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Hyperheterosexualization and hypermasculinity: Challenges for HIV/AIDS intervention in the Caribbean Trinidad and Tobago

Wesley Crichlow

Faculty of Social Science and Humanities, University of Ontario Institute of Technology, 2000 Simcoe Street North, Oshawa, Ontario, L1H 7K4, Canada. E-mail: Wesley.Crichlow@uoit.ca. Tel: 905-721-8668 poste 2651.

This work aims to understand how ones' understanding of Caribbean manhood, hyperheterosexualization, masculinity, and gender shape or impact HIV/AIDS education and one's understanding of self and feelings. Further, given the colonial and religious nature of Trinidad and Tobago, the study wants to untangle the multilayered complex historical, social and political cannons through which identification/gay profiling, prejudice; homophobia, dominant masculinity, and power are produced, performed and understood. This work is a continued extension of the author's previously published book titled *Buller Men and Batty Bwoys: Hidden Men in Toronto and Halifax Black Communities* **[2004].**

Key words: HIV/AIDS, colonial and religious nature, Trinidad and Tobago.

INTRODUCTION

I'm 19 years old and I never thought of HIV/AIDS. It was just some letters that I saw as a white man thing. Before I found out I had HIV/AIDS, I always feel I could not get it because they say it's a gay white man's disease. I don't fit in that category. How in the hell I get this thing? (Interview respondent)

At the end of 2007, an estimated 230,000 people in the Caribbean were living with HIV/AIDS (UNAIDS Report, 2008). In three of the seven countries in the region—the Bahamas, Haiti, and Trinidad and Tobago—more than 4% of the adult population wasliving with HIV/AIDS.[1] That

same year, the disease claimed an estimated 24,000 lives, making it the leading cause of death in the Caribbean among adults aged 15 to 44. Higher prevalence rates are found only in sub-Saharan Africa, making the Caribbean the second most affected region in the world (AVERT, 2009). In a report released by the Joint United Nations Programme on HIV/AIDS, they estimate the number of people living with HIV has slightly increased from 33. 3 million to just over 34 million (2011). Now the world has reached a crossroads, "writes the U.N. secretary-general in the preface to AIDS at 30, a reference to the fact that the epidemic first surfaced in 1981."

The number of people becoming infected and dying is decreasing, but the international resources needed to sustain this progress have declined for the first time in 10 years, despite tremendous unmet needs (UNAIDS Report, 2011). HIV/AIDS education delivered by the state and health care officials in the Caribbean has tended to focus on bringing down mortality rates by strengthening

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[1] In the year 2004 in Trinidad & Tobago, an average of four new cases of HIV/AIDS were reported every day. The predominant mode of HIV transmission is heterosexual, with a male to female ratio of 55:45 and with more females than males in cases reported in the 15–34 age group. 'Multiple sexual partners' is cited as the most frequent risk factor for HIV infection. The median age of reported HIV positive cases is 35 in males and 29 in females, with more than 85% of all reported AIDS cases occurring among people aged 20–59 (United Nations Programme on HIV, 2008).

treatment and delivery programs. Other approaches by religious organizations (Muslims, Hindus, Shouter Baptist, Jehovah Witness, Seven-day-Adventist and other Christian Denominations) and conservatives have stressed sexual abstinence or sex after marriage. Government advertising and posters have also been very heteronormative and conservative in their approach, increasing the ostracism, moral panic, discrimination and stigma faced by men with fluid sexual identities, those sexually abused (incest and rape) injection drug users, sex workers, and MSM reinforcing the legacy of taboo, disorder, decay, and scorn in the minds of many in the Caribbean toward these communities. Homosexuals may be accepted today in some pockets in the Caribbean in a general sense, but "out or publicly known" homosexuals are not as easily accepted. There exists in some Caribbean Islands, Trinidad and Barbados in particular, an interesting form of communal village or societal acceptance and accommodation for LGBTQ life, effeminate gay men and drag queens. LGBTQ groups, human rights activists and drag queens are to be credited for taking the risk, while working against homophobia within these communal and village forms of acceptance. Despite these small gains of communal accommodation LGBTQ resistance, powerful religious and conservative values mute efforts to reach vulnerable populations on the margins of acceptability, including sexually active males MSM[2] and SAM[3]. As Stall et al. (2008) remind us "young men's development is influenced by many contextual factors, including socioeconomics, race/ethnicity, and familial variables. However, sociocultural pressures, including the pressure to meet socially valued masculinity norms (not the least of which includes heterosexuality) also affect the development and behavioral patterns of MSM and SAM. Masculine Socialization stress results from the 'shaming and other punishment of gay males for failing to achieve masculine ideals'… (Stall et al., 2008).

The Caribbean Epidemiology Centre (CAREC) informs us that infection rates among men who have sex with men are between 6 and 66% (December, 2006). Further, in one Trinidad and Tobago daily newspaper, the Trinidad Express, reports from "a six-year (2004-2011) comparative study on HIV/AIDS in the elderly in Trinidad and

Tobago by the Medical Research Centre and Foundation, of 4,566 'new' patients who were enrolled for the first time in the clinic before ever receiving treatment; as many as 1,216 (26 per cent) of the patients were 50 years and over (588 males and 628 females) and 128 (2.7 per cent) were 65 years and over (70 males and 58 females), as compared to 14-15 per cent in the 50 age group and over and 1.5 per cent in those 65 and over in the US studies." (16/02/2012). These statistics cause us to ask why we are seeing such a high increase among MSM populations.

As Treichler et al. (1999) have argued, AIDS is an "epidemic of signification" that allows us to think about flows of information and the fluidity of categories, racial, national, gender, sexual and particularly with respect to research and policy decisions. Because sexuality and gender intersect with race and nation, research on HIV risk requires us to unpack multiple signifiers simultaneously. In other words, labels such as "men who have sex with men MSM & SAM offer us an array of opportunities to identify vulnerable populations and to question social positions with respect to risk. It is observed over the years how HIV/AIDS is deployed to define and stigmatize communal categories. How can we reduce the mortality rate and transmission of HIV other than through the delivery of prevention/treatment programs that are limited due to stigma, discrimination and ostracism, particularly for MSM?

