



# PSN NEWSLETTER

PURPLE SKY NETWORK NEWSLETTER FOR OUTREACH WORKERS AND THEIR FRIENDS WORKING ON MALE SEXUAL HEALTH AND HIV PREVENTION IN THE COUNTRIES OF THE GREATER MEKONG SUB-REGION

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## CHINA: Kunming MSM Website Opens to Assist with HIV Prevention



Grand opening of Kunming Spring Rain MSM Network

By Kunming Correspondence

Kunming Spring Rain Working Group.

As you entered the grand opening of Kunming Spring Rain MSM Network, you saw beautiful women in backless dresses, but after a closer look, you realized that they were men. In fact, most of those guests who entered arm-in-arm or hand-in-hand with their partners were MSM. The Kunming Spring Rain MSM Network is the first MSM website in Kunming (Yunnan Province, China). Its main objective is to help prevent the spread of HIV in the MSM community.

"MSM here is comprised of gays, bisexuals and transvestites, many of which have multiple partners" said Zhao Feng, the manager of the

internet as their primary venue to meet people.

Currently, peer education has reached out to 23 popular places for gays, bisexuals, transgenders, and money boys (male sex workers) in downtown Kunming and Kunyang. By October 2008, nearly 2200 MSM had been reached. A referral service had been set up with the help of the Kunming CDC STD clinic of to help MSM receive medical services and counseling. To date, more than 560 MSM used the referral service and received STD examination and treatment, and 90 MSM had VCT (Voluntary Counseling and Testing). The average condom use rate for those who used the referral service had reached 60%.

Kunming Spring Rain MSM Network, [www.kmcytz.com](http://www.kmcytz.com), is a comprehensive non-profit website for HIV prevention, health care, consultation, and it offers a chat room, forum and online messaging for help making new friends and building a strong STD and HIV prevention community.

MSM normally have a relatively dense sexual network (a social network defined by sexual relationships within a set of individuals). This is due to social, psychological and physical factors in the MSM community. A considerable number of MSM do not grasp the seriousness of the HIV epidemic. Moreover, the lack of effective channels to reach out to those who use the internet to meet people (rather than public venues, such as bars), increases their risk to HIV and other STDs. The Kunming Spring Rain MSM Network plans to improve the effect of HIV prevention efforts among MSM who use the

## Report: Fun and Fashion Defines Cambodia’s MStyle

By Caroline Francis  
Family Health International  
Cambodia



MStyle Flyer

With the support from USAID, FHI and its implementation partners recently launched a new project named MStyle in Cambodia to improve the sexual health of men who have sex with men (MSM). A peer-led, nonjudgmental social network, MStyle aims to take a holistic and human rights based approach to reducing the risk of HIV and other STIs among MSM. MSM often face stigma and discrimination which makes them reluctant to seek health service and other supporting services, MStyle aims to overcome this reluctance and provide high-quality, confidential services by creating an environment that is not just supportive to MSM but also engaging and fun: music and fashion are important elements of the MStyle brand. Considering that many MSM in Cambodia also have female sexual partners, MStyle works in tandem with FHI’s SMARTgirl program, targeting Cambodia’s female entertainment workers and their male clients. This harmonization of efforts means that those who are most vulnerable to HIV will receive consistent, clear messages through multiple channels.

### Reaching out to MSM

In collaboration with partner NGOs and CBOs, FHI supports

MStyle in implementing behavior change approaches that emphasize risk reduction and promote safer sexual practices. Using MStyle “risk assessment cards” and guidebooks, facilitators help MSM assess their risks in different situations and learn how to protect their health. Outreach sessions aim to go beyond discussion of STIs and HIV to address other risks that MSM may face, from disclosure of their sexuality, drug use, and sexual violence.

MStyle posters, leaflets, and T-shirts incorporate colorful designs and a sense of fashion and style that appeals to the target group. Outreach workers from FHI’s partner agencies distribute these materials, socially market condoms and lubricants (or provide these items free to very poor or HIV-positive MSM), and hand out referral cards for counseling and testing, STI, and reproductive health services. FHI also supports partner agencies in referring HIV-positive MSM to care and treatment services and making follow-up home visits.

