

Safer sex or pleasurable sex? Rethinking condom use in the AIDS era

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ABSTRACT. *Background:* Condom use in Bangladesh is low despite nationwide family planning initiatives and HIV interventions. *Methods:* Fifty men aged between 18 and 55 years from diverse socio-demographic backgrounds and five key informants were interviewed in a qualitative male sexuality study. *Results:* Refusal to use condoms is not only a personal choice, but pertains to relationships. The meanings of reduced bodily pleasure associated with condom use are socially constructed. Men's emotions and trust expressed through understanding of direct penile–vaginal contact and ejaculation inside the vagina as 'pure' and 'natural' sex oppose condom use. Sexual prowess in the form of prolonged intercourse without condoms, as depicted in Western pornography, was perceived as a 'real man's' sexual skill. Men sought to preserve a 'good man's' image by avoiding condoms, which symbolised promiscuous men in AIDS educational messages. *Conclusion:* Social dimensions of masculine sexuality, pleasure, eroticism and the emotional aspect of men's lives have to be addressed for effective condom promotion.

Additional keywords: HIV/AIDS, condoms, men and masculinity, social constructions of pleasure.

Introduction

Although contraceptive use has significantly increased over several years in Bangladesh, condom use remains low, even lower than traditional methods.¹ In the context of a paucity of general population-based sexual behavioural studies, most information about condom use comes from commercial sex settings which are widespread in Bangladesh. The findings of national behavioural surveillance consistently reveal lower use of condoms among sub-populations at risk.^{2–5} A brothel-based female sex worker (FSW) in Bangladesh serves the highest turnover of clients per week with the lowest condom use anywhere in Asia.^{4,5} While FSWs' requests that clients use condoms have increased from 61% in 1998 to 87% in 2001, condom use during the last sex act has decreased from 4 to 0.2% in this time.⁴ Most of these studies have not described reasons for the lower use of condoms.^{2–6} Few qualitative studies address condom use,^{7,8} and lack a deeper understanding of reasons for the non-use of condoms, particularly the meanings of men's concerns about sexual pleasure and emotions. While non-governmental organisations (NGOs) operate targeted HIV interventions for various sub-populations, the sustained low use of condoms warrants immediate attention.

Globally, most studies explore women's perspectives of men's refusal to use condoms.^{9–14} Women's statements regarding men's reasons for condom refusal may not reflect men's understandings. Moreover, many of these studies only report the frequency of stated reasons ignoring deeper meanings attached to these numbers. Studies conducted with STI clinic attendees¹⁵ or sub-populations at risk^{2–5} miss the voices of non-patients or populations not recognised as being at risk, popularly known as the 'general' population. In particular, their condom using behaviours are unknown and deserve greater attention. Although males' notions about condoms reveal great diversity in responses,^{16–18} these perceptions are analysed in an individual framework rather than a broader sociocultural context.^{19,20} Therefore, qualitative studies are necessary for enriching our understandings of the meanings of condom non-use. This is an essential step for developing effective condom promotions, particularly in South Asian countries, where critical threats of HIV transmission exist.^{21,22} This article attempts to explore and explain commonly reported reasons for condom non-use and male perspectives are analysed in a broader framework of gender, sexuality and masculinity, with the ultimate aim of strengthening condom interventions in Bangladesh.

Methods

'The commonest form of 'behavioural' research, as it is usually called in health studies, is survey research using questionnaires. But research of that kind, though it yields useful counts of episodes, gives limited understanding of the meanings that sexual encounters have for the partners, their place in the lives of people involved.'²³

A qualitative study was undertaken to understand the meanings of reasons for condom non-use in both urban and rural Bangladesh. Male experiences and condom using behaviour were not reduced to measurable units according to the quantitative approach to sexual behavioural research. Rather, we sought a holistic view of men's sexual practices and experiences and gained an understanding of the diverse contextual meanings that men attach to condom non-use in the context of complex and overlapping issues of male sexuality, perceptions of sexual pleasure and notions of masculine sexuality. This requires an in-depth consideration of men's voiced realities.

