

Trinidad & Tobago



■ Research is the key to change.

Sexual Culture *and* HIV



RESEARCH BRIEF

This research is part of a multi-country study titled Building Responsive Policy: Gender, Sexual Culture and HIV/AIDS in the Caribbean. This International Development Research Centre (IDRC Canada)-funded research undertaken in Barbados, Suriname and Trinidad and Tobago was executed by the UN Women Caribbean Office with partners - the University of the West Indies' (UWIHARP), Cave Hill, Barbados; the Stichting Ultimate Purpose, Suriname; the UWI Institute for Gender & Development Studies (IGDS) St Augustine Unit, Trinidad and Tobago; as well as UNICEF.

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Research On... Caribbean Sexual and Gender Cultures

Professor Kamala Kempadoo

Research on sex, sexuality, sexual practice and sexual culture needs to be done in ways that are positive and ethical. We need to be mindful about the kinds of questions we ask, the methods we use to gather information, how we analyze data, and the kind of interpretations and recommendations we make regarding wider interventions, actions and policies. If done carefully, we could produce research results that would support positive social change.

It is also vital to carefully examine and question how law, religion, the media, gender relations, ethnicity, and class and any other significant factors such as ability, create a particular culture or cultures with their own set of understandings, norms and values, and which produce particular sexual knowledge, actions and identities.

UN WOMEN and a number of researchers have focused on sexual culture in order to produce informed recommendations for HIV&AIDS prevention policies and programmes that close the gap between knowledge about sex, and sexual behaviour.

Gender (the way women and men relate in society) and patriarchy (relations of power where males are dominant) remain critical to our study of sexuality. As organizations such as UN WOMEN have made abundantly clear, the fact that men hold economic, political, social and often the physical power over other genders – and can, and very often do, dictate or enforce the terms of social and sexual engagement – puts many other groups at great risk of contracting sexually transmitted infections.

Any attempt to effectively intervene in the HIV & AIDS epidemics must then take a look at what sex means in peoples' everyday lives and what makes sexual acts and expressions desirable and pleasurable. We could then also ask and perhaps answer what it is in the sexual culture that enables people – sometimes very wise, knowledgeable or responsible people – to put themselves and others in danger.

**Professor Kempadoo has been studying sexuality
and sexual culture since the early 1990s**

SUMMARY

What is the sexual culture in Trinidad and Tobago – taking into account the differentiations of ethnicity, age, class, as well as sex and gender identity? That is the broad question that researchers set out to answer.

Why? Because of recognition that a deeper understanding of sexual cultures is vital to halting the spread of HIV and AIDS – which remains a challenge despite significantly increased understanding and awareness.

Up to now, most HIV-related research has been conducted within a public health framework. This has focused on behaviours identified as driving the epidemic, such as multiple partnering, forms of transactional sex including commercial sex work, and early sex. The fact that buggery and other homosexual-related activity, is illegal in Trinidad & Tobago has also made it difficult to reach some persons who are actively or passively within these groups.

Where research has focused directly on sexuality, it has been within the context of family planning.

Seeking a more comprehensive understanding of the HIV and AIDS phenomenon, the T&T researchers set out: “to document and analyse the practices, attitudes, feelings, meanings, and gendered negotiations of power related to sexuality among young adults, ages 18 to 30, in Trinidad and Tobago, taking into consideration the socio-economic context, and class, religious and ethnic diversity that exists.”¹

The main focus of the research was a popular street social venue termed ‘The Avenue’, a trendy bar and restaurant area also rich with street vendors, within an established middle-class neighbourhood. Two mixed-race field researchers, one male and one female observed and interacted with persons in this space for 15 hours each week over nine months from 2010-2011.²

TRINIDAD AND TOBAGO DEMOGRAPHY FACT FILE:

Population (CSO Estimate 2010)

1,324,125

female :: 667,454

male :: 656,651

Population Mix :: Trinidad (2000)