In this paper, it is argued that educational interventions by government and AIDS workers are blocked by the discourses of hyperheterosexualization and forced performances of stylized and signifying performances of a dominant or hypermasculine behavior that lead men who have sex with men to believe that AIDS is not a problem for them. Further, structural inequalities such as the lack of LGBTQ rights, abject poverty in some situations, and HIV/AIDS illiteracy create additional obstacles. Better intervention strategies are needed not only to reduce the spread of HIV, but also to empower the many gay men who feel powerless and hopeless because they have no recourse to a rights-based agenda (Carr and Lewis, 2007). This paper contributes to the debate on the intersection of HIV and gender-driven roles, money for sex, sexual fantasy, sexual desire, and power in MSM relationships. Beginning with a discussion of the history of HIV/AIDS education in Trinidad and Tobago, this paper is organized in the following manner. Four important themes are discussed in this paper;

1) How do feelings of self-worth, manhood, and the fragility of masculinity shape gay men's and MSM ability to negotiate safe sexual practices and relationships?
2) How has the colonial and religious nature of Trinidad and Tobago influenced homophobia, sexual taboos, and the profiling of gay men?
3) How do hyperheterosexualization and hypermasculinity impact HIV/AIDS education among young and adult gay men?

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[2] Many Caribbean Christian organizations and religious individuals see AIDS as God's punishment of homosexuals for sexual misdemeanors and crimes that go against God's will of Adam & Eve.

[3] While I accept the concept and or terminology MSM and understand it's intention – I would like to add that MSM shortfalls to account for sexually active males (SAM) that is men have sex with both genders or anyone: simply because they enjoy the sensation, are sex workers, might be questioning their sexual orientation, enjoys the excitement of **not** been caught, impact of sexual abuse and sexual violence: reliving their trauma (vivid memories, phantasm, or acting them out and transforming **them in** victory). This is a challenge for HIV/AIDS education to include in their educational narrative, tools and outreach an analysis that accounts for SAM, who are not talked about in HIV/AIDS education as much as MSM.

4) How does immigration, migration and ongoing inter-actions to Canada and North America set in motion a process of recognition, and evaluation premised with a growing awareness of racialized men displacement and one's understating of risk associated HIV behaviors?

Brief history of HIV/AIDS education in the Caribbean

Initially HIV/AIDS was a taboo subject and attributed to white gay males and homosexuals. Many in the Carib-bean were afraid to be tested for fear of stigma, discrimination, guilt, shame, and the negative social connotations associated with being HIV positive. To that end, groups of gay and lesbian activists in the Caribbean, in conjunction with their counterparts in North America, started to engage in local community AIDS education initiatives despite great community and public resistance. As a public health nurse in this study commented, this was when the slogan "don't be afraid, be aware" was born. In a clandestine manner, people sought testing from the few health centers that were set up by the government. The problem, however, with early testing in the Caribbean and elsewhere was the length of time needed for getting results back, usually four to six weeks. This waiting period created anxiety and hesitancy for those who wanted to modify their behavior imme-diately and seek treatment.

In 1991, Ervin announced that he had tested positive for HIV and would be retiring from professional basket-ball. Entertainers in Trinidad and Tobago and globally were used to promote and send messages in their music to enlighten people about the seriousness of HIV. Posters and banners were posted all over the Caribbean and in Trinidad encouraging people to know their status and get tested. As one of the public health nurses in this study reported, a pilot study was done in 1998 in Tobago on pregnant women and mother-to-child transmission. The following year the program was up-scaled to a national level and all pregnant women were encouraged to be tested. Testing sites all over Trinidad and Tobago now offer pre- and post-test counseling, and results are obtained within half an hour. Services such as Voluntary Counseling and Testing (VCT) and Provider Initiated Testing and Counseling (PITC) were set up to facilitate testing. In addition, a group of young adults under the name RAPPORT were used to spread the message to young people in a way they could relate to. Students were given HIV/AIDS education at school via an inter-active feed/back teach/back system. More persons from all walks of life were trained and encouraged to spread the message through group discussion and information booklets. Traditionally HIV/AIDS education in the Carib-bean has focused on strengthening treatment and delivery programs to bring down the mortality rates. Other approaches by religious organizations and conservatives have stressed sexual abstainism, or sex after marriage.

Government advertising and posters have also be very heteronormative and conservative in their approaches, reinforcing or increasing the ostracism, alienation, discri-mination and stigma faced by injection users, sex workers and men who have sex with men (MSM).

These approaches reinforce the ignorance faced by many that AIDS is a gay white man's disease, sex workers problem and men who have sex with men as homosexuality carries a very heavy legacy of taboo, disorder, decay, and scorn in the minds of many in the Caribbean. Homosexuals may be accepted today in a general sense, but "out or publicly know" homosexuals are not in the Caribbean. Given that many in the Carib-bean still see AIDS as a gay white male disease or plague, by extension gay Caribbean male disease. Governments advertising and education targeting (MSM) populations on television or public posters will only create a moral panic and increase the violence and discrimi-nation faced by MSM and gay men. To this end, Carib-bean governments have been muted by powerful religious and conservative values on reaching vulnerable populations including (MSM) persons who remain on the margins of acceptability. The religious and Christian values that embrace sex as intimately between men and women and sex as for the purposes of reproduction, is still alive as the "norm" for many in the World. Due in part to the conservative religious and Judeo-Christian values, patriarchy emerges, threatening "normative masculinity" gendering AIDS education interventions, while the rate of infections continues to increase among (MSM) popu-lations. The Caribbean Epidemiology Centre (CAREC) informs us that infection rates among (MSM) are between six (6) and sixty-six (66) percent [December 2006]. These statistical facts raise the question why are we seeing such a high increase among (MSM) populations. As Paula et al. (1999) have said, AIDS is an "epidemic of signification," because it allows us to think about flows of information and the fluidity of categories, racial, national, gender, sexual and particularly with respect to research and policy decisions. Sexuality and gender intersect with the categories of race and nation, such that research on HIV risk requires us to unpack all the above terms. In other words, labels such as "men who have sex with men [MSM]," like the labels "men," offer us an array of opportunities for identifying vulnerable populations allo-wing us to question social positions with respect to risk. To this end, this study focuses on MSM and SAM in Trinidad and Tobago, framed within the context of hyperheterosexualization and hypermasculinity as a means to an end. As a gay out identified Trinidadian living in Canada, it is observed over the years how HIV/ AIDS is deployed to define and stigmatize communal categories. How can we reduce the mortality rate and transmission of HIV other than through the delivery of prevention/treatment programs which have limitations due to stigma and ostracism in particular for (MSM)? The forced gender performances of hyperheterosexualization

and hypermasculinity, as survival means blocks successful interventions by government and AIDS workers to curb the transmission of HIV/AIDS and educate (MSM) populations, because they see themselves as outside the "normative frames of heterosexualization. Discourses of hyperheterosexuality lead MSM to believe that AIDS is not a problem for them. Further, structural inequalities such as the lack of LGBTQ rights, abject poverty in some situations, and HIV/AIDS illiteracy must be targeted. Carr and Lewis [2007] also point out that most governments fail to address structural vulnerability, because they are concerned about been reelected if they go against deeply religious and conservative views of the electorate and the culture of hegemonic heterosexuality and purity. This study contributes to the debate around the intersection of gender-driven roles and HIV, money for sex, sexual fantasy, sexual desire, power, and HIV in same-sex (MSM) sexual relationships, which are complicate to study and very few empirical studies have been done on this subject.

