

“EXPLORING TABOO BEHAVIOURS IN A TRADITIONAL SOCIETY: EVIDENCE FROM PAKISTAN”

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1. INTRODUCTION:

Pakistan is currently the sixth most populous country in the world, with an estimated population of 160 million and a growth rate of 1.9 percent (Economic Census 2007-08). Pakistan enjoys a unique geographical location being at the crossroads of Central and South East Asia and the Middle East.

The first case of AIDS in Pakistan was reported in the city of Lahore in 1987 (Khanani et al. 1988, Mujeeb & Hashmi 1988). According to UNAIDS estimates, there are approximately 70,000 to 80,000 HIV positive cases in Pakistan, which is about 0.1 percent of the total adult population (World Bank 2005). The number of reported HIV cases is 2622, with 321 individuals suffering from AIDS (NACP 2005).

Although Pakistan has been identified as a low prevalence country, recent evidence shows that the country is already experiencing a concentrated epidemic in the high-risk groups such as the intravenous drug users, commercial sex workers, transvestites, and long distance truck drivers (FHI Impact Project 2005). The infection has therefore, the potential to spread from these groups to the general population. UNAIDS has recently cautioned that the epidemic is growing rapidly in several South Asian countries including Pakistan, Vietnam, and Indonesia (UNAIDS Global Aids Report 2008).

The Ministry of Health and the National Aids Control Program (NACP) recognize the potential threat of a generalized HIV epidemic that might occur through men who engage in risky sexual practices. It was within this backdrop that the NACP commissioned a pioneering behavioral and biological study of urban men implemented by the Population Council in 2007. The main objectives of the DFID-funded study were: to estimate the prevalence of five commonly occurring STIs, including HIV, in six major cities of the country; to measure urban men's sexual behaviours and assess current levels of knowledge regarding STIs (including HIV), and to examine common misconceptions and perceptions about STIs. This paper presents only the study results that pertain to urban men's non-marital sexual behaviours.

2. DATA AND METHODOLOGY:

The study was conducted in six major urban cities of Pakistan that were purposively selected to include the four provincial capitals of Pakistan (Karachi, Lahore, Quetta, and Peshawar) and the other largest cities of the country (Rawalpindi and Faisalabad). The study had three distinct components: qualitative; quantitative; and biological. The initial formative qualitative research comprised 64 Focus Group Discussions (FGDs) that were conducted between February - April 2007 in four cities (Faisalabad, Karachi, Peshawar, and Quetta). In each city 16 FGDs were conducted. . The quantitative component of the study comprised a cross-sectional household survey. The study population included men aged 16-45 years, who had been resident in the selected households (households comprised houses, hostels and apartments) on the night prior to enumeration. The age band took into account the near-universal finding that men's risk behavior declines from about age 30 and reaches very low levels by age 50 (Crauel et al. 1995). The study population included both married and unmarried men from different occupations (including those working in the informal sector) as well as those who were students or unemployed. It represented most linguistic groups since migration to cities is likely to originate from almost all parts of the country.

400 men were selected in each of the six cities. The sampling protocol for the survey was a stratified, multistage systematic sample of households. Keeping in view the heterogeneity of these cities, the sampling protocol aimed at capturing the full range of the socioeconomic conditions of the city population. For this purpose, the literacy rate and the sex ratio, obtained from the 1998 Population Census, were used as the indicators of the socioeconomic status for each of the census enumeration circles. The “enumeration circle” is the smallest unit available in the 1998 Population District Census as demarcated by the population census organization for these cities.

The second stage was to randomly select one block with probability proportional to size from the list of total blocks from each of the ten circles. The enumeration teams updated the listing of each block before selecting the sample of households from each block. The third stage involved the selection of 40 households from each PSU using the systematic random technique. At the fourth stage, one eligible respondent (male resident aged 16–45 years; resident in household the previous night) was selected randomly from the household roster and was asked to participate in the study.

Out of a total 2400 men interviewed, 2396 agreed to provide biological samples. The overall refusal rate was 37percent, well within the range of surveys of men (Mishra et al. 2006, PDHS 1991).

