

Extended abstract

**Condom use, HIV/AIDS prevention and gender relations in Vietnam:
Changing paradigm in the sexual realm**

Myriam de Loenzien, IRD-LPED

Introduction : gender relations in a transitional society

From Doi Moi policy in 1986 up to the country's WTO membership in 2007, Vietnam has been going through a deep demographic, socioeconomic and cultural mutation. The emergence of HIV/AIDS epidemic in the early 1990s and the development of fight against the epidemic have raised additional profound social changes. Condom use as the safer method to prevent HIV/AIDS sexual transmission during male to female intercourse is recommended by many HIV/AIDS prevention programmes. However, despite a high incidence of the epidemics, condom remains relatively little used, especially among married couples and de facto spouses.

In this context, in which respect are traditional norms of social and sexual behaviour between male and female still relevant to understand gender relations? In which way do these norms influence condom use? Conversely, in which way does the need to use condom against HIV/AIDS influence these norms and the way they are changing?

RESULTS FROM RECENT STUDIES

To document this question, we lean on the data of a study we performed in Quang Ninh province, one of the regions with the highest HIV/AIDS prevalence in the country. The gathering of data took place in 2006 in towns and on 2008 in the country-side. These results are supplemented by those of the 2005 national Population and Indicators AIDS survey to whom sample is representative of the whole population of Vietnam.

A case-study research in domestic households

Source of data

Case-control study accomplished in 2006 and 2008 in households in Quang Ninh province including a quantitative survey in urban area as well as a qualitative study in urban and rural areas. All members from 15 to 59 years old of investigated households have been surveyed using individual and household questionnaire.

Population under study

PLWHAs, people living in a household where there is a PLWHA, household members living in a household where there is no PLWHA, community representatives (health facilities, support groups for PLWHAs, popular committees).

Volume of data gathering

326 household questionnaires (163 household including at least a PLWHA and 163 household without PLWHA)

814 individual questionnaires to every member of these households among which: 179 PLWHAs, 219 household members cohabiting with a PLWHA, 416 household members living in a household where there is no PLWHA

45 in-depth individual interviews and 13 focus group discussions (FGDs) in urban area

12 in-depth individual interviews and 19 focus group discussions in rural area

Comparison of surveys

Besides the data of our study, we use data from the 2005 Population and AIDS Indicators survey. This national survey has been done with a sample representative of the population of the whole country. Every member from 15 to 49 years old from surveyed households has been surveyed. In total, 6337 households have been surveyed including 7289 women and 6707 men.

CONDOM: AN ULTIMATE RECOURSE

Condom : well-known but marginal

Condom use is recommended as a contraception method and as a STIs prevention method. Its implementation shows however that it remains marginal. It is indeed associated to HIV/AIDS prevention. HIV/AIDS is a particular phenomenon among STIs and problems of sexual health in general. The specificity of condom is not due to the fact that it would be linked to male character but to HIV/AIDS lethal character.

HIV/AIDS prevention: a well-known method

The level of knowledge is relatively high.

-> Comparison of the answers from men versus women on their knowledge of condom as a mode of prevention. Table 4.2 p. 37 national survey (question 404). Question 401, (spontaneous) 402 and (suggested) 406.

-> Study in Quang Ninh: quantitative data

-> Study in Quang Ninh: cross analysis of male and female verbatim on this topic.

The virulence of messages relating to HIV/AIDS and advices in favour of condom use are in favour of a strong adherence (in interviews) to condom use.

Prevention of contraception and of STI transmission: a marginal method

- Among couples in union (without HIV positive status), condom can be used for contraception, but only in case of difficulty or failure of other methods.

-> Study in Quang Ninh: focus group discussion with wives living with their husband in rural area. This FGD shows how women speak between them about the attitudes and behaviours of themselves and their spouses in relation to condoms use.

- For the whole population: knowledge of condom as a contraception method and a method to prevent STIs transmission

-> Study in Quang Ninh: interviews and focus-group discussions with people who are not HIV positive

Condom use: which gender relations?

Level of condom use

-> National survey: comparison of the answers of men versus women about condom use during their 1st sexual relation, during their last sexual relation and during 12 last months (question 324)

Negotiations within the couple about condom use

Condom use as a mode of HIV/AIDS prevention and as mode of prevention of STIs transmission corresponds to two different perspectives. The fact that STIs other than HIV/AIDS are not lethal allows people to express impossibility for a woman to negotiate condom use or to refuse sexual intercourse when her husband has an IST.

-> National survey: comparison of the answers of men versus women on the capacity of the wife to ask for condom use (question 516) when her husband has an STI.

-> National survey: answers of women on their personal capacity to ask condom use to their husband (question 519).

-> Study in Quang Ninh: quantitative data about discussion in couples for condom use, comparison between HIV positive couples and other couples

-> Study in Quang Ninh: quantitative data about agreement to use a condom with spouse according to HIV status of the couple, rural area.

