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Men who have Sex with Men: The Male University Students Experience

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Abstract- There is an increasing incidence of human immunodeficiency virus (HIV) infection in the Philippines. The majority of those affected were males and men having sex with men (MSM) is the predominant mode of transmission. Much of the literature available is on statistics of HIV cases and the population of those engaged in MSM. However, there is a lack of research in understanding the reasons that lead male youth to be involved in MSM activity and their views regarding such activity. This qualitative case study reports on the experience of eight male university students involved in MSM. Data obtained through interview and focus group discussion helped understand the views, dynamics, and factors that contributed to the MSM involvement of male university students. Results revealed that male university students involved in MSM for a variety of reasons. Curiosity, alcohol drinking, and sexual satisfaction were the primary reasons. Participants were aware of the potential risks of being involved in MSM, observed certain dynamics, and also have ways to protect themselves.

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Men who have Sex with Men: The Male University Students Experience

Maricel Aguila Gomez

Abstract- There is an increasing incidence of human immunodeficiency virus (HIV) infection in the Philippines. The majority of those affected were males and men having sex with men (MSM) is the predominant mode of transmission. Much of the literature available is on statistics of HIV cases and the population of those engaged in MSM. However, there is a lack of research in understanding the reasons that lead male youth to be involved in MSM activity and their views regarding such activity. This qualitative case study reports on the experience of eight male university students involved in MSM. Data obtained through interview and focus group discussion helped understand the views, dynamics, and factors that contributed to the MSM involvement of male university students. Results revealed that male university students involved in MSM for a variety of reasons. Curiosity, alcohol drinking, and sexual satisfaction were the primary reasons. Participants were aware of the potential risks of being involved in MSM, observed certain dynamics, and also have ways to protect themselves. Data collected can be used as a basis for designing and implementing programs that can provide an opportunity for those engaged in MSM to know where to seek guidance regarding this sensitive issue, thereby, encouraging them towards observing a more positive sexual health behavior.

Keywords: case study, HIV, MSM, male, university students.

I. Introduction

Men who have sex with men (MSM) are considered at present as the predominant mode of transmission of Human Immunodeficiency Virus (HIV) infection among males. It is identified as one of the subpopulations with the highest risk of acquiring HIV by DOH-HIV Serologic Surveillance (UNAIDS, 2011; Hernandez & Imperial, 2009). MSM in this study refers to those males regardless of whether they associate themselves as straight, gay, or bisexual, who have sex with other males, and whether or not they have sex with women (UNAIDS, 2011). From the records of HIV/AIDS and ART Registry of the Philippines (HARP) from January 1984 to July 2019, there are 69,512 reported HIV positive cases and 94% (65,162) of those diagnosed were males (DOH-HARP, 2019). It was also reflected from the same data that MSM (85%, 55,386) was the predominant mode of transmission among males (DOH-HARP, 2019). MSM is taking up an increasingly more significant portion of new HIV infections (Burki, 2017). These data are corroborated by findings of the World Health Organization (WHO, 2015). Also, it was indicated that 31% (348) of the reported cases were 15-24 years old at the time of testing.

Region 8 has listed 604 reported HIV positive cases from 1984 to February 2018 (DOH, 2018). As of July 2019, region 8 has reported 4% (2,780) newly diagnosed cases (HARP, 2019). In February 2018, Leyte has the highest number of reported HIV cases. It has around 334 reported positive HIV cases. In Leyte, Tacloban City has the highest number among the different municipalities with reported cases of 104 (31%). Also, 550 (91%) of the 604 reported positive HIV cases were males. In terms of mode of transmission, MSM ranks first with 307 (58%) positive with HIV. The existence of MSM activity among the youth in Tacloban City is corroborated by the findings of Ogena and Kabamalan (2014) and Matillano (2013). Reported also in the data are cases of individuals who were 15-24 years old.

