

# **The Bangkok Sauna Study:**

## **Findings from a survey of gay men in Thailand**

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In collaboration with Bangkok Rainbow Organisation and the Rainbow Sky Association of Thailand



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Monograph Number 87

**Suggested citation:**

Grierson J and McNally S (2012) *The Bangkok Sauna Study: Findings from a survey of gay men in Thailand*, Monograph Number 87, Australian Research Centre in Sex, Health and Society, La Trobe University, Melbourne, Australia

ISBN 9781921915178

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## Acknowledgements

The project is a collaboration between researchers at Australian Research Centre in Sex, Health and Society, an Australian university-based HIV and sexuality research centre and two Thai NGOs: Rainbow Sky Association Thailand (RSAT) and Bangkok Rainbow Organisation (BRO). We thank those organisations for the effort and care they put into ensuring this research was appropriate and meaningful for their communities. We thank the staff members and volunteers who worked with us to collect the data. They brought understanding, creativity and fun to the process and executed the data collection with the highest professionalism.

We particularly wish to thank the 728 men who contributed to this study. Participation in research has always been one of the most significant contributions that individuals can make to their community, present and future.

## Background

Thailand is widely acknowledged as one of the great success stories in responding to HIV within South East Asia, particularly when it comes to promoting condom use among female sex workers (Rojanapithayakorn & Hanenberg 1996). Facing a rapidly expanding epidemic at the beginning of the 1990s, Thai authorities introduced and promoted the 100% condom program for female sex workers. The contribution of this campaign to the reduction in new infections is rightly celebrated.

At the same time, however, the failure of effective and comprehensive prevention efforts with gay men and other men who have sex with men was leading to one of the worst expansions of the epidemic within this population in South East Asia. The alarmingly high number of MSM who tested positive for HIV at Bangkok's Silom Clinic in 2010 was 35%. Sadly, reports of infection rates of this magnitude among MSM are becoming more common (UNDP 2011). Van Griensven and colleagues' biennial cross-sectional HIV prevalence study conducted in 2003, 2005 and 2007 alerted us to the disturbingly high rates of infection among these marginalised and forgotten men. Their study, repeated over three years, recruited men from saunas, entertainment venues and parks. HIV prevalence rates were recorded at 17.3 % in 2003 28.3% in 2005 reaching 30.7 % in 2007 (van Griensven et al. 2009 and 2010). Of particular note is that younger men are more vulnerable to acquiring HIV. The HIV prevalence rate among MSM 15-22 years old was 29.9% in 2003, 22.3% in 2005, and 22.2% in 2007 (van Griensven et al. 2010). This continued high level, is, as van Griensven et al. writes, 'a reason for grave concern'. It is of concern because 'these men have been sexually active only for a short period; and the combination of strong sexual desires, sexual opportunities, and HIV risk factors and behaviors in this population is likely fuelling this epidemic.' (2010, p 236) Unprotected sex, multiple concurrent sex partners, high level of HIV prevalence among communities of MSM and an increasing number of venues where men can meet for sex pose challenges for finding ways to reduce HIV incidence for young Thai men.

As HIV prevention workers struggle to respond to this epidemic with limited resources, the absence of a broad base of behavioural and social research continues to hamper strategic and effective responses.

Outreach and peer education remain the cornerstones of HIV prevention for gay men and MSM in most of South East Asia and Thailand is no exception (van Griensven et al. 2010). Increasingly this is supplemented by approaches such as social marketing, policy advocacy and media engagement.

Saunas are one of the key sites for prevention work with gay men in Thailand, including peer outreach activities. While outreach workers have a high level of operational expertise and a great understanding of the patrons of the saunas, the lack of rigorous social research and documentation of cultures within these venues isolates that expertise with individual workers and limits the extent to which prevention activities can be truly strategic.

Saunas are popular among Thai MSM, embodying as they do sexual opportunity, a longstanding 'spa' culture of health and wellbeing, resonances with international gay culture and the Thai sense of *sanuk* (fun). While these are places for men to socialise and to have

sex; they are also environments that may construct particular forms of sexual health risk. They are environments that may facilitate high rates of partner change and high rates of sexual concurrency among the most sexually active segment of a population. Sexual concurrency, particularly in dense sexual networks is a significant driver of concentrated HIV epidemics (Morris & Kretzschmar 1995), and saunas are one type of institution that has long been recognised as both a potential risk environment in this regard, and also as a site of considerable potential for providing information and education to the men at highest risk of STI or HIV infection. However, with the worryingly high rates of infection among Thai MSM we still remain reliant almost exclusively on epidemiological and behavioural analyses that give us only cursory insight into the characteristics of the men who go to these saunas or the social and relational aspects of this practice.

The saunas selected had been operating for between 2 and 6 years. Five of the six saunas have been operating for more than 5 years, while one opened 2 years ago. Most of the men who go to these saunas are young Thai men in their twenties. Middle class and professional men make up the majority of men at these saunas. All saunas offer wet areas, usually consisting of steam, sauna and shower. Private rooms, sex rooms and dark rooms are also available at all the sites. All saunas provide social areas where men can gather, such as a roof top garden, gym or a bar/restaurant. There is some variation between the saunas, with one sauna known to attract more feminine acting men and another where men will find more bisexual men. Students make up a distinct group for most of these saunas, with one sauna charging 39B in comparison to 139B for the full price. General entry fee ranges from 99B to 220B, with one sauna offering a long weekend price of 500B. Most places offer free food and free alcohol. The busy times for the saunas tend to be weekends, with Friday and Saturday nights and Sunday usually attracting over 200 men. One sauna attracts between 300-400 men on Friday and Saturday night. Special events are held at a number of the saunas including: orgy night, adventure night, soldier night, masturbation groups, foam party. Three saunas close at midnight, one closes at 2am, and two saunas close at 6am. This study offers an insight into the cultures and practices of Thai gay men within Thai saunas. The aim of this study was to include, but go beyond the simple behavioural documentation of men's sexual activities and to include motivation experience and expectation as key contextualising themes.

## Method

Six saunas were selected as sites for this study. Saunas were selected on the basis that they were venues with a primary clientele of Thai men, rather than foreigners, that they were venues where the NGO partners had a history of outreach work, that they were physically amenable to the conduct of the research and that management and staff were willing to support the research. These criteria created a sampling base in venues that are 'best case' scenarios for prevention work.

The Rainbow Sky Association of Thailand (RSAT) and Bangkok Rainbow Organisation (BRO) provide outreach work in each sauna which involves providing condoms and lubricant.

The questionnaire was drafted by the academic partners and workshopped with the two community partners to ensure it was appropriate and useful for program planning. The instrument was translated into Thai, pretested and modified. The final instrument contained 30 items and took approximately 10 to 15 minutes to complete.

Data was collected by interviewer administered questionnaires. Recruitment and interviewing took place over a period of six days in March 2010. Interviews were conducted at peak times for each of the venues.

The project was funded by the Australian Research Centre in Sex, Health and Society at La Trobe University and ethical approval was obtained from the La Trobe University Human Ethics Committee (Ref: UHEC 09-056).



## Findings

A total of 728 questionnaires were completed with between 80 and 148 questionnaires completed in each sauna (see Table 1). This allows for meaningful statistical comparisons between the venues. Given that venues attract different segments of the population and offer different environments and attractions, we can expect that they will facilitate different styles of interaction among participants. In the remainder of the report differences between anonymised venues are reported to offer some insight into these patterns.

Table 1 Number of responses per venue

	Number	%
Farose 2 Sauna	120	16.5
The Beach Resort Sauna	80	11.0
Paradise Sauna	101	13.9
Torpedo Sauna	148	20.3
Cruising Sauna	142	19.5
39 Underground	137	18.8
Total	728	

**NOTE:** References to venues in the remainder of this document do not present the venues in the same order as the table above. The order of venues has been randomised to avoid attribution of particular characteristics to specific venues. Venues have been randomly assigned a code from S1 to S6 and these refer to the same venues across the remainder of the report.

## About the Men

This section presents the characteristics of the 728 men who completed the survey. As will be seen below the men represent a diverse cross section of Bangkok society. We were interested in the type of men that visit the saunas for a range of reasons. Foremost, understanding the characteristics of the patrons of these saunas offers guidance to prevention work in how to market their prevention activities and materials to the men. The focus of this study was on venues where Thai men engage socially and sexually with other Thai men, so some understanding of the heterogeneity or homogeneity of men within saunas helps to understand the forms of social relationships that are possible and actually occur within venues.

For some characteristics, we describe some of the differences between the six venues, between Phet and between other characteristics in order to better describe the general character of the patrons.

### *Demographics*

The majority (97.8%) of participants were Thai citizens and 94.5% were born in Thailand. This accords with our aim in this study to engage Thai men in predominately Thai venues.

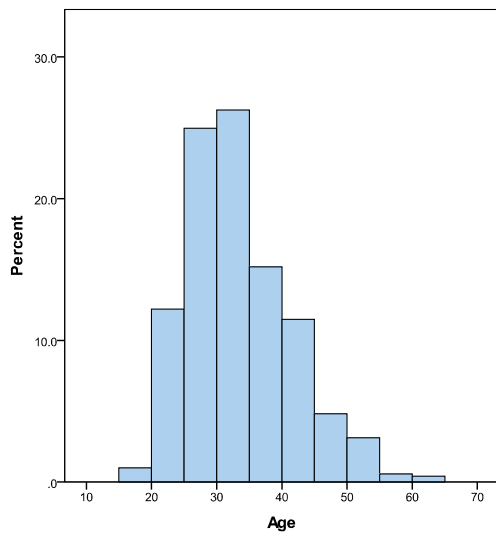
### **Age**

Participants were aged from 18 to 61 with an average age of 33 (see Table 2). Overall, 75% were aged below 38. As can be seen from Figure 1, the majority of men were in their 20s and 30s representing the age groups representing the highest levels of new HIV infections in Bangkok.

Table 2 Age of participants

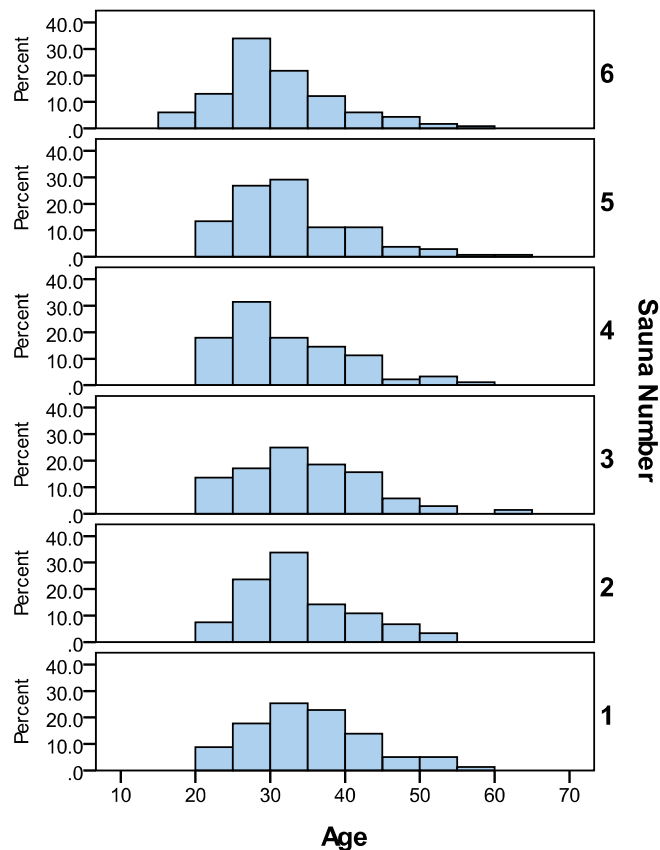
	Age
Minimum	18
Maximum	61
Median	31.5
Mean	32.9

Figure 1: Age distribution of participants



The six saunas differed significantly in their age distribution ( $F=4.063$ ,  $p=0.01$ ), as can be seen in Figure 2 below. Saunas 1 and 3 had the most even distribution across age groups, while Sauna 6 had a higher concentration of men in their 20s and Sauna 2 a higher concentration of men in their 30's.

Figure 2: Age distribution by Venue



When we report differences by age in the remainder of this report we will do so across three age groups: under 30; 30 to 39 and 40 and over.

## Phet

Phet is the term used to describe gender/sexuality categories in Thai culture (Jackson 2000). These descriptors reference sexual practice, sexual identity and gender identity at the same time. Participants were asked to select a sexuality/ Phet category from a list of seven, with the option to write in any other descriptor (see Table 3). Only 5 participants chose the “other” category. The largest proportion chose the category *Gay Both* (34%) followed by *Gay King* (26%) and *Gay* (20%).

Table 3 Sexuality/ Phet

	%	Number
Gay	19.6	143
Gay King	25.5	186
Gay Queen	9.6	70
Gay Both	34.2	249
Kaethoy	0.3	2
Bisex	7.6	55
Straight	0.3	2
Other	0.7	5
No response	2.2	16

When we report differences by Phet in the remainder of the report, we will mostly report for the five largest categories: Gay; Gay King; Gay Queen; Gay Both and Bisex. The other groups, while important for targeted prevention work, are too small within this study to make any meaningful statistical comparisons.