Condom and payment for sexual intercourse

What is the contribution of commercial sex work in the explanation of the differential between men and women about condom use?

-> National survey: answers of men on condom use with commercial sex worker: last sexual relation with a commercial sex worker, level of systematic condom use with commercial sex worker during the 12 last months

CONDOM USE AMONG HIV POSITIVE COUPLES

HIV positive couple is defined here as a couple whom at least one of the members is HIV positive.

The reappraisal of male leadership within the couple

The adoption of a HIV prevention method

-> Study in Quang Ninh: quantitative data about condom use

Discussions within the couple about condom use after HIV status disclosure: importance of post test counselling. As long as doubt remains, condom use is not systematic. Generally, condom use is initiated only once the result of the HIV test is known with certainty and proves to be positive.

Condom use injunction is perceived as a loss of a male leadership: it is usually not the man who decides it, this behaviour is imposed from outside and often required by female.

-> Study in Quang Ninh: individual interview with a HIV positive men member of a support group for HIV positive people. Condom use mainly imposed by female partner.

-> Study in Quang Ninh: cross-analysis of interviews of 2 members of the same HIV positive couple in rural area: the injunction comes from head of health infrastructure

-> Study in Quang Ninh: individual interview with a head of health infrastructure

Condom use as an injunction

-> Study in Quang Ninh: analysis of an interview with a HIV positive woman whose partner did not test for HIV and is supposed to be HIV negative in rural area. Refusal by the female of sexual relations without condom. Verbatim: the negotiation for condom use within the couple.

-> Study in Quang Ninh: individual interview with a head of health infrastructure

The search for a new male leadership

The need for a male leadership

Injunction for condom use is perceived as calling into question the capacity of man to take or to keep initiative in sexual relations. This need of leadership is not only present in sexual relations but also in social life. This is also present among non HIV positive couples. The search for maintaining of male leadership appears clearly in cross analysis of interviews of two spouses

-> Study in Quang Ninh: cross analysis of in-depth interviews with two HIV positive spouses in rural area. The confrontation of these two interviews on their common sexual and therapeutic course shows two different versions. Male eludes the leading role taken by his wife. This cross-analysis of interviews raises questions about research methodology.

The claim for a masculine leading role at the risk of prevention

It corresponds to the search for a new form of masculine leading role, extreme case.

Paradox: the difficulty of some HIV positive women to make their HIV negative male sexual partner use condom. The opposite was not noticed: no man claimed to have asked for condom use to a female partner who would have refused it.

-> Study in Quang Ninh: in-depth interview with HIV positive woman in urban area

Conclusion of this part: male leadership and female virtue in the field of sexual relations is partly called into question by prevention injunctions

Conclusion: toward new gender relations related to efficient HIV/AIDS prevention

Our data show that part of the low level of condoms use relates to errors and gaps in HIV/AIDS programmes and policies. Until 2004, HIV/AIDS epidemic has been presented by the central power as linked to "social evils". Although this politic has been recognized as harmful and abandoned, it has deeply conditioned perceptions of HIV/AIDS within the whole population. Another factor, which

is linked to the former, is that condom use is perceived as endangering male leadership and female virtue in the realm of sexual relationships. Masculinity is traditionally supposed to be linked to sexual performance and proactive character whereas feminine virtues are supposed to be fidelity, obedience and passivity. Recent data show that these norms still prevail although some changes have been witnessed. Inequality between men and women is relatively strong in the social but also in the sexual arena. In the field of sexual health, masculine leading role is relatively asserted and exclusive. Male domination over sexual life of the couple corresponds to a social norm to which most female conform. It echoes male domination in social and family life.

This double standard leads to sexual behaviours in contradictions with recommendations given by prevention programmes. On one side condom use relates to constraints which are usually perceived as to be dealt with mostly by female, such as avoiding pregnancy, preventing male to female transmission of HIV and preventing mother to child transmission of HIV. On the other side, condom use is highly dependent on male willingness. The contradiction between behaviours generated by the need to use condom and behaviours linked to the double standard norms takes a specific strong emphasis due to the seriousness of the health threat which the epidemic represents. This contradiction occurs in various health contexts which we explore here. It poses particularly sharp problems for couples where at least one person is living with HIV/AIDS (PLWHAs). The decisive factor here is not the fact of living with HIV/AIDS but the recognition of this HIV status by both members of the couple.

However, some situations of couples where a member at least is living with HIV are marked by a try to rehabilitate male leading role. Male and female roles express themselves in the negotiation relating to condom use and the sexual practices which follow. Moreover, some particular situations show how this double standard model can gain diversity among these couples.

Such evolutions show the necessity of a reformulation of gender relations, especially sexual norms and sexual behaviour in a way to make sexual leadership and negotiation compatible with the imperative put down by the struggle against HIV/AIDS. This may lead to new perceptions and behaviours, that is to say a changing paradigm. As such, male leadership and female virtue may not be endangered by condom use but rather challenged.