Much of the literature available is on statistics of HIV cases and the population of those engaged in MSM. There is not much literature dealing with understanding the reasons and factors that lead male youth to be involved in MSM activity. According to WHO (2015), lack of global data on the number of young MSM, their levels of risk for HIV and their protective behavior is due in part to a "lack of research and surveillance, and also to the difficulty of reaching young MSM who may fear disclosing their same-sex behavior" (p. 6). Hence, this study was conducted as an effort to address this lack of research on understanding MSM among the youth. The purpose of this study is to understand the reasons, perceptions, dynamics, potential risks, and ways of protection of male college students engaging in MSM activity. The study sought to answer the following questions:

What are the reasons for engaging in MSM?

What are the perceptions of college students being involved in MSM?

What are the dynamics involved in MSM?

What are the potential risks involved in engaging MSM?

What are the measures for protection from the potential risks of MSM?

II. Theoretical Framework

This study is anchored on the theories of peer influence and social construction of sexuality or 'frame'

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theory. The theory of peer influence posits that people are most likely to engage or adopt new behaviors when positive feedbacks of the experience in engaging such behavior are observed among similar others whom they trust or respect (Hernandez & Imperial, 2009). In this study, the theory of peer influence is elucidated as the majority of the participants indicated that their peers influenced them to engage in MSM.

The theory of the social construction of sexuality or 'frame' theory advances that physically similar sexual acts may have different social significance and subjective meaning on the people depending on the culture and periods it is being defined and understood (Vance, 1999). In this study, the participants have varying views or perceptions of MSM.

III. Methodology

Understanding MSM dynamics entails an in-depth exploration in which qualitative inquiry is most fitting. In this study, qualitative research was preferred because it focuses on a process that is quite complex and there are no preset variables (Lichtman, 2012). Likewise, I tried to interpret or make sense of the meanings research participants brought to their involvement in MSM (Dezin & Lincoln, 1994).

IV. Research Design

As an effort to understand the factors that prompted a male college student to engage in sex with another male, this study was conducted using a case study as the primary research design. Case study research involves "studying of a case within a real-life contemporary context or setting through detailed, in-depth data collection involving multiple sources of information" (Creswell, 2013; Stake, 1995; Yin, 2009). Also, this study follows a single case study design with subunits using three groups of participants, namely gays, bisexuals, and heterosexuals as subunits belonging to a larger case which is men having sex with men (Yin, 2003).

a) Research Setting

The study was conducted in a state university where students of different gender are enrolled. However, in terms of the student population, it is dominated by female students. The university is primarily a teacher-training institution.

b) Participants and Sampling Procedure

Due to the sensitivity of the topic being explored, purposive sampling, particularly snow-ball sampling, was used to get participants of the study. A key informant helped the researcher in identifying willing participants of the study. The criteria for choosing the participant included a) male university students who had experienced MSM regardless of their gender; b) willing to answer the survey questionnaire; and c) willing to be interviewed. A total of eight (8) students, 18 years old and above, served as participants of the study. According to Wa-Mbaleka and Gladstone (2018), a case study can have a minimum of eight (8) participants. Also, the researcher felt that data saturation has been reached already in these eight (8) participants. Two (2) identified themselves as heterosexual, two (2) bisexuals but more into liking females, and four (4) openly admitting gays. The university guidance counselor and the health personnel were also interviewed.

c) Data Collection Procedure

Qualitative research depends on many different types of data sources such as interviews, focus groups, artifacts, observations, documents, and archival data (Creswell, 2013; Yin, 2014). In this study, a survey questionnaire that also served as an interview guide was used. A separate interview guide was used for the university guidance counselor and health personnel. The questionnaire used for the male participants was researcher-made. It was composed of 14 open-ended questions that were designed to gather data on participant's views and reasons for engaging in MSM activity. Two experts in qualitative research validated the questionnaire. Then it was pilot tested to gay and heterosexual male university students, who in turn were not taken as participants of the study. They were asked for comments and suggestions to improve the questionnaire. The same questionnaire also served as the guide during the interview. The questionnaire was given first individually to the participants for them to have an idea of the questions and helped them decide on their participation in the interview that will be conducted to elaborate on their answers. For the university guidance counselor and health personnel, the interviews were primarily focused on their awareness of male students' involvement in MSM activity and the programs being implemented by the University concerning reaching out to these students.