- African 39.6%
- Indian 40.03%
- Mixed 18.4%
- White/Caucasian 0.6%
- Chinese/Syrian/Lebanese 0.5%
- Other 0.6%

Population Mix :: Tobago (2000)

- African 92%
- Indian 2.5%
- Mixed 6.6%

Religion

Largest groups – Roman Catholic & Hindu. Others include Muslims, Anglicans and other Christian groups, Seventh Day Adventists, Pentecostals, Evangelicals and Afro-Christians such as Spiritual Baptists and non-Christian religions such as Orisha

Education

Women's level of educational attainment is generally higher than men's

Employment

More women are unemployed and for longer

Poverty (2005)

Estimated rate of 27%. Marked gender differentials in income between male-and female-headed households with more women economically vulnerable

Contraception Widely available, however usage levels vary. Abortion is illegal except to preserve the mothers physical or mental health.

HIV CONTEXT

Regional concerns about HIV and AIDS prevalence are underscored in Trinidad and Tobago, which is one of the few Anglophone Caribbean countries whose rates have risen rather than fallen in recent years. The Caribbean is the second most affected region worldwide, with a rate of at least 1%. In Trinidad & Tobago, HIV prevalence rose from 1.2% at the end of 2006 to 1.5% in 2009, by which time the number of new HIV positive cases was 20,255. A significant reason for the increase was the increased survival rate of people living with HIV because of access to free antiretroviral therapy.

Women accounted for nearly half of the new cases, with young women, 20-24 years, considered the most vulnerable group. This comes in the context of acknowledged vulnerability of girls and women to sexual violations, in Trinidad as in the wider Caribbean. The local situation is compounded by cultural gender ideologies that recognize male power, a popular culture that is sexualized and consumerist, and an absence of sexuality education in schools.

There is insufficient state response to sexual violations such as rape, sexual abuse and incest, as a result of understaffed and under-aware criminal justice and social service systems. This is true despite important legislative advances rooted in efforts by the women's movement of the 1980s and 1990s.

“Overall, the high and increasing HIV prevalence rates among females in the country points to inadequacies in dealing with issues of sexuality.”³

GENDER & SEXUALITY

While the state has acknowledged a wider range of socially-acceptable partnerships, including common law and visiting unions as well as marriage, the focus has still been on male-female relationships, while social and legal contexts still idealize heterosexual, male-headed, married families. Individuals who do not conform in terms of their sexual identities or practices may face significant stigma and legal penalty.

Generally, fertility and childbearing remain as the main indicators of femininity, with marriage and the bearing of sons being especially important for Indo-Trinidadian women. Manhood tends to revolve around sexual prowess, having multiple partners and fatherhood.

Fear of being considered ‘soft’ and ‘effeminate’ and being stigmatized as homosexual has increased, especially among boys and young men. This has had an impact on their behaviour, including their falling participation rates in educational programmes,

propensity for violence, and the high value placed on sports and physical activity.

Many men who have sex with men (MSMs) operate in secret, often behind the shield of heterosexual relationships – which places their female partners at risk; and many Caribbean MSMs deny being homosexual, especially if they are penetrating their partner and not the reverse, because penetration is seen as a masculine act.

Women who have sex with women are generally less marked in everyday interactions, in part because physical displays of affection between women are more accepted; and also because many men find lesbianism non-threatening.

Also important, especially where there continues to be income disparity between women and men, are various forms of sexual economic exchange including commercial sex work or prostitution, sex tourism, ‘sponsoring’, ‘sugar daddy’, ‘sugar mommy’ and ‘outside’ relationships. It is often difficult for women, especially young women, to negotiate condom use in these contexts.