A phenomenological qualitative research method^{24–28} was chosen where the phenomenon involved is condom use as it relates to sexual health and well being. Two field researchers along with the principal investigator collected data and were involved in data management. Fifty men, between 18 and 55 years of age with an average age of 27, from diverse socio-cultural, economic, educational and occupational backgrounds, and five key informants involved in condom promotion interventions were interviewed in depth. Forty-five percent of the participants were currently or ever married and 55% were never married. Of the participants 48% had institutional educational qualifications and among them 30% had completed 10–16 years of education. A semi-structured open-ended guideline was utilised for in-depth interviews with maximum flexibility for incorporating emerging issues for exploration. Each interview took an average of 2 h. On a few occasions, we had to arrange several sessions to complete one in-depth interview. Along with these in-depth interviews, we analysed participants' referred cultural scripts (e.g. printed AIDS educational material, video CDs, and videocassettes) and their responses in this aspect. We looked at participants' metaphors reflecting their experiences and emotions. Metaphor is considered useful in sex research since it 'communicates the terms in which the men conceptualised sex and sexuality and thus indicates the point of connection between personal experience and cultural context.'³⁰

In traditional Bangladeshi culture, historically people believe that signing a paper means entering into a 'serious deed' which could put them at risk of exploitation. Our earlier research experience suggested that while discussing personal and intimate issues about one's sex life, participants often felt uncomfortable giving their written consent, which usually created a 'threatened' and 'suspicious' relationship with the researcher. This may eliminate the opportunity of building a relationship of mutual trust and rapport. As the participants were adults, verbal affirmation only was considered adequate to begin an interview. This verbal testimony was tape-recorded every time at the beginning of the in-depth interview.

Professional translators translated several tape-recorded interviews, but we noticed that the English version of raw data had lost in many places the socio-linguistic details and the context of men's psychosocial descriptions of sexual behaviours. The recorded interviews were transcribed in their exact linguistic form in order to perform manual qualitative data analysis. The data analysis was performed using inter-subjective interpretations through examination of a variety of interview-texts, researchers' field-diaries (with researchers observed and encountered experiences during fieldwork relating to the interview process), line-by-line content, contextual and thematic analytical procedure.^{28,31} Only Bengali speaking authors participated in the interpretation of data. Careful, repeated and systematic reviews of

the transcripts were made and linked to the research questions, and other relevant emerging thoughts. Note-cards were used in order to identify prominent themes, logical connections, clarifications or relevant comments that would assist in explaining similar statements made by other informants. During this process, we identified the general domains emerging from the texts. This categorisation process included the identification of salient themes, recurring ideas, meanings or languages and logical relations that linked people and situational context. During analysis, atypical or diverse data were not disregarded, but were presented as well.

Results

Although most men knew about condoms, non-use within or outside marriage was generally reported. Only a few men claimed inconsistent use. The negative notions about condoms were diverse and complexly grounded in men's lives. Men commonly claimed the following reasons for non-use of condoms: (i) reduction of sexual pleasure; (ii) breach of emotional closeness; (iii) interruption of 'naturalness' and 'uncontrolled' sexual sequences; and (iv) destruction of the image of a 'good man'.

Meanings of reduced sexual pleasure

Most men emphasised penile–vaginal penetration to ejaculation as the principal way to achieve sexual pleasure. Only a few men mentioned various acts of foreplay as integral to their sexual enjoyment. These acts included hugging, kissing, pressing and sucking breasts, and manual stimulation of the vagina. Oral sex on women was only reported by a few urban men of comparatively young age. These acts of foreplay were not considered important for getting sexual pleasure for both men and women. Rather, all these acts were not labelled sex unless they ended in penile–vaginal penetration to ejaculation. This prevalent notion of sexual pleasure requires a partner, preferably a woman. Men most commonly claimed genital 'desensitisation' and 'reduced sexual pleasure' for themselves and their female partners as the reason for not using condoms.

