Filipino Men’s Condom Use during Gay Sex: Findings from the 2003 National Demographic and Health Survey

Eric Julian Manalastas*

PRE-PRINT VERSION of:

Sexual culture is the system of practices, meanings, knowledge, beliefs, and symbols that structure sexuality in different social contexts (Parker, Herdt & Carballo, 1991). With the recognition that sex is not simply a “natural” biological fact but a culturally informed experience shaped by subjective and material realities in which we live, the analysis of sexual culture has become a critical task for social scientists, especially those working in the area of sexual health.

One approach in the analysis of sexual culture is the empirical description of actual sexual practices in a population. Social, public norms surrounding sexuality may prescribe or proscribe certain forms of sexual expression, but whether these cultural ideals are translated into actual experiences is an empirical question. This paper analyzes baseline findings from a nationally representative dataset on one particular aspect of contemporary Filipino sexual culture: condom use or non-use during gay sex among Filipino men.

Previous empirical work on condom use as a sexual health behavior has focused only on Filipinos’ experiences of heterosexual sex (e.g., Laguna, 2004; Manalastas, 2005). This report aims to expand our knowledge on Filipino condom use and contribute to a less heterocentric, more inclusive analysis of Filipino sexual health behaviors.

Gay Sex Among Filipino Men

Although sexuality is becoming an increasingly popular topic in Filipino social research, relatively less is known about aspects of our sexual culture related to gay identities and sexual behaviors, possibly due to widespread heterosexism in contemporary Filipino society (Manalastas & del Pilar, 2005; Sabo, 2000). In one cross-national survey of 33,590 respondents from 24 countries conducted by the International Social Survey Program, the Philippines was found to be the nation with the most extremely negative views about gay/lesbian sex and other forms of sex outside the context of heterosexual marriage (Widmer, Treas & Newcomb, 1999). In fact, Philippine data were set apart in their cluster analysis, because of a highly uniform negativity toward diverse sexual behaviors, which was not found in other countries.

Despite the cultural heteronormative ideals in the Philippines, however, some research reveals a slightly different empirical picture for gay sex among Filipino men. Findings from the third Young Adult Fertility and Sexuality Survey (YAFSS3), for example, show that 15.1 percent of young sexually active Filipino men report having had sex with other men (Silverio, 2004). One
could argue that such survey results are likely to be underreported since the behavior of interest (i.e., sex between men) is negatively viewed and considered sexually transgressive (Catania, Gibson, Chitwood & Coates, 1990). So contrary to traditionalist, heteronormative views of Filipinos and their sexualities, Filipino men have and do engage in sex not solely with women, but with each other.

**Condom Use During Gay Sex: Beyond “Contraception”**

Apart from the scholarly analysis of sexual culture, research into gay sex is also of particular interest to those working in the area of sexual health and HIV/AIDS. Although it is now widely acknowledged that the HIV pandemic is driven largely by heterosexual transmission and is not a “gay disease” as earlier claimed, men who have sex with other men remain to be one of four internationally recognized key populations that may be neglected and therefore at risk for HIV (UNAIDS, 2006).

In the Philippines, HIV has been largely heterosexually driven. As of September 2006, the majority of the reported 2,655 cases in the National HIV/AIDS Registry has been linked to male-female sex. However, almost a fifth of known HIV cases in the country (N = 497, or 18.7 percent) indicate “homosexual contact” as the mode of infection, making it the second leading means of HIV transmission among Filipinos. Given that the sexual transmission of HIV between women is extremely rare (CDC, 2006), gay sex appears to be a smaller yet significant locus for the spread of HIV in the context of Filipino sexual culture.

While the surest way to avoid the sexual transmission of HIV is to abstain from sex altogether, a number of strategies have been identified to decrease sexually active men’s risk for HIV. One is to engage in behaviors that are known to have a relatively lower probability of HIV transmission, for example, mutual masturbation or oral sex (versus anal intercourse). Another is negotiated safety, when partners in a steady relationship who are both HIV-negative agree to dispense with condoms during sex while negotiating an explicit safety agreement regarding their sexual practices both within and outside their relationship (Kippax et al., 1997). And finally, perhaps the most well-established strategy for HIV prevention among gay men is the use of condoms during sex.