Early sexual initiation has also been identified as contributing to the HIV risk, including cases of older males and young women or girls. A pilot study at the St Augustine campus of the University of the West Indies, looking into the connections between race/ethnicity, gender and sexuality among students of African and Indian descent, found that 11 – 15 was the generally agreed age range for sexual initiation;

though Afro-Trinidadian males gave an age range of 13 - 18.⁴

“...much of the early sexual initiation may not be voluntary although the hyper-sexualised climate of contemporary Caribbean life places great sexual pressure on young boys, girls and adolescents. New research on child sexual abuse suggests that this may be more prevalent than assumed and that for many young women and to a lesser extent men, their first intercourse may be forced or take place within a context of family or peer violence.”⁵

There is also evidence that multiple sex partnering is a risk factor in spreading HIV in Trinidad & Tobago.⁶

Concern about this and early sexual initiation have underpinned appeals to implement a Health and Family Life Education programme in schools, with a sexuality education component.

THE AVENUE

Generally described as a physically, socially, culturally and sexually open space – the ultimate ‘liming spot’ – The Avenue nonetheless reflects many of the wider society’s class, cultural and ethnic divisions via space and structure. Various clubs, bars, restaurants and other spaces cater to specific race, sexuality and class groups and these distinctions are generally understood and accepted by ‘limers’.

“The Avenue ... exhibits a tolerance and acceptance of people who express a range of social and sexual behaviours. Hence many different people can feel comfortable ‘liming’ on The Avenue.... In spite of this perception ... its internal spatial and structural organization represents many of the class and ethnic divisions of the wider society. Constraints exist that are not wholly and readily visible but offer clear and consistent boundaries. The physical sites on The Avenue – clubs, bars, restaurants etc. are understood to cater to different groups of persons – based on class, ethnicity/ colour and sexuality.”⁷

Gendered use of space was also observed – for instance in relation to the locations where men and women hung out within particular establishments.

The research identified some of the boundaries operating on The Avenue. For instance, forms of sexual expression encouraged and represented were in tune with the establishment’s understanding of its clientele’s class and colour. A working class space, for instance, was portrayed as a hyper-heterosexualized space, supported by sexually-explicit music and videos and sometimes by DJ encouragement.

Several business places were perceived to welcome gay – homosexual – clients, however there were unspoken boundaries in relation to what was acceptable in terms of sexual activity and public displays of affection were generally frowned on.

“...The Avenue is really used as a space for gay networking, tentative expressions of this sexuality, hooking up, and expressing sexual availability.”⁸

While homosexuality was considered to be generally accepted on The Avenue, other non-normative sexualities were in the minority. Patrons at facilities in the area made clear statements about what they understood about the various types of sexuality:

BISEXUAL consistently understood as an individual attracted to and engaged in sexual activities with persons of both sexes.

HOMOSEXUAL linked to the term ‘gay’; generally assigned to a biological male who behaves in a way not culturally understood as masculine. Heterosexual males tend to link the term specifically to sexual practice and physical presence, while non-heterosexual men and women both added emotional connections to their definitions.

LESBIAN understood as a female who is physically and emotionally attracted to, and who has sex with other women. Because public displays of affection and intimacy between all females are accepted, lesbianism is less marked than male homosexuality.

METROSEXUAL identified as a biological male, attracted to women, who does not present himself in an ultra-masculine way and who pampers himself and dresses in ways that are considered to be more feminine. May be termed a ‘hen’ and often considered to be an undeclared ‘gay’. He is also perceived as a challenge to the male-female norm.

‘**TRANS**’ though there is not always a clear understanding of the meaning of the various terms, transgendered/transsexual/transvestite persons are acknowledged to be present at some establishments.

IMPACT OF CYBERSPACE

New communication technologies, and cyber spaces such as Facebook and other social networking sites, provide people anonymous new ways to communicate, ‘hook-up’, and engage in sexual discourse and behaviour. There are popular social networking and mating sites targeted specifically to the gay community as well as the traditional sites like Facebook, Hi5, Trinipulse etc.

This has facilitated gay relationships, whereby prospective partners identified online can then meet on The Avenue. Similar opportunities exist for heterosexuals and also for sex workers. It is acknowledged that there may be dangers involved in such connections.