Hyperheterosexualization and hypermasculinity

For most young men in the Caribbean, the success and strength of their manhood to a large degree depends on how well they can perform 'normative, straightjacket or dominant masculinity' to obfuscate any form of tenderness or effeminacy'. Their hypermasculinity is an apparatus or sum total of collective surveillance and regulation of what is supposed to be male, masculine and not effeminate. To that end, most men police and deny expressions of tenderness in order to perform, instead, a certain cheerful obsequiousness, hypermasculinity and, by extension, hyperheterosexualization. As Connell (1987, 1995, 2005) argues, dominant forms of hegemonic masculinity reside alongside less powerful, subordinated forms of masculinity (e.g., of sexual minorities, disabled men) and marginalized or discriminated forms of masculinity (e.g., of racialized minorities, working class men, under-employed men, and low income men).

The subordinated position of working class masculinities by comparison to their middle class financially secure brothers makes their masculinities seem very fragile. To prevent this, working class men engage in roles and performances that police soft masculinity by acting macho. Morgan (in Crichlow, 2004) comments that "our fights usually indicated an overt disdain for anything that might appear soft or wet—more a taboo on tenderness than a celebration of violence" (Crichlow, 2004 quoting Morgan). Hypermasculinity and hyperheterosexualization, or acting "macho" within Caribbean and among working class men and boys affirms one's allegiance to the policing of a soft masculinity. The dominant culture demands physical responses from boys and makes toughness the hallmark of the real male. As Bailey et al. (2002) observe, young boys knew that if they performed outside the expected, traditional roles they

would be ridiculed and labeled 'sissy'. Some Black gay working class men in the Caribbean, in particular those who reject soft forms of masculinities and in some cases education as upward mobility, embrace instead fighting, fucking and flirting, which is a source of the crisis for some HIV interventions, making it gendered and risky. Barrow (1998) argues that the contemporary social-gender system that operates in the Caribbean was built on an "insecure and ambivalent" foundation. This ambivalence, along with the tropes and strictures of Black working class and gay masculinities, is played out in the risk some men take with unprotected sex, making their masculinity fragile at times.

Many of the seeds of this foundation are planted in childhood and adolescence by parents and communal pressure. According to Bailey et al. (1998), having multiple sexual partners earns respect both in the heterosexual and MSM worlds in the Caribbean. The term 'one burner' applied to a faithful male in some Jamaican and Caribbean communities is a phrase of derision (p. 66). Those who did not have many women were regarded as "sick," suspected of "being bullers," or not being "average young black males" (Crichlow, 2004). For many men, the enduring consequences of these lessons militate against their playing a positive role in the fight against AIDS and expose them and those they have sex with to a greater risk of HIV infection through non-negotiation.

In the next sections, the author takes up questions of hypersexualization and hypermasculinity in his work on HIV and risk among MSM, in Trinidad and Tobago; ethnographic study on men who have sex with men in Trinidad and Tobago. The study also draws on subsequent meetings in 2011 with medical and academic practitioners in the field, and explores three main questions:

1) How do feelings of self-worth, manhood, and the fragility of masculinity shape gay men's and MSM ability to negotiate safe sex practices and relationships?
2) How has the colonial and religious nature of Trinidad and Tobago influenced homophobia, sexual taboos, and the profiling of gay men?
3) How do hyperheterosexualization and hypermasculinity impact HIV/AIDS education among young and adult gay men?

RESEARCH CONTEXT AND METHODOLOGY

The lacuna of academic literature in the Caribbean on HIV, gay men, and MSM motivated this study. The author wanted to interrogate hyperheterosexualization and hypermasculinity as socializing agents for young men in and from the Caribbean, and understand their experiences of HIV education, prevention and criminalization or gay criminology. He used the interpretative frameworks of McKee and O'Brian (1982) and Oliffe and Mroz (2005) to invite men to talk about their private and personal experiences.

The study involved 46 participants from different parts of Trinidad

and Tobago, and from different race, class, ethnic, religious, educational and occupational backgrounds. The participants included MSM ranging in age from 18 to 60, nurses and doctors, AIDS educators/workers, author's family members, and professors from the University of the West Indies.

Some of the participants identified as "men who like to have sex with men" but did not consider themselves "gay." Some identified as "bullers"—the term in Trinidad and Tobago for men who have sex with men. Others identified as "gay," and some said there was "no need to use a label." Three of the men were homeless or living in shelters. Ten identified as living with HIV/AIDS, but did not say where they were living or with whom. Four of the men lived alone and were skilled professionals. Three were living in shared accommodation with friends. Ten were students attending college or university.

In addition, the author interviewed eight couples. Two of the couples were living together in intimate relationships and the other six couples were living separately with their parents and families. The remaining participants were health care workers from public health community clinics, and family members, bringing the total for the study to 46 participants.

Data collection

Data were collected through a mixed-method qualitative approach that included formal and informal in-depth interviews, daily ethnographic observation of social events including the 2007 and 2011 Trinidad and Tobago Carnival celebration, two semistructured meetings with a local gay men's discussion group, and local newspaper media analysis.

As same-sex sexual practices are still illegal in Trinidad and Tobago, meeting research participants and finding private spaces for interviews required care. The Sexual Offences Act of 1986 makes sex between two men punishable by 5–10 years imprisonment. In essence the state of Trinidad and Tobago represents itself as heterosexual and legally promotes heterosexuality. As a result, some of the interviews took place in public parks while others took place in the private backyards and homes of key informants who provided a space for men to meet socially. Some were conducted at the author's home; others happened at social events and clubs. The author had to enter these interviews on the terms and in the spaces of comfort determined by the participants.

The interviews were recorded and transcribed. As the participants used different forms of local Trinidadian dialect, it was important that the transcriptions were accurate. A continuous exchange of data evolved over the course of the study with some of the participants who agreed to assist with language interpretation and wanted to be sure they were not misrepresented.

Researcher position—reaching out

As Garfinkel (1957) points out, estrangement is helpful for bringing into view the background expectations of participants (p. 37). This was an important methodological intervention as it gave the authorhe ability to understand the men, make them feel at ease, and gain their support and confidence. To paraphrase Freund (1990), emotional work can be taxing, stressful and painful for all involved and is connected to the issues at hand. As an outsider/researcher, A healthy outlook and attentative listening one with care and empathy was embraced and performed as the author listened to the men with care and empathy. Simmel (1950) makes it clear that the native/stranger role carries with it a certain objectivity that does not commit the researcher to "the unique ingredients and peculiar tendencies of the group" (p. 405). This combination of estrangement, memory, and objectivity were the author's experience

with many of the meeting places and interviews, doing ethnographic observations, and understanding the different forms of language used by the participants.