We anticipated relatively high rates of non-response due to the sensitive nature of the subject matter of the questionnaire, the biological testing requirement, and the known difficulty in locating men in urban settings (Mishra et al. 2006). Out of the original 2,400 randomly sampled households, 1,338 (56 percent) were interviewed on primary visit and 1,062 (44 percent) were replaced because respondents were either ineligible, the dwelling premises were locked, respondents were absent after three follow-up visits, or the respondent refused. In total, 5995 households had to be approached. Subsequent to the quantitative survey, in-depth interviews were carried out with 247 men who reported having had non-marital sex in the last three months.

Data collection: Data collection was carried out by a study team that comprised one medical doctor, a phlebotomist a lab technician and two social scientists. For each city two teams were hired locally. All teams were assembled in Islamabad and provided extensive training. Field work was completed in approximately 45 days.

Ethical approval: Ethical approval was obtained from the Human Research Review Committee of HOPE a Pakistan based research organization, the Institutional Review Board of the Population Council New York, and the Ethics Committee of the London School of Hygiene and Tropical Medicine, London.

Data Analysis: Data entry was carried out using CSPro version 3.2 and data analysis was carried out by SPSS version 14. Statistical analysis included descriptive statistics, bivariate analysis using chi-square test and multivariate analysis using logistic regression models, with 95 percent confidence intervals.

Demographic Information Obtained During the Quantitative Survey:

The information obtained from the respondents included demographic data such as age, education, language, marital status, number of children, living arrangements, living away from natal or marital home, family structure, source of water supply in home, toilet facility, ownership of household possessions, occupation, salary, history of foreign travel and travel within country.

Information on risk factors included:

1. Sexual behaviours: History of sexual debut including age and type of partner, sexual partners in the last 12 months and last three months, type of sex including anal, oral and vaginal sex, condom use ever and last time, and personal hygiene.
2. History of testing for HIV/STIs
3. History of blood transfusion and testing status

3. RESULTS:

This paper reports both quantitative and qualitative study results that reflect non-marital sexual behavior with a special emphasis on male to male sexual activity. We present results related to sexual debut, lifetime behaviors and finally factors that are associated with bisexual and exclusive MSM behavior.

Table 1 provides the socio-demographic characteristics of the study respondents.

Table 1: Socio-Demographic Characteristics of Respondents (N = 2400)

Age	Percent
Mean age in years	29.1
Median age in years	27.0
Education	
No Education	14.9
Up to secondary	53.2
Above secondary	31.9
Employment	
Unemployed	3.0
Student	16.8
Employed	80.3
Types of Employment	
Government Service	19.3
Private Service	39.3
Self-employed	32.4
Other	8.9
Marital Status	
Unmarried	47.8
Married	51.8
Formerly married	0.7
Economic Status – Monthly Earnings	
1000-5000 Rupees	39.2
5,001-15,000 Rupees	5.1
15,001 and above	10.7

SEXUAL PRACTICES:

We describe sexual practices on the basis of:-

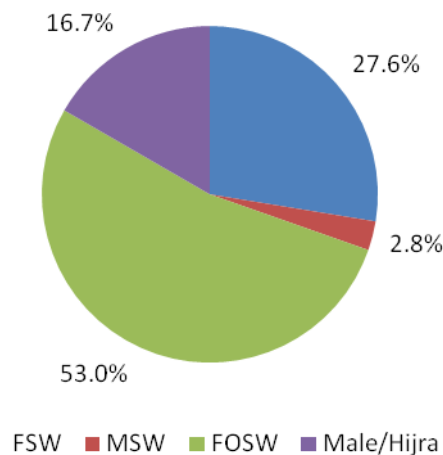
- **Sexual debut**
- **Non-marital sexual behaviours over different periods**
- **Relationships involving men**
- **Male having sex with male (MSM) activity in the last 12 months**

3.1. Sexual debut

Among the total sample of 2,400 men, 31 percent reported never experiencing marital or non-marital sexual intercourse (i.e., were virgins), while 42 percent reported having had their first sexual encounter with their wives. Twenty-seven percent (n=653) reported having premarital sex.