This pervasive claim of reduced pleasure is a complex phenomenon with diverse meanings. For example, incompetence in using condoms or unfamiliarity with condoms was even described by some married and unmarried men as 'reduced pleasure'. One educated urban man had never used condoms in his pre-marital sexual life. His wife took contraceptive pills until she developed medical problems. A doctor suggested condoms for contraception. Aware of his inexperience, he became worried. His friends informed him that condoms reduce pleasure, which generated further fear and tension. When he attempted to use condoms, he was embarrassed as he initially could not open the packet causing his wife to laugh at this incompetence. He first attempted to wear it in the wrong direction. Then he was able to wear it correctly, which took some time. Soon after wearing a condom his erection was deflated and he could not perform intercourse that night. This was his first and last

attempt at using condoms. Like this man, many other men's inexperience in using condoms made their first experience embarrassing. They usually hide their incompetence, which is counter-productive to 'manly' sexual skill.

There are other dimensions of sexual pleasure. For example, condoms were perceived as barriers to the 'male right' to sexual pleasure with FSWs. Several married and unmarried participants claimed that on a few occasions they used condoms with FSWs but, believing that condoms reduce sexual pleasure, they did not continue intercourse with condoms in most of their commercial sexual encounters. For example, one unmarried, urban daily laborer stated:

'I know I have to use a condom especially with FSWs. During my last visit to a FSW, I started sex with a condom on. I did not get sexual pleasure. I took off the condom. I could complete a 'bad sex' with a condom on my penis, but you know I paid money for enjoyable sex. I do not frequently visit FSWs. I know sex with sex workers could be risky. Therefore, I carried a condom for protection, tried but failed. What can I do? I have a right to enjoy sex with the FSW as I paid money for that.'

Perceptions of sexual pleasure are constructed as men's perceived 'right' to enjoy sex without condoms with paid sex partners. Men's sense of reduced bodily pleasure was grounded in their economic right as consumers of commercial sex.

One rural married farmer stated that '*nach-te name, ghomta deya jaina*' which is a popular cultural metaphor indicating that if a woman decides to dance, she cannot cover her face with *ghomta* (a part of the dress generally used to cover face) due to shyness. For a woman in Bangladesh dancing is an issue of showing her openness in public. Although the metaphor is constructed in the feminine context, this man used it to indicate that if a man wants to have sex (analogous to dance), he should not use a condom to cover his penis (analogous to cover the face with *ghomta*) for whatever underlying reasons. Deciding to engage in sexual intercourse means 'pleasurable, adventurous and wild action'. Using any measure of protection is '*porospor birodhi*' (contradictory) and '*hasshokor*' (funny) to the philosophy of sexual interaction. Thus, the concept of sexual pleasure was constructed in the framework of men's acceptance of 'pleasurable adventure' for sexual intercourse, which is 'wild' too. This notion was raised by both married and unmarried participants at urban and rural settings.

Men had several other negative views of condoms relating to perceived reduced sexual pleasure with condoms. These included: (i) the smell of condoms was unpleasant; (ii) a 'tight' feeling during intercourse was hampered with lubricated condoms; and (iii) the condom is bigger than the penis.

These views were related to condoms rather than men's sense of bodily pleasure. Men raised several questions: 'Why do manufacturers put so much lubricant on condoms?' 'Why is the smell of condoms so bad?', 'Why can't they produce condoms with a pleasant sexy smell?' 'Why are condoms produced in one size?' Regarding the concern about the size of condoms, one man stated:

'I have tried various local and foreign condoms. Not one fits to my penis. Both the length and diameter of condoms are greater than that of my penis. I feel upset using a condom, my partner may notice the smaller size of my penis compared to that of the size of condoms.' (Urban, unmarried, tailor, 27)

A condom acts like a measuring tape to assess the length and width of the penis. Finding his penis 'much' smaller than that of available condoms, he felt threatened for having a comparatively 'smaller' penis: the symbol of men's power and sexual potency. Therefore, reduced pleasure in this case was constructed on phallogocentric sexuality where the size of a penis was measured against a condom.

Men were concerned about their abilities to give pleasure to women. No specific word is known in Bengali for 'orgasm'. The meaning of orgasm was not clear to most men. In Bengali pornographic magazines, several terms are used in relation to women's sexual pleasure. Men were confused in describing women's sexual pleasure. Even those men who claimed to be confident of their sexual skills in providing pleasure to women, acknowledged that they never raised the issue of pleasure with women, although it was important to them. When asked about this apparent contradiction, some reported that sexual pleasure is a private matter that a person only needs to perceive. It is not a topic for discussion with others. Some believed that sexual pleasure is a 'normal' thing that is 'automatically' achieved during intra-vaginal penetration. However, many men acknowledged that they were not sure when a woman got the highest pleasure or the nature of women's pleasure.