## *Differences Across Saunas*

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There was considerable variation in the distribution of Phet across the six venues (see Table 4 and Figure 3). *Gay Both* was more often used by men in S5 and least often in S1. Participants in S1 and S4 were more likely to report *Gay* than those in other venues and *Gay Queen* was given more often in S1, S4 and S5. *Bisex* was chosen by participants in S3 and S6 more often than in other venues.

Table 4 Sexuality/ Phet by venue (% within venue)

	S1	S2	S3	S4	S5	S6
Gay	23.1	18.5	17.9	31.3	17.4	16.2
Gay King	25.6	29.5	28.6	25.3	22.7	23.9
Gay Queen	12.8	5.5	9.3	12.1	12.1	9.4
Gay Both	26.9	38.4	34.3	26.3	40.9	37.6
Bisex	6.4	7.5	10.0	4.0	6.1	11.1
Others	5.2	0.7	-	1.0	0.8	1.8

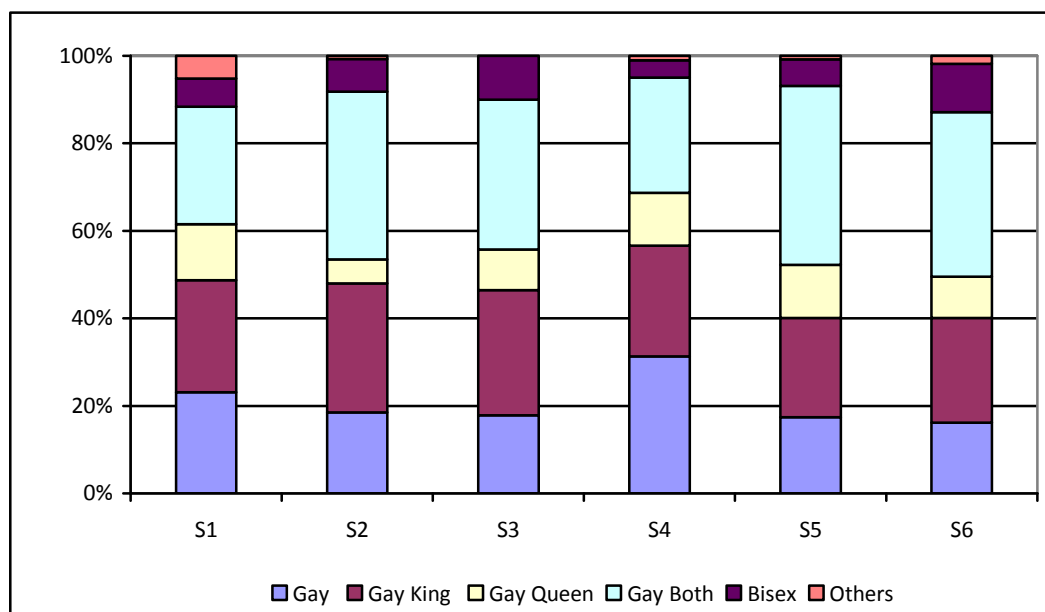


Figure 3: Phet by sauna

## Place of Residence

We asked how close participants lived to the sauna at which they were interviewed. Options given were: *In this neighbourhood* (อยู่ใกล้ๆติดกับที่พัก) meaning within a few blocks of the sauna; *In this area* (อยู่ในเขตละแวกนี้) meaning in the local district; *in Bangkok*; *In another part of Thailand*; and *In another country*. The majority of participants lived in Bangkok but not within the district of the sauna (50.4%) while 35.3% lived in the district. Only 8% lived in the neighbourhood of the sauna (see Table 5). This suggests that selection of sauna is not simply on the basis of proximity, but the characteristics of the sauna may play an important part in men travelling to a particular venue.

Table 5 Proximity of men's residence to sauna

	%
In this neighbourhood	8.0
In this area	35.3
In Bangkok	50.4
In Thailand	6.0
Other country	0.3

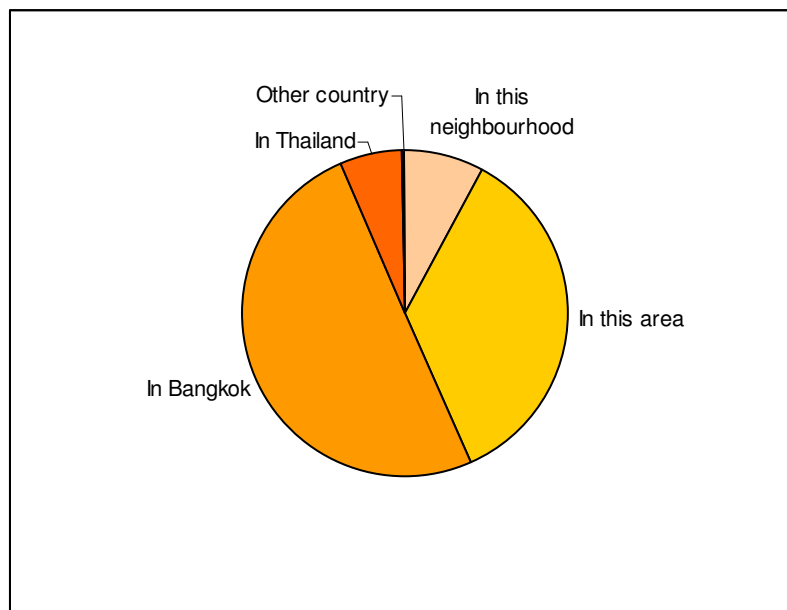


Figure 4: Proximity of men's residence to sauna

## Differences Across Phet

When we look at place of residence for each Phet, some differences are evident (Table 6). For example, Gay King and Gay Both are the most likely to live in the neighbourhood of the venue, while Bisex are most likely to live further from the venue.

Table 6 Proximity of residence to sauna by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
In this neighbourhood	5.0	10.3	2.9	9.6	7.4
In this area	39.7	34.6	34.3	37.8	16.7
In Bangkok	53.9	45.9	57.1	47.4	66.7
In Thailand	1.4	9.2	5.7	4.8	9.3
Other country	-	-	-	0.4	-

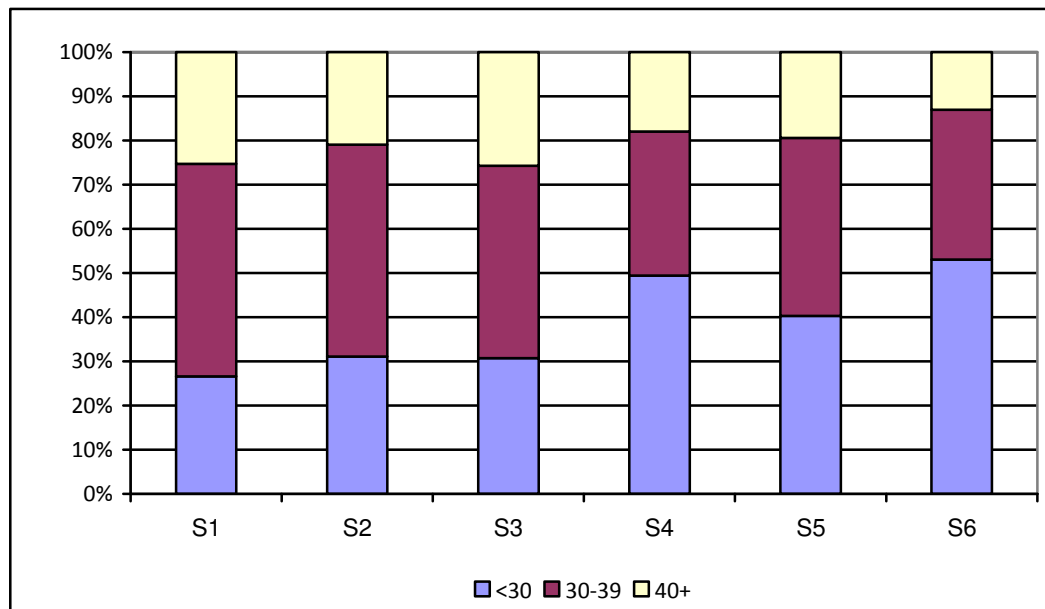


Figure 5: Proximity of residence to sauna by sexuality/Phet

## Differences Across Age Groups

Proximity to sauna did not differ significantly by age group, but there was a slight trend toward younger men living closer to the venue (see Table 7).

Table 7 Proximity of residence to sauna by age group (% within age groups)

	<30	30-39	40+
In this neighbourhood	8.6	7.2	6.3
In this area	39.6	32.1	34.5
In Bangkok	46.3	54.5	52.8
In Thailand	5.2	6.2	6.3
Other country	0.4	-	-

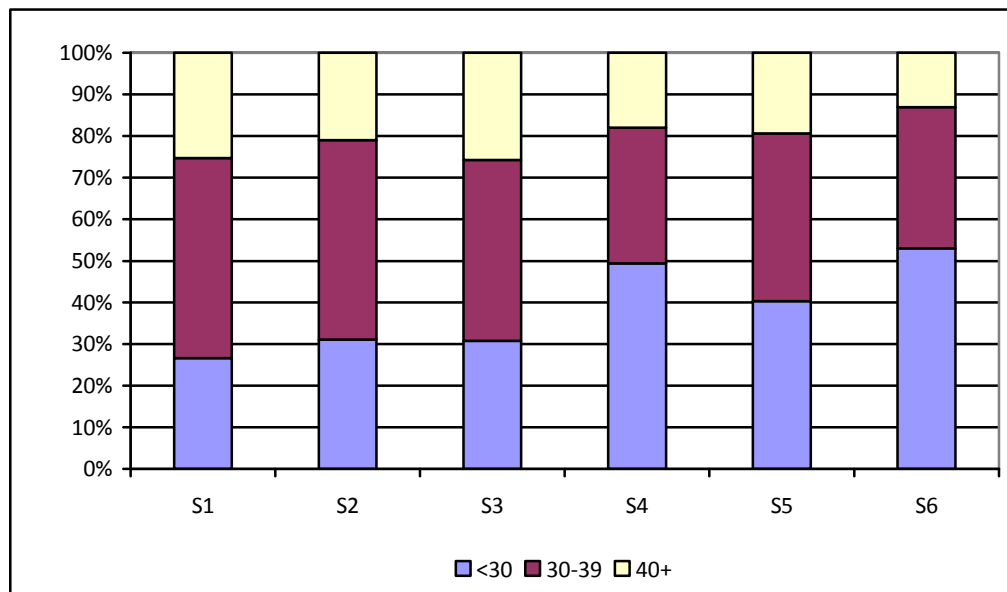


Figure 6: Proximity of residence to sauna by age group



## Differences Across Saunas

There was some variation in this across saunas, with venue S3 having the highest proportion of respondents from the local neighbourhood (14.2%) and venue S6 having the highest proportion from outside Bangkok (11.8%) (see Table 8).

Table 8 Proximity of residence to sauna by venue (% within venue)

	S1	S2	S3	S4	S5	S6
In this neighbourhood	2.5	9.5	14.2	10.1	5.9	3.4
In this area	30.0	41.9	32.6	49.5	28.1	30.3
In Bangkok	58.8	45.9	48.9	39.4	56.3	54.6
In Thailand	8.8	2.7	4.3	-	8.9	11.8
Other country	-	-	-	1.0	0.7	-

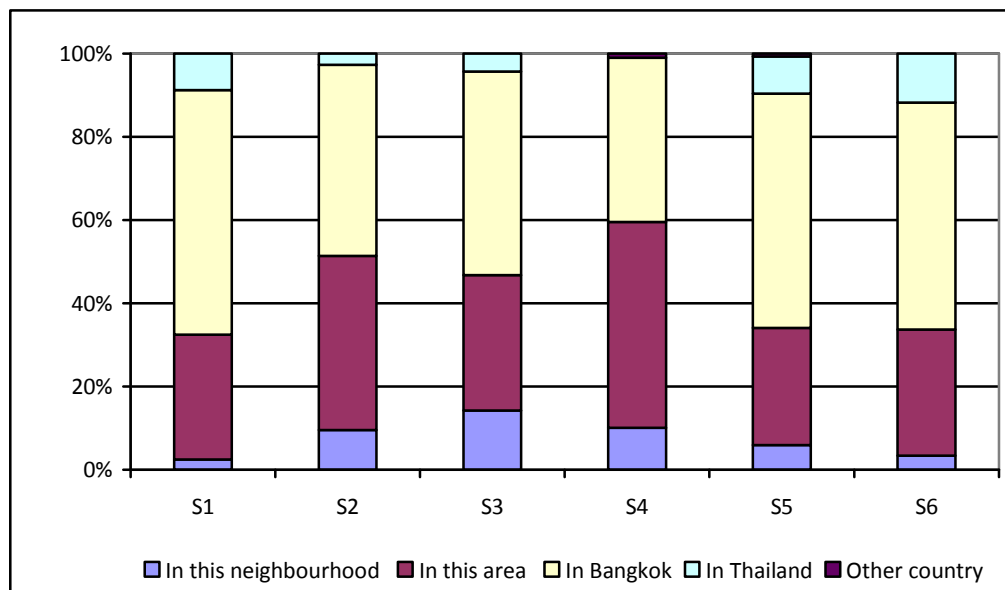


Figure 7: Proximity of residence to sauna by venue

## Employment Income and Education

The majority (83.8%) of participants were in full time employment, while only 8.5% were unemployed (see Table 9).