Figure 1 shows non-marital sexual debut by type of partner. Of the 653 respondents (27 percent) who reported having a premarital sexual encounter as their first sexual experience, 53 percent did so with a female other than a sex worker (FOSW), 28 percent did so with a female sex worker, 3 percent with a male sex worker, and 17 percent with a male other than sex worker and/or transsexual (*hijra*) (only 3 respondents, 0.5 percent admitted having had sex for the first time with a transvestite “hijra”).

Figure 1: Pre-marital sexual debut, by type of partner (percent) n=653

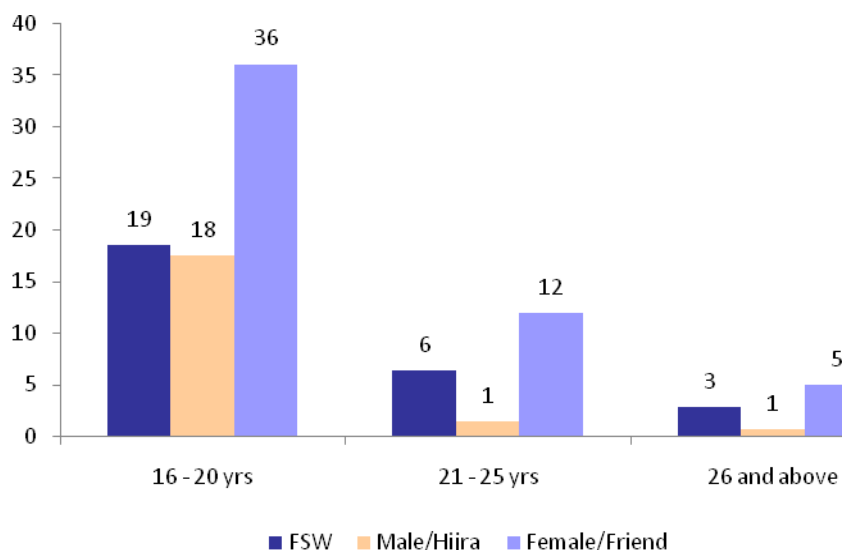


3.2. Age distribution at first intercourse. The mean and median age at the time of marital sexual debut was 22 years. The mean and median ages at the time of sexual debut for pre-marital sexual intercourse were 19 and 18 years, respectively.

Overall, the majority of men (44 percent) had their first intercourse between the ages of 16-20 years. Seventy-four percent of men had their first sexual experience by the age of 26. At older age bands the percentages decrease. Seven percent reported first sexual experience at the ages of 31-35 years; less than 1 percent had their first intercourse between the ages of 36-45 years.

Figure 2 shows the variation in type of sexual debut partners (other than wife) among different age groups. Sexual debut with males seems to be more likely at younger ages (16-20 years), which is a period of experimentation and partner selection and according to our qualitative findings is also based on availability and affordability. At increasing age debut with males we assume is more likely to be a matter of preference or choice.

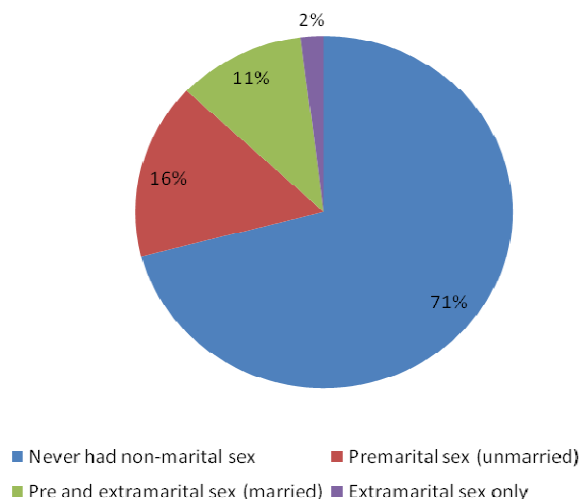
Figure 2: Type of partner, by age at first intercourse (n=653)



Non-marital sexual behaviors over different periods

In order to determine the extent to which the study population engages in premarital or extramarital sexual activity, all respondents were asked to recall their non-marital sexual experiences over their lifetime, within the last twelve and three months. The results based on lifetime experience of all men included in the study, are shown in figure 3.