Hooks (1990) refers to the politicization of memory as a practice of remembering that serves to illuminate and transform the present (p.147). In so doing, she distinguishes it from nostalgia—the longing for something as it used to be. Indeed, the author went through different degrees of culture shock while trying to understand how gay men understood their relationships or adapted to living as gay men in Trinidad and Tobago. He also had some limitations in understanding, as Louis Wirth (1964) explains, "the more complex nuances and saliency of class, race, mixed race, and colourism shape and impact sexual discussions, taken-for-granted issues, and unexplained stories and life experiences" (p. 60-83). Wirth argues that the most important thing to understand about a group or society is what it takes for granted. Indeed, the author Canadian tourist gaze made him take nothing for granted about gay life, gay men, Trinidadian and Tobagonian culture and the deeply evangelical religious and superstitious nature of Caribbean society and people in general.

Doing field research for the study also heightened his awareness and understanding of marginalization, discrimination, bias and taboos. The homophobic culture of Trinidad meant negotiating, as it did for the participants as well, which parts of my identity to make public, which parts to keep private, and which acts of masculinity or hypermasculinity to perform in order to erase effeminate behavior. Identity as performance is theorized by Goffman (1959) who argues that in face-to-face interactions, people use a "front stage performance" including clothing, sex, age, racial characteristics, size, posture, speech patterns, facial expressions, and bodily gestures (p. 24). The work of feminist film critics on the male gaze (Mulvey, 1990) was also very applicable to this negotiation of identity and to observing others who 'might be gay.' It assisted the author especially in public spaces and in meeting with participants. Some participants, for example, warned him not to wear bright colours when going out with them so that they would not be gazed at or perceived by hyperheterosexual men as gay.

As a researcher, the author benefitted greatly from being able to interview men conversationally in Trinidadian dialect, slang, and formal and standard English. Without knowing, understanding, and feeling the cultural nuances of the participants in our research, we risk misrepresenting, permanently damaging, and pathologizing minoritized communities. If we are to be more methodologically sound, reflexive, and theoretically sophisticated in doing qualitative research, the gaze of the stranger researcher has to be interrogated more deeply and complexly. Finally, and most important in doing this work in a hypermasculine, heteronormative and violently homophobic culture was the trajectory of potential problems with police, communal homophobic attacks against the author and study participants, and his family's concerns. To that end, it was a matter of safety, privacy and ethics. The four ethical principles and work of Beauchamp and Childress (1989)—respect for autonomy, beneficence, non-maleficence, and justice—guided this research work. The participants' names as well as other identifying details have been removed to ensure confidentiality and anonymity.

FINDINGS AND ANALYSIS

This section is divided into three parts. Part one analyzes the men's negotiation of self-worth and the common struggles and vulnerability some of them face in forming relationships. Part two interrogates the perpetuation of colonialism and the sexualization of racism. Part three demonstrates the relationship between hyperhetero-

sexualization, hypermasculinity and gay profiling.

Negotiating self-worth and relationships

There is a great deal of sadness, unhappiness and constructed hopelessness in the lives of many of the MSM interviewed. These conditions affected how they negotiate relationships, who they have sex with, and the degree to which they are comfortable in finding a language of negotiation and sense of self-worth in both sexual encounters and relationships.

The first interview took place with a group of 15 young men from the Chat Room, a discussion group that met weekly at a private residence. The first issue raised by one of the men in the group was the meaning of gay relationships. As the discussion got started a number of the participants commented, "What relationship?" When asked what they meant, a young man explained:

It is more about what I can give you or, better yet, what you could give me, and who you can catch at the club. You know, the tourists, they have lots of money and they spend it wild on drinks. It's not about love, but money and a fast life. It's fast romance.

Another participant said, "Look, we gay people who bulling, we know that we have no human and legal rights, so why bother about having a meaningful relationship when it means nothing in society?" Their insights quickly reminded the author of the materialist nature of Trinidadian culture and the sense of hopelessness that some men express and feel. It was best summed up by a young man in the group:

I am young, my body is my gift to older men who have the money. Not the young boys—they have nothing, they're unemployed and still living at home. I want a man who has a good job, a car, a big house and a place for me to go to. I want to be able to have sex with him and have a good time.

In these conditions, HIV/AIDS education is muzzled by poverty and who feeds you. When power is vested in an older person with money, it also jeopardizes the possibility of negotiating safe/r sexual practices.

The perpetuation of colonialism

The tropes and legacy of colonialism still dominate the minds and thinking of many white Westerners on racialized peoples. It is therefore important to examine its effects on the construction of and interaction between different kinds of interracial sexual and relationship encounters both globally and locally. The permutations and racist sexual stereotypes are endless, whether exa-mining the effects of white domination and white power in the Caribbean or in North America. One commonly held

power white stereotype is the attribution of inferiority and sexual decadence. This sexual profligacy equates blacks with sexual energy and hypersexuality—what is termed the sexualization of racism. This is best summed up by Baldwin (1972) who writes "no name in the street" in describing his unbelieving shock when he visited the American southern states. It is absolutely certain that white men, who invented the "N" big black prick, are still at the mercy of this nightmare and are still, for the most part, doomed in one way or another to attempt to make this prick their own (p. 482). This sexual phobia, when acted upon, is done with whites feeling pitiful while blacks and racialized peoples suffer the consequence, especially around effective HIV prevention strategies. Inevitably, these racist fears and images are internalized by racialized peoples themselves and acted out unconsciously because they are legitimized by whites. This was the main message of Frantz Fanon's *Black Skin, White Masks* (1967), namely that racialized men who have sex with white men act out sensuous sexual imagining.

The sexualization of race

A number of men in the discussion group and in the study as a whole felt that tourists were the best men to meet. As one young man said:

I go to the club to look for and meet tourists only so that I can get American or other foreign currency. The tourist will pay for anything and buy me anything. I don't have to worry about a place to have sex, something to eat, and money. I stay in their hotels, if they are in one, or see them regularly when they want to have sex with me, and I am cool with that. A gay relationship for me is about sex and money, not love and commitment. I'll do anything for money, and the same thing with the tourists—they do anything for sex. It is all about sex, good looks, and money.