SOCIAL CONSTRUCTION

Despite its relative ‘openness’, many mainstream ideas about masculinity and femininity continue to hold sway on The Avenue. Women, for instance, are expected to dress and act in a way that attracts male attention. Men are generally expected to initiate contact, in response to positive female body language, though women do sometimes take the initiative.

The expression of sexuality extends to the dance floor, which is generally a female space where the norms of acceptable feminine behaviour can be challenged. Clothes that expose or enhance physical assets are worn and the dancing is often highly sexualized.

While gay men will often join the women on the dance floor, dancing in exaggeratedly sexual manner that marks them as ‘gay’ for many watchers, most men populate the bar area or watch from spots along the walls. Music contributes to hypersexuality, including the choice of tunes with sexually explicit lyrics – especially dancehall and to a lesser extent soca music.

“In the clubs and bars, music and the dictates of DJs endorse and reinforce male sexual domination, female sexual objectification and heteronormativity and promote homophobia. On the dance floors women are the main performers and dance to dancehall and soca music in sexually explicit ways. They are guided by the lyrics of the songs, which project women as hypersexual objects.”⁹

Alcoholic consumption is also an important part of liming on The Avenue, and also contributes to a release of inhibitions in both male and female patrons. Male ability and willingness to purchase alcoholic drinks for women

is also an important signal of interest and of being in a position of authority. Female acceptance of drinks is perceived as willingness to socialize further. The type of drink purchased is also considered to reflect masculinity and femininity, with masculine drinks being hard and strong. Drinks that are sweet, pretty, or served with a straw, are definitely not masculine. Class and ethnicity/colour are also perceived to affect the types of drinks chosen.

Masculinity is also indicated by the capacity to buy rounds of drinks for the group, and by the capacity to ‘hold’ your liquor.

“Alcohol therefore, serves as the basis for initiating heterosexual, social and intimate relations. It sets up a particular power relationship with certain expectations. But it has a dual functionality in that it both initiates relationships and reduces sexual inhibitions, thus facilitating unplanned sexual activity.”¹⁰

THE HETEROSEXUAL NORM & THE SAME SEX PRACTICE

The acceptance of heterosexuality as the norm provides the framework for sexual and social activity on The Avenue and beyond, even for people in same-sex relationships. Many of the values are the same as those that circumscribe heterosexual relations. Additionally, same-sex practices are always constructed as alternative to the norm.

Non-normative sexual behaviour also seems to be strongly influenced by European and North American patterns, mainly communicated through the media. For instance, the masculine and feminine roles within heterosexual relations, in which the feminine is generally assumed to be passive and the masculine is assumed to be dominant, are generally accepted and adhered to in same sex relationships.

THE HETEROSEXUAL NORM & HOMOPHOBIA

As a result of society accepting heterosexuality as the norm for sexual orientation, people who have other sexual identities and behaviours may be victims of homophobia, suffer from homophobia and suffer psychosocial discomfort. On The Avenue, most heterosexual men are willing to peacefully co-exist with gay men as long as clear boundaries are observed,

including the tolerance of homosexual socializing within specified spaces only. Same-sex public displays, especially involving males, may generate homophobic violence, commonly towards male sex workers in drag – who ironically may dress in drag to seem more feminine and minimize fears of stigma and exposure among potential male clients. Lesbian homosexuality rarely generates the same response.

In general though, same-sex displays of affection are restrained on The Avenue and are limited even in most of the gay-friendly spaces.

MEDIA

The media was seen to have an important role in shaping ideas about homosexuality and endorsing heterosexual behaviour as the norm.

A heterosexual female respondent noted that there is a lot of anti-gay music, that “affects people in the sense that even though they may have homosexual tendency (sic) because of the bashment going on out there you might be hesitant as to what extent you express and expose yourself to people in public.”¹¹

The study also noted the extent to which people are exposed to hypersexualized imagery, not only on video screens in dancehalls, but also on public and commercial media.