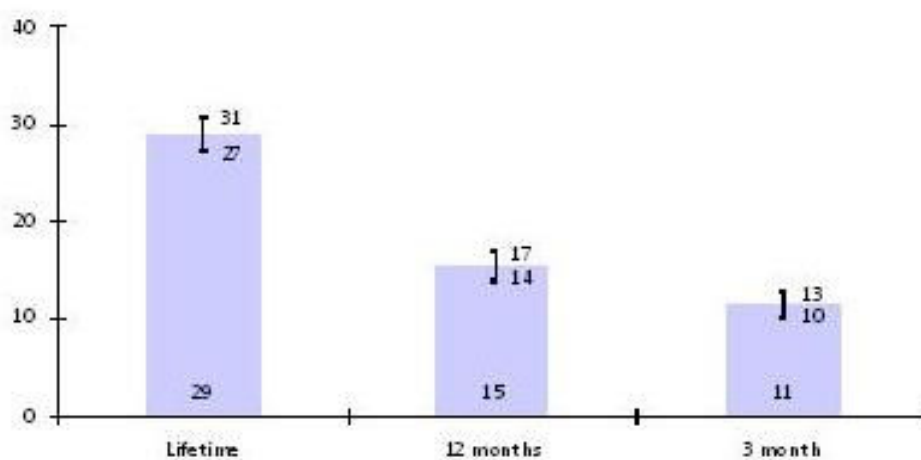
Figure 3: Lifetime non-marital sexual behavior of all non-virgin respondents



Nearly one-third (29 percent) reported having had non-marital sex in their lifetime. Of these men 16 percent reported premarital sex, while 11 percent reported engaging in both pre- and extramarital sex. Only two percent reported exclusive extramarital sex. In total, 13 percent of men reported engaging in extramarital sexual activity.

Figure 4 shows non-marital sexual behavior over different time periods (lifetime, last 12 months, and last 3 months) with 95 percent confidence intervals. Eleven percent of respondents reported non-marital sex in the last three months, fifteen percent in the last 12 months and 29 percent reported non-marital sex ever in their lifetime.

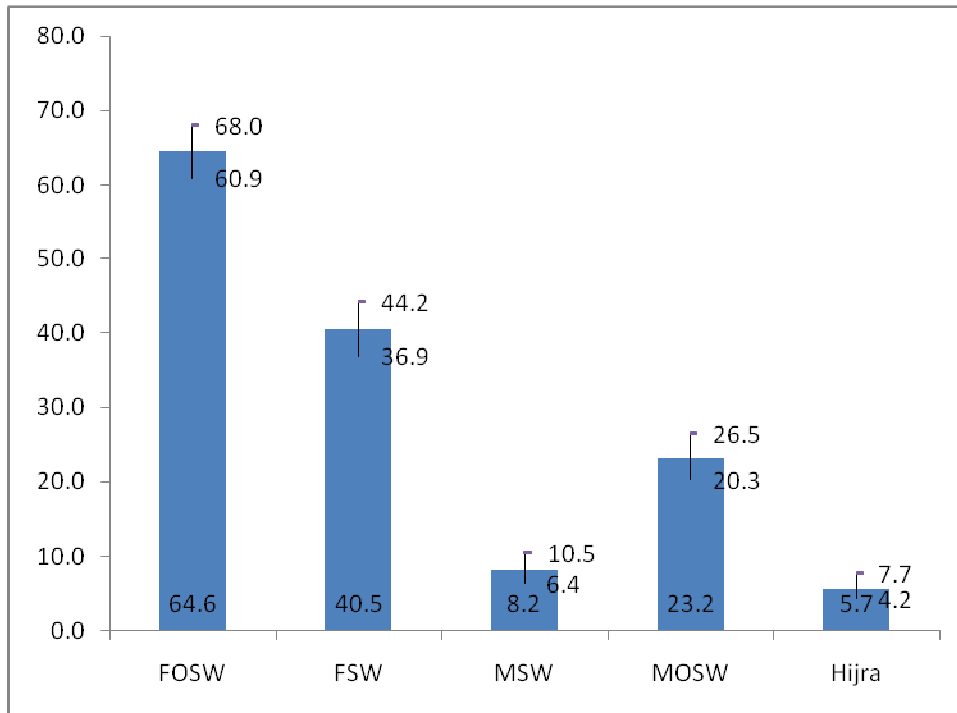
Figure4: Respondent’s non-marital sexual behavior, over three time periods (with 95% CI)