It would appear that the colonized or, in this case, the gay men who seek out mainly white tourists for American dollars, are living out the self-fulfilling prophecy of the sexualization of racism and the black stud/jock/Mandingo image, all dick and no brain. By "Mandingo", the author refers to the film by the same name (1975) in which director Dino De Laurentis portrays sex acts between masters and slaves as intensely paradoxical sites of pleasure and racism. Similar to the fantasy that white tourists are looking for love, the racist Mandingo fantasy is constructed as a romantic encounter that, according to Caribbean men, local men are not capable of giving. By contrast, as Philips (1999) argues in her work on Barbados, men who receive money from female tourists are "able to harness the racial image of Afro-Caribbean men as studs in order to realign their subordination to

white heterosexual masculinities" (p. 45).

The predicament of racism is a matter of philosophical, psychological and institutional contamination, and must be addressed at its core. Rousseau and Porter (1990) argue that the invention of the exotic and the labeling of the anthropological "other" as exotic legitimated treating the peoples of the "developing world/third world" both as a projection of Western fantasies and as fit to be despised, destroyed, or doomed to extinction (p. 7). In essence, the colonizer view of non-whites deployed within the coded language of sun, sex, tourism ignores white racist practices in the name of civilizing men who have sex with men in the Caribbean. The construction of Caribbean MSM as primitive by those who extol the virtues of the sexual freedom and liberation of developing countries relies on the belief that these men do not know better or do not value their lives. By extension, the non-negotiation of safer sexual practices is almost seen as taboo or forbidden if they are racialized men.

Sex tourism

Some of the men in the study felt that allowing the sex tourism industry to flourish was the government's way of addressing the abject poverty and high unemployment in Trinidad and Tobago. There are ways in which sex acts trespass the intimate boundaries of the racial and legal divide between colonizer and colonized, affirming a new humanity and sexual desire along the lines of economic exchange. Puar, in *Circuits of queer mobility: Tourism, travel, and globalization* (2002), explains the link between colonialism and sex tourism as follows:

A politically charged, religiously driven, and culturally defined homophobia does not, after all, deflect the lure of an exotic (queer) paradise; instead, it encourages a continuity of colonial constructions of tourism as travel adventure into uncharted territory laden with the possibility of taboo sexual encounters, illicit seductions, and dangerous liaisons—a version of what Renato Rosaldo terms 'imperial nostalgia' (p. 113).

Tourism, white or otherwise, in places where there is a lack of human and civil gay rights, and where there are people living in abject poverty, large communities of illiteracy, and in areas still in need of development create a ripe environment for exploitive, abusive sexual excitement and the spread of HIV/AIDS. The Caribbean and other sun, sex vacation resorts are places where tourists tend to adventure, wanting to take part in risky unprotected sex and illegal acts with the wild, uncivilized, child-like native. This practice only serves to reinforce developing nations as 'safari cave like' and in need of white or foreign salvation.

Such relationships and encounters complicate how we understand racialized sexuality and the sexualization of racism. Tourist sexual encounters with local natives challenge the site of the sex act and paradoxically create an antagonism between freedom and domination. However, most local gay men are oblivious of the sexualization of racism, while internalizing some aspects of the dominant definitions of dependency and constructed sexual powerlessness. Given that most white tourists come from racist societies where they are often afraid to engage in publicly displayed interracial relationships, they fulfill their repressed sexual fantasies through temporary vacations and relationships that are easily left behind and forgotten as they show their passports to customs officers on their way out. In addition, as Kincaid (1988) observes, foreigners or tourists are rarely aware of the intentions and perceptions of local people:

It never occurs to the tourist that the people who inhabit the place cannot stand you ... that behind the closed doors they laugh at your strangeness. Nor are tourists aware that the well-practiced rituals of dissemblance that characterize friendliness have more to do with the rituals of asymmetry and survival, or the desire to keep a job when few are available, than with the fiction of 'native' character (p. 38).

This was evident among some of the men in the study who said they look for tourists to have sex with because they can be paid for it. The colonized subject who sees tourists as having more romantic finesse and, by extension, as being more civilized and better lovers, is best explained by Fanon (1967). As Fanon reminds us, the colonized who have fully accepted their colonization and the discourses that surround them are deeply embedded in the psyche and behavior of the colonized (p. 252–3). Such practices are a part of a broader colonial regime of oppression that is sedimented in the hearts and minds of Caribbean men and women as subjects and victims:

When the colonized makes contact with the white world, a certain sensitizing action takes place. If the psychic structure is weak, one observes a collapse of the ego. The colonized stops behaving as an actionable person. The goal of his behavior will be the "other" (in the guise of the white man), for the "other" alone can give them worth. That is on the ethical level: self-esteem. […] Man is only human to the extent to which he tries to impose his existence on another man in order to be recognized by him. As long as he has not been effectively recognized by the other, that other will remain the theme of his actions. It is on that other being, on recognition by that other being, that his own human worth and reality depend. Is that other being in whom the meaning of his life is condensed (p. 217).

Hyperheterosexualization and gay profiling

The gender roles, class dynamics, and idealizations of

hypermasculinity and hyperheterosexualization that influence the negotiation of same-sex relationships complicate HIV/AIDS education interventions. Many older gay men embody traditional hyperhererosexual and hypermasculine gender roles to fulfill their sexual needs, using chat lines and social media sites, as well as cell phone cards and other gift offerings for sex with younger or less financially stable partners. In the extraction of cash benefits, there appears to be a silence on gender role expectations and the negotiation of safe sex practices. Most of the younger men interviewed who were not financially stable said that the decision to have safe sex was not up to them. Instead, it was up to the more financially stable or older person. As one participant explained, echoing others, "a man with money has a place. I could go and have sex with him, sleep over sometimes, and spend a nice weekend. My neighbors don't have to know I am bulling."

The power relations vested in a person who has a good job, combined with the belief that money = guaranteed sex = relationship, define the social and cultural constructions of gay male relationships in Trinidad and Tobago. According to Parker et al, (2000), the politics of gender sexuality—who one is permitted to have sex with, in what ways, under what circumstances, and with what specific outcomes—are never random. Such possibilities are defined through "explicit and implicit rules imposed by the sexual cultures of specific communities and the underlying power relations" (p. 7). These explicit and implicit rules resonate with the history of slavery, in which young slaves were often defined as the sexual property of their masters. Beckles (1989) informs us that slavery meant not only compulsory extraction of labour from Blacks, but also, in theory at least, slave owners' right to total sexual access (p. 141–2).

Indeed some of the participants talked about their first love and sexual experiences at the age of 13 and 14 with much older, more mature men in their 30s and 40s. A number of men in the Chat Room group reflected on their childhood same sex experiences and coming out. As one young man in particular said: "When I was 13, I met my first love of my life. He was 35. I went to him place daily for sex and he would take care of me and buy me everything I want. He was also the top or the man in the relationship." This relationship, he added, lasted for two years. This raises fundamental questions about the point at which sex, love, and the exchange of money turns into rape and the abuse of power. Is it possible for a thirteen-year-old to talk about his first love with a person in their forties? Or are we talking about sexual exploitation and child prostitution? Do older men see their masculinity as threatened, weakened or emasculated if they have relationships with men their own age? Or does homophobia and the illegality of homosexuality force them into relationships with younger men to secure and maintain their own masculinity?