RELIGION AND ALTERNATIVE SEX/ GENDER IDENTITIES AND PRACTICES

Religious discourse generally emphasizes the heterosexual norms, and this was often used as a critical reason why alternative sexualities are not accepted.

Avenue participants may not be active religious practitioners, but they are aware of moral codes governing sexual behaviour, which often results in contradictions and rationalizations.

Even where they may be accepted, ‘gays’ on The Avenue may also have an on-going struggle to accept their own sexuality.

“There is a general perception that for members of the gay community, there is a need to reconcile their sexuality with their religious beliefs and, in some instances, it appears as though they strongly desire acceptance from their faith of their sexuality and sexual practices.”¹²

Issues of morality also emerge with respect to sexual infidelity in monogamous relationships; in a culture where infidelity is widespread.

CHILD SEXUAL ABUSE AND SEXUAL IDENTITY

Some of the people on The Avenue who express alternative sex/gender identities are male survivors of child sexual abuse.

“The male experience of abuse violates the socio-cultural norm of male dominance (penetration), female subordination and places the victim in a position of submission normally identified as feminine, especially if pleasure is experienced. This affects the development of a male gender role identity and results in gender role confusion that is frequently rationalized in an attempt to ... make sense of this experience. There is a strong view in Trinidad and Tobago that male penetration of straight men can ‘turn them’ into homosexuals.”¹³

SEXUAL ECONOMY

Researchers raised the issue of transactional sex outside of the ambit of sex work exchanges; however many patrons denied expecting sexual favours in return for drinks or gifts and differentiated between that sort of gesture, and prostitution which involved the acceptance of money for sexual acts. They argued that behaviour, love and sexual satisfaction were more important than money in choice of partners.

Outside of the broadly social, however, it was generally accepted that certain areas on and around The Avenue were linked to sexual activity for pay with male and female sex workers looking for clients on the street and even in some bars. The sex workers indicated that the economic returns were very varied, as was the clientele in terms of occupation, social class and ethnicity.

SEXUAL NETWORKING AND HIV

In general, The Avenue provides a defined space for social and sexual networking. This sometimes leads to or involves episodes of impulsive, unplanned sex outside of committed relationships.

The result is that there are many instances where there is risk of contracting HIV:

- **through infidelity and unprotected sex even where the participants are in presumed monogamous unions;**
- **through multiple partnering, and**
- **through unprotected sexual episodes with sex workers.**

Researchers identified two particular risk factors for deeper exploration: alcohol use and abuse; and the impact of unprotected, forced sex especially child sexual abuse.

The issue of protection, centered on condom use, had become an important symbol of ‘gay sex’ and HIV prevention among ‘gay’ groups on The Avenue, including being a point of focus at events. ‘Gay’ interviewees also stressed care in choosing sexual partners. However ‘straight’ ones seemed less cautious and there seemed no stress on condom usage at venues or events that targeted heterosexuals.

Unprotected sex was standard within presumed monogamous relationships, based on an interplay of trust, age, appearance and relationship status. Infidelity – considered a cultural norm – might result in unprotected sex, often justified because the act was unplanned and unscheduled, and because the partner appeared clean; however no respondent admitted to unprotected sex in a formal sex-work transaction, a one-night stand or a single encounter.

Transvestite male sex workers on The Avenue indicated that they were aware of the HIV risk and of the importance of safe sex. However some also admitted to unprotected sex on occasion.

The influence of excessive alcohol used by men and women on The Avenue, leading to sexual risk and thereby increased risk of HIV, was stressed. “Women who experience a false sense of sexual power on the dance floor may not understand the implications of this sexual power and the resulting risks...”¹⁴

RECOMMENDATIONS

The researchers concluded with several recommendations:

In addressing HIV and STD prevalence, the complexities of negotiations regarding sexual identities, need to be addressed.