'Ejaculation is an obvious feeling of pleasure for men. However, I do not think women also ejaculate. Women's secretions are difficult to understand for men. I think a woman's vagina is always wet which does not result from sexual stimulation. Rather, it is nature of a vagina.' (Rural, unmarried, factory worker, 29)

They reported the unavailability of proper information on these issues. Men generally reported that women's primary source of sexual sensation is located inside the vagina which can be aroused by penile penetration. Women's sexual pleasure begins when the penis enters the vagina and ends when it is taken out.

Men thought that if 'a woman's *joni* (vagina) fills with *jouno ros* (sexual secretions), then she is enjoying sex' and

an uncovered penis was 'perfect to feel women's vaginal secretion'. The notion of women's enjoyment is described in *choti* (Bengali pornographic storybooks) in slang such as *guder pani jhora* (sexual secretions of vagina) of sexually excited women. Men, especially unmarried young men in this study, used similar terms to describe women's sexual excitement, which they wanted to feel through their uncovered penis.

Men's perceptions of sexual pleasure were often constructed in the context of the portrayal of sexually skilled men in pornographic movies and magazines. 'I am skilled in stimulating any woman sexually within few minutes. A man should know how to excite a woman. This is an essential skill for a man.' Many men wanted to feel sexually excited females' vaginal secretions with their uncovered penis, in order to assess their sexual skill.

'A woman's *sukher sitkar dhoni* (noises of pleasure) during sexual intercourse indicating that she is enjoying sex, as women do in pornographic movies.' One urban married man described his experience that FSWs always made 'noises' during sexual intercourse. This made him happy as it reinforced his masculine sexual potency in giving pleasure to women. In contrast to this situation, many men claimed that their wives or other partners never made any 'noise', making them confused. They believed that sex with condoms might be less enjoyable for females, preventing them from making 'noise'.

One married urban man reported that if his semen was not discharged inside his wife's body, she would not get *shes moja* (end pleasure) of 'real' sex, making the whole act incomplete. He claimed his wife wanted him to ejaculate inside her vagina because she enjoyed the 'hot sensation of semen'. On further inquiry, he reported telling his wife about the concept of *shes moja*. Although women's perceptions of pleasure of intra-vaginal ejaculation were not explored, men reported teaching women the meanings of sexual pleasure from male perspectives.

Meanings of breaching emotional closeness

The sense of emotional intimacy acts as a barrier to condom use for many men, as one 32-year-old rural married, educated businessman, reported a deeply loving relationship with his wife since adolescence.

'Initially I began to use condoms and both of us found that sexual interactions with condoms did not match our emotional intimacy. We do not have any barrier in our emotions and love, why should we place a 'barricade' in our sexual actions and emotions?'

His wife took contraceptive pills to prevent pregnancy. He claimed that condoms destroyed the 'penis-vagina' direct contact, the crucial symbol of physical and emotional proximity between a male and a female. 'When we have

other options of effective contraception, why do we need to depend on condoms?' Thus, condoms were seen as barriers to physical and emotional proximity in sexual relationships between loving partners.

Similarly, another married man claimed: 'sex is a pure and natural thing, which is the consequence of extreme physical and mental closeness with my wife.' Like this man, many others did not like to 'mechanise' this 'purity' by using condoms. If men's semen is not ejaculated inside women's bodies, then it is not a 'pure' sexual interaction.

'I love to go deep to her to ejaculate into further deep to feel a great sensation of a real sexual intercourse. As I engage in sex with my wife for love and emotion, so I want to feel her deeply. I see condoms as barriers to my emotional and physical closeness to my wife.' (Urban, cinema hall staff, 32)

Using a condom with one's girlfriend signifies a lack of love and trust in the relationship. Sex is a symbol of trust and a close relationship to these men.