Among the respondents who had ever had non-marital sex in their lifetimes (n=697), as seen in figure 5 65 percent reported having sex with a female partner who was not a sex worker with no financial transaction being reported. These partners in most instances were labeled by respondents as ‘friends’. The next most frequent category was female sex workers (41 percent overall). The third most frequent non-marital sexual liaison was reported with males who were not sex workers (23 percent) while 8 percent reported sex with a male sex worker. Multiple responses were possible.

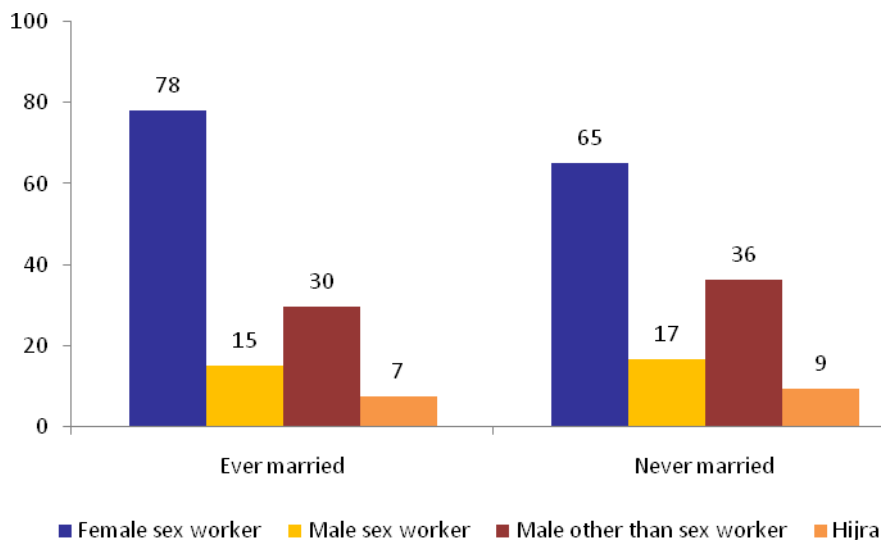
Sex with eunuch sex worker (hijra) was about 6 percent in all six cities. It is possible that there is underreporting of sex with hijras due to the stigma against sex with these individuals (Faisel and Cleland 2006).

Figure 5: Type of sexual partners among men who reported non-marital sex (n=697)



Looking at the distribution of high-risk partners within the married and unmarried categories of figure 6 the results suggest that unmarried men had higher rates of sexual activity with male sex workers, males other than sex workers, and hijras as compared to married men. Most unmarried men were in the younger age category.

Figure 6: Type of high-risk sexual partner, by marital status (percent)



Overall, 44 percent of those who reported non-marital sex said they had three or more non-marital partners in their lives, while 39 percent reported having one partner only.

3.3. Relationships Involving Men

In total 211 respondents (9 percent) reported ever having had sexual relations with men. Out of these 62 respondents (2.6percent) reported exclusive sex with males. Among the respondents reporting sex with men 26 percent were married. Overall,the reporting of sexual relationships with men was significantly more likely among unmarried men as compared to married men (p value <0.000).