As Hope (2001) reminds us in her work on homophobia in Jamaica, for some, "the intense paranoia of male homosexuality is a reflection of the hyperhetero-sexualization of Caribbean masculinities, most apparent among working classes." For many Caribbean men, as she explains, the location of their masculine gender identity must be understood in relation to how men see and understand women, their roles, and socialization. This negotiation of identity is complex and multilayered, and always in dialogue with women; that is, erasing all signs of effeminophobia. "Here," as she states, "hetero-sexual conquests and a hatred of homosexuality (internalized homophobia and self hate) are ways in which men who do not want to be outed access their entire cache of masculinity, and manhood is secured" (p. 5).

It is clear that these various practices—young men seeking older men, older men seeking young men, and local men seeking tourists—produce forms of gay sexual profiling. Such dangerous and limiting categories, along with the construction of masculinity, sexuality, and love as economically driven, raise a number of important issues. First, does being gay in Trinidad and Tobago mean needing to have money in order to meet other gay men and have sex? Does it mean that men who are financially poor do not have sex with other financially poor men? Does the consumerist nature of same-sex practices mean that the buyer can do anything he wishes, including engaging in unsafe sexual practices? Does it mean that gay male sex or sexual relationships equate with the destruction of the body and self image?

Denial and representation

The complexity of disclosing or denying HIV status creates further challenges for AIDS education. As one participant said, "I do not want him to leave me because I love him. So if he know I have HIV, he will leave me. I want love, not rejection and stigma, so I lie to him or anybody who love me and can take care of me." Not only do homophobia and heteropatriarchy force both heterosexual and gay men to lie from young, but the betrayal can have a snowball effect—'no one told me they were HIV positive, so why should I have to tell other people that I am?' What is disturbing here is that HIV positive persons who willingly and knowingly pass on the virus are not only aware of the dangers of unprotected sex and non-disclosure, but also of the need for honesty, preventative measures, the need to know, to seek treatment and how to live healthy with HIV. Disclosing their status also becomes violently complicated for some because it increases fears of violence, stigma, discrimination, and communal out-casting and ostracism. Other participants said: "I do not need to tell anybody my status" or "I am bi-sexual, you know—on the "down low" as they say in America—and will not tell anybody who I having sex with, and my child mother doh know I does have sex with man them." To avoid responsibility, these men do not label themselves as gay or bisexual, nor do

they tell their female partners that they have sex with men. It is also very easy for them to use American terms to make serious issues seem painless and cool. As men are socialized not to show their true feelings, using these terms helps them to mask their feelings and the pain of living with HIV.

Other comments by participants reflected the deep social taboos, emotional complexity, and forms of resistance surrounding gay relationships and HIV status. As one man confessed: "I went into the relationship knowing that he had HIV. I wanted to take the risk of having sex without condoms with him to prove my love for him was pure." Another said: "I know two guys who are HIV and they say they want to bring down as many others with them. They say they on a mission." And as a third participant made clear:

You know in Trinidad, if you want to be gay, do not flaunt/show it and people will say you are nice and they will love you for not pushing it in their face. But the minute you try to let people know you are gay, they will stone you, beat you, laugh at you, and you doh want to pass in front of them. So you think I will tell people I have HIV/AIDS? Yuh crazy?

Lying to find love by not disclosing one's HIV status is complex, and unfolding its many complicated layers requires more work. However, it was clear from some of my discussions with men from the Chat Room that those who identified as heterosexual and those who saw themselves as hypermasculine and embodying a hyper-heterosexual orientation tended to be the men who, for the most part, did not want to discuss their status because it was or should be assumed that they were HIV negative. Chng and Gelia-Vergas (2000), in their research on ethnic identity, gay identity, and HIV risk taking, also found that MSM who identified as heterosexual were more likely to have unprotected sex and lie about their status (p. 326–339). Given the epidemic nature of HIV, Decena (2008) has questioned the "orthodoxy of compulsory disclosure," insisting that Black MSM should disclose their same-sex realities and actions on purely epidemiological or programmatic grounds (p.397–413). Further complications for HIV education include how to reach men who construct themselves as heterosexual because they are married to female partners. MSM who sometimes engage in unprotected sex with one male partner outside of their married relationship, for both to understand the need and importance for engaging in protected sex and to realize that unprotected sex is not about building and sustaining relationships or a demonstration of trust that his bi-sexual encounters will be protected from his wife.

Stigma and discrimination toward homosexuality in the Caribbean have a negative and pervasive effect on MSM. They have high levels of internalized homophobia, self-hate, religious guilt, effemophobia, and seldom disclose their orientation and, by extension, their HIV status.

Caribbean men also care a great deal about what their family, friends and neighbors think about their sexual preferences. This was clearly communicated in interviewing one of the participants in the study who said he avoided wearing any bright clothing colours coming to his home because he did not want the neighbors to think he has gay friends or that he might be gay. Religious guilt is also a conduit for blocking effective HIV interventions and HIV disclosure in the lives of many MSM who attend organized religious institutions that have negative effects on homosexuality. Greater internalized homophobia, according to Huebner et al., (2002), is also associated with lower awareness of HIV prevention services and with fewer changes in the perception of one's ability to use condoms (p. 30).

Stigma and the fear of being found out

Many participants talked about not looking at or cruising other men in public in order to avoid being stigmatized as gay or bullers. As Brown and Chevannes (1998) inform us in their work on masculinity, young men and boys are restricted from displaying overt signs of tenderness toward one another and are expected to show affection by "greeting each other with clenched fists, backslaps, hey bro, and other brotherly or manly aggressive expressions" (p. 30). Further, the expectation to hide any form of homoeroticism acts as a male opium, making it impossible to engender a discussion on affection, tenderness and feelings as it relates to how to men understand themselves and, by extension, their level of comfort in talking about HIV, safer sex negotiations and stigma.

Both the male gaze and public stigma are hindrances to HIV education. In the interviews, many of the men said : "If I tell my family and friends how I get HIV, I will have to explain too much, and that is too stressful." Some argued, "it will be stress and pressure for the rest of my HIV life." The fear of being identified as having HIV clearly shows the pressures of stigmatization. Although most of the men interviewed were looking for love, affection, family approval, security and public affirmation, they all knew the social, economic, violent, and alienating consequences of telling their partners the truth about their status. Homophobia and heteropatriarchy make young gay and heterosexual men prisoners of a particular system of ideological oppression that teaches them to not tell the truth about themselves. Further, as young men or boys they measure themselves and their self-worth in relation to others that they estimate to be similar and to other siblings in their communal and immediate families. Hiding their HIV status secures them a temporary sense of security and validation about who and what they are.

