‘penetration, aggression, power play’ and ‘pleasurable sex’ (or sexual thrill). What could be done to make sex safer for MSM without reducing its pleasure quotient, which is currently strongly associated with the very factors that make sex unsafe?

It is crucial to initiate open dialogue on sex and sexuality, but this is a herculean task given the present socio-legal environment in India. Civil society efforts to initiate such dialogue – in the context of advocacy around legal reform – have constantly run into moral stone walls set up by the government and larger society, which refuse to accept the validity of non-procreative sex. As one key informant noted:

Our patriarchal society feels ashamed to talk about sex or love between two men, so they try to suppress such men and are happy as long as these things [male-to-male sex] are practised discreetly.

Advocacy around legal reform to recognise the sexual rights of MSM remains important, however
evaded at present. Legal reform could both help to shift societal attitudes towards sex, sexuality, sexual behaviour and sexual pleasure as well as facilitate the work of voluntary agencies working on health issues with MSM whose activities are restricted by the present legal framework.

Interviewees and secondary research for this study identified three important areas for legal revisions:

1. Section 377 of the Indian Penal Code (IPC), which clubs together ‘coercive same sex behaviour’ and ‘same sex behaviour between two consenting adults even in private’. This law particularly impacts on the activities of voluntary agencies working on health issues with MSM, which in turn affects wider public health (Combat Law 2002).

2. Section 292 of the IPC which punishes ‘obscenity’ and makes it a criminal offence. The current definition of obscenity can lead to its misuse against gay and lesbian writings and literature. Social developmental agencies are unable to produce behaviour change communication (BCC) materials which address issues of sexual health and sexuality in an explicit manner with detailed graphics or pictures. As a result, BCC materials are very sanitised and cannot disseminate detailed information (Combat Law 2002).

3. The Immoral Trafficking Prevention Act, 1986, which criminalises commercial sex. The police and the administration often use this law to harass sex workers and voluntary agencies working with these populations. This law should be revised along with checks and balances to ensure that nobody is forced into sex work and that child prostitution is not abetted (Combat Law 2002).

5 Promoting safer and pleasurable sex: immediate and practical approaches

With so many hurdles in the way of an objective dialogue on sex, gender, sexuality and equity in these spheres, it would be unrealistic to expect larger social acceptance of ‘sex for pleasure’, let alone making MSM accept ‘safer sex as also (mutually) pleasurable’ in the near future. What might work would be more immediate and practical approaches on a limited scale in the NGO sector, which emphasise elements of sensuousness. These strategies could also prepare the ground for more fundamental approaches in the long run. A few immediate possibilities follow:

5.1 Improving the quality of sex education in progressive schools/colleges

Under consistent pressure from civil society organisations, the central and state governments of India have introduced sex education in some schools and colleges. These initiatives have had limited impact so far. In many parts of India, teachers have opposed sex education, and where sex education has found its way into the curriculum, its quality has remained suspect. Voluntary agencies working on sexuality and sexual health issues would have to take the lead in such an initiative.

While universal and unbiased sex education remains the long-term goal, what could be attempted immediately is to advocate directly with some of the more progressive educational institutions and teachers to reduce or remove the biases in the current sex education. Students should be taught that sex is more than just penile–vaginal penetration. Messages should be designed such that the students develop a non-aggressive notion of sex, and learn to respect gender equity and variations in gender and sexuality. As one key informant put it:

Sex is not just about anal, oral or thigh sex. Sitting close to each other, holding hands, going to the movies together are also part of sex.

5.2 Innovating behaviour change and communications strategies in STI/HIV/AIDS intervention programmes

The STI/HIV/AIDS intervention programmes run by various lesbian, gay, bisexual and transgender (LGBT)/MSM community-based organisations (CBOs) and other voluntary agencies working with male populations should design their BCC strategies and material towards developing a positive and non-aggressive concept of sex among their target populations. The development of such a concept would necessarily be related to enhancing the self-esteem of MSM, as the greater the self-esteem of an individual, the greater his desire to maintain good health and his ability to be open to the idea of safer sex as pleasurable sex and vice versa.

Sharing experiences of safe, pleasurable sex

Skits, mime, films and focus group discussions for sharing pleasurable experiences of safer sex are some
of the strategies/material that could be deployed. Outreach workers, peer educators and counsellors could also highlight the positive and mutually pleasurable aspects of safer sex through consistent one-to-one interpersonal communication. Additionally, individuals who have multiple sexual partners but practise safer sex could be identified and trained to act as role models.