Table 9 Employment status

	%
Employed full-time	83.8
Employed part-time or casual	7.7
Not employed in the work force	8.5

Participants earned on average ฿300,000 per year with a considerable variation in this (see Table 10). There was some variation across venues, ranging from an average of ฿219,000 to ฿386,000.

Table 10 Annual income

	Baht	AU\$*	\$US*
Median	200,000	6,900	6,200
Mean	300,042	10,350	9,300
Minimum	600	21	19
Maximum	4,200,000	145,000	130,000

\*At time of survey

Most participants had completed at least 12 years of education and 58% had some form of post-secondary education (see Table 11).

Table 11 Years of formal education

	%
0-6 (primary)	2.3
7-12 (secondary)	39.4
13+ (tertiary)	58.3

In combination, this suggests that while the cost of sauna entry (which varied between ฿99 and ฿220) was not expensive in relation to annual income, there were class dimensions to visiting these saunas, and there were unlikely to attract poor or unemployed men in significant numbers.

## ***Differences Across Phet***

There were some variations in men's employment status across the categories of Phet, with higher levels on unemployment noted for both Gay Queen and Gay Both, and higher part time employment for Gay Queen.

Table 12 Employment status by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
Employed full-time	85.0	88.0	76.5	82.1	87.3
Employed part-time or casual	7.9	6.5	11.8	7.3	3.6
Not employed in the work force	7.1	5.4	11.8	10.6	9.1

Income did not vary significantly by Phet, although there was a slightly lower median income for Gay Both.

Table 13 Annual income (฿) by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
Median	200,000	240,000	200,000	180,000	200,000
Mean	307,141	312,875	256,836	318,196	234,465
Minimum	600	10,000	20,000	12,000	100,000
Maximum	3,600,000	3,000,000	2,000,000	4,200,000	800,000

Similarly, there was little difference in the educational levels by Phet (Table 14). Those identifying as Bisex were somewhat more likely to report tertiary education.

Table 14 Years of formal education by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
0-6 (primary)	2.8	2.2	1.4	2.4	1.8
17-12 (secondary)	40.6	36.6	44.3	41.4	29.1
13+ (tertiary)	56.6	61.3	54.3	56.2	69.1

## ***Differences Across Age Groups***

Differences across the age groups tend to reflect population differences and largely result from increasing opportunity to achieve educational level, employment and higher income with increasing age. Therefore, those under 30 were least likely to be in paid employment (see Table 15), had a lower annual income (Table 16) and were less likely to report tertiary education (Table 17).

Table 15 Employment status by age group (% within age groups)

	<30	30-39	40+
Employed full-time	72.0	90.3	91.5
Employed part-time or casual	10.2	6.2	6.3
Not employed in the work force	17.8	3.5	2.1

Table 16 Annual income (฿) by age group (% within age groups)

	<30	30-39	40+
Median	156,000	200,000	250,000
Mean	212,790	306,901	437,142
Minimum	10,000	600	10,000
Maximum	2,000,000	3,000,000	4,200,000

Table 17 Years of formal education by age group (% within age groups)

	<30	30-39	40+
0-6 (primary)	1.9	2.1	2.8
17-12 (secondary)	47.2	35.4	30.6
13+ (tertiary)	50.9	62.5	66.7

### ***Differences Across Saunas***

There were no significant differences between venues in men's employment status (see Table 18).

Table 18 Employment status by venue (% within venue)

	S1	S2	S3	S4	S5	S6
Employed full-time	82.5	89.1	89.9	81.4	81.5	75.8
Employed part-time or casual	10.0	4.8	5.1	10.3	8.9	9.2
Not employed in the work force	7.5	6.1	5.1	8.2	9.6	15.0

Similarly men's income did not vary significantly (Table 19), although venue S5 had a slightly lower median income than the other venues.

Table 19 Annual income (฿ ) by venue (% within venue)

	S1	S2	S3	S4	S5	S6
Median	200,000	240,000	200,000	240,000	150,000	180,000
Mean	273,151	385,985	282,252	280,603	316,066	219,216
Minimum	12,000	40,000	10,000	80,000	600	12,000
Maximum	200,0000	3,600,000	2000,000	1,400,000	4,200,000	1,300,000

There was considerable variation by venue in the educational level of participants (see Table 20), with venues S2, S3 and S5 having a highly tertiary educated clientele and venues S1, S4 and S6 more likely to report secondary education. In some part this is explained by the age range of participants in each venue, but also reinforces the notion that venues have particular styles that attract a particular profile of men.

Table 20 Years of formal education by venue (% within venue)

	S1	S2	S3	S4	S5	S6
0-6 (primary)	2.5	2.0	1.4	3.0	0.7	5.0
17-12 (secondary)	85.0	8.1	8.5	71.3	16.2	83.3
13+ (tertiary)	12.5	89.9	90.1	25.7	83.1	11.7

## Disclosure of Sexuality

We asked participants if they had told people in a range of categories about their sexuality/ Phet or the fact that they had sex with men. Table 21 gives the percentage of participants that had disclosed to people in each category where that was applicable. (For example 4.7% of those with a son or daughter had disclosed to them. 60.8% did not have a son or daughter, so this appears in the *Not Applicable* column.)

The only category to whom the majority of participants had disclosed was *close friends* (88.6%). Men were more likely to have disclosed to work colleagues than they were to parents or siblings. Few had disclosed to neighbours and very few to their children.

Table 21 Disclosure of sexuality

	Applicable		Not applicable (% of total)
	Yes	No	
Close Friends	88.6	11.4	3.7
Other friends	37.5	62.5	7.7
Parents	24.9	75.1	6.7
Brothers or sisters	28.5	71.5	7.5
Neighbours	13.5	86.5	8.5
Son / daughter	4.7	95.3	60.8
Work colleagues	46.4	53.6	9.5

## Differences Across Phet

Disclosure differed considerably by sexuality/ Phet as can be seen in Table 22. It is interesting to note that those who identified as *Gay Both* or *Gay King* are less likely to have disclosed in most categories. This may suggest that those in these categories are more able to actively *pass* as heterosexual; however it may also reflect a lower likelihood that their sexuality/phet is questioned by others. Gay Queen may have a more physically visible dimension to phet which would explain the greater level of disclosure to neighbours.

Table 22 Disclosure of sexuality by sexuality/Phet (% Yes of applicable within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
Close Friends	92.6	84.8	87.9	92.6	72.0
Other friends	37.1	27.2	49.2	45.1	22.7
Parents	23.5	24.7	25.0	28.9	13.6
Brothers or sisters	26.2	25.4	32.8	33.8	21.3
Neighbours	9.5	9.9	23.1	16.2	11.6
Son / daughter	1.6	7.0	3.3	5.0	4.0
Work colleagues	42.7	34.9	45.2	57.8	45.7

## Differences Across Age Groups

On average, younger participants were more likely to have disclosed their sexuality, most notably to close friends, other friends, neighbours and work colleagues. This may reflect changing norms in Thailand, or may represent the selectivity in operation where the more open young men are more likely to attend the gay saunas.

Table 23 Disclosure of sexuality by age group (% Yes of applicable within age groups)

	<30	30-39	40+
Close Friends	92.1	87.1	83.8
Other friends	44.1	35.5	30.2
Parents	25.6	23.0	26.9
Brothers or sisters	26.2	30.0	29.8
Neighbours	16.5	12.0	11.2
Son / daughter	6.2	2.9	5.9
Work colleagues	54.0	45.1	35.7

### ***Differences Across Saunas***

Disclosure patterns varied by venue (see Table 24) reflecting to some extent the differences in Sexuality profile of the venues (as above in Table 4). For example, disclosure to work colleagues was lowest in S4 at 28% with all other venues recording around 50%.

Table 24 Disclosure of sexuality by venue (% Yes of applicable within venue)

	S1	S2	S3	S4	S5	S6
Close Friends	92.1	77.6	88.1	94.8	92.3	91.2
Other friends	36.8	42.4	34.7	38.3	33.9	38.2
Parents	25.7	32.4	23.1	15.8	21.0	28.3
Brothers or sisters	35.2	37.1	26.1	15.8	22.3	33.6
Neighbours	21.1	15.3	12.5	3.2	12.8	16.4
Son / daughter	5.9	15.4	5.6	-	6.7	3.1
Work colleagues	48.6	49.0	50.0	28.1	48.7	51.5

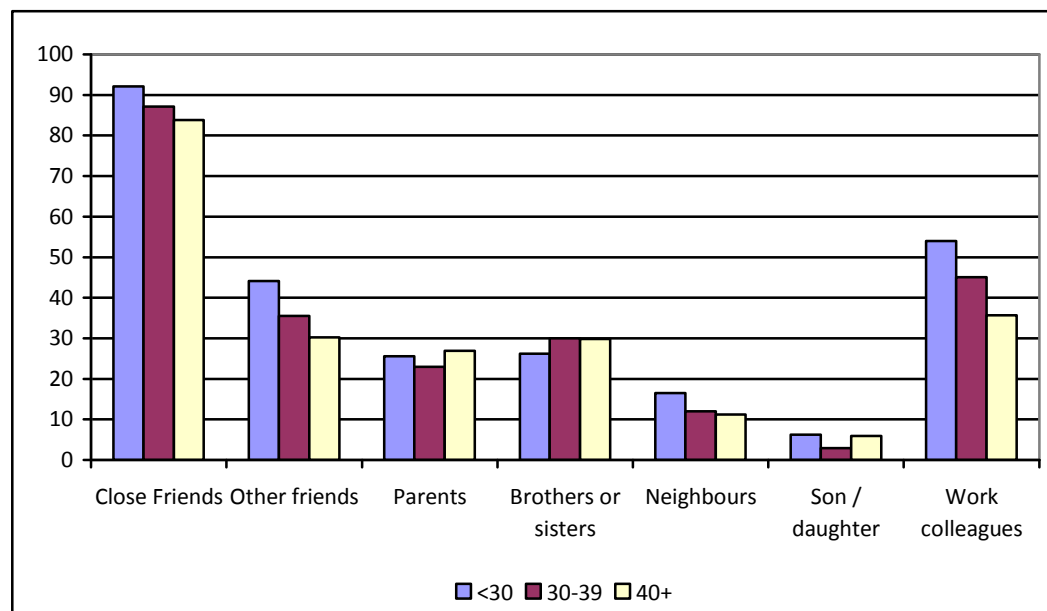


Figure 8: Disclosure by age group

## Partners

We asked participants how many regular male sexual partners they currently had. This would include boyfriends, *Fans* and *Kiks*. 42% of men did not have a regular male partner and 42% had one partner. Almost one in ten had two regular male partners and smaller numbers had three or more. Of those with a regular male partner, 32.2% lived with him.

Table 25 Number of regular male sexual partners

	%
None	42.4
1	42.1
2	9.7
3	2.9
4	0.8
5 +	1.9

Men were also asked if they had a regular female partner and 14.3% had at least one (see Table 26). Of those with a regular female partner 22.8% lived with her.

Table 26 Number of regular female sexual partners

	%
None	85.7
1	9.0
2	3.0
3+	2.2

## Differences Across Phet

Whether the men had a regular male or regular female partner varied across the categories of Phet (see Figure 9). Not surprisingly, those identifying as Bisex were more likely than the others to have a regular female partner (68%). Among the other four groups, Gay Kings were more likely to have a female partner (15%) and Gay Queens least likely (3%). Differences in whether men had a male partner were more subtle, with Gay King and Gay Queen more likely to have a partner than the other groups, but Gay Queen least likely to have more than one male partner.

Table 27 Number of regular male sexual partners by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
None	44.3	38.6	38.2	44.1	45.1
1	40.7	46.7	52.9	39.3	35.3
2 +	15.0	14.7	8.8	16.6	19.6

Table 28 Number of regular female sexual partners by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
None	91.5	84.8	97.1	92.3	32.1
1	4.2	11.4	2.9	5.6	37.7
2 +	4.2	3.8	-	2.0	30.2

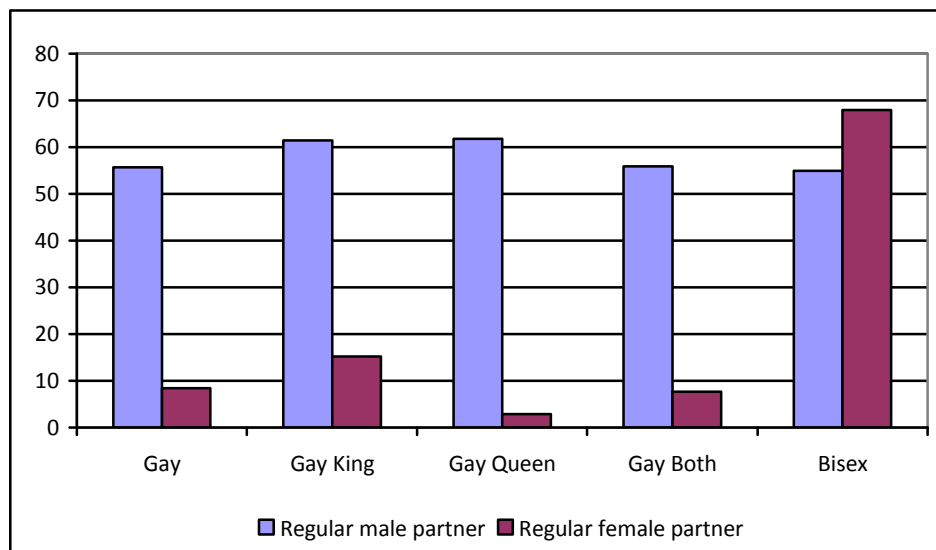


Figure 9: Regular partners by Phet

### ***Differences Across Age Groups***

There were no significant differences by age in whether men had a male partner, but men over 40 were twice as likely to have a female partner compared to younger men (see Figure 10).