In the course of data gathering, the participants opted to be interviewed in a group rather than individually. Hence, a focus group discussion (FGD) was conducted. In an FGD, a small group of participants from similar backgrounds or experiences gathers to generate data such as their perceptions, attitudes, beliefs, opinion, or ideas on a specified topic or issue (Wong, 2008). The researcher conducted two FGDs. The first group was composed of four (4) openly admitting gays. The second group was composed of two (2) bisexuals and two (2) heterosexuals.

A triangulation procedure was observed in the study. Triangulation is an excellent method to use in validating data through cross verification from two or more sources (Yazan, 2015). Interviews with the university guidance counselor and the health personnel as well as documents from the Department of Health

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(DOH), supplemented the data gathered from the participants.

d) Ethical Consideration

A key informant helped the researcher in fielding the questionnaire and retrieved the same in a sealed envelope. A consent form was attached to the questionnaire. Only participants who were willing to be part of the research were given the questionnaire. The participants were instructed that they can skip questions they do not want to answer. It was also stated in the consent form that their identity would be held confidential, pseudonyms would be used, and their responses would be reported collectively. Also included in the consent was asking permission for audio recording during the interview, which was conducted to have a deeper understanding of their answers in the questionnaire.

In the conduct of FGDs, it was done on a Saturday when there were no other students present. It was in a closed room to make sure that the identity of the participants was held confidential from other students. Likewise, at the start of the FGD, the process was explained, and participants were informed that they could withdraw from the discussion at any time.

For triangulation, the researcher interviewed the health personnel and guidance counselor of the university. The interviews were primarily focused on their awareness of male students' involvement in MSM and the programs being implemented by the University concerning reaching out to these students. There were no names, personal data, or health records asked regarding the individual participant of the study. Permission was also sought in the use of an audio recorder during the duration of the interview.

e) Reflexivity

The researcher has no direct supervision of the participants of the study. The participants were not students of the researcher. The researcher is a Biological Science teacher who includes the topic of HIV infection in some of her discussions.

f) Data Analysis

The units of analysis in this study were the three groups of male college students involved in MSM namely, gays, bisexuals, and heterosexuals; hence, cross-case synthesis best fit in analyzing the data. For this study, with-in case analysis was done for each group first, followed by cross-case synthesis. Cross-case synthesis enabled the researcher to see comparisons on the views and reasons for engaging in the MSM activity of the three groups. In the analysis, themes were formed, and then an interpretation of the meaning of the case or assertion was made (Creswell, 2013). The data from the recordings of the FGD were analyzed following the stages developed by Ajawwi and Higgs (2007).

Member checking was also done by the researcher to improve the credibility of the results from the data gathered from the participants. Birt, Scott, Cavers, Campbell, and Walter (2016) mentioned that in member checking, "data or results are returned to participants to check for accuracy and resonance with their experiences"(p. 1802).