3.4. MSM Activity in the last 12 months

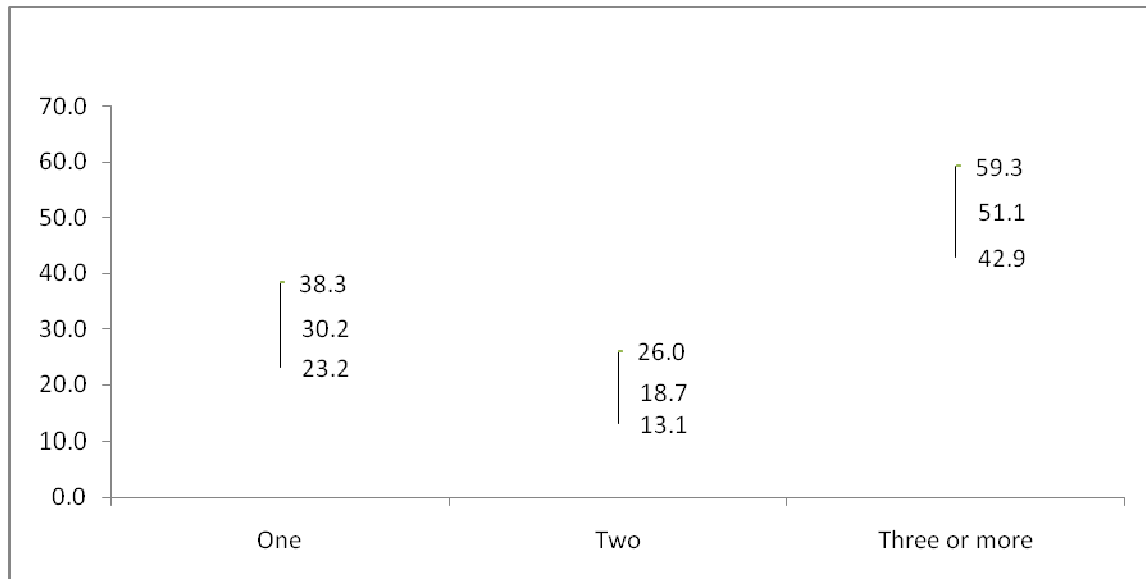
Among men having sex with men, 65 percent reported having had sexual activity in the last 12 months as shown in figure 7. Out of these, 33 percent reported having had sex with a male friend , 28 percent with a female sex worker, 27 percent with a female friend, and 16 percent with a male sex worker (multiple partners were possible and hence the total does not add to 100 percent).

Figure 7: Types of partners of MSM men with 95% CI in the last 12 months



As shown in figure 8 nearly half of the MSM men reported having had three or more sexual partners in the last 12 months.

Figure 8: Number of partners of MSM in last 12 months



3.5. Perception of Risk of MSM Men

Nearly half of the MSM respondents when enquired as to whether they considered themselves to be at risk of acquiring a sexually transmitted infection replied in the affirmative (p value <0.000).

3.6. MULTIVARIATE ANALYSIS OF MSM AND EXCLUSIVE MSM ACTIVITY

Multivariate analysis was carried out to identify the association between various individual level characteristics and the probability of engaging in sexual activities involving men. Two models (Table 2 and 3) were constructed for the purpose. The first identifies the contribution of covariates to being sexually active for MSM while the second model explores the contribution of covariates to the probability of men having sex exclusively with men. The outcome variables in the first and second models were respectively based on 211 MSM (included 146 bisexual men as well 62 men having exclusive sex with men) and 62 exclusively homosexual men.

Table 2: Factors associated with MSM activity among the sexually active population. (n=1643)

Variables	Adjusted OR	95% CI	P value
Age			
Upto 27 years	5.4	3.8 – 7.7	0.000
>27 years	1		
Educational status			
Upto 10 years	2.1	1.4 – 3.2	.000
>10 years	1		
Occupation *			
Unemployed	2.7	1.6 – 4.3	.000
Service	1.8	1.2 – 2.8	.005
Self Employed	1		
Ever viewed pornographic materials			
Yes	4.8	3.0 – 7.7	.000
No	1		
Migration status			
Short-term Migrants*	1.1	0.7 – 1.7	.585
Long-term migrants*	2.1	1.3 – 3.4	.002
Non-migrants	1		

Factors that had a significant association with men engaging in MSM behaviours were being less than 27 years (the median age of all respondents in the sample), having less education (below 10 years), being unemployed, having ever viewed pornographic materials and being a long-term migrant i.e living away from natal or marital home for more than 4 months.

In the second model (table 3) the factors significantly associated with exclusive homosexual behavior were having sexual debut at a younger age, being unemployed, having had exposure to pornographic materials, and cigarette smoking. Educational attainment was not significantly associated.