Table 29 Number of regular male sexual partners by age group (% within age groups)

	<30	30-39	40+
None	42.2	40.2	47.6
1	46.0	43.4	32.2
2 +	11.8	16.4	20.3

Table 30 Number of regular female sexual partners by age group (% within age groups)

	<30	30-39	40+
None	89.9	86.6	76.8
1	5.6	8.3	16.2
2 +	4.5	5.2	7.0



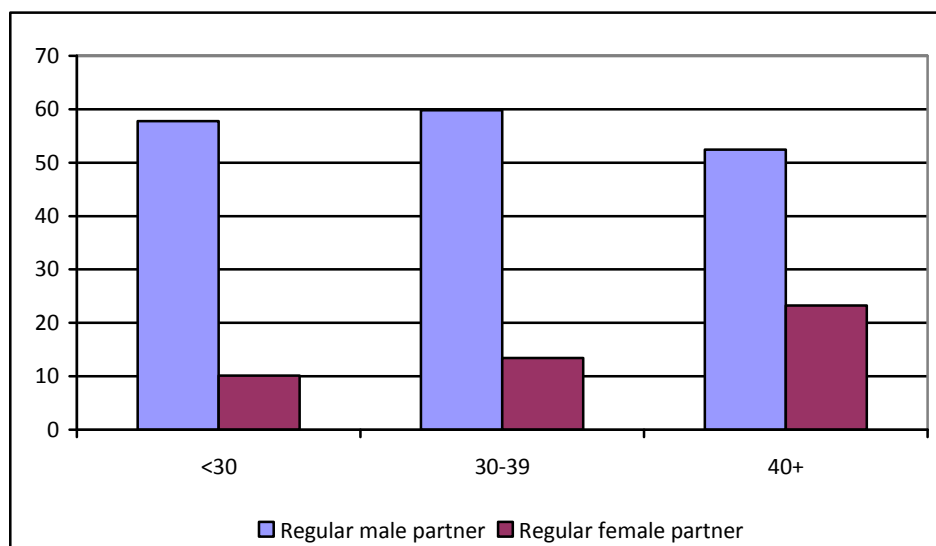


Figure 10: Regular partners by age group

### ***Differences Across Saunas***

Whether men had a regular male partner or not varied across the six saunas, with half of those at S6 and S2 having at least one partner compared to two-thirds of those at S4 and S3 (see Table 31). Similarly whether men had a female partner or not varied, with those at S1 being most likely to have at least one female partner.

Table 31 Number of regular male sexual partners by venue (% within venue)

	S1	S2	S3	S4	S5	S6
None	47.4	49.7	36.0	30.7	40.6	49.2
1	34.6	44.2	44.9	51.5	38.3	37.5
2 +	17.9	6.1	19.1	17.8	21.1	13.3

Table 32 Number of regular female sexual partners by venue (% within venue)

	S1	S2	S3	S4	S5	S6
None	72.5	91.2	81.4	93.1	83.0	89.8
1	10.0	7.4	13.6	5.9	9.6	6.8
2 +	17.5	1.4	5.0	1.0	7.4	3.4

## Information Sources about HIV and Sexuality

Participants were asked their most important source of information about HIV/AIDS (see Table 33). Participants were able to choose as many of the options as were applicable. The most commonly reported source was *Media*, with over three quarters choosing this, followed by *the Internet* (61%) and *health care providers* other than their regular doctor (49%).

Table 33 Information sources for HIV/AIDS

	%
Media	78.0
Internet	61.4
Other health care providers	48.8
Pamphlets	44.4
Friends	31.6
My regular doctor	15.8
Family	8.8

Participants were also asked which sources they would consider most important for information around sexuality issues (see Table 34). The most important sources were the *Internet* (54%), *Friends* (46%) and *Media* (45%).

Table 34 Information sources for sexuality

	%
Internet	53.9
Friends	46.2
Media	45.1
Pamphlets	15.1
Other health care providers	12.8
My regular doctor	8.1
Family	5.6

## Differences Across Phet

The overall pattern of these information sources was similar across sexuality/Phet (see Table 35) but the likelihood that specific sources would be nominated varied somewhat. Those who identified as *Gay King* were more likely than others to nominate *Media*, and less likely to nominate their *Regular Doctor*. Those who identified as *Gay Both* more likely than others to nominate *Pamphlets*, and less likely to nominate *Internet*. Those who identified as *Gay Queen* were less likely than others to nominate *Friends*.

Table 35 Information sources for HIV/AIDS by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisexual
Media	67.8	84.9	78.6	78.7	72.7
Internet	60.1	66.7	67.6	59.3	52.7
Other health care providers	51.7	45.4	47.1	51.2	34.5
Pamphlets	37.1	45.2	47.1	48.0	40.0
Friends	35.0	30.6	27.1	33.7	21.8
My regular doctor	21.0	7.5	11.4	19.7	16.4
Family	7.0	7.6	7.1	10.1	14.5

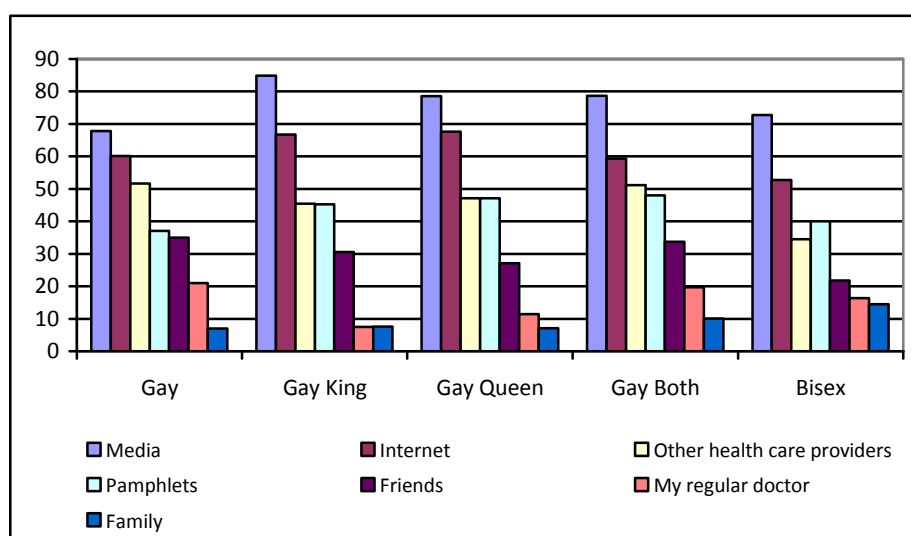


Figure 11: HIV information sources by Phet

The pattern of information sources for sexuality differed somewhat more across sexuality/Phet (see Table 36). Those who identified as *Gay* were more likely than others to nominate *Friends*, those who identified as *Gay King* were more likely than others to nominate *Internet* and *Media*, and those who identified as *Gay Queen* were more likely than others to nominate *Pamphlets*.

Table 36 Information sources for sexuality by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
Internet	51.0	60.2	52.2	52.2	50.9
Friends	55.2	44.1	42.9	44.8	40.0
Media	34.3	51.1	41.4	49.0	34.5
Pamphlets	8.4	16.7	21.4	16.1	16.4
Other health care providers	17.5	10.8	7.2	13.7	10.9
My regular doctor	10.5	4.8	4.3	9.6	12.7
Family	7.0	3.8	7.1	4.4	9.1

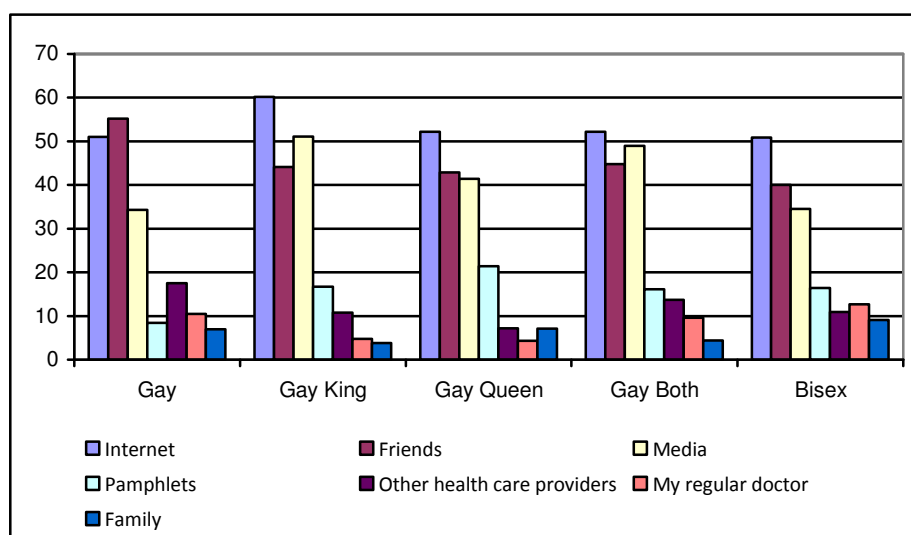


Figure 12: Sexuality information sources by Phet

### ***Differences Across Age Groups***

There are some differences between the three age groups in their likelihood to rate sources as important for HIV information (see Table 37). Those under 30 are more likely to rate internet and family as important sources of information than the older age groups. Those over 40 are more likely to rate the media as an important source of HIV information (see Figure 13).

Table 37 Information sources for HIV/AIDS by age group (% within age groups)

	<30	30-39	40+
Media	76.2	77.1	84.0
Internet	65.7	59.6	56.3
Other health care providers	58.4	44.8	41.7
Pamphlets	45.4	41.6	46.5
Friends	34.2	30.5	28.5
My regular doctor	16.0	17.1	13.2
Family	12.7	6.9	6.3

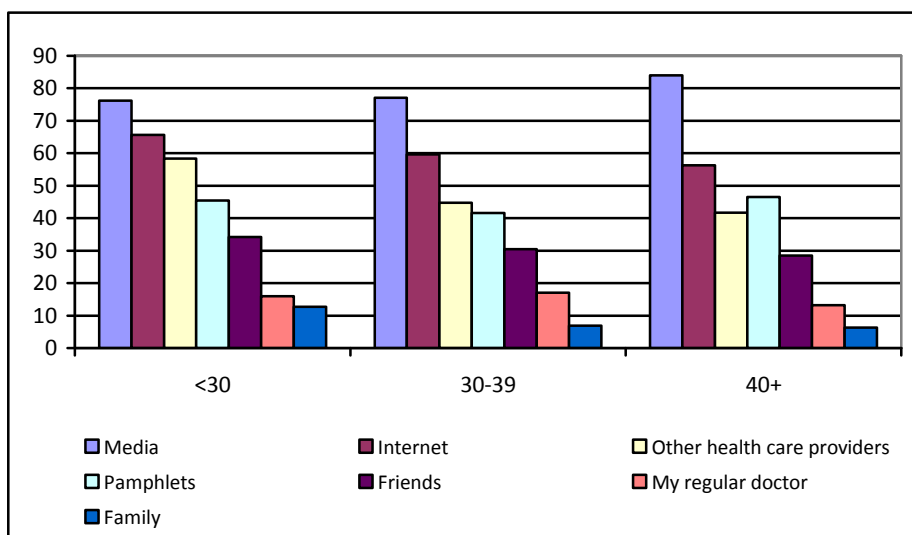


Figure 13: HIV information sources by age group

A similar set of differences are found between the age groups in their ratings of important sources of information about sexuality (see Table 38). Those over 40 are less likely to identify the internet as an important sources and more likely to identify the media. Those under 30 are more likely than the others to identify friends and their regular doctor as important sources of sexuality information (see Figure 14).

