

Men Who Have Sex With Men: Risk Situation In Pattaya, Chonburi ชายมีเพศสัมพันธ์กับชาย: สถานการณ์เสี่ยงในพัทยา ชลบุรี

Nikom Moonmuang

Faculty of Nursing, Burapha University

นิคม มูลเมือง

คณะพยาบาลศาสตร์ มหาวิทยาลัยบูรพา

Abstract

This article takes its place among a considerable body of literature on Men who have Sex with Men (MSM). A survey assessment was done during April to June, 2007 in Pattaya Municipality, Chonburi province. This report is based on extended observation and interviews along with secondary data from other research studies.

Keywords: Socially Transmitted Disease

Men who have sex with men (MSM), in the research context, is a term used to classify men who engage in sex with other men, regardless of whether they self-identify as gay, bisexual, or heterosexual. The term is intended to reference a particular category of people as a risk-group for HIV. This survey study focuses only on MSM who have work in the service sites in Pattaya.

Pattaya is located on the Gulf of Thailand, about 140 kilometers southeast of Bangkok. It is Asia's premier beach resort and accommodation ranges from luxuriously appointed beachside hotels with superb convention facilities to simple guesthouses. There are many leisure activities and cultural entertainment particularly after dark. Pattaya offers all the truly vibrant nightlife such as night clubs, bars, discotheques, cocktail lounges, and restaurants.

In the year 2007, the data indicated that there were about 1,065 of male commercial sex service places with more than 4,500 commercial male sex workers in Pattaya. More than 80 per

cent of service sites are gay beer bars. Other examples of the sex service venues are go-go bar, karaoke, gay hotel, gay sauna, gay coffee shop, gay massage, and gay restaurant. There are many sites located in Pattaya such as North Pattaya road, Pattaya Land 3, South Pattaya 2, VC Avenue, and Jomtein Complex.

The service sites for gay were classified into 3 sizes by Mr. J. Sampao for the Thailand Research Fund: large size with more than 60 sex workers, medium size with between 31-60 sex workers, and small size with less than 30 workers. Male sex trade occurs at the bars and freelance or the beach. The beach boys are workers who parade on the beach and make eye contact with their customers. Some offer Thai massage.

The service can also be divided into 3 price levels: 1) high level is focused on high income customers with service costing more than 5,000 baht. The majority of workers are good looking. Most customers are male foreigners and some female foreigners from Japan, Korea, and Hong Kong.

2) Medium level service is provided for the medium income customer with service charge was between 2,500 to 5,000 baht. Majority of the service places are low level with cost between 1,000-2,500 baht. The shows at each service place level are also of different styles. High level show the male's body and personality similar to models on the clothing catwalk. In contrast, the low entertainment has a special show of sex organ size and positions for making love. Each of working places has different worker roles dependent on the size and level of service. In general the worker team consists of a manager, captain, bartender, waiter, doorman, and male sex worker.

Workers ranged in age from 18-24 years, though more than half was less than 22 years of age. The majority of the workers come from the Northeastern region, with second highest proportion from the North region. Workers were generally from farm and labor families with insufficient income to support their family. Ninety per cent of workers had education level of secondary school or less and were single. The ratio of same sex/opposite sex partners is equal for married men.

The data indicated 2 main factors that influence intent to work as a commercial sex worker.

1. Social factors play a major role in leading men to work as commercial sex worker. Social factors identified include:

1.1 Family problems. The data indicated that family factor played important role in making decision to work as commercial sex worker such as family breakdown.

1.2 Friend factor. Friendship also was one of the factors influencing men to work in this career. Their friends provided information of this career as providing good income, with no education

qualification and no experience needed.

2. Personal factors

2.1 Economics was one of the main factors in the decision to become a sex worker. Men give reasons such as unemployment, low income from their former work, and responsibility for their family living cost that made them a decision to work as commercial sex worker.

2.2 Perception of social value has changed a lot in Thai society and many young men put a higher value on material than mental aspects of life. Becoming a commercial sex worker provided them with high income without any experience or education qualification. So they can have access to unnecessary things.

2.3 Homosexual behavior also was found in some workers. Thai culture still does not accept the gay behavior. In contemporary society, men have more pressure on not showing their gay behavior. For this reason, working as commercial sex worker provided them opportunity to release their sex need. Moreover, they also got paid from their sex activity.

The results of the study revealed that there are still risks of HIV transmission among MSM group due to the low level of knowledge of AIDS in new workers. A major reason for higher HIV/AIDS prevalence is that engaging in receptive anal intercourse carries a higher risk than other forms of penetrative sex. There are also misconceptions and lack of concern about using condoms, particularly if the customer gave them high pay or they got a handsome customer. The reasons for no condom use during sexual intercourse were that it was not comfortable and enjoyable, particularly with regular customer or their partners. In fact, the data showed that this group had an average of

changing their partner 2 or 3 times per year. As a result, they contribute to the high risk of HIV transmission in this group.

Inadequate knowledge of sexual health care behavior from the MSM group may cause more infectious cases. To reduce the burden of sexually transmitted diseases and HIV infection among MSM, it is of utmost importance for health care providers to take a serious initiative concerning MSM behavior and promoting the well-being of this minority group.

Acknowledgement

The author wishes to thank the Policy Research and Development Institute Foundation (PSI) for grant support for this survey study. Special thanks are expressed to Assist. Prof. Dr. Ronald A. Markwardt for helping with the languages.

Further Reading

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