**Making condom use appear uncomplicated, trendy and desirable**

Glamorising condom use and promoting it as a sexual pleasure enhancer could make it popular and thereby increase usage. This could be done by putting erotic pictures of males on condom packs, and enclosing safer sex messages and condom use tips in attractive designs within the condom packs. More graphic glamorisation of condoms through print and audiovisual material would require long-term and consistent advocacy on changing laws that prevent the development of such material.

Additionally, there should be more variety in the condoms available in terms of colours, textures, flavours, smell, sizes, thickness and elasticity – to suit various requirements and tastes. In terms of actual ease of use during anal sex, the promotion of water-based lubricants is a crucial element. Sexual health studies have shown that availability of inexpensive and good-quality lubes does enhance the appeal of condoms (Palm Avenue Integration Society 2001). Fortunately, STI/HIV/AIDS interventions targeted at MSM in West Bengal have begun to promote lube usage. But the accessibility and affordability of lubricants would need to improve significantly.

**Making non-penetrative sex appear more desirable**

One way of promoting non-penetrative sex would be disseminating the concept that sexual pleasure is felt by the brain and not just by the penis. In addition it could be emphasised that caressing, touching, hugging, kissing, self and mutual masturbation, being naked and sitting close to one’s sexual partner, and sharing or planning for a future together or doing certain things together, are all part of pleasurable sex. In addition, individuals could be educated in the art of sensuous lovemaking with information about the body’s erotic zones and how to stimulate them. Simultaneously, it should be conveyed that self-esteem, respect, friendship and love can be great ingredients for mutually pleasurable sex.

Given the existence of laws like Section 292 of the Indian Penal Code, how this education could be imparted would be a challenge in communication design. At the very least, focus group discussions and culturally acceptable print material with line diagrams or simple cartoons could be tried out. More graphic representation through flip charts, illustrated books and magazines, and films with attractive models would first require vigorous advocacy with the law, policymakers and implementers on the need for such education.

**Innovative training of trainers on non-penetrative sex**

In 2004, SAATHII, in association with Shonali Saha, a New York-based medical student involved in LGBT rights issues, developed a module for training trainers on HIV/AIDS issues. A particular exercise in the module encourages participants to fantasise about a sexual encounter using a variety of unusual props provided to them. When the participants narrate their fantasies, it is pointed out that most of the sexual acts they fantasised about were quite safe with regard to STI/HIV infection and yet pleasurable. This helps the participants realise that pleasurable sex is not all about penetration, even protected penetration.

**Using new spaces for sexual health education**

Public toilets and bathhouses could be used for education on sexual health-related issues. Condom vending machines could also be installed in such places. The managers of these institutions may be willing to cooperate. For example, Sulabh Souchalaya, which manages a chain of public toilets in India, was approached by some civil society organisations about setting up halfway homes for street children. Similarly, we can advocate with them towards implementing sexual health awareness programmes in those toilets.

**5.3 Changing the working values of commercial sexual services**

Changing the working values of commercial sexual services could help in promoting safer yet pleasurable sex. Massage parlours, which play a key role in the provision of such services in and around Kolkata, are able to reach out to many MSM who are invisible and inaccessible to the STI/HIV/AIDS intervention programmes. These massage parlours and their masseurs could be scientifically trained on techniques of safer and pleasurable sex such as ‘relaxation sexual massage’. The success of such
techniques in weaning away clients from potentially unsafe sexual acts has been quite well established in some countries.

Key informants’ suggestions included:

1. Each massage parlour should have a trainer to develop the masseurs’ skills in providing pleasurable sexual services to their clients – without compromising on their own or their clients’ health and well-being. Training could be provided through discussion, demonstration and direct physical contact. The trained and experienced masseurs should further impart training to newcomers.

2. Regular feedback should be collected from the clients to assess the masseurs’ skills, and the feedback should be shared with the masseurs to help them improve their skills.

3. Masseurs should be trained in maintaining personal hygiene, using nice perfumes or deodorants and being well dressed.

4. Clean and fresh towels should be provided to each of the masseurs and their clients.

5. Rotation of work should be promoted among masseurs in a particular massage parlour along with mutual respect and care among the masseurs. This would help reduce unhealthy competition (providing unsafe sexual services as a means of undercutting), jealousy and work stress among the masseurs.