Table 38 Information sources for sexuality by age group (% within age groups)

	<30	30-39	40+
Internet	56.3	57.2	43.1
Friends	51.3	46.2	38.2
Media	45.7	41.4	50.7
Pamphlets	15.6	13.0	16.7
Other health care providers	15.2	10.3	13.9
My regular doctor	11.2	6.2	6.3
Family	7.1	5.1	4.9

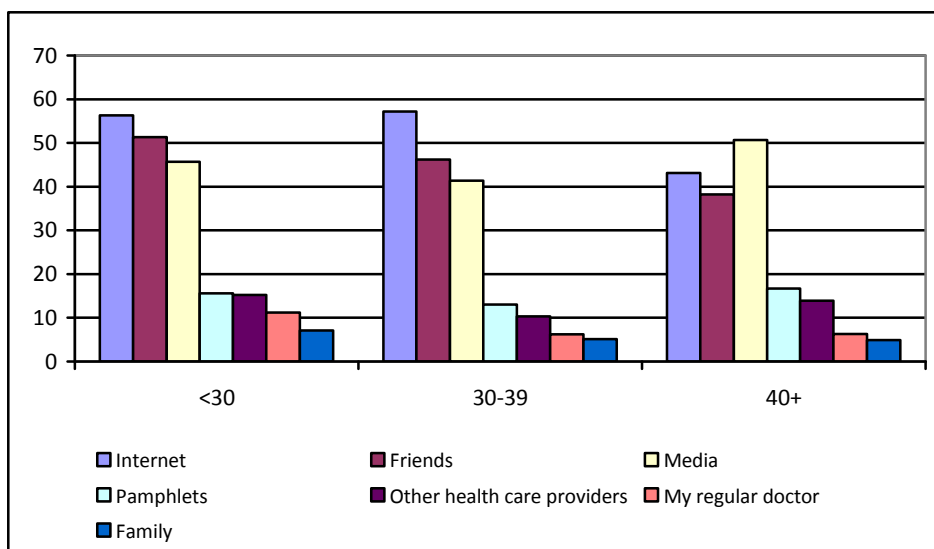


Figure 14: Sexuality information sources by age group

## ***Differences Across Saunas***

There were some differences in how these information sources were rated when we compare across the six saunas. Mostly these reflect the demographic profile of the patrons interviewed. It is interesting to note the differences in the nomination of *internet* as a source of sexuality information (see Table 40) which ranged from 23% in sauna S1 to 76% in sauna S2.

Table 39 Information sources for HIV/AIDS by venue (% within venue)

	S1	S2	S3	S4	S5	S6
Media	78.8	81.1	67.6	82.2	75.9	85.0
Internet	53.8	77.6	49.6	60.0	55.5	68.3
Other health care providers	52.5	35.4	41.5	42.6	64.0	59.2
Pamphlets	41.3	38.5	41.5	46.5	50.7	48.3
Friends	36.3	30.4	21.8	29.7	40.1	33.3
My regular doctor	10.0	11.5	23.9	11.9	24.1	9.2
Family	5.1	13.5	6.3	4.0	11.0	10.2

Table 40 Information sources for sexuality by venue (% within venue)

	S1	S2	S3	S4	S5	S6
Internet	22.8	76.4	50.0	67.3	36.5	60.0
Friends	51.3	56.1	38.0	48.0	38.7	47.5
Media	27.5	48.0	44.4	57.4	22.6	69.2
Pamphlets	6.3	10.1	21.8	21.8	10.2	19.2
Other health care providers	6.3	7.4	16.3	4.0	20.4	18.3
My regular doctor	-	3.4	16.9	1.0	17.5	4.2
Family	13.8	6.8	4.9	6.9	1.5	3.3

## Sexual health

We included a section that asked about participants' HIV and sexual health testing history. It should be remembered that this survey was interviewer administered and so there is likely to be some under-reporting of HIV positivity. To partially address this problem, we included *I would rather not say* as a response option.

### HIV testing and status

Over three quarters (76.2%) reported that they had ever had an HIV test and 57% had had a test in the previous twelve months (see Table 41).

Table 41 Ever tested for HIV

	%
No	23.8
Yes in the last 12 months	56.6
Yes, but more than 12 months ago	19.6

Of those who had ever had an HIV test, most (85%) reported that test result to be HIV negative (see Table 42). Only 7 individuals report their most recent test to be HIV positive, while 12% said they would rather not say.

Table 42 Most recent HIV test result

	%
HIV negative	85.0
HIV positive	1.3
Don't know	2.0
I would rather not say	11.8

When we combine the information from the previous two tables we can get an overview of the reported HIV status of participants (see Table 43). From this we can see that around half reported that they had tested HIV negative in the previous 12 months. An additional 15% had a HIV negative test, but more than a year ago. There are a significant number of participants that have never had an HIV test and around 11% who did not report their result.

Table 43 Summary HIV status

	%
Untested	23.8
Status unknown/unreported	11.1
HIV negative > 12 months ago	15.4
HIV negative in past 12 months	48.8
HIV positive	1.0

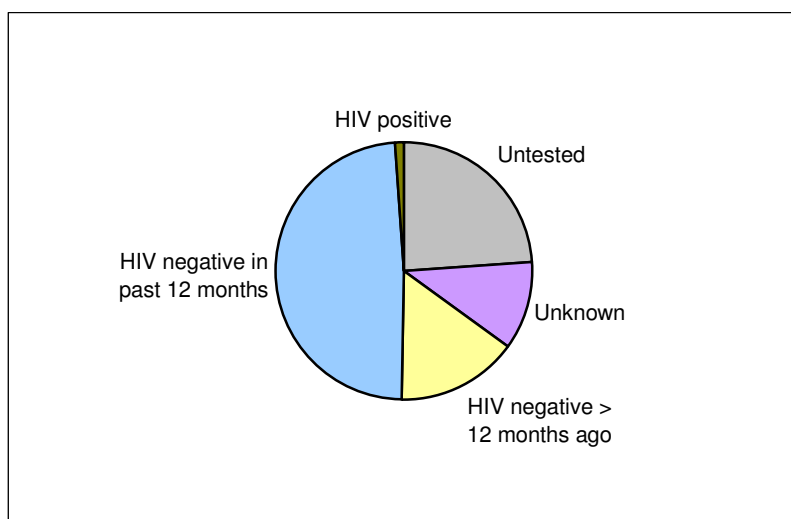


Figure 15: Summary HIV status

### ***Differences Across Phet***

There were distinct differences by Phet in relation to HIV testing and status (see Table 44). Those who identify as Gay Queen were the least likely to have taken a HIV test, with over one third untested (see Figure 16). Those identifying as Gay King were the most likely to have had an HIV test and to have had that test in the previous twelve months.

Table 44 Summary HIV status by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
Untested	23.1	19.4	34.3	26.1	14.5
Status unknown/unreported	10.5	12.9	7.1	12.4	9.1
HIV negative > 12 months ago	19.6	14.0	12.9	13.7	21.8
HIV negative in past 12 months	46.2	52.7	45.7	46.6	52.7
HIV positive	0.7	1.1	-	1.2	1.8

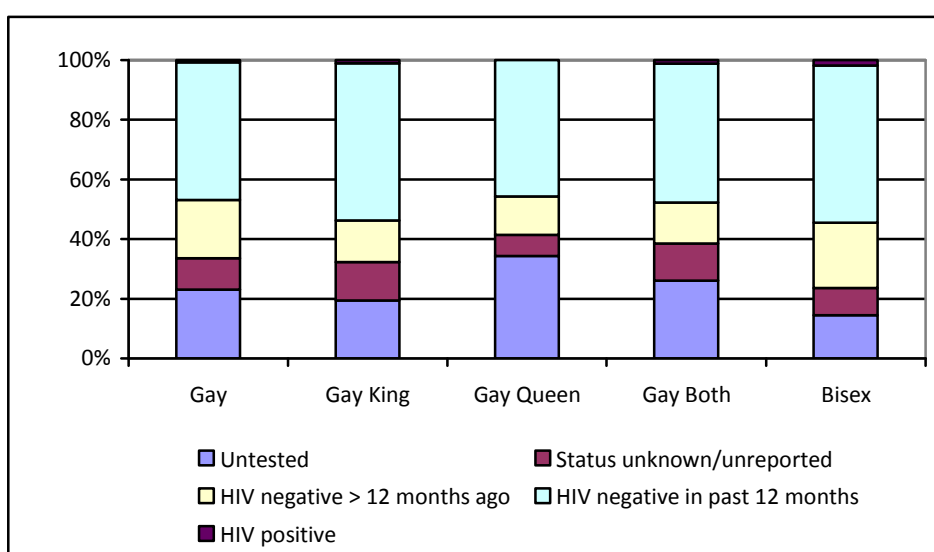


Figure 16: Summary HIV status by sexuality/Phet



## Differences Across Age Groups

There were also noticeable differences between the three age groups in this area (see Table 45). Men in their 30s were the most likely to have ever had an HIV test, although similar proportions of all three groups had had an HIV test in the previous twelve months. This suggests that those over 30 may be less likely to have regular tests than younger men.

Table 45 Summary HIV status by age group (% within age groups)

	<30	30-39	40+
Untested	28.3	17.5	26.4
Status unknown/unreported	11.9	14.0	4.2
HIV negative > 12 months ago	9.7	17.5	22.2
HIV negative in past 12 months	49.4	49.7	47.2
HIV positive	0.7	1.4	-

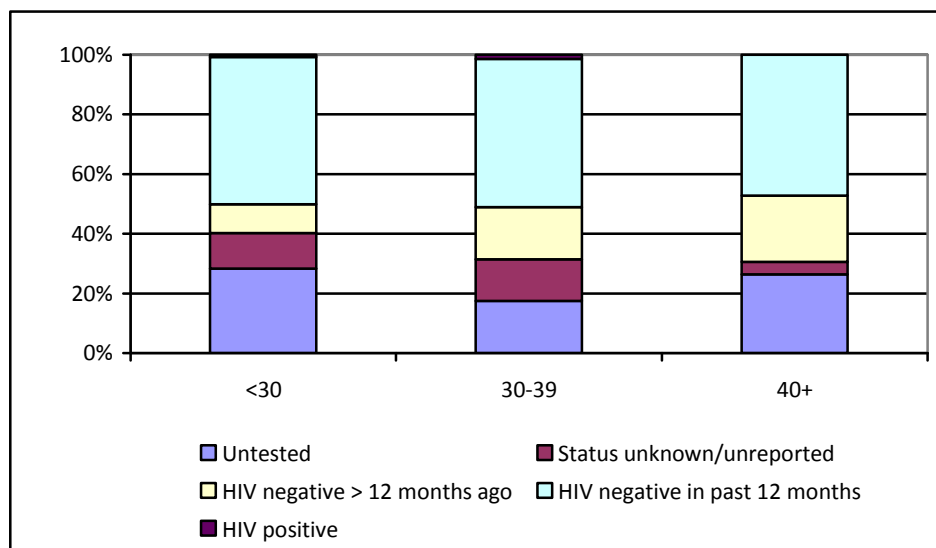


Figure 17: Summary HIV status by age group

## Differences Across Saunas

There were some distinct differences between the six saunas in the HIV testing practices and reported status of the men (see Table 46 and Figure 18). Most noticeably, men at venue S6 were the least likely to have had a HIV test and to have an unreported HIV status. Men at venue S2 were the most likely to have had an HIV test.

Table 46 Summary HIV status by venue (% within venue)

	S1	S2	S3	S4	S5	S6
Untested	22.5	16.2	24.6	24.8	26.3	29.2
Status unknown/unreported	6.3	3.4	13.4	5.9	9.5	27.5
HIV negative > 12 months ago	18.8	18.9	14.1	14.9	15.3	10.8
HIV negative in past 12 months	50.0	60.1	47.2	54.5	48.2	31.7
HIV positive	2.5	1.4	0.7	-	0.7	0.8

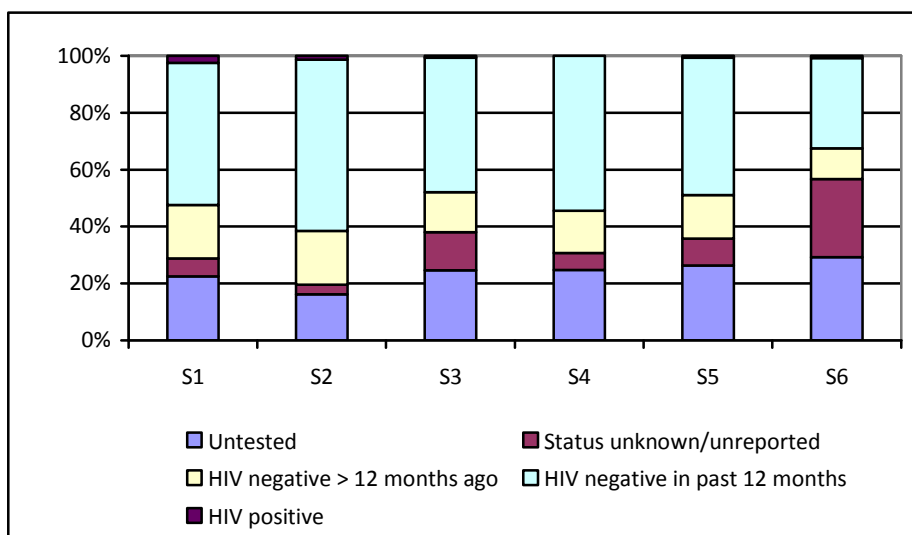


Figure 18: Summary HIV status by venue

## STI Testing and status

We asked a similar set of questions around testing for sexually transmissible infections (STIs). Half the sample had never had an STI test (see Table 48). Of those who had had a test, most had been tested in the previous twelve months.

Table 47 Ever tested for STI

	%
No	50.3
Yes in the last 12 months	37.2
Yes, but more than 12 months ago	12.5

When asked the result of this test, most (87%) reported that it was negative (see Table 48). Given this was an interviewer administered survey, this is likely to represent an under-reporting of STI infection.