Table 3: Factors associated with men having exclusive sex with men among the sexually active population (n=1643)

Variables	Adjusted OR	95% CI	P value
Age at sexual Debut			
16-22 years	12.5	3.8 – 40.7	0.000
>22 years	1		
Occupation *			
Unemployed	8.8	3.0 – 26.0	0.000
Service	4.5	1.5 – 12.9	0.006
Self Employed	1		
Ever watched pornographic materials			
Yes	3.3	1.5 – 7.2	0.002
No	1		
Cigarette smoking			

* Short-term Migrants are respondents who stayed away from their natal or marital homes for one night or more and Long-term Migrants are respondents who stayed away from their natal or marital homes for four months or more.

Yes	0.3	0.1 – 0.6	0.001
No	1		

4. DISCUSSION:

Gaining independence from British colonial rule, the Islamic republic of Pakistan came into being in 1947. Contemporary Pakistani society is close knit, conservative and traditional. Most of the population is rural and the economy is agrarian. However, modernization especially within the cities seems to have loosened the hold of traditional values and norms.

The constitution of Pakistan framed in 1973 enshrines that all laws should be in conformity with the precepts of Islam, the official religion of the country. According to Islamic Law sexual relationships outside marriage with males or females are forbidden. Islamic punishments for such acts are severe. According to the Pakistan Penal Code Article 377 the punishment for carnal intercourse is imprisonment for life or a prison term not less than 2 or more than 10 years (see footnote)*.

In such a scenario pre and extra marital sexual relationships are severely castigated by society. Societal norms do not allow open discussion about sexual practices and sexuality as they are considered “taboo” subjects. Sexual activity outside marriage is stigmatized as immoral or unnatural and therefore, takes place clandestinely and is never publically acknowledged.

Contrary to expectations our study results show that Pakistani men are indulging in risky sexual practices outside of marriage that are commencing at a young age and include sexual practices that have not been previously documented. For the first time this study provides empirical evidence to describe the magnitude of non-marital sexual practices prevalent in Pakistani society. Our results are supported by other studies from South Asia that found relatively high rates of both extramarital and premarital sexual activity. Collumbien’s (2000) study among urban and rural men in India found that 25 percent had sex before marriage, and did so with a variety of partners (e.g., sex workers, friends, relatives, and future spouses). Faisel and Cleland (2006) found that 55 percent of the unmarried men in their study of migrant men in Lahore reported being sexually experienced.

Another important finding from the study is that it reveals exclusive male sexual activity with men. We do acknowledge that our estimates of exclusive male having sex with males are possibly an underestimate. Most studies are believed to underestimate the prevalence of male-to-male sex (UNAIDS 2007). The issue of male-to-male sex in most societies is associated with stigma making it difficult for people to discuss the issue candidly. The prevalence of HIV in men who have sex with men is important for several reasons. In 2006, more than 70percent of HIV-positive people in South and Southeast Asia were men. In Pakistan, of the reported cases of those infected with HIV, men outnumbered women by seven times, and 7percent of HIV-positive individuals were men who have sex with men (AIDS epidemic update 2006). According to a recent study in Karachi and Lahore, 4percent

***377. Unnatural Offenses:** *Whoever voluntarily has carnal intercourse against the order to nature with any man, woman or animal shall be punished with imprisonment for life, or with imprisonment or either description for a term which shall not be less than two years not more than ten years, and shall also be liable to fine.*

Explanation: *Penetration is sufficient to constitute the carnal intercourse necessary to offense described in this section.*

of 200 male sex workers/hijras tested were found to be HIV positive (Bokhari et al. 2007). Other findings (Khan and Hyder 1998; Khan and Khan 2006) and anecdotal evidence suggest that males engaging in sex with other males is a more frequent practice.

Many men who have sex with men do not do so exclusively – they also have sex with women. 42percent of the respondents in a survey of MSM in Andhra Pradesh, India were married (Dandona et al., 2005). A sample of 482 men who had sex with men in Beijing (Gibson et al., 2004) found that nearly two-thirds also had sex with a woman, 28percent of them within the past six months. In our study among the 211 MSM men, 26 percent were married. This has important implications for the potential for an HIV epidemic in Pakistan as married men can act as the bridge to spread the infection from the high risk groups to the general population.