'My girlfriend is taking contraceptive pills for enjoying sexual intercourse, as both of us do not like condoms. Pills prevent pregnancy as well. One of her friends had a pregnancy during using condoms with her boyfriend. So she does not believe in condoms. It is good that I do not need to use condoms. If I stick on condoms, this may indicate that I am concerned about *jouno rog*. This reflects either of us is promiscuous. The meaning of love and trust will disappear. This is not good for both of us since we are going to marry soon.' (Urban, unmarried, student, 26)

Some married and unmarried men reported practicing withdrawal in order to prevent both pregnancy and STIs. One unmarried man stated: 'I can easily control the moment of my *birjopat* (ejaculation), so it's not a problem to ejaculate outside her vagina by withdrawal.' He claimed that if he used condoms, his 'smart' girlfriend might suspect his sexual honesty since condoms are good for promiscuous men. When asked about his girlfriend's fear of getting pregnant the man replied: 'she prefers to be pregnant than allowing me to have sex with other women.' These men viewed love and closeness as analogous to non-condom sex, which could be achieved through direct penis-vagina contact by the withdrawal technique.

Meanings of interrupted 'uncontrolled' sexual sequences

Once erect, without any delay, most men proceed to penetrate, the ultimate goal of sex. Many men reported that they did not like to spend time in 'useless silly things' referring to foreplay. With probing, they emphasised lasting longer after penetration. Some men claimed that after

becoming erect they did not wish to delay mainly because of the fear of losing the erection, which they described as an 'uncontrolled' sexual sequence. Some reported that in extreme sexual excitement, they simply had no time to wear condoms. *Jokhon mathai mal uthe jai* (during extreme sexual excitement) an unmarried man said he could not 'even remember his name, so wearing condoms was a rare possibility.'

'Jouno khudha and jouno kamona (sexual drive and excitement) are strong for men. If tigers taste meat, they become crazy and will eat meat by any means, no one can remove meat from the claw of tigers. Men are like tigers. When they touch women, their sexual stimulation becomes so intense that they simply do not like to listen to any advice about condoms.' (Religious leader, rural)

The tiger's wildness symbolises the 'uncontrollable' male sex drive. They alleged that their bodies and mind were adapted to a sequence of non-condom sexual interaction. Men enjoyed the spontaneity of sexual interaction to inevitable penetration. Condom use was seen as a threat to the continuity of this sexual sequence. A married educated man preferred wearing a condom immediately before penetration and at that 'extreme moment' he stated: 'my wife gets angry if I waste time in wearing a condom, either of us dislikes to interrupt the sequence of sexual action by wasting time in wearing a condom.' Therefore, he did not use condoms.

Some unmarried men described not being mentally ready to have sex with their girlfriends until kissing and doing many 'other' things. Sexual stimulation was beyond their control and finally 'it' happened without condoms. The sequence and flow of sexual acts were compared with unprotected *banner joler moton* ('flood of water'). Men reported sexual activities must lead to penetration and ejaculation without any interruptions. Condoms were seen as barriers to 'natural' sexual sequencing of men's 'uncontrolled' sexual drive.

Meanings of broken 'good man' image

We found men's 'good man' image prevented them using condoms, which to them symbolised promiscuous men in the AIDS era. Some men referred to printed materials on AIDS education published by local NGOs. Locally produced Behaviour Change Communication (BCC) materials recommend monogamous sexual relationships and only to introduce condoms for 'promiscuous' men in order to protect STIs/HIV. Cultural and religious sensitivities have made the situation complex in Bangladesh. An HIV/AIDS program manager claimed he faced difficulties in finding culturally and religiously appropriate messages for field dissemination on condoms. He claimed: 'We cannot introduce condoms in positive ways due to religious

sensitivity. We need to be careful that our messages do not hurt religious sentiments about being monogamous.'

Men felt shame in purchasing, storing or disposing of condoms after use. The shame and stigma attached to the purchase of condoms, especially for unmarried men, was commonly reported. Unmarried young men in Bangladesh are not supposed to pursue premarital sexual experiences, keeping the societal expectation of 'good men.' This results in their embarrassment about obtaining condoms.