Table 48 Most recent STI test result

	%
STI negative	86.9
STI positive	3.4
Don't know	1.6
I would rather not say	8.1

## Differences Across Phet

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There are some important differences in STI testing by Phet (see Table 49) with those identifying as Gay Queen least likely to have ever had a STI test and among those who have had a test, men identifying as Bisex were least likely to have had this in the previous twelve months. Given the low STI testing rates, there were no differences in the reported results of these tests (see Table 50).

Table 49 Ever tested for STI by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
No	47.6	49.2	59.4	51.4	50.9
Yes in the last 12 months	39.9	37.3	29.0	38.6	32.7
Yes, but more than 12 months ago	12.6	13.5	11.6	10.0	16.4

Table 50 Most recent STI test result by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
STI negative	83.8	88.7	93.9	84.9	82.8
STI positive	5.0	2.1	-	4.8	3.4
Don't know	2.5	1.0	-	0.8	6.9
I would rather not say	8.8	8.2	6.1	9.5	6.9

## ***Differences Across Age Groups***

Differences in STI testing across the age groups were similar to those for HIV testing with men in their 30s most likely to have ever had an STI test (see Table 51). Men in their 30s were also more likely to report that this test had shown the presence of an STI (see Table 52).

Table 51 Ever tested for STI by age group (% within age groups)

	<30	30-39	40+
No	52.6	47.9	49.0
Yes in the last 12 months	40.3	37.7	31.5
Yes, but more than 12 months ago	7.1	14.4	19.6

Table 52 Most recent STI test result by age group (% within age groups)

	<30	30-39	40+
STI negative	87.4	83.9	92.2
STI positive	1.5	6.2	1.3
Don't know	-	3.7	-
I would rather not say	11.1	6.2	6.5

## ***Differences Across Saunas***

There were some differences across the six venues in history of STI testing; with patrons of saunas S4 and S6 least likely to have ever had an STI test (see Table 53). Results of the most recent test did not vary by sauna.

Table 53 Ever tested for STI by venue (% within venue)

	S1	S2	S3	S4	S5	S6
No	47.5	47.3	44.3	64.4	40.9	61.7
Yes in the last 12 months	40.0	41.2	44.3	26.7	43.1	24.2
Yes, but more than 12 months ago	12.5	11.5	11.4	8.9	16.1	14.2

Table 54 Most recent STI test result by venue (% within venue)

	S1	S2	S3	S4	S5	S6
STI negative	88.1	93.7	75.9	94.6	87.8	87.5
STI positive	2.4	3.8	8.0	-	2.2	-
Don't know	2.4	-	3.4	-	2.2	-
I would rather not say	7.1	2.5	12.6	5.4	7.8	12.5

## About the Saunas

We asked participants a series of questions about the sauna at which they were recruited and about the other patrons at that sauna. Most participants were satisfied with their visit (see Table 55) and were likely to return to the sauna (see Table 56).

Table 55 Satisfaction with visit

	%
Very satisfied	34.7
Somewhat satisfied	62.7
Not at all satisfied	2.6

Table 56 Intention to return to venue

	%
Very likely	71.8
Maybe	27.0
Not at all likely	1.2

We asked participants to identify which of a range of descriptors were applicable to the venue they had just visited. The descriptors used were: *Sexy*; *Safe*; *Fun*; *Busy*; *Friendly* and *Clean*. Most participants considered the venue to be *Friendly* (61%) and *Fun* (40%).

Table 57 Venue characteristics

	%
Sexy	17.9
Safe	32.4
Fun	40.3
Busy	15.4
Friendly	61.1
Clean	30.1

We also asked participants to characterise the other patrons of the venue using nine descriptors. Descriptors included personal characteristics such as attractiveness, friendliness and openness about their sexuality, social characteristics such as class and ethnicity, and HIV status. Patrons were unlikely to be characterised as HIV positive or HIV negative, suggesting that HIV status was not key to thinking about particular venues. Class, also, was not a salient characteristic of patrons. Most characterised patrons as Thai, rather than foreigners, and this would match both the criteria the venues were chosen on the basis of, and the characteristics of the participants themselves.

Table 58 Patron characteristics

Characteristic	%
Attractive	23.9
Thai	80.3
Foreign	2.1
Open about their sexuality	46.9
HIV negative	5.2
HIV positive	2.6
Friendly	40.1
Higher class/ professional	9.6
Lower/ working class	6.3

## Differences Across Saunas

Venues differed significantly in how they were rated on these characteristics (see Table 59). For example venue S1 is rated as safe, clean and friendly, but not sexy or busy, and venue S3 is rated as sexy, fun and friendly, but not busy or clean.

Table 59 Venue characteristics by venue (% within venue)

	S1	S2	S3	S4	S5	S6
Sexy	5.0	9.5	29.6	4.0	28.5	22.5
Safe	31.3	35.8	30.3	27.7	43.1	23.3
Fun	12.5	23.0	46.5	29.7	51.8	68.9
Busy	7.5	2.7	16.9	11.9	20.4	31.7
Friendly	62.5	70.9	52.8	69.3	53.3	60.0
Clean	23.8	58.8	14.1	39.6	32.1	7.5

When we examine the correlations between these ratings, participants tended to be rate a venue as either: *Fun*, *Sexy* and *Busy*; or *Clean*, *Safe* and *Friendly* (see Table 60).

Table 60 Correlations between venue characteristics

	Sexy		Safe		Fun		Busy		Friendly
Safe	-0.009								
Fun	0.095	**	-.138	**					
Busy	0.06		-0.084	*	0.111	**			
Friendly	-0.055		-0.080	*	-0.109	**	-0.277	**	
Clean	-.126	**	0.147	**	-0.167	**	-0.222	**	0.025

\*= significant at 0.05, \*\*=significant at 0.001

When we examine patron characteristics in terms of the specific venues, some interesting differences arise (see Table 61). Considerations of ethnicity and HIV status do not differ between venues. However, patrons of certain venues were more likely to be considered higher or professional class (venues S1, S2 and S3) and patrons of venues S4 and S5 were more likely to be considered attractive. Venue S6 had a much higher percentage of participants stating that the patrons were open about their sexuality, while patrons in S1 were less likely to be characterised as *Friendly*.

Table 61 Patron characteristics by venue (% within venue)

	S1	S2	S3	S4	S5	S6
Attractive	5.0	11.5	24.6	32.7	41.6	23.3
Thai	83.8	90.5	71.8	69.3	81.8	83.2
Foreign	1.3	1.4	-	2.0	6.6	0.8
Open about their sexuality	40.0	36.5	43.7	44.6	44.1	73.3
HIV negative	8.8	2.7	7.7	-	2.9	10.0
HIV positive	1.3	1.4	2.1	-	3.6	6.7
Friendly	21.3	52.0	30.3	42.6	43.8	43.3
Higher class/ professional	12.5	11.5	13.4	6.9	5.8	7.5
Lower/ working class	10.0	4.1	2.8	2.0	8.8	11.7

## Reasons for Visit

We asked patrons to nominate up to three main reasons for their visit to the sauna. We included social as well as sexual reasons in a list of 11 possibilities, with the option to write in another reason if appropriate (see Table 62). The most commonly reported reason was *to use the facilities* (68%) followed by *to find sex* (59%) and *to relax* (58%).

Table 62 Main reasons for visit to sauna (up to 3 given by each participant)

	%
Find sex	59.1
Find a fulltime partner	7.6
Spend time with friends	31.9
Spend time with other gay people	23.5
Sell sex	0.4
Buy sex	-
Use the facilities	68.3
Have fun	37.7
Relax	58.4
Be in a safe place	6.2
Be with my partner	2.2
Other	4.6

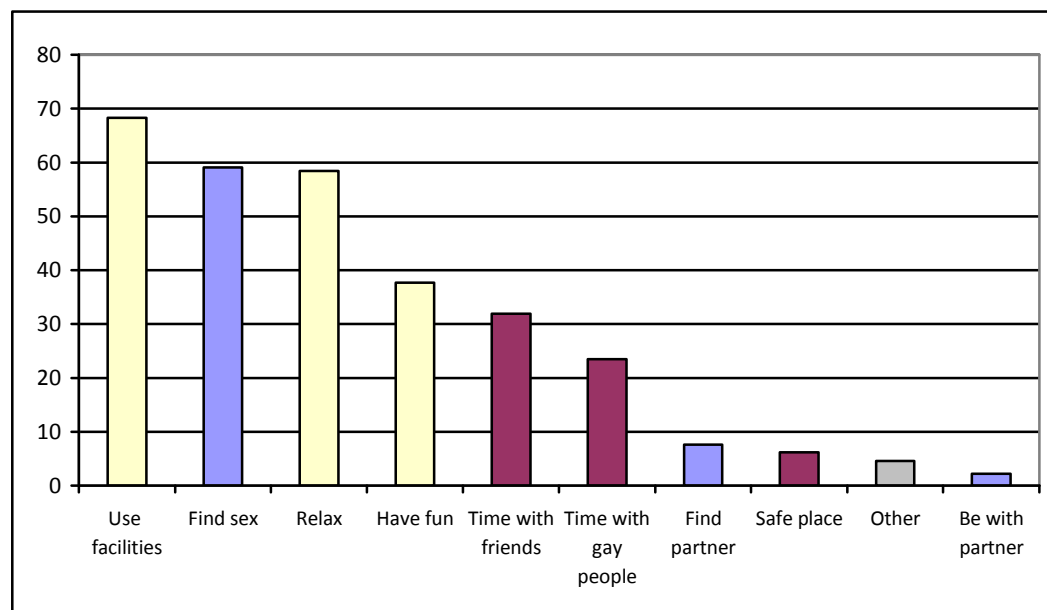


Figure 19: Main reasons for visit to sauna

We can summarise these reasons by combining them into three groups: Reasons around sex or finding a partner (The blue bars- 61% chose at least one of these); Social reasons (the purple bars- 48%) and Recreational reasons (the yellow bars- 92%).

## Differences Across Saunas

Looking at this summary across the six venues we find some interesting differences (see Table 63). We can see for example that participants at S6 and S2 were more likely to nominate recreational than other reasons, while at S3, S4 and S5 sex and recreational reasons are more similarly reported.

Table 63 Summary reasons for visit to sauna by venue (% within venue)

	S1	S2	S3	S4	S5	S6
Sex or partner	47.5	48.6	74.6	74.3	70.1	50.0
Social	43.8	36.5	46.5	36.6	57.7	63.3
Recreation	87.5	98.0	90.1	89.1	90.5	95.8

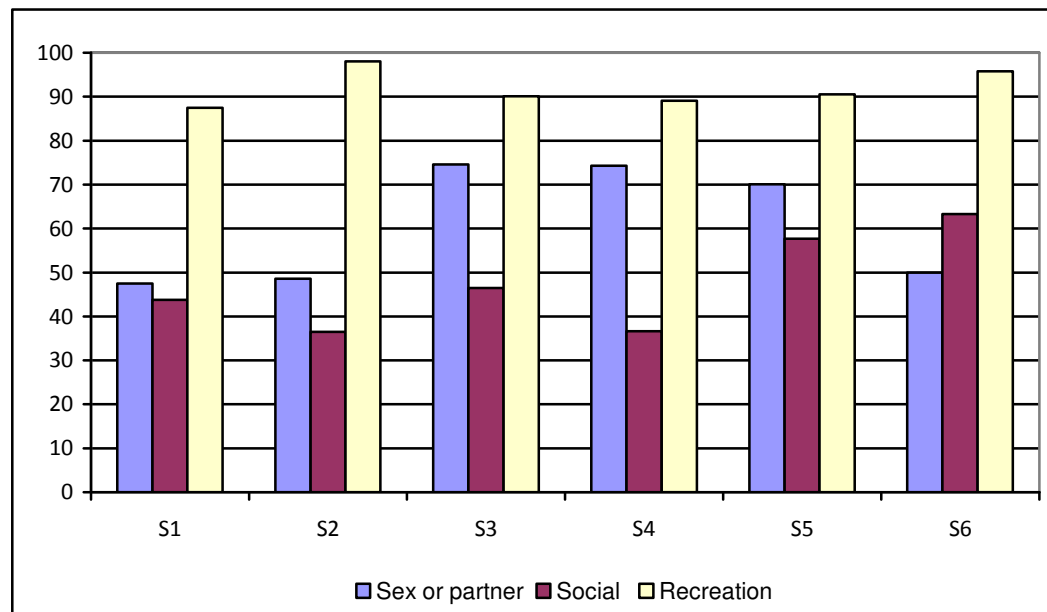


Figure 20: Summary reasons for sauna visit by venue

## Differences Across Phet

There are some noticeable differences between the Phet categories in relation to reason for the sauna visit (see Table 64). Those identifying as Gay Queen were the most likely to select items in the sex/partner category. Bisex respondents were far less likely to nominate items in either the social or sex/partner categories, but equally likely to nominate recreational reasons (see Figure 21).