Additional outreach sessions are held weekly at five MStyle clubs, located in Phnom Penh and Banteay Meanchey Province. The clubs are a safe place where MSM can meet and communicate with friends, and at the same time learn about healthy sexual practices and choices. The MStyle website, [www.mstylekhmer.com](http://www.mstylekhmer.com), offers a chat room, downloads, quizzes, and sexual health information that members can access confidentially.

### Change a Culture



MStyle Activities

FHI and partner agencies are working to build a supportive environment for MSM sexual health by encouraging stakeholders, including bar and club owners, healthcare providers, and others, to take a leading role in helping to protect the health and wellbeing of young men and the wider community. Visible MSM serve as positive role models and convey key messages about the importance of developing responsible sexual attitudes and practices. IAs document any issues that MSM face in accessing or using sexual health services and regularly report these issues to their FHI partners.

In keeping with its strategy of emphasizing sustainability, FHI is supporting IAs, partners, and stakeholders to develop the skills they will need to plan, implement, manage, and monitor program activities when external funding ends. The new, branded MStyle approach has proven popular with MSM, as well as club and outreach staff, and is poised to play an important, long-term role in addressing sexual health and MSM issues in Cambodia.

### What is sexual risk?

Sexual risk is the risk of contracting HIV or STI while having sex.

Some sexual acts have more sexual risk than others. Unprotected receptive anal sex is the highest sexual risk.



MStyle Members

## Health: Alternatives to Condom Use can Help Reduce HIV Transmission among Gay Men

By Jan Wijngaarden  
UNESCO Bangkok



The HIV epidemic among gay men in Asia is continuing to grow. 30.7% of Thai MSMs are infected with HIV while Cambodia, Vietnam and Indonesia have 5-10 % of MSMs with the virus. In most places transgender sisters are in harder hit.

And that while transmission of HIV is quite hard, with a relatively low per-contact-transmission chance - HIV is much less efficient than other viruses, such as the ones causing flu or measles. Preventing HIV is relatively simple - covering our favorite organ with a 0.06 mm thick coating whenever we have anal sex...yes, **condoms**.

But why are - even in places where significant numbers of men are infected with HIV - significant numbers of men still not using condoms?

A recent study from Sydney, Australia appeared in the AIDS journal (Jin F, Crawford J, Prestage GP et al, 2009) found that even when men do not use condoms, they still employ certain strategies to reduce their risk for HIV infection or transmitting to their partners if they are already positive. Three of these protective strategies were found to reduce the risk significantly, comparing with no strategy and no condoms.

The first is **strategic positioning**; meaning the HIV positive partner

being the receptive part in anal intercourse with HIV negative person given that the receptive partner is up to ten times more likely to be infected by the HIV positive insertive partner than the other way around.

The second is **negotiated safety**; meaning that to have one steady partner to practice unsafe sex, promising to have safe sex if they do with others and to tell each other if an 'accident' happens.

In the Sydney study, both these strategies reduced HIV infection risk to a similar degree as consistent condom use.

A third strategy is called **Sero-sorting**. This means that HIV negative men have condom-less sex only with HIV negative men, and likewise HIV positive men only with HIV positive men. The intermediate risk of HIV infection with this strategy is higher than with consistent condom use or with one of the above two mentioned strategies, but lower than having unprotected sex indiscriminately, without exchanging information about one's presumed serostatus.

However, sero-sorting is usually not recommended, as some HIV negative men may in fact be positive. The virus may have entered their body so recently that it does not show up in HIV tests yet. The period where a person is infected already but the virus can not yet be detected is called the 'window period'. It is also possible that a presumably HIV negative person had his last test quite a while (and quite a few partners) ago - he may in fact have become infected already.

A fourth strategy - **withdrawal from the rectum before ejaculation** - was found not effective.

What do these findings mean?

This study was done in Australia - we do not know if Asians as well use such strategies and if being successful. Another thing, Asian men have far fewer HIV tests than the men in the Australian study,

making these strategies - which depend on knowing your HIV status - difficult to use.

The important lesson from this study is that gay men not using condoms are not necessarily irrational - there is a certain intelligent design in the way they take risks and three of these designs do indeed decrease the risk of HIV transmission.