V. Results

The results section is presented in five (5) main parts: the first deals with the profile of the participants in terms of age, gender, and confidant; second, focuses on the perception and reasons for engaging in MSM; third, the dynamics involved in MSM activity; fourth, the perceived potential risks of engaging in MSM and the measures of protection from the potential risks identified by the participants, and the last, advice from the participants and actions done by the university.

a) Age, Gender, Profile, and Confidant of the Participants

The university guidance counselor, physician, and nurse confirmed that there are students who were involved in MSM activity at the University. The guidance counselor confirmed that there were students who went to their office and asked for advice regarding their MSM involvement. For the university physician and nurse, they get to know the MSM involvement of students because of being diagnosed with having sexually transmitted infections (STI). Based on the university clinic records from 2013 to 2018, there were reported ten male students diagnosed to have STIs. Through their probing, they were able to confirm that these student-patients were involved in MSM with partners who were either a student of the university or from another school.

i. *Age*: The participants were ages 19 to 21 years old. When asked how old they had first experienced MSM, one gay participant indicated to have experienced it at a young age of 6 years old with an older cousin. The other participants experienced it at the age of 9, 13, 14, 15, and 17 years old. Results suggest that the first experience of the MSM of the participants in this study happened at a very young age.

ii. *Gender:* When asked about their gender, they have different answers on how they classify their sexual orientation. Aggleton et al. (1989) defined sexuality as an expression of one's totality as a person and may refer to one's masculinity and femininity. In the study, four openly admitted that they are gays because they are attracted to the same sex and does not like to have a sexual relationship with women. The bisexuals classified themselves as such because they are attracted to both men and women. However, they had indicated that they associate more themselves with the side of

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masculinity. For the heterosexuals, they classified themselves, straight men, because they are not attracted to have a relationship with gay, they have male sex organs, and it is what the society dictates.

iii. *The Confidant of the Participants:* The participants expressed to have confidant whom they share their experiences in being involved in MSM activity. The most common confidantes were close friends. However, it is interesting to mention that some tell their family members such as sister, cousin and even mother. One gay participant shared that his mother, knows he is gay and has a relationship with man, but he did not directly confide to her that he is already involved in MSM. Others mentioned confiding to women friends because they consider them as "best people to understand…" regarding their involvement in MSM. Also, another gay participant shared that they proudly tell their gay friends being involved with a specific man and showing it off like a trophy to them.

Moreover, one bisexual participant shared that his girlfriend knew that he was engaged in MSM activity before. Others mentioned that their girlfriends know they got involved with gays but not on the details of their being involved in MSM. One straight man, also mentioned that his mother expressed that it is better to get involved with gay while studying in college than to have a girlfriend because he might impregnate a woman.

When asked about the reactions of the people they confided about being engaged in MSM, they have a common answer that their confidantes were first shocked and disgusted. Some said, "they laughed at us". But the participants said they did not think much of their reactions. However, one straight man feared that other people will know aside from the people he confided with because he considers it as a confidential matter.

b) Perception and Reasons for Engaging in MSM

i. *Perception of MSM activity:* Gays, bisexuals, and heterosexuals have different views on MSM activity. All participants admitted that they felt awkward, ashamed of themselves, and guilty in their first MSM experience. Then, later on, they overcame the guilt and considered it as a normal activity for them. Interestingly, one heterosexual considers it abnormal because "it is man to man when it is supposed to be done by a man and a woman". Another one mentioned that he knew that engaging in MSM is considered as "sin in the Bible, and it is a form of fornication". However, as time passed the guilt in doing the activity diminishes that it becomes a regular activity, especially if done with boyfriend.

It is also interesting to note that the participants preferred to be interviewed in a group rather than individually. When they were asked why they preferred to be in a group to share their thoughts regarding this sensitive topic, each participant felt more at ease, knowing that it is not just him engaged in MSM activity.

ii. *Reasons for engaging in MSM activity:* All participants have indicated that the first time they engaged in MSM was because of curiosity and peer pressure. The story of pleasure experienced by their peers motivated the participants to also engage in MSM. Also, alcohol intoxication plays a role in getting involved in MSM. Participants shared that once they are under the influence of alcohol, they "did not become ashamed of engaging in the activity". When they are sober, they felt shy to initiate or to engage in such activity. Alcohol intoxication also leads some participants not to use a condom during their intercourse.