Table 64 Summary reasons for visit to sauna by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
Sex or partner	62.2	62.4	77.1	61.8	34.5
Social	49.7	47.8	50.0	47.8	34.5
Recreation	89.5	93.5	90.0	92.8	94.5



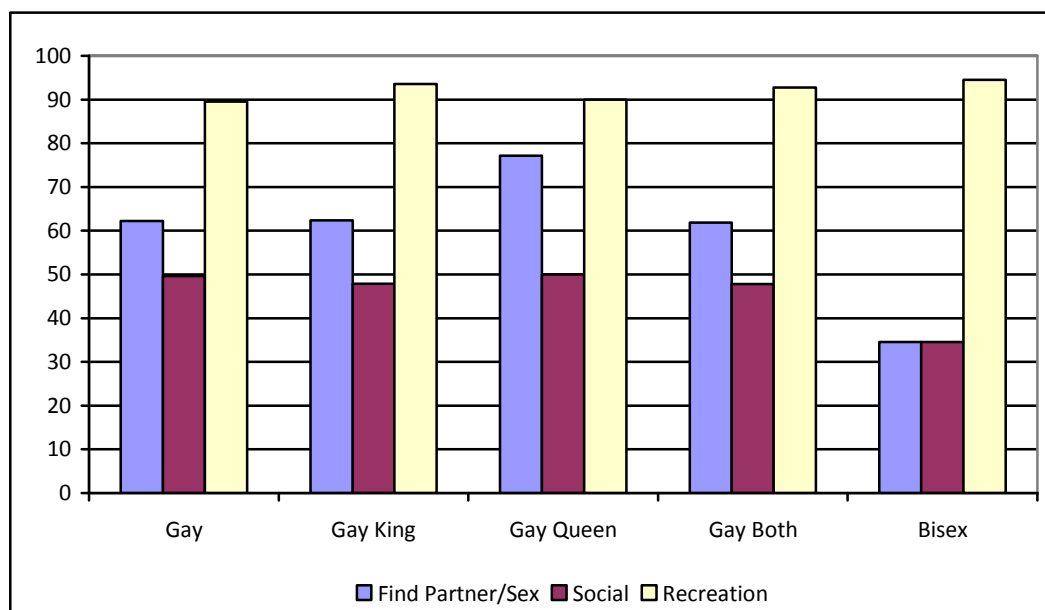


Figure 21: Summary reasons for sauna visit by Phet

### ***Differences Across Age Groups***

Differences between the three age groups are not marked (see Table 65). Those under 30 are somewhat more likely to give a social reason for their visit than the older men (see Figure 22).

Table 65 Summary reasons for visit to sauna by age group (% within age groups)

	<30	30-39	40+
Sex or partner	57.6	65.1	61.8
Social	52.8	44.5	45.1
Recreation	92.9	91.4	95.1

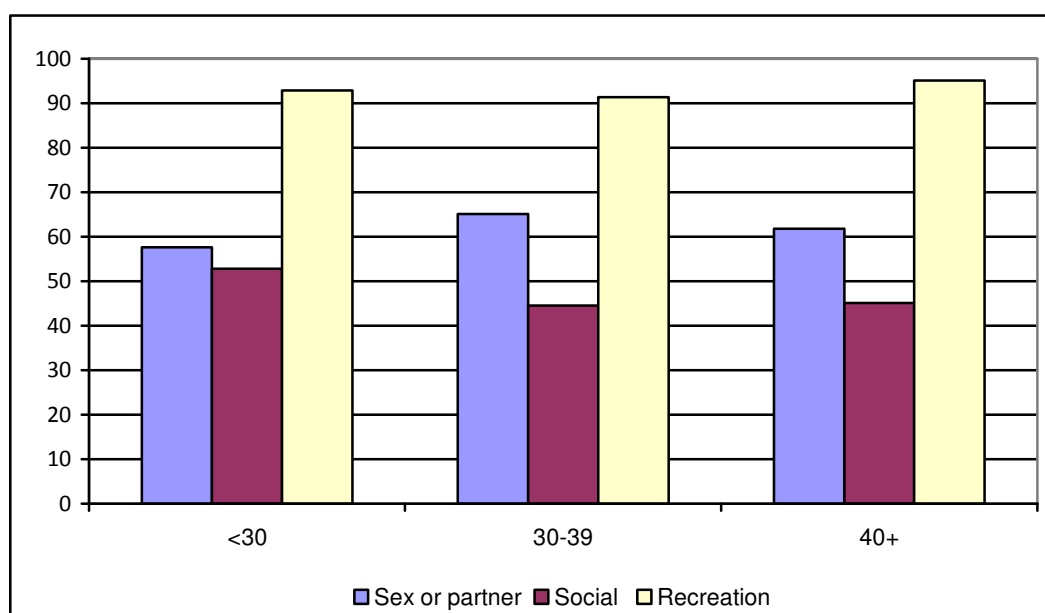


Figure 22: Summary reasons for sauna visit by age group

## About Sexual Practice

We asked participants a series of questions about the sex they had at the sauna, if any.

Overall participants spent an average of 3 hours on the visit to the sauna (see Table 66).

Table 66 Length of time visiting sauna

	Hours
Minimum	0.25
Maximum	8.0
Median	3.0
Mean	3.1

Around two thirds (67%) of participants said that they had sex during this sauna visit. With those that had sex, they spent an average of 48 minutes having sex (see Table 67).

Table 67 Length of time having sex

	Hours
Minimum	0.25
Maximum	5.00
Median	0.75
Mean	0.8

Most men had sex with one (56%) or two (28%) men during this sauna visit (see Table 68). Of the men they had sex with, 10.8% said that the man was their regular partner and only 4.9% said that the man they had sex with was a foreigner.

Table 68 Number of men that participant had sex with

	%
1	56.1
2	28.1
3	12.1
4	2.1
5+	0.8

### ***Differences Across Saunas***

The length of time men spent at the sauna and the length of time they spent having sex while there varied across the six venues (see Table 69). Men spent the least amount of time at S2, and the most at S6. Men at S3 and S5 spent the most amount of time having sex while men at S4 spent the least. If we look at time having sex as a proportion of the total visit, men at S3 spent almost one third of their visit having sex, while those at S4 spend around one fifth of their time having sex.

Table 69 Mean time spend by venue

	S1	S2	S3	S4	S5	S6	sig
Visiting sauna	3.36	2.76	3.01	3.06	3.15	3.48	0.000
Having Sex	0.72	0.78	0.98	0.55	0.93	0.85	0.000
Percent of time having sex	21.4	28.3	32.6	18.0	29.5	24.4	

The number of men that the participants had sex with also varied by venue (see Table 70), with those at S2 the most likely to have sex with only one man, while those at S3 and S5 the most likely to have sex with 3 or more men.

Table 70 Number of men that participant had sex with by venue (% within venue)

	S1	S2	S3	S4	S5	S6
1	58.7	78.9	56.9	52.1	43.9	55.8
2	34.8	14.5	23.3	32.9	36.0	30.8
3 or more	6.5	6.6	19.8	15.1	20.2	13.5

### ***Differences Across Phet***

The length of time men spent at the sauna varied by Phet, but the length of time they spent having sex did not (See Table 71). Gay Kings spent the least time at the sauna, and consequently the greatest proportion of this time having sex.

Table 71 Mean time spend by sexuality/Phet

	Gay	Gay King	Gay Queen	Gay Both	Bisex	sig
Visiting sauna	3.28	2.87	3.33	3.12	3.15	0.016
Having Sex	0.81	0.81	0.78	0.86	0.81	0.873
Percent of time having sex	24.7	28.2	23.4	27.6	25.7	

There was some variation in the number of men the participants had sex with when we compare across Phet (see Table 72). Gay King were most likely to have sex with only one man, while Gay Queen and Bisex were more likely than others to have sex with 3 or more men.

Table 72 Number of men that participant had sex with by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
1	57.1	63.6	53.1	54.8	58.6
2	26.5	24.0	28.6	31.0	20.7
3 or more	16.3	12.4	18.4	14.3	20.7

### ***Differences Across Age Groups***

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There were no differences between the three age groups in the length of time men spent at the sauna, but they did vary in the amount of time they spent having sex (see Table 73). Those in their 30s spent more of their time having sex while at the venue, around one hour out of a three hour visit.

Table 73 Mean time spend by age group

	<b>&lt;30</b>	<b>30-39</b>	<b>40+</b>	<b>sig</b>
Visiting sauna	3.12	3.08	3.14	0.857
Having Sex	0.73	0.94	0.82	0.003
Percent of time having sex	23.4	30.5	26.1	

The age groups also varied in the number of men that participants had sex with (see Table 74). Men under 30 were least likely to have sex with 3 or more men, and men over 40 were the most likely to have sex with only one man.

Table 74 Number of men that participant had sex with by age group (% within age groups)

	<b>&lt;30</b>	<b>30-39</b>	<b>40+</b>
1	58.9	53.7	60.2
2	33.7	25.5	23.5
3 or more	7.4	20.7	16.3

## Sexual Practice

Of the 487 men that said they had sex during their visit, 86.1% said that they had anal sex. When asked what position they took during anal sex, 43% said they were insertive, 18% that they were receptive and 39% said they were both insertive and receptive.

Table 75 Sexual position of participant during anal sex (% of those that had anal sex)

	%
Receptive	17.8
Insertive	43.2
Both	39.0

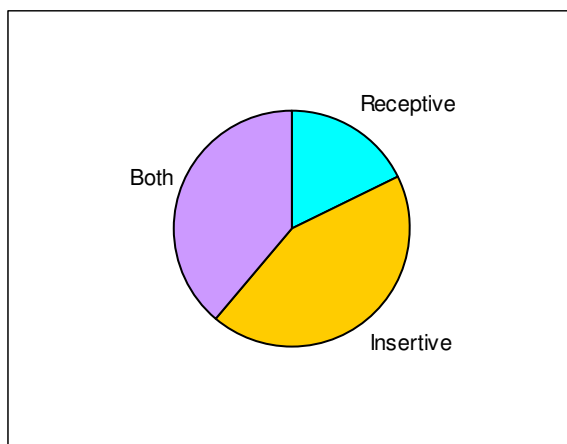


Figure 23: Sexual position during anal sex- sex at sauna

Almost all participants (96.8%) reported that condoms were used during this episode of anal sex and similarly almost all reported use of water based lubricant (92%).

Table 76 Lubricant used during anal sex

	%
None	3.2
Water based lube	92.2
Gel	1.4
Saliva	2.8
Other	0.2

## Differences Across Saunas

The proportion of men reporting anal sex did not differ significantly across the six venues. The percentage reporting anal sex for the venues was (from S1 to S6): 82.2%; 78.2%; 90.8%; 86.5%; 86.7%; and 88.5%. There was some slight variation in the pattern of sexual positioning across venues (see Table 77 and Figure 24), but these were not statistically significant. Reporting of condom and water based lubricant use was similarly high in all venues.

Table 77 Sexual position of participant during anal sex by venue (% within venue)

	S1	S2	S3	S4	S5	S6
Receptive	20.5	17.7	16.5	23.4	15.4	17.0
Insertive	46.2	46.8	48.6	39.1	37.6	42.6
Both	33.3	35.5	34.9	37.5	47.0	40.4

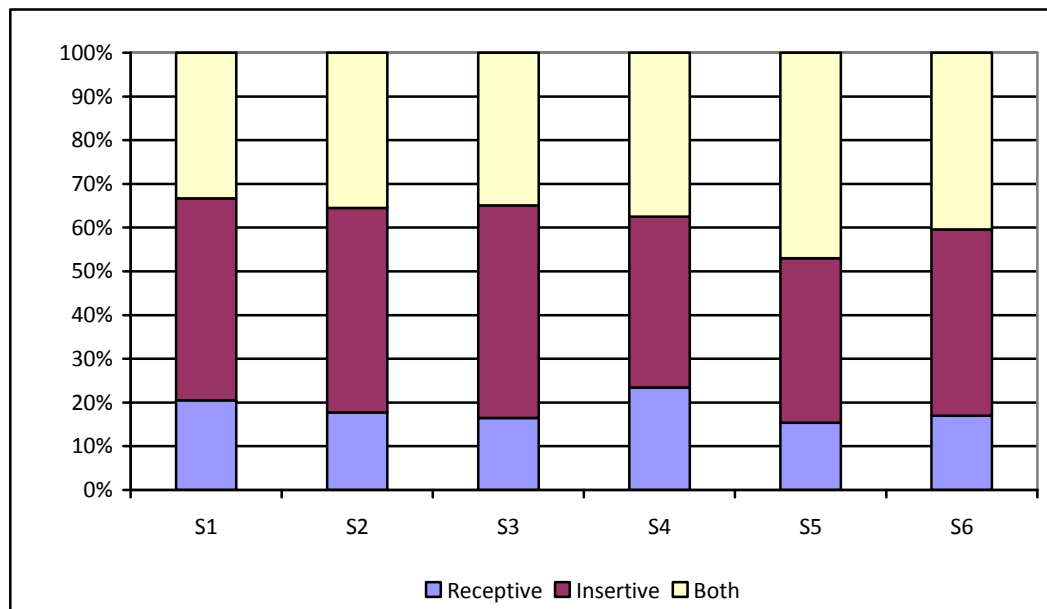


Figure 24: Sexual position in anal sex by venue

## Differences Across Phet

There were slight differences in the proportion within each Phet that reported anal sex: Gay 70.9%; Gay King 88.9%; Gay Queen 95.9%; Gay Both 90.4%; and Bisex 79.3%.

