# "Condoms are for people with HIV": partial information and sexual taboo among middle-class women in Delhi, India

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How do women construct understandings and strategize in an environment where gathering sexual and reproductive health information is taboo? Women were interviewed about their experiences and attitudes regarding sexual and reproductive health information. The title of this paper is a paraphrase of a middle class woman's statement about condoms during a research interview in Delhi, India. The statement starkly captures the type of misunderstandings that can occur when people are caught between public health messages and sexual practices in a context where reliable information about sex is difficult to obtain. What are the current strategies, and how can they best be augmented? What tools, curricula and policies can be developed to best serve women's own well-being and the greater public health?

Background: Recent scholarship examines the relationship and sexual behavior of young adults in urban India (Hindin and Hindin 2011), and the absence or inadequacy of reliable sex education in the face of rising risk of HIV and STIs (Benzaken, Palep and Gill 2011). Strategies for overcoming the silence can be framed in the theory of everyday actions of De Certeau. In the midst of confusing messages, subjects obtain information about theses socially taboo topics as acts of self-care and resistance. In addition, the wedding of pleasure to safe sex technologies (Philpott, Knerr and Boydell) emerges as an possible antidote to the silencing traditions of taboo and danger.

Methods: Semi-structured interviews were conducted with 33 women in Delhi, India during four months in 2011. Women had attended or were currently attending post secondary university, had held professional jobs at some point, and were between the ages of 19 and 58. Interviews included questions regarding the interviewee's first and subsequent exposures to formal and informal information about sex and reproductive health, their own efforts to obtain information, and their suggestions regarding the sources and content of information for young people in the future. Interviewees were assured that the interview was about their experiences with information and not about actual sexual experiences. Careers of the interviewees included nursing, law, journalism, research, social work, NGO staffer, university student, advertising, and hospitality management. Data from interviews is triangulated with participant observation, including trips to chemist shops (pharmacies), markets, and sexual and reproductive health clinics, as well as attendance at a co-ed student women's action group, an LGBT campus group and a community center for transgender people. In addition, content analysis is conducted of articles in newspapers, women's magazines and television advertisements in Delhi during the time of the study.

Preliminary analysis of themes from the interviews includes ways in which public health messages are at times misunderstood, ways in which popular media and online technology augment and obscure access to information, ways in which existing health structures and policies may pose barriers to safe sexual practices, and insights into ways that women construct gender, power and pleasure. Five main thematic areas are identified below.

#### STIs:

"You know if you have an STI if you have a rash."

Several respondents were completely unaware that there were other STIs besides HIV/AIDS. From those women who could name others, herpes was the most common, and chlamydia, syphilis, and gonorrhea were rarely mentioned. Only two women knew where to go in order to be screened or treated.

## Contraception:

"Can I drink alcohol if I take the pill?"

Despite the interviewees' universal awareness of television advertising for pills and condoms, information about their correct use and safety was difficult to obtain. The differences between emergency contraception, the daily oral birth control pill and the early abortion pill were widely misunderstood. Women cited an almost complete lack of privacy in which to find out about or to obtain contraceptive products or services.

### Sexual information on the internet:

"I just googled it..."

Many women did not have private access to the internet, greatly curbing their ability or willingness to privately search for information. Those who did have private internet access increasingly triangulated information between the web and friends, family, books, magazines and other media with mixed success at finding what they wanted to know. Younger women and those with their own computers had the most access to the internet.

## **Depictions of Sex:**

Rape was consistently cited by women as the most prevalent depiction of sex in the media in films, television, books and news. Women's magazines offered partial descriptions of sexual pleasure and instructions for obtaining health care. Mills and Boon books (the equivalent of harlequin romances) were often cited as giving euphemistic sexual and romantic accounts.

#### Pleasure:

This thematic area includes, but is not limited to knowledge about female orgasm. Inquiries about orgasmic response were the most common questions women asked the researcher. With the exception of access to medical and nursing textbooks for a few women, there was an overall lack of information about female and male anatomy. Women's magazines described pleasure and sexual positions without the

context of basic anatomical information and outside of the cultural context. Sexual aids, including regular vibrators, were almost unobtainable because they were illegal to sell or transport.

Researcher positionality is a likely influence in the research, as researcher identified primarily as a social science researcher and secondarily as a health care provider in the field of sexual and reproductive health in the United States. Coupled with social outsider status, this may have facilitated communication and/or directed the interviewee's responses toward medical and health considerations. At the end of each interview, the researcher provided a list of reliable, comprehensive sexual and reproductive health information texts and internet sites that were developed in India and internationally.

# Abstract Bibliography:

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