I believe that in our work to prevent HIV infections we should give men **OPTIONS**. It is not just a matter of 'using condoms' or 'not using condoms'. We should instead conceptualize our sexual behavior as a 'ladder of risks'; at the bottom 'No sex / solo sex', and at the top 'having unprotected receptive anal intercourse without condom with a person knowing he is HIV positive'. But in between these extremes there are numerous nuances and shades of risk - men should be made aware of these, so that if they can not totally eradicate their risk of infection (by consistently using condoms and lubricants) they can at least reduce their risk to a certain degree.

Gay men need to develop their own set of options. '**CNSS**' could be the answer (Condoms, Negotiated safety, Strategic positioning, and Sero-sorting). This might be a good start - but there may be more strategies out there, like reducing anal sex in favor of mutual masturbation and oral sex, or (rather than abstinence, using webcams and phones for (very safe!) cyber/ phone sex.



Full article available at:  
<http://www.fridae.com/newsfeatures/2009/04/29/2269>.

## CHINA: Several Cities in China Started First Ever Intervention for MSM

By Xia Chen  
UNESCO Bangkok

In March 2008, the Ministry of Health (MOH) of the Chinese government issued a pilot programme to battle dramatically rising HIV prevalence and other STIs among men who have sex with men (MSM). The starting point of this campaign was to identify the prevalence of HIV, syphilis and hepatitis C among MSM in major cities of the country. Pilot work is expected to be completed by the end of this year. MSM have been lacking attention for a long time because MSM has long seemed taboo in China. Despite this problem, several cities in China have started their first ever HIV prevention interventions for MSM.

Dongguan, a city in Guangdong Province in the south, is an example of this. A local CDC official in the implementation unit of MSM intervention project said MSM were now the group with the highest odds to become infected with HIV among all people with risky sexual behaviors. Meanwhile, the relatively high density of sexual networks has worsened the problem. Interventions aiming at MSM are also the most difficult. It is estimated that there has been a considerable number of MSM population in Dongguan but there has not been any reliable statistics on the number. Officials have found it very difficult to find MSM. Most of them have to disguise their sexual

preferences due to the social taboos and stigma. Many have female spouses while their sexual practices with other men may only be a part of their social roles. Moreover, their sexual life is usually very secret.

Despite these difficulties, MSM intervention project officers recently successfully got access to 22 MSM, and have begun their interventions. They found that non-government organization network and volunteers were able to find MSM but still many of them were very sensitive to any intervention. It may cost time and patience to work with them.

Almost at the same time in the west of China, Tianshui, Gansu Province, MSM peer education members attended a forum organized by Red Ribbon Home, a service centre committing to publicizing HIV/AIDS education and intervention, promoting condom use and providing testing and treating service as well.

This forum was expected to be helpful to enhance NGOs' ability to implement projects and activities and to explore effective intervention models for MSM in Tianshui. Participants consisted of MSM peer education members and 20 MSM. A psychological expert explained the psychological issues related to MSM and HIV/AIDS related issues. Participants then had a very active discussion on how to deal with the public's stigma and discrimination

against MSM population and how to have effective interventions among them.

The effectiveness of the MSM peer education was confirmed by MSM. And they were also advised to learn more about HIV/AIDS, communicate frequently with related organizations and increase the condom use rate.

The MSM campaign aims to involve 5-10 million of Chinese MSM in pilot areas. Measures include stronger promotion of condom use, effective prevention interventions, and sufficient medical service provided for the counseling, prevention, testing and treatment of both HIV and other STIs, and advocating HIV-related education.



## CHINA: The 6<sup>th</sup> Round of China Global Fund AIDS Program Guangxi NGO Capacity Building Training Session



By Guangxi Correspondent

22-24 April 2009, the 6<sup>th</sup> Round of China Global Fund AIDS Program Guangxi NGO Capacity Building Training Session was held successfully in Nanning, with 29 program implementation agencies involved.

An experienced expert from Hong Kong AIDS

Foundation was invited to lecture on how to improve these agencies' implementation capacities, and helped them with establishing appropriate mentality and attitude towards HIV prevention and treatment.

Some MSM working group members in Guangxi had a chance to talk with the expert about the problems and difficulties they face in their work and

expressed their opinions. As scheduled, the 6<sup>th</sup> China Global Fund Guangxi Program office will fund those implementation agencies which carried out their programs well to observe and study in Hong Kong in late May.

