SEXUALITY AND SEXUAL BEHAVIORS OF MALE STD PATIENTS
IN DHAKA CITY, BANGLADESH

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ABSTRACT

With the emerging threat of HIV/AIDS, scientific discussions on sexuality and sexual behaviors have received global attention. However, in Bangladesh, due to sociocultural and religious sensitivities, research on sexuality has been avoided. This study involves an in-depth exploration of sexuality and sexual behaviors among male STD patients in Dhaka, in the context of STDs/HIV/AIDS transmission in Bangladesh.

A qualitative, exploratory research methodology was employed. Data were collected from August to November 1996. A purposive sample of 15 male STD patients was selected from the Skin and Venereal Diseases Out Patient Department of a government hospital in Dhaka city. An open-ended, unstructured, in-depth interview guideline was utilized for collecting data. Line by line content, contextual and thematic data analyses were performed to generate themes that represent perceptions and patterns of the dynamics of sexuality and sexual behaviors in their sociocultural context.

Results reveal premarital sexual relations beginning in early adolescence, often with multiple sex partners, and that extramarital sexual relations are also reported. Although heterosexual relations are predominantly reported as normative behaviors, two respondents reported having engaged in bisexual relations, what is described as situational, experimental, opportunistic, and unplanned. This suggests that sexual identity is not linearly related to sexual behaviors. Data show lack of knowledge about the body’s sexual and reproductive functions, as well as of STDs/HIV/AIDS, even among educated respondents. Condoms are not commonly used for disease prevention, but are used to some extent for contraceptive purposes. The respondents’ beliefs are influenced by their religious and cultural values in the absence of sex education.

Study findings clearly suggest that traditional gender roles in Bangladeshi society shape respondents’ sexuality and expression of sexual behaviors in terms of masculine and feminine sexuality, and male-dominated, double-standard sexual
relations. Western sexual ideologies are being diffused mainly through media exposure, especially by pornography. This cultural diffusion predominantly influences the perception of sexuality and sexual behaviors of adolescents and young adults which facilitates their moving beyond local cultural boundaries.

Further investigations are urgently needed in order to understand the phenomena, especially in a conservative Muslim society such as Bangladesh. Service delivery and future intervention programs for STDs/HIV/AIDS should be based on factual information regarding the dynamics of sexuality and sexual behaviors in the local sociocultural, socioeconomic, psychosocial and spiritual context. Culturally sensitive sex education then should be developed accordingly on a life cycle basis both at institutional and non-institutional community level.