Sexual position varied by sexual identity/ Phet (see Table 78) as would be expected, with those identifying as *Gay King* most likely to take an insertive position, those identifying as *Gay Queen* more likely to take a receptive position, and higher levels of versatility among those identifying as *Gay* or *Gay Both* (see Figure 25).

Table 78 Sexual position of participant during anal sex by sexuality/Phet (% within Phet)

	Gay	Gay King	Gay Queen	Gay Both	Bisex
Receptive	7.6	2.5	93.6	13.0	8.3
Insertive	46.8	93.3	2.1	9.7	79.2
Both	45.6	4.2	4.3	77.3	12.5

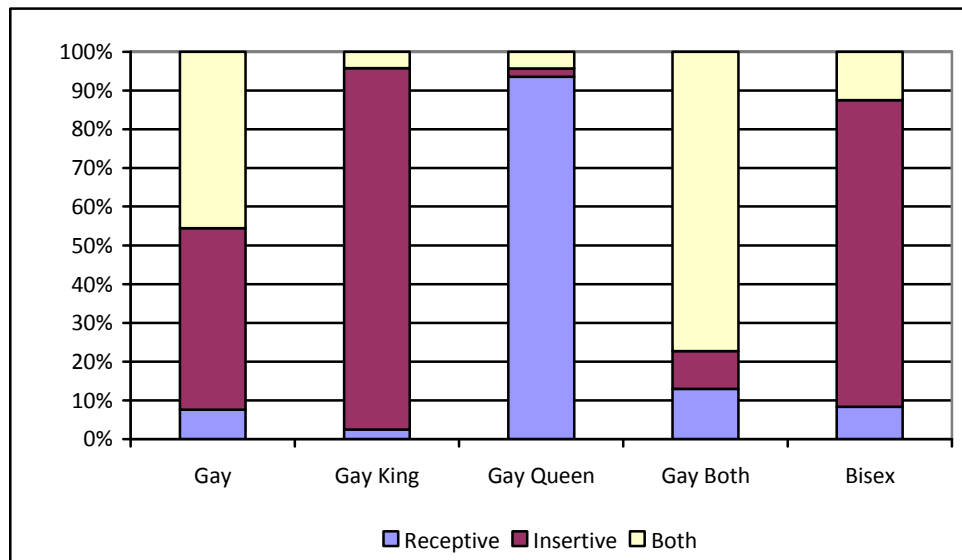


Figure 25: Sexual position in anal sex by Phet

## Differences Across Age Groups

There were no differences across the age groups in the proportion reporting anal sex: Under 30 was 85.3%; 30-39 was 88.3%; and 40+ was 81.8%. There were some differences in sexual positioning, with younger men reporting greater versatility (see Table 79 and Figure 26).

Table 79 Sexual position of participant during anal sex by age group (% within age groups)

	<30	30-39	40+
Receptive	21.0	15.3	16.7
Insertive	35.8	44.6	53.6
Both	43.2	40.1	29.8

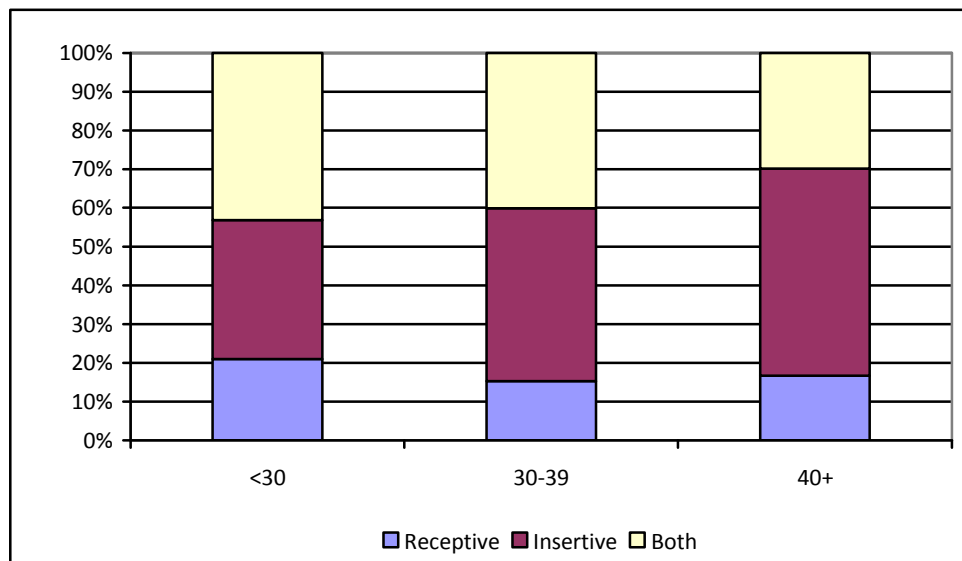


Figure 26: Sexual position in anal sex by age group



## Discussion

More men are going to saunas than ever before and there has been a rapid increase in gay venues in recent years. (Jackson 2011, 33) The lowering of entry price has meant venues such as saunas have become more affordable for men on a lower income as well as middle income earners. Gay saunas as with entertainment venues attracting the gay dollar operate within a competitive market and this can be seen reflected in the marketing of saunas to attract particular market segments.

What is known about gay saunas in Bangkok is usually framed around the notion of these as risk environments. Research in saunas has operated within the constraints of behavioural surveillance with attention on HIV and STIs and sexual behaviour. Valuable data has been collected from recent surveillance which has shocked many people and alerted us to extremely high rates of HIV. However, past research has given us a only cursory insight into the characteristics of the men who go to gay saunas in Bangkok and what they do while there.

Who goes to gay saunas, why they go and what do they do while there, are important questions, but ones that have not ever been seriously posed before. These issues have not been considered important because saunas have been constructed as one dimensional, as sites of sexual behaviour and of potential infection. The underlying fact is that saunas are first of all social places where sex happens (a lot). The answers to these simple questions are more complicated than first appear.

There were estimated to be 31 gay saunas at the end of 2011 across Bangkok's eight districts. (Howard et al, 2012) Dacanay puts the number at more than 50. (Dacanay 2011) The high number of venues is part of what Peter Jackson labels as the 'Thai queer boom'. Even more so today than ever before Bangkok holds the title of the "gay capital" of Southeast Asia with the ever increasing commercial gay venues throughout the city. Jackson and fellow contributors to an edited volume: *Queer Bangkok: 21st Century Markets, Media, and Rights* (2011): map out the growing queer spaces throughout Bangkok coupled with the booming gay economy which is taking hold of Bangkok in the early twenty-first century. As Jackson writes: 'In contrast to the sense of decline that has affected public queer life in early twenty-first century Sydney and San Francisco, Bangkok's queer cultures and "rainbow" communities and markets have boomed.' (Jackson, 2011, 18)

Gay saunas, focussed primarily on Thai men, are an important and visible part of this queer boom. With this expanding market and the lowering of entry price over the past few years, gay saunas have become popular and affordable to lower and middle class Thai men. (Jackson 2011, 33) Nikos Dacanay's research is one of the few anthropological works that explores Bangkok gay saunas. He focuses on two very different saunas. First, The Babylon which is a large internationally renowned venue trading on its cosmopolitan image with a smorgasbord of desirable bodies and money boys and the lower class Farose venue marketed towards a lower class man. He notes that these places are highly structured and contested sites. He writes about how gay men negotiate these sexualised places and are able to move through these venues (p100) which are highly mediated by class, ethnicity, gender and sexuality. 'a key objective of Thai gay men who go to the two saunas is to have sex, they are placed within a complex set of class, ethnic, and gender/sexual power dynamics that both enable and hinder them from achieving this objective. (110)

As Dacanay notes, saunas across Bangkok have taken on different characteristics and reputations with the intent to target different gay sub-populations. (Dacanay 2011, 104) Men go to saunas not just to have sex, but to spend time socialising with other gay men. Men do not go to these sites to buy sex, they are fun places to hang out and meet men. They are also risky environments for HIV and other STIs. In 2011 the International Labour Organisation (ILO) conducted an assessment of HIV prevention initiatives at eleven saunas across Bangkok. The assessment revealed a lack of information on sexual safety and health, lack of water-based lubricant and condoms, with limited condom access points throughout sauna spaces and specifically where sexual activities occur, and lack of staff training on HIV, sexual health or hygiene. (Howard et al. 2012) Prevention work in these venues tends to be inconsistent and is often focused solely on condom and lubricant distribution with little attention to addressing the social aspects of the negotiation of protective practices.

Most of the men who go to these saunas are Thai men in their twenties. These saunas attract few foreigners and even fewer westerners. These six saunas, as is the case for nearly all gay saunas in Bangkok, are for locals. These men tend not to live in the surrounding area or neighbourhood. They travel from elsewhere in Bangkok, indicating intention and selection – they choose to go at a particular time and visit saunas with specific patrons and venue characteristics. There is some diversity between the saunas, with one sauna known to attract more feminine acting men and another where men are likely to find more bisexual men.

Middle class and professional men make up the majority of patrons, with nearly all men in full time employment and mostly highly educated. Students make up a distinct group for most of these saunas, and this is also reflected in sauna policies where, for example, one sauna charges students 39B in comparison to 139B for the full price. Entry fee ranges from 99B to 220B, with one sauna offering a long weekend price of 500B and as a consequence attracts more men from beyond Bangkok for those weekends (cheaper than a hotel).

As expected there is diversity in the patterning of phet across venues. We offered participants a choice of seven phet to choose from. Nearly all (97%) claimed one. Men did identify with traditional phet like gay queen and gay king, but interestingly one in five men described themselves as gay and over one third as gay both. Gay both is a category that is still not common in the academic literature on Thai sexualities and may well represent a shift in patterns of identification among homosexually active men. Without longitudinal data, we can only speculate that this represents an historical shift from gay to gay both, although the low numbers choosing to describe themselves as gay queen may also be important here. Historically this category included men who practiced receptive anal sex within a wider sexual practice.

The sexual position(s) for anal sex taken by these men during their visit to the sauna is largely consistent with how they identify themselves, although there are exceptions. Of particular interest is the difference in the pattern between men who identify as gay and gay both. Men who describe themselves as gay are fairly evenly distributed across insertive and versatile in anal sex, while among those who use gay both around three quarters are versatile, with remainder being roughly the same for insertive and receptive.

Men are about equally likely to have a regular male partner as not, with a significant minority (16%) having more than one regular male partner, as one would expect in Thai gay

culture. Also, a significant minority have a regular female partner (around 14%), but these are not the saunas of the sensationalist media, populated by large numbers of married men, sneaking out to have sex with men. In fact a significant proportion of these men are open about their sexuality with friends and work colleagues. Openness with family may in fact be higher among this group than among other Thai gay men, but we do not yet have the comparative data.

These data show us that not all these men who visited these saunas had sex while there. There is an obvious relationship between saunas and sex, but there is a great deal more going on during the average three hour visit than sex. Seeing saunas only as sexualised places where men meet men to have sex has stopped us thinking about these places as social spaces with a range of possibilities. We need to understand these venues as places offering much more than the possibility of sex.

While these saunas are sexualised spaces, the act of sex is not why all men go and certainly not the only reason why men go. One third of these men did not have sex on their most recent visit although they may well have arrived with the intention to have sex. Most of the time spent at the sauna for most of these men did not involve sex. On average men spent only around one quarter of their time actually having sex. Most (68%) indicated that one of the main reasons for visiting the sauna was to 'use the facilities' (gym, pool, sauna); with over half (58%) saying that they visited the sauna simply to 'relax'. Spending time with friends and, for some, the idea of spending time with other gay men is an understandable incentive to visit a sauna. It should not surprise anyone that men go to saunas to have fun (38%) which does not always mean to have sex. Sitting around talking with friends, looking, flirting, being desired and also desiring other bodies is fun and an enjoyable way to spend part of an evening or a Sunday afternoon. The fact that it is a sexualised space and carries considerable sexual potentiality, and indeed that it is a gay space is critical to these other forms of social enjoyment. Otherwise men would use a pool or sauna in their own neighbourhood. The critical distinction, though is that while the flavour of these venues is sexual and gay, the practices men engage in and their motivations for being there are at least as much social.

Most, but far from all, of the 728 men who visited the sauna did have (anal) sex with one or more men. For those who did have sex while at the sauna, just over half (56%) had sex with only one man, with the remainder having sex with at least two men. Sexual reciprocity and versatility is more easily negotiated in an explicitly sexual environment with a number of potential partners than in more domestic relationships, and so it is not surprising that we see strong evidence for these practices in this setting. There is a high level of reciprocity when there is only one partner and a high level of sexual versatility when it comes to anal sex with more than one partner.

Saunas are settings where there is potentially high risk for the transmission of HIV and other sexually transmitted infections. The potential for risk comes from both the structural characteristics of the setting (high partner change rates, reciprocity, versatility and sexual concurrency) and population characteristics (young, highly sexual active, multi partnered men) and these are well recognised within epidemiological representations of saunas. What can be seen from this simple study, however, is that the social processes and social mediators may be far more important when it comes to the development and enhancement of prevention work with this population.

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