## THAILAND: Improving Understanding of Anal Cancer Risk Among MSM in Thailand

TREAT Asia Report on  
March 2009

Among men who have sex with men (MSM), anal cancer has been diagnosed more frequently among those engaging in receptive anal intercourse and those infected with HIV. In a study conducted in the U.S., anal cancer was reported at an incidence of 35 in 100,000 MSM, with the risk of anal cancer among HIV-positive MSM double that of HIV-negative MSM.<sup>1</sup> But in Asia, anal cancer has remained largely understudied.

Doctors can screen for anal cancer with a Pap smear, which checks for the presence of cancerous cells under a microscope, and then confirm abnormal results with a biopsy. The Thai Red Cross Anonymous Clinic (TRCAC) in Bangkok found

that of the 174 anal Pap smear tests its staff performed on MSM between January 2007 and April 2008, 73 percent were normal, 13 percent were troubling but not clearly cancerous, and 14 percent had some evidence of cancer known as squamous intraepithelial lesions (SIL).<sup>2</sup> HIV-positive MSM had a significantly higher rate of SIL (18%) than HIV-negative MSM (5%)

To increase regional capacity to diagnose and treat anal cancer among MSM, amfAR's MSM Initiative provided funding to TRCAC in April 2008 to establish an MSM sexual health clinic in Bangkok. The clinic provides screening and treatment for sexually transmitted infections, anal Pap smear testing, treatment of abnormal anal Pap smears, and risk reduction counseling services.

From April to September 2008, 1,719 MSM clients visited the clinic. Of these, 253 received anal Pap smears and 27 percent had abnormal results. These clients are now receiving follow-up care through the TRCAC MSM sexual health clinic. More resources are needed to study anal cancer risk among MSM in Asia and provide diagnostic screening and treatment.

<sup>1</sup>Frisch M, Biggar RJ, Goedert JJ. Human papillomavirus-associated cancers in patients with human immunodeficiency virus infection and acquired immunodeficiency syndrome. *J Natl Cancer Inst.* 20 Sept. 2000;92(18):1500-1510.

<sup>2</sup> Li A, Phanuphak N, Sathianthammawit W, Avihingsanon A, Chaithongwongwatthana S, Teeratakulpisarn N, et al. HPV-associated anal disease in

In Asia, anal cancer has remained largely understudied.

in HIV-positive and HIV-negative men who have sex with men in Thailand. In: *XVII International AIDS Conference*. Mexico City, Mexico; 3-8 August 2008. Abstract no. THPE0222.

Available at:

<http://www.amfar.org/world/treatasia/article.aspx?id=6516>

## Story: Create Social Environment to Support Men Who Have Sex with Men in Cambodia

By Cambodia  
Correspondent

MSM peer educators have been assigned an important role in attitude and behavior change and creating a change of social norms in Cambodia. Peer educators are supposed to be models to provide education to MSM and to respond to risk behavior among MSM so that HIV prevention would be promoted. Selected MSM peer educators will also work on changing social norms to create a supportive environment for MSM programs.

**The Story of Mr. Sambath**  
Mr. Sambath is a



Mr. Sambath

transgender living in Chamkardong Village, Chbamon Community in Kampong Speu Province. He works for a beauty salon and has been working as a volunteer for Men's Health Social Service (MHSS) in his spare time since 2007, working mainly on providing

education and changing risk behavior and sexual practice among MSM.

Mr. Sambath himself used to cut off his contact with other MSM to hide his identity so that he could protect himself from stigma and discrimination.

After being a volunteer as a peer educator for about one year in his community, it had been noticed that the stigma and discrimination from his family and his community was greatly decreased, for they had realized that MSM like Sambath could also do a lot of beneficial contribution like the normal population.

Sambath finally was able



Mr. Sabath in his community

to talk about MSM-related issues openly as a peer educator in his community.

Also since that time, Sambath's MSM friends have been able to get access to education and knowledge on communication skill with their sexual partner about safe sex, as well as accessing healthy services such as VCCT (Voluntary Confidential Counseling and Testing).