'My face tells I am unmarried and you know very well how bad is the meaning of buying a condom by an unmarried man in our society. Being unmarried, how can I ask for condoms from a shopkeeper? I will be labelled a 'bad boy', who wants that image?' (Rural, unmarried, student, 21)

A widespread silence regarding sexuality in Bangladeshi society and the necessity of keeping the image of sexually inactive 'good' unmarried men, discourage them purchasing condoms. Even married men felt shy while purchasing condoms, especially from local shops. Married men felt shame on the grounds that when contraceptive pills are widely used by women, their purchase of condoms could indicate their sexual relations with other women. A man stated that his wife took contraceptive pills, so he did not need to use condoms for contraception. If he wanted to use condoms, he had to ask his wife to stop taking pills, raising unwanted suspicion in her mind. The promotion of condom use from a disease prevention framework imposes negative connotations on condoms. In this era of AIDS, many men did not like to bring condoms into their relationships with wives, in order to avoid creating any 'unnecessary misunderstanding' and to keep the 'faithful' or 'good man' image.

Condoms are advertised as suitable for promiscuous men. Many men perceived condoms as barriers to 'good' and 'faithful' images. They did not like to take any risk of being suspected of infidelity. Condoms as symbols for sexual infidelity threaten the image of 'good' manhood in Bangladesh, resulting in non-use of condoms by many married and unmarried men.

Discussion

'Condom use is a social behaviour and probably one of the most ambiguous behaviours, since it takes place between at least two persons with an unequal distribution of power including physical, mental, social, economic, gender relations and acquired knowledge.'⁸

Supporting the findings of many other studies,³²⁻³⁶ participants in this study were mostly concerned about reduced sexual pleasure with condoms. The claim of reduced pleasure has diverse meanings. The 'uninterrupted natural'

sequence of sexual interactions must end in penetration. Putting on a condom appeared as a challenge, particularly at the extreme moment described as an 'uncontrolled' moment of sexual sequence. Flood finds his respondents are concerned about 'the heat of the moment', which he thinks is a 'psychic space' or 'moment' that is 'passionate, sexually and emotionally intense, verbally silent.'³⁴ He thinks the concept of 'the heat of the moment' may have overlapping dimension with the 'male sex drive' which is considered 'uncontrollable' even for few moments to wear a condom. Findings of the studies of other countries also demonstrate men's perceptions of uncontrollable sexual desire and drive work as barriers to condom use.^{32,34,37-40}

Underlying reasons for claimed 'reduced pleasure' were explained as originating from men's fears of losing their erections while wearing condoms. Participants' fears of erection failure destroy their 'sexual performance', threatening masculine sexual potency, a phenomenon reported by many other researchers.^{41,42} We argue that ideas about 'the heat of the moment' or the 'uncontrolled male sex drive' are constructed in the midst of performative male sexuality. Avoiding condoms due to 'uncontrollable' sexual sequences has the social dimension of ensuring manly performance beyond mere physical or psychological pleasure. Men described this in a vague and ambiguous manner, pointing to the 'innate nature' of male sexual sequences under the banner of 'reduced pleasure'. We agree with Flood that men's claims of 'condoms as desensitising' is not a simple outcome of physiological and pre-social sensation, but is informed by cultural meanings in a social context.³⁴

Many men's inexperience in using condoms often makes the first incident of condom use an embarrassing experience, resulting in what they reported as 'reduced pleasure'. Studies suggest that such negative experiences reduce the likelihood of condom usage and positive experience reinforces further use.⁴³ Since men believed that condoms reduce pleasure and destroyed erections, their first negative experiences resulted in permanent non-use of condoms. These negative experiences are shared with and passed to friends who internalise the fear of using condoms, sometimes without any personal experience of condom use.