Correct and consistent condom use is considered to be the single most efficient technology to reduce the transmission of HIV and other sexually transmitted infections (UNAIDS, 2004). When used correctly and consistently during gay sex, condoms provide both male partners a significant degree of protection against HIV and a spectrum of other STIs. Condom use is particularly important for men who engage in receptive anal intercourse, a behavior associated with a high risk of HIV infection (Center for HIV Information-UCSF, 2003).

The analysis of condom use during gay sex also highlights how some lay people and even researchers have come to view – and indeed, reify – the contraceptive feature of condoms. While biomedical research has indeed shown that condoms are highly effective in preventing unwanted pregnancy, it is incorrect to refer to condoms as contraceptives per se, without considering the specific sexual and relational contexts in which condoms are used (Cooper, Agocha & Powers, 1999). Because pregnancy prevention motivation is not a factor in the use of condoms during gay sex, the examination of condom use (or non-use) among men having sex with other men also serves as reminder for caution about falling into the trap of essentialist, reproduction-centered discourses in the analysis of sexuality.
Problem

To what extent are Filipino men using condoms during gay sex? To explore this question, I present a secondary analysis of self-reported condom use among sexually active Filipino men using data from the 2003 National Demographic and Health Survey or NDHS (NSO & ORC Macro, 2004).

Method

Dataset

Data for analysis were obtained from the men's subset of the 2003 NDHS, an interview-based survey conducted by the National Statistics Office from June to September 2003, based on a stratified three-stage cluster sample of 13,914 households in the 17 administrative regions of the Philippines. The original objective of the 2003 NDHS was the provision of national-level data on fertility trends, knowledge and utilization of contraceptives, condom use, HIV knowledge and attitudes, and family health. The Men's Questionnaire, which looked into background characteristics, sexual history, and other health-related matters, was administered to a final weighted sample of 4,766 Filipino men ages 15 to 54 years old (response rate of 95 percent) which was used in this analysis.

Measures

Condom use was assessed using two yes-no self-report questions. The first was: “The first time you had sex with a man, was a condom used?” and the second was: “The last time you had sex with a man, was a condom used?” Respondents were also asked questions regarding HIV testing experiences, beliefs about condom efficacy, attitudes toward condoms, and heterosexual sex experiences. Because the structure of the dataset did not allow for the disaggregation of responses to the two sexual episode items (i.e., the data could not rule out the possibility that first vs. last gay sex were non-independent, overlapping events), the analysis focused on first gay sex experiences. Initial sexual experiences have been shown to be particularly salient in memory following a vividness bias (Abramson & Herdt, 1990) and can provide useful information about sexual activity of a population.

Results

About five percent of the total respondents in the NDHS Men's sample reported having had at least one experience of sex with another man (N = 239 out 4,766). Excluding those who report no interpersonal sex experiences, this indicates that 6.8 percent of sexually active Filipino men have had sexual activity with another man. Compared to Filipino men with no reported gay sex experiences, those who had male-male sex tended to be younger, 40.7 percent of whom were in the 15 to 24 year-old age bracket (see Table 1). Focusing on the young adult population, examination of the data indicated that out of the 633 sexually active Filipino men ages 15 to 24 years in the NDHS sample, 15.5 percent (N = 98) reported having had sex with another man. This corresponds with the 15.1 percent figure reported by YAFSS3.