## Feature: Lube Up for Better Lovin'

### Water-based personal lubricants



Personal lubricants (colloquially termed as *lube*) were originally derived from surgical lubricants designed for use during medical procedures, and are now also used frequently to provide lubrication for sexual practices.

According to their properties, lubes can be generally categorized as follow: water-based or silicone-based, gloppy like hair gel, slick like saliva, or silky like lotion.



Silicone-based lubes tend to be more and more acclaimed. They stay wet for a long time, which is good for extended intercourse. Some manufacturers may claim that it will stay wet for 10 years in the lab. But silicone-based lubes may not be the best choice for people using sex toys made of silicone. Silicone dildos and vibrators are recommended over those made of rubber because they're easier to clean. The surface has fewer tiny pores that could trap germs. But it has been reported that silicone lubes, over time, seem to react with the silicone toy and make its surface feel tacky, in effect ruining it.



Water-based lubes are water soluble and are the most widely available personal lubricant on the market. One advantage of water-based lubes, of which there are many brands, is that they wash away easily because they are water soluble. But they dry up faster than silicone-based ones do. There have been some complaints from women that water-based lubes containing glycerin seem



to promote vaginal yeast infections -- the idea being that glycerin, a sugar, feeds the yeast naturally present in the vagina. This notion has spread widely around the Internet, but there's scant scientific evidence to support it.

Consistency is another consideration in choosing a lube. The desired consistency depends partly on what you intend to do with it, while the thicker ones are considered to be better for anal sex. Rectal tissue is more fragile than vaginal tissue. A thick lube reduces friction and abrasion more than a thin one does. Besides that, there aren't any rules about consistency. It is suggested to try rubbing a dollop between fingers to get a sense of the consistency, and choose whatever feels best when buying lubes.

For many years, health officials have discouraged people from using oil-based lubes because oils break down latex rubber, causing condoms to fail. Only silicone- and water-based lubes are safe to use with latex condoms. What's more, there's not much point in using skin lotion, petroleum jelly, or cooking oils when so many products are made specifically for sex. Oil is awfully messy, and it's really not meant to be put in someone's vagina or rectum.

One other important warning applies to sex lubes: Avoid anything that contains the spermicide nonoxynol-9. CDC spokeswoman Jessica Frickey writes in an email, "It boils down to this:

Studies have shown that N-9 can cause genital lesions and damage to the rectal lining, providing a possible entry point for HIV and other [sexually transmitted diseases]."

### 90% of MSM reported having to use saliva when no lubricant available

According to a study published in the Journal of Acquired Immune Deficiency Syndromes (JAIDS) this month, almost 90 percent of men who have sex with men (MSM) have resorted to using their own saliva as a lubricant in the absence of conventional water-based varieties -- nearly one-quarter of them while practicing what would otherwise be safe sex. It's not a pretty thought.

When used with latex condoms, water-based lubricants can help prevent condom breakage and thus aid the prevention of HIV transmission.

Saliva, when used as a lubricant, may not be sufficient to protect the condom from friction and tears, and may even present a vector for the transmission of diseases like Hepatitis B.

Source:  
[www.medicinenet.com](http://www.medicinenet.com)

## Perspective: Building a Strong Network

By Leng Monyneath  
National MSM Network /  
Bandanh Chaktomuk  
Cambodia

Men who have sex with Men (MSM) is a new emerging high-risk group found to be vulnerably exposed to HIV/AIDS infection and transmission in Cambodia. Additionally, MSM has been put as the hottest agenda to be concerned. Nevertheless, Cambodia has been recently recognized by national and international agencies as one of the few countries in the world to successfully control the HIV epidemic among the general population by reducing HIV prevalence to 0.9 percent in 2006.

The National MSM Network/Bandanh Chaktomuk (BC) was initially established in 2006 serving as a network of individual MSM and transgenders, working together to promote health, protect the human rights, and advocate the equality of MSM and transgender people with

general population in order to reduce the vulnerabilities, risks and impacts of STI/HIV/AIDS among MSM population in Cambodia. Its existence also reflects the commitment outlined in the National Strategic Plan (NSP II), the National Strategic Framework and Operational Plan for MSM, HIV, and STI in Cambodia, which calls for a comprehensive and multicultural response to HIV/AIDS (2006-2010).