Gender and sexuality education and ways of teaching about gender and sexualities need to be compulsory components of all teacher education programmes, with the possibility of having special Sexuality Education teachers. There is also a need to have compulsory workshops for teachers who have already been trained.

Possible partners to implement this initiative include the Ministry of Education, the Ministry of Science, Technology and Tertiary Education, and tertiary institutions that offer teacher education programmes, such as the University of the West Indies (UWI), St Augustine, School of Education; the University of Trinidad & Tobago (UTT) School of Learning, Cognition and Education. The Institute for Gender and Development Studies at UWI, St Augustine, can assist in the development of curriculum materials.

Measures must be taken to introduce age-appropriate gender sensitive sexuality education curricula in schools through the Health and Family Life Education (HFLE) programme for primary school children and the introduction of an HFLE curriculum in secondary schools.

Curricula should include information on HIV testing and prevention, and empower children and youth to challenge gender stereotypes and not be afraid to do so. Additional recommendations for inclusion in the curriculum include education on the constructions of masculinity and femininity and the concept of 'gender'; the ways in which gender ideologies shape social and sexual behaviour;

the role of alcohol and other drugs in predisposing to risky sexual behaviour; the recognition and reporting of child sexual abuse and incest; and the role of child sexual abuse as a risk factor for HIV. Media Literacy is also critical for a generation highly influenced by media messaging and imagery.

Alcohol consumption must be seen as a major risk for unplanned sexual activity.

- Legislation on age limits for consumption and purchase therefore must be reviewed and implemented.
- Public education on the role of alcohol in predisposing persons to risky sexual behaviour, and thus HIV, should be incorporated into sexuality and HIV education programmes.
- Children, as well as adults, need to be educated about the impact of alcohol and that it may lead to unsafe decisions.
- The media should also be sensitized in their role in portraying and popularizing the use of alcohol, in particular to young men, and national standards on advertising alcohol should be introduced.
- Clubs and bars in the country must also be drawn into any social marketing campaign surrounding the topic, and condom machines must be compulsory in all of these enterprises. Possible partners and entry points for implementing these initiatives include the National Alcohol and Drug Abuse Prevention Programme in the Ministry of the People and Social Development and the Office of the Prime Minister which now has responsibility for HIV in Trinidad & Tobago.

There is a need for the scope of HIV, sexual and reproductive health, parenting and life skills programmes offered in the country to expand and focus on:

- Greater sensitization and education of everyone in Trinidad & Tobago and the region on the diversity of sex/gender expression and identity;
- How race, ethnicity and religion intersect with these sex/gender expressions and identities;
- The constructions of masculinity and femininity and the ways in which these gender ideologies shape social and sexual behaviour;
- Child sexual abuse and incest as risk factors for HIV;
- The role alcohol and other drugs play in predisposing persons to risky sexual behaviours.

Programmes should be gender-sensitive and focused on the needs of specific communities (women, men, men who have sex with men (MSM), transgender, sex workers and others). Social marketing campaigns, including the use of all forms of media, should be a critical component of any initiative. Current and future campaigns should reflect the local situation by featuring local accents, settings and the full range of race, ethnicity and religious representation.

Possible partners to implement this initiative include the HIV/AIDS Coordinators in each Ministry, the HIV Programme of the Office of the Prime Minister and the new national machinery for HIV when it is introduced; the National Parent Teacher Association (NPTA), the Family Planning Association of Trinidad & Tobago (FPATT), the Ministry of Gender, Youth and Child Development through enhancement of the male support unit, and other government ministries that provide parenting and life skills programming.

Campaigns to educate children and adults about sexual abuse should be a fixture in schools and communities.

Children, parents and teachers need to be aware of the signs of a potential sexual predator and know that they can find someone to tell if they feel uncomfortable about a situation. Preventative measures and support

systems related to child sexual abuse and incest must be strengthened or established. The “Break the Silence” or more familiarly referred to Blue Teddy campaign developed by the Institute for Gender and Development Studies of the UWI, St Augustine campus must be supported and extended throughout the region.