Majority of Filipino men who had had gay sex also reported at least one experience of heterosexual sex (78.2 percent), and more than half were married to a woman at the time of the survey (55.5 percent), revealing that a number of heterosexually married Filipino men have had (at least one) past experience of male-male sex.
Further analysis of the young adult respondent data (see Table 2) also indicated that out of the 633 sexually active Filipinos ages 15 to 24 years in the NDHS sample, 9.6 percent ($N = 61$) reported at least one heterosexual and one gay sex experience, and only 5.9 percent ($N = 37$) reported having had only gay sex, by the time of the survey. These figures could point to some notable behavioral patterns in young Filipino male sexual culture: while a considerable number are not interpersonally sexually active (or at least do not report any kind of sexual activity with a partner), many are sexually experienced – most of whom have had sex with only women, some only with other men, and some with both women and men. Interestingly, the proportion of young Filipino men who have had sex with both a man and a woman was slightly greater than those who have had sex with a man only (9.6 percent versus 5.9 percent).
Table 2. Sexual Experiences of Young Filipino Men Aged 15 to 24

<table>
<thead>
<tr>
<th>Experience</th>
<th>Frequency</th>
<th>% of Total</th>
<th>% of Sexually Active Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Had sex only with a woman*</td>
<td>535</td>
<td>31.4%</td>
<td>84.5%</td>
</tr>
<tr>
<td>Had sex with a woman* and with a man*</td>
<td>61</td>
<td>3.6%</td>
<td>9.6%</td>
</tr>
<tr>
<td>Had sex only with a man*</td>
<td>37</td>
<td>2.2%</td>
<td>5.9%</td>
</tr>
<tr>
<td>No reported sex</td>
<td>1,071</td>
<td>62.8%</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>1,704</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

* Responses indicate at least one sexual episode.

Condom Use during Gay Sex

Although majority of Filipino men who had had gay sex believed that condoms provide protection against disease (87.7 percent) and many knew of a place where condoms could be obtained (78.0 percent), only 10.1 percent reported using a condom during their first sexual experience with another man (Figure 1). This indicates that about 9 out of 10 Filipino men with gay sex experience have done so unprotectedly. Similar levels of condom non-use of young Filipino men during heterosexual sex have been reported elsewhere (e.g., 86.2 percent, Laguna, 2004; 86.5 percent, Manalastas, 2005), highlighting converging evidence that majority of sexually active Filipino men, regardless of whether their partners were women or other men, do not appear to be protecting themselves during sex.

Secondary analysis of the 2003 NDHS Men's Dataset revealed a number of baseline patterns in sexual behaviors between men in contemporary Filipino sexual culture. Gay sex was a reported experience of a number of Filipino men, many of whom were relatively young, had had sexual activity with women as well, believed that condoms could protect against disease, and knew where condoms could be obtained. Nevertheless, very few Filipino men actually used protection during gay sex, as the extremely low level of condom use revealed.

Discussion

As a sexual health behavior, the use of condoms has been studied from a number of perspectives, and different factors have been suggested to account for levels of condom use. Traditional theories based on rational decision-making models have, for example, emphasized individual information, risk perceptions, and attitudes toward condoms and condom use; however, various studies throughout the first two decades of the HIV/AIDS epidemic have demonstrated that HIV risk prevention knowledge, beliefs, and attitudes have little to do with the actual behaviors that would protect people from HIV infection, for example, condom use among gay men (e.g., Valdiserri et al., 1988; Kelly & Kalichman, 1998; Weatherburn & Hunt, 1991). Dynamics like relational contexts (casual versus regular sexual partnerships; Weatherburn & Hunt, 1991), trust and intimacy among partners (Adam, Sears & Schellenberg, 2000), social norms regarding protected sex (Kelly et al., 1995), drug and alcohol use prior to sexual activity (Stall, Coates & Hoff, 1988; Kelly & Kalichman, 1998), constructions of masculinity (Halkitis & Parsons, 2003), and social meanings ascribed to condomless sex (Ridge, 2004) present themselves as important factors in understanding and addressing condom use among men.
A number of limitations in this secondary analysis are noteworthy. First, in relation to the problem of defining and operationalizing “gay sex” in the 2003 NDHS, male respondents were asked to report on their experiences of having “sex with another man.” It is unclear exactly what specific behaviors may or may not be understood to fall under this rather imprecise category. In contrast, sexuality researchers as early as the 1980s have made and incorporated distinctions among different forms of sex between men into their assessment of sexual behaviors (for example, separate items for receptive versus insertive anal intercourse; see Valdiserri et al., 1988). In one recent study, Vincke and others (2001) used cluster analysis listing 25 different possible behaviors that could be included in the category of gay sex – including insertive anal intercourse (IAI), receptive anal intercourse (RAI), partner masturbation (passive, active, or mutual), fellatio (insertive or receptive), interfemoral sex, and rimming, among others. This is not a trivial issue, for at least two reasons. First, some behaviors may carry different symbolic weight (for example, anal sex is associated with various meanings like masculinity, excitement, and even higher trust and love; Ridge, 2004) and could be more prototypically represented as “sex” by respondents (e.g., anal intercourse may be considered to be gay sex, but partner masturbation may not be). Second, from a biomedical, health perspective, some behaviors are known to be more high-risk than others. For example, anal intercourse (condomless RAI, particularly) is considered to have higher probabilities of HIV transmission, compared to other behaviors like oral sex and rimming, which are known to be “safer” (Center for HIV Information-UCSF, 2003).