The tabooing and illegality of homosexuality drives individuals underground and leads them to seek social acceptance by adopting a visible hyperheterosexual life-style. For example, the participants pointed out that, in some of the younger-to-older relationships, the older men

are the more "straight or hyper-heterosexual acting one." When asked how safe sex is negotiated in relation to self-perception and age differences, the younger men said that most older men do not identify as gay because they feminize the younger men in their relationships. By feminizing the younger men, they act out their hegemonic heterosexualization and put up a hypermasculine front in order to protect their sexual identities.

Chevanne's work (2001) on Caribbean masculinity is very instructive here. He informs us that socialization into heterosexuality leads Caribbean men to construct, maintain, and celebrate hypermasculinity. He writes that having one's first sexual experience, having a child, and/or setting up an independent household are more important indicators of reaching adulthood than other social factors like jobs or education (p. 215). Power plays an important role in the social construction of masculinity, especially in the opposition, in male same-sex relations, between wealthy hegemonic masculinity and marginalized or working class masculinity. In wealthy hegemonic same-sex masculinity, the dominant Caribbean consumerist cultural ideals of what it means to be a man become the terrain on which all marginalized or subordinated masculinities are constructed and performed.

Thinking of wealthy same-sex hegemonic masculinity in this way allows us to understand why the older men feel they have to provide all the material possessions for the younger boys/men. It reassures their wealthy hypermasculinity and their ability to control the relationship without negotiation. In addition, most young Caribbean men do not feel that they are really men unless they are sexually active and acting out hetero-hypermasculinity. As Brown and Chevannes (1998) write about young men's hypermasculinity: "Boys greet each other with clenched fists and backslaps, and often use other forms of aggression to express their feelings" (p. 30). This aggression also plays itself out in the roles that drive some of their sexual encounters and relationships. The main reason the young men in the study said they engage in unsafe sexual practices was fear of losing the older, more financially secure man who is providing for them. The man who provided was also the active, top or insertive partner, while the younger, and in some cases, the lighter skinned man, was the passive, bottom or receptive partner. When the older men were asked why they assumed the dominant and penetrative role with younger men, they replied that they were seen as the masculine one and that they liked acting out heterosexual roles within their relationship to reassure their masculinity. It is clear for these older men who have sex with younger men that the articulation or action of penetration reinforces power, domination, hypermasculinity and hyperheterosexualization. In addition, as mentioned above, the passive partner does not negotiate the conditions for having sex. As an older man informed me: "I am paying for everything he wants. I am paying for everything he has and I will decide if we use the condom." When I asked what that meant to him, he said, "power, masculinity and control."

Unprotected sex in these situations is not only seditious, random or unintentional, but rather a form of hypermasculine barebacking driven by a form of hyper-heterosexualization that erases all safe sex negotiation. There is also the myth in the minds of some that 'skin to skin is in' or that going bareback is 'the real deal.' This prevailing myth makes some couples not negotiate the use of condoms because skin to skin is in and 'if you love me you do not have to worry.' The role of gendered imbalances sex between MSM sexual relationships reinforces the argument that gender roles in the Caribbean and elsewhere, along with failing to disclose one's status, is a major contributor to the spread of HIV/AIDS. Barebacking sex in these situations is not the same as for two HIV negative partners who are in a long-term relationship, have been tested, and agree to having unprotected sex. Of particular concern here is the extent to which internalized homophobia, religion, guilt and stigma have created a sense of constructed hopelessness and respect for the men and their partners. "Stigma against people living with HIV/AIDS and homosexuality was implicated in low levels of use of HIV testing, treatment and care services, and the reluctance of HIV positive people to reveal their serostatus to their sexual partners. Data reveal a pressing need for anti-stigma measures for both homophobia and HIV/AIDS, and for training for health and human service professionals" (Ruth and Robert, 2005).

Danger

Other risky sexual practices leading to unsafe sex also emerged from the interviews. The family situations that some of the men were living in forced them to meet for sex outside or in public spaces such as parks, below bridges, washrooms, abandoned buildings, or near the river and beach areas. Some also took the risk of having sex at the dance clubs they frequent, as the security closes their eyes to it. One young man told me he has sex with men for money and is subjected to repeated abuse. He also told me he became friends with a group of male street sex workers who socialized him into street prostitution. He could not tell his parents. He was living at home and prostituting. He said the men had threatened to kill him or have him arrested if he stopped. Like the lives of others, his life is endangered not only by the various settings in which he conducts his sexual activities, but also by unsafe sexual practices. Given the lack of legal and sexual protection, rampant homophobia, and the multiple partners with whom men engage for the purpose of sex money, the risk of HIV/AIDS infection increases dramatically. These street sex workers also feel very disenfranchised from the larger culture, society and community due to the taboo nature of prostitution

sex, homophobia and discrimination.

Saga Boy Calypso

Trinidad and Tobago are known for their steel pan and calypso. Claysonian themes include but are not limited to issues and topics such as the role of women in society, family issues, sports, nationalism, education, ethnicity, race, global issues, and above all the reinforcement of dominant and persistent forms of masculinity and father. As a dominant cultural tradition and integral part of the social imaginary, calypso contributes to constructions of hypermasculinity and hyperheterosexuality. Calypsonian Penguin's song "Soft Man" (1983), for example, reinforces ideologies of male dominance over women by suggesting that masculinity is centered on an erect penis. At the same time, Shurwayne Winchester's popular calypso song "Woman By My Side" (2007) goes like this:

Listen now, hear me now
God made Adam first, he was the first man
Then he found out Adam was lonely, and his companion was Eve, a woman Lord Why should I go against myself thinking this is wrong eh
But it was written in Leviticus
Man should not lie with man, it is an abomination.
Many in the Caribbean will argue that Winchester is only reinforcing the religious values of the Caribbean and, by extension, the heteronormative nature of a society where LGBTIQ persons are religiously condemned. Delmano's 1981 song "Sodom and Gomorrah" also contributes to this perception. As the chorus goes:
For we are living in this modern Sodom and Gomorrah
And very soon an angel go visit we here in the near future
So if your wife turn into a pillar of salt, I want you to know that is your fault
And if the fire and brimstone fall down on we, I know we are all guilty.

Calypso as popular culture text not only celebrates antigay paranoia, morality, sexual perversion, hyper-heterosexualization and hypermasculinity, but also takes great joy in elevating and policing a form of phallocentric masculinity that makes a mockery of gays and effective HIV intervention and awareness. These songs, and others, embody contradictory notions about a fixed or policed masculine identity.