Partners to assist in implementation include the Children’s Authority, the Ministry of Gender, Youth and Child Development, the IGDS-UWI and current and future social marketing campaigns implemented by various ministries, NGOs and private institutions.

In relation to media responsiveness, there is a need to incorporate clearer and more concrete definitions of the terms used in the Trinidad & Tobago’s Draft Broadcast Code.

For example, references to ‘age-appropriate programming’ should include a precise definition of this term. The media should also be sensitized to the potentially dangerous impact of non-regulated portrayals of risky behaviours and beliefs, e.g. the portrayal of dangerous behaviours including illegal drug use and smoking; graphic reporting of assault or court action related to sexual crimes.

New approaches to communication and age-appropriate HIV and sexuality education must be addressed.

Specific recommendations included:

- The creation of children’s television programmes using puppets and family drama to teach sex education for different age groups;
- Radio programming that addresses issues surrounding sex and sexuality, through informed discussion, (call in talk shows);
- A Web series exploring a reality TV framework that can highlight the experiences that young women and young men in Trinidad & Tobago have in dealing with different issues surrounding sex and sexuality;
- A partnership between online channels that address issues of masculinity, such as CARIMAN, and the Communication Studies Programme and IGDS at the University of the West Indies, St. Augustine campus in Trinidad & Tobago, as well as communications departments and schools in other tertiary institutions.

Introduce programmes to prepare parents to talk to their children about sex.

- These could take the form of short courses at community centres, religious spaces etc. as well as components in parenting programmes

Introduce gender and sexuality education, including appropriate language and terminologies to the curricula of communications and journalism programmes at universities and other tertiary institutions.

Writers, actors and musicians must be part of the discussions, interpretation and communications around gender and sexuality and involved in the creation of new knowledge for the transformation and healing that is required to address the issues thrown open by the HIV pandemic.

End Notes

1 'Building Responsive Policy: Gender, Sexual Culture and Implications for HIV&AIDS in the Caribbean', Final Country Report, The Trinidad & Tobago Case Study. IGDS, UWI St Augustine, October 2011. p9

2 To reflect a varied population, the researchers are also undertaking work at a university site, termed 'The Campus', where 50 male and female students of varied ethnicity have been interviewed over a period of 13 months in 2010-2011, by six research assistants with varying sex and racial characteristics.

3 Final Country Report,
The Trinidad & Tobago Case Study, p6

4 Lawson, D. 'The Joint United Nations Response to HIV/AIDS.' United Nations Theme Group on HIV/AIDS in Trinidad and Tobago (UNAIDS), Port of Spain, Trinidad, 2005.

5 Final Country Report,
The Trinidad & Tobago Case Study, p42

6 Douglas D, Reddock R, Reid S. Gender and sexuality: Behaviour, attitudes and taboos among UWI Students on the St. Augustine Campus, in Sex, Power & Taboo: Gender and HIV in the Caribbean and Beyond. Eds Roberts, Reddock, Douglas and Reid. Ian Randle Publishers, 2009. 216-238

7 Final Country Report,
The Trinidad & Tobago Case Study, p47

8 Ibid p51

9 Ibid p76

10 Ibid p69

11 Ibid p76

12 Ibid p79

13 Ibid p83

14 Ibid p95

UN Women is the UN organization dedicated to gender equality and the empowerment of women. A global champion for women and girls, UN Women was established to accelerate progress on meeting their needs worldwide.

UN Women supports UN Member States as they set global standards for achieving gender equality, and works with governments and civil society to design laws, policies, programmes and services needed to implement these standards. It stands behind women's equal participation in all aspects of life, focusing on five priority areas: increasing women's leadership and participation; ending violence against women; engaging women in all aspects of peace and security processes; enhancing women's economic empowerment; and making gender equality central to national development planning and budgeting. UN Women also coordinates and promotes the UN system's work in advancing gender equality.

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