Sex between men may take place because it is what is immediately available, for example in prisons or among long distance truck drivers (Khan and Hyder 1998, Agha S. 2002). Men who engage in it also may not think of themselves as homosexual and in other situations will have sex with women. In our study in the in-depth interviews with men who reported exclusive sexual activity with males, none of the respondents reported having a sexual preference for males. This could be attributed to the fear of social disapproval attached to homosexual behaviours.

From a public health perspective MSM behaviours present an important entrypoint in preventing the spread of the HIV epidemic. Clear evidence exists that the HIV epidemic among MSM is accelerating in other settings. The infection rate among men who have sex with men was reported to be 28percent in Bangkok in 2005 compared with 17percent in 2003 (Van Griensven et al., 2005). In Ho Chi Minh City, it increased from 5percent in 2003 to 8percent in 2005 (Tuan et al., 2004).

Across Asia and the Pacific, governments are putting more money and resources into HIV prevention and AIDS treatment, but few countries have addressed the entirety of the challenge. A key component missing from virtually all national programmes are services for men who have sex with men (MSM). Among 20 Asia-Pacific countries surveyed in 2006, only nine of the National Strategic Plan on AIDS had included MSM and HIV specific programmes or interventions, such as peer outreach despite that Asia's AIDS pandemic first appeared among MSM (UNAIDS 2007). Only eight countries had any form of surveillance specific to MSM, while only five reported the inclusion of MSM in Behavioral Surveillance Surveys (BSS) (UNAIDS response survey, 2006).

At least 5percent to 10percent of all HIV infections in the world are transmitted through unprotected sex between men (UNAIDS 2007). Based on the evidence available from the region, the number of men who engage in sex with men is estimated at 2percent to 5percent worldwide (Caceres et al., 2006). Male-to-male sex occurs in every culture. In East Asia, studies estimate 3percent to 5percent of men have same sex relations at some point in their life, which is similar to our results.

Our results show that sex with males is more likely to occur at younger ages (16-20 years) and declines with age. At younger ages men often begin sexual experimentation, and their choice of sexual partner at this age is often based on availability and affordability and not necessarily on sexual orientation or preference. This may explain why male sexual partners are reported comparatively

higher in the lower age groups than in the older ones. With a large cohort of Pakistan's population in the adolescent age group an important recommendation from this study is that in addition to school health programs, special interventions must also be introduced that reach out of school young men who are employed in the informal sectors in order to educate them about safe sexual practices.

In describing their sexual relationships a high proportion of respondents reported relationships with "friends" who were either males or females, with no financial transaction taking place in exchange for sex. However this phenomenon needs to be more deeply understood as it is not known whether these "friends" also had concurrent partners. Sexual partners labeled as "friends" have also been reported in the earlier study by Faisel and Cleland (2006). The concept of unpaid sex with these friends needs further elaboration. Our qualitative research suggests that while these relationships may not be purely financially mediated there is some degree of transaction 'in kind' -- which could range from providing gifts or doing favors.

The study results show that while awareness about condoms was quite widespread, their use was very limited in part because men perceive condoms as contraceptives. This assumption needs to be rectified through more explicit Information Education Communication (IEC) campaigns. Having multiple sexual partners enhances the risk of acquiring STIs and should therefore be a focus of future IEC campaigns.

As the multivariate analysis shows and is corroborated by the qualitative research, non-marital sexual behavior especially among young males is being influenced by exposure to pornography through various electronic mediums. The qualitative data suggests that these materials have some influence on sexual norms or practices such as group sex and preferences for oral and anal sex.

Another finding from our study shows that living away from their natal or marital home predisposes men to risky sexual practices. These findings are supported by the literature that argues that mobility due to occupation is a risk factor for STI transmission (Lau et al. 2001). It is possible that men living away from their families are free from socio-cultural and familial constraints and hence have greater opportunities to engage in non-marital sex.

CONCLUSIONS:

Our study results provide new evidence that challenges preconceived notions of male sexual behavior in a traditional Islamic society such as Pakistan. The findings and recommendations from this paper will help inform key stakeholders including policy makers regarding the need to develop appropriate preventive strategies that target specific segments of society and influence behaviours of especially the youth.

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