Social media and exposure to pornographic sites also influence the participants to engage in MSM activity. The participants visited websites with sexually-explicit content and watched sex-videos through cellphones or the internet. Participants also mentioned receiving some material things such as cellphones from being engaged in MSM. Aside from sexual pleasure, one bisexual mentioned that he was given an amount for tuition fee but already stopped receiving it. Another mentioned he was offered money but refused because he does not want to be asked for favors in return for the money given. For the heterosexuals, they engaged in such activity primarily just for sexual pleasure, which they cannot get from masturbation or from having sex with women. They also indicated that gays find pleasure in doing oral sex to them. This statement is substantiated by the gays who said that they "felt like they are a woman when they could let their male partner able to release or reached climax".

c) Dynamics of the MSM Activity

All participants mentioned that they got involved in the activity at their own free will, and they only engage with people they know, such as casual friends, close friends, and boyfriends. Before the MSM activity happens, all participants observed body language and wait for signals such as meaningful glances. Gays jokingly touched the sides or back of the man to check if the guy is into it. This move by the gays was confirmed by the heterosexual and bisexuals, who mentioned that a gay man tends to be touchy. In addition, the heterosexual participants revealed that they tend to be the insertive partner. They usually engaged in oral sex with the gay as the receptive partner. For gays, they felt satisfied just being a receptive partner either in oral or anal sex. They indicated that they felt beautiful or like a woman when they can let their male partner reached or climaxed. They also mentioned that if their partner would agree that they are going to switch the role of being insertive to receptive, it is an indication that the man is a bisexual.

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Also, most of the participants admitted that they do not engage MSM activity at their own houses. They did it in boarding houses of their sexual partner, friend's house and even in public places for as long as it is dark and secluded such as the plaza or school. Also, the gays mentioned that they engaged in MSM with men who are from their home town rather than those from the city because they believe that rural men have lesser tendencies of being infected with sexually transmitted infection (STI) or sexually transmitted disease (STD).

In terms of frequency in doing the activity, the participants had varying answers. Ranging from rarely, once a week, every monthly anniversary, twice to four times a month or just when they feel like doing it. When asked if they will stop engaging in the MSM, the participants mentioned they would stop in the future, but not immediately.

d) Perceived Risks and Ways of Protection

i. *Perceived risks:* All participants indicated that being infected with s STI or STD is one big possible risk of engaging in MSM. They too were aware of STI and STD signs and symptoms that include difficulty in urinating, genital and mouth sores, blisters or rashes, and bad smell discharge. They too have indicated that they do not have any sign or symptom of STI or STD at the moment the FGD was conducted.

Aside from the health risk mentioned, other risks indicated were more on a personal aspect. This includes being discovered by parents resulting in being reprimanded or condemned and being the topic of nasty talks or gossips resulting in a damaged reputation. One heterosexual also mentioned he is afraid that the gay partner will take a naked picture of him and show it to his friends or post on social media. All perceived risks mentioned elicited feelings of apprehension or fear among the participants in being engaged in MSM. However, despite their apprehension or fear, they continue to engage in the activity.

ii. *Ways of protection:* All participants have ways to protect themselves from harm or STI. All participants indicated that they chose to engage MSM with partners they are familiar with because they are more confident that the person is not infected with STI or STD. They also advised not to have multiple partners. In addition, gays mentioned that another way to protect themselves is by doing a body check of their potential partner. They did this by touching the side of their partner's body to check if he has something inserted in the pocket or inside of their clothes. If they felt that there is something, they slowly distance themselves because it may indicate that the man has a deadly weapon that may be used to harm them later on. They also smell their potential partner in a not so obvious manner. If they smell something not right in their potential partner, they find a way to excuse themselves. Another way of protection is the use of condoms during anal sex. Other participants mentioned that they do not engage in anal sex because they believe that is how they can be infected with STI or STD.

e) Participant's Advice on MSM and Actions are done by the University

Participant's advice regarding engaging in MSM activity. Interestingly, the participants advised that men as much as possible "should avoid being involved in MSM". The gays mentioned that young gays "should not be in a hurry to be involved in MSM and to be very responsible and careful in choosing a partner". The heterosexual advised, "not to get involved in MSM just to get money nor to have a relationship with a gay".