A second caveat relates to the distinction between sexual behavior and sexual orientation and identity. Data limited to sexual behaviors do not inform us about the complexities of individual people's sexual identities and orientations. Any conclusions that respondents are in and of themselves “gay”, “bisexual”, or “heterosexual” individuals based solely on self-reports on one sexual episode are extremely problematic. Such inferences assume a perfect orderly fit between behaviors and orientations, an assumption not supported by empirical evidence (e.g., Lee, 2002; Tan, 1994, 1998). Ideally, sexuality researchers, especially those interested in social aspects of HIV, should collect data on both sexual behaviors and sexual identities, not limiting ourselves to one or the other (Young & Meyer, 2005). Thus, in the present dataset, we are able to explore male-male sexual behaviors but cannot make any definitive statements about sexual identities and orientations of Filipino men, a task left to future research.

Additional points for further work include the improvement of behavioral assessment and the investigation of the social dynamics of condom use in the context of Filipino sexual culture. Single-episode measures (i.e., those that look into first or most recent sexual activity) should be expanded so that we have better information about patterns of sexual behaviors, not just isolated “slices” of behavior. After all, it is correct and consistent condom use that protects against HIV transmission.

Likewise, systematic inquiry into the social meanings, contexts, and motivations behind sexual health behaviors like condom use will provide us with better insights into Filipino sexuality. In the case of condomless gay sex, for example, more in-depth study of intentions to use or dispense with condoms can answer the question of whether this trend among Filipino men can be framed as “barebacking” – the deliberate engagement in unprotected anal sex, which has been recently documented in many contemporary gay communities worldwide (Halkitis & Parsons, 2003; Ridge, 2004).

Finally, the relational context of condom use may prove to be a particularly important question. Filipino men have been shown to be less likely to use condoms when having heterosexual sex in steady partnerships (i.e., with spouses and cohabiting partners) compared to casual relational contexts (Manalastas, 2005), a pattern that has also been found among some gay men elsewhere (Weatherburn & Hunt, 1991). Whether this is also true for Filipino men during
gay sex cannot be answered by the 2003 NDHS dataset (which only probed respondents about sexual partnership types for sex with women, but not for sex with men), but should be an interesting avenue for further research, especially considering that a notable proportion of Filipino men who have had gay sex are apparently married or enter other forms of heterosexual unions (an issue which gives rise to a number of issues in terms of HIV prevention; see Kalichman et al., 1998).

These recommendations, which are in line with the basic task of analyzing the diversity within Filipino sexual culture, its many nuances and complexities, will provide us a wider, more inclusive knowledge base for more effective interventions in the area of sexual health and HIV prevention (Kelly & Kalichman, 1995).

References