Men primarily attached meanings of sexual pleasure to the genital area. Because they view sex as penetration of the penis into the vagina for ejaculation, direct penile-vaginal contact has no alternative. Anything covering the penis is perceived by men cross-culturally as the major barrier to achieving sexual pleasure.^{32,34,38,41,44} Chapman and Hodgson describe participants' notion of sex with condoms is meaningless, as condoms are symbolised as sex with a 'shower' and condoms as 'raincoats'.³³ Using a condom to prevent disease contradicts the notion of sex as an act of 'wildness' where risk is an alien concept. Flood's participants claim 'there's no better feeling than the inside of girl's, the inside of a

female,' which they do not like to compromise by wearing condoms.³⁴

Men's complaints reflected their views that condoms interfered with the essence of 'naturalness' of sexual acts, and diminished their sexual pleasure mainly by preventing the penis-vagina contact. Married men claimed that 'real' pleasurable sex should end in ejaculation inside a woman's body. Similar sentiments have been reported both in Australian and British studies.^{34,45} Men claimed that wives wanted their husband's 'hot semen' inside their bodies to feel the 'end pleasure' of sexual intercourse. We argue that men transmit their preferences and notions of 'end pleasure' to women who then claim this as their own preference. Studies on women's sexuality demonstrate that women internalise men's views about sex, and are taught to satisfy men sexually.⁴⁶⁻⁴⁸ This is particularly true in Bangladesh where women are culturally expected to behave sexually inert and ignorant, appointing men as sex tutors.⁴⁹

There is a controversy whether sexual pleasure or sensation is physical or psychological.⁵⁰ With Flood, we are convinced that pleasure is not solely implanted in bodily experiences.³⁴ Negative notions about condoms and 'performative' masculine sexuality influence the concept of pleasure. Participants' statements support other scholars' argument that male sexuality is constructed beyond the biological domain and there is a connection between men's physical body and socio-cultural interpretations of men's bodily actions.^{34,51} Men rationalise their non-use of condoms as 'not my fault', by which they defend their illogical decision in an essentialist framework of men's rights to achieve sexual pleasure. The notions of 'male rights' to enjoy sex and men's rationalisation of non-use of condoms potentially contribute to the social construction of condom non-use.^{45,52}

Since a condom eliminates the direct contact between a penis and a vagina, emotional closeness, an essential component of sexual interaction particularly between loving partners, is considered to be hampered. This has been reported by many researchers across countries.^{16,34,53-56} Emotional closeness was prioritised, particularly for rationalising sex without condoms. This poses the question; why men do not use condoms with paid sex workers, where the relationship is not based on emotional trust and closeness? While exploring this issue, a separate discourse of relationship with sex workers was identified. Some men took off condoms as they could not find any valid reason to complete what they regarded as unsatisfactory sex with a paid sex worker by compromising 'the male's right' to enjoy sexual intercourse in commercial settings. This has been supported by other studies.⁸ It seems that the relationship between emotional closeness and condom use is complex. Along with emotional closeness and trust, we argue that emotional detachment or mistrust opposes condom use. In case of emotional detachment, men are not concerned about disease or pregnancy. Therefore, they do not feel any

obligation to use condoms. The risk of disease was given less importance compared with the sexual urge and 'male right' of getting pleasure with commercial partners without condoms. Although the meanings and rationalisations are different, unprotected sex becomes a common outcome.

We need to consider the possibility that men may avoid condoms based on women's perspectives of sex in the framework of love, as suggested by other researchers.⁵⁶ However, as some men raised the issue of love, emotional sentiment and trust as counterproductive to their use of condoms, 'we need messages which tell us how to have safety in love and how to incorporate condoms in the search for love'⁵⁷ for both men and women.'

The practice of the withdrawal technique in sexual intercourse demonstrates the expectation of achieving close physical contiguity by direct penis–vaginal contact. Although they prefer to ejaculate inside, pregnancy has to be avoided. Therefore, sex through withdrawal constitutes a preferred way to keep the sense of emotional closeness to one's partner, particularly wives or girlfriends, and it is also perceived as preventing pregnancy. When we discussed the possibility of contraceptive failure of withdrawal, they claimed they were skilled enough in this technique to achieve contraception. This notion of being 'skilled enough' reflects ideas about men's mastery in sex, which need to be demonstrated in front of women.^{30,35,57} Men's understandings of sexual skills and performance in the framework of non-condom using masculine sexuality have been reported elsewhere.^{30,52,58,59}

A few men who had access to AIDS educational materials internalised the notion that AIDS is a disease of promiscuity and condoms, therefore, are choices for promiscuous men. Condoms signify a 'bad' image of men. As suggested by other researchers, this negative image of condoms diminishes the possibility of their use.^{19,40,60,61} This is particularly true in Bangladesh where 'good men's' manhood is constructed in moral and religious rigidity.⁶² Thus, the common discourse of safer sex promoted through condom use is antithetical to this 'good men' image.