Actions are done by the university. In the interview with the guidance counselor and the university physician, symposiums were being conducted regarding HIV and STI awareness every year. The guidance counselor, however, admitted that few attend the said yearly activity and very few come to the guidance office to talk about their involvement with MSM. With the sensitivity and confidentiality of the matter, the guidance office is gearing towards designing other ways or activities that can effectively reach these students to give them advice and guidance.

VI. Discussion

This study was undertaken to get an in-depth understanding of the profile, reasons, perceptions, dynamics, potential risks, and ways of protection of male college students engaging in MSM activity. The results showed that male participants experienced MSM at a young age, below 18 years old. This finding corroborates what DOH (2017) and Ogena and Kabamalan (2014) have reported regarding the age range of male youths who were engaged in MSM. The result of having the first experience of MSM as young as six years old and with a cousin supports the findings of Italia and Oducado (2014) that their participants had their first experience of MSM below 18 years old and with a relative. This finding is quite alarming implying that parents or guardians should provide greater attention to the interaction of their kids have with other people, in this case, their young sons with other male individuals.

Concerning how the participants described their sexual orientation, the participants tend to define their sexuality based on their social construction and subjective meanings of masculinity. The description of being a straight man because of "having a penis" is one of the constructions of Filipino masculinity. For Filipinos, physical characteristic is an essential component for one to be considered as masculine (Hernandez, 2004). Possession of the penis and its corresponding function is the physical characteristic being referred to as an

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essential aspect of Filipino masculinity (Aggleton, Hilary, Jan, Stuart, & Simon, 1989). Likewise, the participant's response that he is a straight man because "it is what the society dictates" (Participant 6) reflects the socialization perspective of viewing masculinity. Socialization perspective posits that "masculine identity is framed by the local culture where traditional beliefs and values and norms are embedded in the male psyche in the process of growing up" (Aggleton, Hilary, Jan, Stuart, & Simon, 1989, p.7).

It is likewise interestingly reflected in the results that in MSM dynamics, participants observed roles, like who is going to be the insertive or receptive partner. The role of being an insertive partner can determine that the person is either bisexual or a straight guy. Being the receptive partner is a role that a homosexual would do in MSM. They likened this to be the role of a woman in a male-female sexual activity.

In addition, four of the participants openly admitted that they are gays and said they accept themselves for they are. According to WHO (2015), research shows that men who accept their sexual orientation are more psychologically healthy and have higher self-esteem. These four gay participants were observed to have vibrant personalities and were very open to sharing their experiences. They were also cultural performers and student leaders. Their being open about their sexual orientation may have contributed to their great confidence and high self-esteem.

As reflected in the results, participants have varying views regarding their being engaged in MSM activity. These varying views reflect the concept of the social construction of sexuality or "frame" theory advancing the idea that physically similar sexual acts may have different social significance and subjective meanings depending on the culture and periods it is being defined and understood (Vance, 1999). The different perceptions of the participants regarding their MSM involvement may also be rooted in their upbringing in the family or community where they were raised. Three participants indicated that their family is conservative that they have a fear that their family members will know that they are engaged in MSM.