Building a strong network is the most essential and effective mechanism to increase the health service such as VCCT (Voluntary Confidential and Counseling and Testing) for STI. According to the Sentinel Surveillance Survey (2005), there are 8.7 percent MSM population in Phnom Penh and 0.8 percent in other provinces. Two of the main problems among MSM is the low condom use rate and high density of sexual networks. The stigma and discrimination

in the communities usually prevents MSM from reaching to the STI and reproductive health services. Therefore, a strong MSM network which enables MSM to participate in social activities, to raise public awareness and promote health service is very essential.

Without a strong network, MSM who need to be concerned and involved in the policy planning process benefiting them in terms of health service and social recognition seem to be ignored by both the practitioners and policy makers.

The main function of MSM networking is to work with the local NGOs and governmental institutions to build up an enabling environment in order to increase accessibility and quality of health service for MSM. The effort and commitment constitute to the achievement of the Universal Access (UA).

Do homosexual have a lack or male hormones?

No. Although many people believe in this, hormones in fact have nothing to do with sexual orientation or behavior.

Hormone treatment will therefore not "cure"

Pomosexuality— it may, however, influence sexual appetite.

## PSN Faces from China



Jiangan Zhao (Frank), 39, lives in Kunming, China.

Frank, the founder of Trans China (Alliance of Chinese Transgender), has been

working on MSM and HIV/AIDS since 2002. Frank values a social environment of no stigma, discrimination or violence. But there is so much to do for this ideal world. Publicity and education to the public are two of the most important components. As the coordinator of the MSM Working Group in Yunnan, Frank calls on understanding and collaboration of all people and organization working on MSM, aiming at effective HIV prevention among MSM.

Frank can be reached by email: zhaogang9940@hotmail.com



Lili Song (Congcong), 28, lives in Nanning, China.

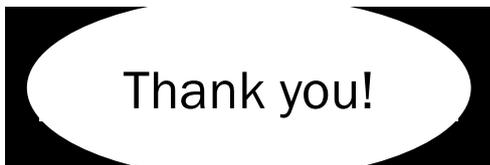
Team leader of Guangxi Yanguang Working Group, Congcong has been working

on MSM and HIV/AIDS for 3 years. He looks forwards to the diversity, humanity, legalization and equality for MSM whose rights would not be ignored. Congcong encourages MSM to have strong self-identity and take the initiative to preserve our own rights.

You can reach Congcong by email: boy-ake@vip.qq.com



Purple Sky Network is the network of governmental organizations, nongovernmental organizations, community-based organizations and international organizations working with men who have sex with men and transgenders in the Greater Mekong sub-region, including Cambodia, China (Guangxi and Yunnan provinces), Laos, Myanmar, Thailand and Vietnam.



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## LAO PDR: UNESCO publishes ethnographic study on male to male sexuality in Lao PDR

BY Jan Wijngaarden  
UNESCO Bangkok

UNESCO has released the first-ever ethnographic study on male to male sexuality in Lao PDR. The study was conducted by Chris Lyttleton of Macquarie University in Australia and a team of Lao peer researchers. It sheds light on the context in which male to male sex takes place in Lao PDR and enhances our understanding of the way Laotian MSM view themselves, their lovers and their lives. It is hoped that this will provide information to make HIV prevention, care and support interventions for this group more appropriately, authentically and effectively.

The study proposes a continuum based on self-perception as male or female, preferred sexual behavior and the degree to

which people appear masculine or effeminate in public. In general, it appears that sex between men is not seen as a big deal for many young men; often it is seen as a playful and pleasurable pastime.

The study also pays attention to the rapid changes in Lao society and the increased visibility of homosexuality in society, partly caused by increased

interactions with the outside world. It focuses on the issue of stigma and discrimination (which many men say is rapidly decreasing), helping more men to disclose their preferences.

The final chapter deals with HIV and sexual risk, noting that condom use is low, partner change is high and, hence, the risk for HIV and STIs was high too.

UNESCO aims to conduct similar researches in other countries in the region during 2009 and 2010 after this one and the earlier one done in Cambodia.

The PDF file [of the study] can be downloaded from <http://www2.unescobkk.org/hiv aids/fulltextdb/aspUploadFiles/msm.pdf>



Cover of UNESCO report, "Mekong Erotics"