Condom advertisements in commercial settings, especially in America during the 1970s, were directed towards sexual pleasure and intimacy.⁴³ During the late 1970s, condoms were integrated in family planning programs in most countries of the world. Since the early 1980s, with the emergence of the HIV/AIDS pandemic, condoms have been advocated in the framework of AIDS prevention, suggesting promiscuous men should use condoms. The central strategy of condom promotion in the context of sexual promiscuity to prevent STI/HIV is problematic. Abramson and Pinkerton think the reason for the limited success of condom promotion programs is that safer sex campaigns are directed towards the disease prevention paradigm, rather than pleasure.⁴³ Current AIDS educational materials in Bangladesh and elsewhere are narrowly focused on morality,

fear production and the imposition of biomedical knowledge. The issue of human sexuality, pleasure, eroticism, fun and enjoyment are absent in educational messages. Moreover, introducing condoms in the promiscuous context greatly perils a 'good man' image, suggesting its relevance to some men's non-use of condoms. If condoms are placed in opposition to 'good man' images, it is likely that many men may reject them from fear of being labelled promiscuous, especially in front of their girlfriends and wives. Therefore, the chance of bringing infection to one's bedroom cannot be diminished by advertising condoms in the disease framework.

Conclusion

This article offers a broader understanding of the complexities of meanings men attach to condom non-use. It is suggested that policy planners, program managers and condom manufacturers need to re-conceive strategies of condom interventions. Disseminating simple messages about the capacity of condoms to prevent STI/HIV/AIDS has questionable success in encouraging condom use in Bangladesh and elsewhere.

Condom promotion needs to move from the discourse of AIDS to a discourse of pleasure, sexual skill and eroticism.⁴⁸ Due to dominant constructions of masculine sexual prowess, men want prolonged intercourse. There is no concluding evidence that condom use delays ejaculation by penile desensitisation. However, during informal discussions with brothel and street based female sex workers in Bangladesh, it was reported that clients could increase the frequency of thrusting with condoms. This was also supported by some men who used condoms for prolonging time of intercourse before ejaculation.⁸ Since most men are concerned about the span of sexual intercourse and prefer delayed ejaculation to show their sexual prowess, condoms can be introduced as a choice of sexually skilled men. In addition, as condoms liberate sexual intercourse from pregnancy and infections, the issue of pleasure and eroticism can be the focus.

Men's understandings of sexual skill and performance in the framework of non-condom use and masculine sexuality have been reported in several cross cultural studies.^{30,52,58,63–65} Reference to porno movies as learning media for non-condom sex as 'real' men's' sexual skill demonstrates that in the era of globalised media culture, men's understanding of condoms and sexuality are not exclusively locally constructed. Producers of pornographic media can contribute to sexual health promotions by advocating condoms as the core ideal of pleasurable sex of 'real men'.

Condom use is a behaviour that needs to be promoted with appropriate information for encouraging men to include it as an integral habit of their sexual lives. Studies show that men possess positive attitudes towards condoms if they acquire

satisfactory skill to use them appropriately.³⁶ In addition, as some men raised the issue of love, emotional sentiment and trust as counterproductive to their use of condoms, ‘we need messages which tell us how to have safety in love and how to incorporate condoms in the search for love’⁵⁶ for both men and women.

Innovative messages can address condoms in the framework of relationship, masculinity and sexual enjoyment between men and women. Our findings support the concept: ‘sex education must therefore promote safe sex as pleasurable to be effective and change public attitude towards the condom.’³² We need to remember that ‘safer sex cannot be enforced by one sex or the other: it can only be practiced in an atmosphere of mutuality and compromise.’³⁰ Rather than focusing on risk, disease and promiscuity, if the discourse of sexual pleasure and skill is placed at the centre of condom promotion, men may achieve a satisfying sexual life, which is safer too.

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