The results further show that the major reasons that lead the participants to engage in MSM activity include:

Curiosity, peer pressure, alcohol intoxication, watching pornographic sites, sexual pleasure, and material rewards received such as cell phone and money for tuition fee. This finding of getting money from their sexual partner corroborates to what Italia and Oducado (2014) indicated in their study. Listening to friends sharing their experiences on being engaged in MSM activity and the pleasure they get from the activity, stirred the curiosity and motivated the participants to engage in it. This result reflects the theory of peer influence which posits that people are most likely to engage or adopt new behaviors when positive feedbacks of the experience in engaging such behavior are observed among similar others whom they trust or respect (Imperial & Hernandez, 2009). Likewise, the result that is under the influence of alcohol led participants to engage in MSM is corroborated by findings of Italia and Odocado (2014). Participants were less likely to initiate engaging MSM when they were sober. Increased accessibility to the internet and exposure to pornographic sites at a young age is also identified as another factor leading to the engagement of participants to MSM. This implies that parents or guardians should be more mindful in monitoring what their young sons or kids are exploring the internet to prevent them from being exposed to pornographic sites. Participants also mentioned certain perceived risks that somehow made them feel a certain degree of hesitation in engaging MSM. The risks were classified as a health and personal risks. Health risk identified was the possibility of being infected with STI or STD. Personal risks include being reprimanded by parents and damaged reputation once their MSM involvement is discovered. Filipino culture, in general, is conservative, hence some participants have fear of being discovered by friends and relatives to be engaged in MSM activity. According to WHO (2015), the fear of being condemned or stigmatizing attitudes towards homosexuality is one major obstacle affecting the lives and health of MSM. In the study, one gay participant indicated that for a long time he has not engaged again in MSM because of his fear of his brother who was becoming stricter in following up on his daily activities in school.

Interestingly, despite the perceived risks, the participants still engage in MSM. Likewise, despite the fear of being discovered of being engaged in MSM, the participants preferred to be interviewed in a group rather than individually. In the beginning, it was observed that there was a bit of hesitation, but later on, the participants became more engaging in the FGD. Sharing their experiences in a group made them feel validated knowing that there were others like them in the university who were also engaged in MSM activity. The researcher had seen that the FGD is similar to a support group for the participants wherein they were free to express their views and feelings regarding MSM activity without the fear of being judged. They also tend to have confidantes whom they choose carefully to share their personal experiences without the fear that their confidential activity being told to other people such as their relatives.

With the perceived risks identified, participants engaging in MSM activity observed certain dynamics for their protection. Participants indicated that they were careful in choosing their partners, observed body language for signals, performed body check on their potential partner, and use of condoms as means to

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protect themselves from being infected with STI or STD. Despite the pleasures, they get from the activity, protecting themselves from potential harm is of utmost consideration.

VII. Recommendation

The result that participants preferred to be interviewed in-group rather than individual, may serve as a basis for the concerned office in the university such as the Guidance office to design a support group where those engaged in MSM can seek guidance and freely discuss this sensitive and confidential matter without the fear of being judged. Male students who are involved in MSM can be tapped as peer counselors. This idea is embodied in the theory of peer influence (Hernandez & Imperial, 2009, p.45). Peer counselors who experienced MSM activity can be good listeners, advisers, and positive influencers encouraging male students who come for advice to observe a more positive sexual health practice. Likewise, further research is needed to collect data from other groups, such as professional and higher age groups. This can provide a more comprehensive picture of the dynamics of MSM activity among males.

VIII. Conclusion

This study has elucidated that MSM among young male college students is an existing phenomenon. It is a complex dynamic activity involving the consciousness of those who engage in it. Participants are engaged in MSM for varied reasons such as curiosity, peer pressure, alcohol intoxication, watching pornographic sites, sexual pleasure, and material rewards receive. They have different perceptions of MSM rooted in how they were brought up in their family. There are perceived risks classified as personal and health risks identified by the participants that give them a certain degree of hesitation in engaging in MSM. However, despite those risks, they still engaged in MSM. Participants observed certain dynamics as they engage in MSM and observe certain ways to protect themselves from the identified potential risks. The university is like the second home of students is encouraged to find better ways how to reach those engaged in MSM providing avenues for them to freely discuss this sensitive and confidential matter without the fear of being judged and be given the advice to observe a more positive sexual health practice.

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