Issues like ensuring a minimum age for employment and minimum pay scales in the massage parlours would also be worthy of consideration. These factors would help promote work in massage parlours as a valid career option, and increase the commitments of both parlour owners and the masseurs to a professional code of ethics. Such a code could include emphasis on safer and pleasurable sex.

5.4 Promoting safe social and sexual spaces for MSM

Social spaces
It could be argued that as long as the social and legal environment remains hostile to MSM, the creation of safe spaces of any kind would not be possible. However, the experience of the Indian LGBT movement, including the developments in eastern India, has shown that much is possible in terms of safe social spaces, where it becomes easier to deliver (and absorb) messages related to self-esteem, sexuality, human rights, sexual health and HIV/AIDS issues.

Safe social spaces could be in the form of support group meetings, drop-in centres, get-togethers and parties, festive occasions, tours and expeditions, public networking sites like restaurants, pubs, bars, parks and shopping centres, and cyber space forums like e-forums and blogs.

Most such spaces would provide opportunities for sexual pick-ups though not for actually having sex. Each of these spaces would have their own strengths and weaknesses with regard to communication on safer sex as mutually pleasurable sex.

Sexual spaces
The promotion of safe sexual spaces would be the more difficult task. While massage parlours accessed by MSM in and around Kolkata have successfully survived and grown over the years, legally they still exist in a grey area. Innovative advocacy with relevant stakeholders, particularly the police, would be needed to ensure their sustainability and ability to provide safer and pleasurable commercial sexual services.

If issues of morality around sex, same sex relations and commercial sexual services could be put on the backburner, it might be possible to convince at least some of the stakeholders of the social value of massage parlours. For instance, a lot of male-to-male sex tends to happen in public spaces, which is currently seen only as a law and order concern. The law enforcers also understand that it is practically impossible for them to stop such behaviours. It is also known that sex in public places is the only option available to many individuals who do not have access to private spaces for sex. Hence if sex in public places could be shown to be a significant health concern, the benefits of safe sexual spaces (for MSM and others too) could be argued for with greater force. These spaces would not only be private or semi-public spaces, they would also have greater scope for education on and the practice of safer and mutually pleasurable sex. With a secure, harassment-free and pleasing environment, they would better enable safer sex negotiations and would also be conducive to provision of sexual health services.
Apart from massage parlours, other forms of safe sexual spaces could be:

1. Open houses or khols: These already exist in Kolkata and other parts of West Bengal, but their potential for the promotion of safer sex as pleasurable sex remains untapped. A typical open house would mean an individual from an MSM network allowing his friends to bring their sexual partners to have sex in his house. Some open house owners might make condoms and lube sachets available.

2. Saunas for MSM: There are already saunas in most Indian cities, but none serve MSM exclusively. If exclusive saunas for MSM did exist, these sites could display attractive safer sex messages and distribute condoms and lubes. Even in men’s saunas and mixed saunas (although very few exist in India) safer sex messages for both sex between men and heterosexual sex could be displayed. However, cleanliness and hygiene in these saunas would play an important role in making the sexual experience both safe and pleasurable.

3. Room renting services/short stay hotels: Individuals or small hotels could rent out rooms on an hourly basis so that individuals could have sex in privacy and have greater scope for safer sex negotiations. These sites would also provide scope for safer sex messaging and would need to be kept clean and attractive.

5.5 Forum for parents of LGBT people
In 2005, Swikriti, a Kolkata-based LGBT CBO and a partner organisation of SAATHII, initiated a support forum for parents of LGBT individuals. Though not directly related to safer sex issues, it is expected that such a forum would help parents of LGBT people understand the sexual and romantic needs of their sons and daughters. This in turn could help promote a family environment which would be pro-pleasure, and where sexual and associated problems would not have to be hidden. MSM from such family environments would likely be emotionally stable and relatively more receptive to messages on safer and (mutually) pleasurable sex.

6 Conclusion
This article shows how behaviour change communication strategies and material can be used to promote safer sex by recognising elements of sensuousness in male-to-male sex and making these an entry point for more effective sexual health promotion.

I hope that at the very least this article contributes towards an open dialogue on sex and sexuality and generates greater acceptance and understanding of the role of sexual pleasure in human growth and development. It might also help develop a safer and healthier working environment for commercial sexual service providers that would also benefit the clients. It is high time that policymakers realise that pleasure is a pertinent component in promoting safer sex and that creation of an enabling environment for pleasurable sex is a necessary part of this issue.

Notes
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References