This policing of masculinity influences and shapes the social practices, behaviors, and attitudes of MSM as they navigate the role-playing of top and bottom, safe and unsafe sex, and who decides if a condom is to be worn. In addition to the practices of younger men acquiescing to the power of older men in same-sex relationships, and men engaging in heterosexual dating, marriage and fathering to conceal their homosexuality, other practices

also reinforce hypermasculinity. In Trinidad and Tobago, men with socially constructed feminine qualities are sometimes called "ex-layers." They are ostracized by society and other gay men in general. As an expression for chickens that no longer lay eggs, this feminized dero-gatory term reinforces the misogyny within Caribbean and Trinidadian culture and demonstrates how gay men socially construct gender roles for other gay men within an already complex and oppressed context. These men are often seen as the ones who are penetrated in sexual encounters, and also as men not to be seen with in public because of the harassment that occurs in a violently homophobic culture[4]. Participants who described themselves in the interviews as "macho" or "butch" made it very clear that they do the penetrating while the femi-nine men are the receivers without negotiation or discussion.

This policing of constructions of gender poses a number of health risks and challenges for HIV/AIDS education. Intervention HIV research and development in the Caribbean have not done much to reduce stigma and discrimination against sexual minority communities. For example, more research needs to be done in the Caribbean on serosorting or on how MSM select partners according to their assumed/guessing/profiling behavior or known HIV status. We also know very little about different sexual networks. There is still a tendency to target HIV education interventions to stigmatized and non-stigma-tized communities.

DISCUSSION AND STRATEGIES OF CHANGE

Knowingly spreading HIV/AIDS and going from person to person is a carnival of barbarity and cocktail for disaster that, for some, combines self-hate and anger at having HIV with the goal of pulling others down with them. The findings from the study reveal the extent to which homophobia, heterosexualization, neo-colonialism, popu-lar culture, and ideologies of hypermasculinity impact the sexual practices, relationships, lives, security, and self-worth of men who have sex with men in Trinidad and Tobago. First, it is clear that some of the men who have unprotected sex are both subject to and, in turn, create and promote a system of gender, race, class, and cultural norms that place them in extremely risky unsafe sexual situations. Second, these situations are masked and kept silent in the effort to avoid stigmatization, violence and legal repercussions. Third, issues of migration, colo-nialism, and racialization within the Caribbean highlight

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[4] While I was delivering a guest lecture in 2007 on men and masculinity, a student told me the following story: At his home, there were mangoes hanging on his side of the yard from his neighbour's mango tree. He thought this was great because he would get some mangoes. But when his two boys didn't pick the mangoes, he worried that they were gay. He asked if they saw the mangoes. Then he made them pick them to prove that nothing was wrong with their masculinity.

social problems associated with sex work or sex for money. Taken together, the unwritten rules of hyper-masculinity, class, and power complicate effective HIV/AIDS education interventions and the changing of behaviors. There is no doubt that better intervention strategies are needed not only to reduce the spread of HIV, but also to empower the many men who feel powerless and hopeless without recourse to a rights-based agenda.

Homosexuality is still illegal in most of the Caribbean, with the exception of the Bahamas. The Buggery, Sexual Offences and Morality Acts make sex between two people of the same sex punishable by imprisonment. The accompanying fear and silence of daily homophobic attacks and the fear of being criminalized or beaten by the police if caught makes it hard on stigmatized populations. These activities include torture, drowning, stoning, burning by being placed in car tires (UNAIDS; Robert and Lewis, 2007), as well as employment discrimination and other forms of persecution. Homosexual persecution combined with a positive HIV status is a frightening reality for many in the Caribbean. These fearful feelings and hegemonic acts of hypermasculine and hyperfeminine violence coupled with state criminalization force people to be secretive about their status and sexual orientation. By extension, this contributes to the spread of the virus through a lack of protection, fear, stigma, and not being tested or avoiding knowing one's status.

The Buggery laws make it harder for MSM to seek out their status and, in some cases, when their status is known, to seek out available treatment options. Male sex workers, gay men, and drug injector users, by virtue of their disfranchised or marginalized status, are thought to have lost themselves and their right to equal human rights and protection from the law. Traumatized by fears of HIV stigma and homophobic persecution, they sometimes contemplate or even commit suicide, withdraw from LGBTQ social activities and women's support groups, live in seclusion, or seek asylum abroad. Asylum seekers also run the risk of not returning to their country of origin because of their sexual orientation or because they expose the Caribbean's poor human rights track record on protecting persons living with HIV/AIDS.

Structural change

Structural inequalities such as the lack of LGBTQ rights, poverty, and HIV/AIDS illiteracy need to be targeted in a language and manner that makes sense to the communities of men involved. Vulnerable populations can only change their behaviors and gain a sense of self-worth when the social and political climate embraces them and grants them rights and civility. Because the engine driving human rights and law reform today is undoubtedly the HIV/AIDS pandemic or epidemic and the economic impact it has on the economies of the Caribbean, government interest in sex and sexual politics should be positive and liberating, and not only focused on moral regulation. UNAIDS argues that 85,000 children have been orphaned since 1999 in the Caribbean alone by parents who have died from AIDS (2008). The future of youth is at risk. We and the governments of the Caribbean collectively need to quantify the economic, cultural and social cost of HIV/AIDS in the Caribbean. For example, what stresses has HIV/AIDS placed on health care systems, loss of productivity, and loss of technical and professional expertise? Also, with an unemployment rate of 14.2% (Central Bank of Trinidad & Tobago, 2007), we need to consider to what extent the sex tourism industry and racialized constructions of gay relationships are a by-product of the economy and how this has this affected the rate and spread of HIV/AIDS among gay men.

Education and research

The homophobic gendering of discrimination and taboos against MSM in particular have to be more publicly addressed by government education initiatives to secure peoples' safety. Hyperheterosexualization, hypermasculinity, religion, and a culture that virtually celebrates the violation of gay peoples' rights, combined with a gay culture of sexual secrecy, makes HIV and gender education a huge task. Men who have sex with men must be able to talk about their feelings and sense of self, and have pride in who they are.

The lack of empirical research on the linkage between Caribbean masculinities and HIV transmission perpetuates a vicious cycle in which assumptions, stereotypes and fear trump the advancement of effective educational and policy interventions. Clearly the link between masculinities and HIV is not an easy one to understand and get honest answers from. However, as a result of lobbying by LGBTIQ groups and organizations, the Center for Disease Control and Prevention and other public health agencies in Trinidad and Tobago have launched campaigns to study men who have sex with men that do not identify as gay.

Challenging homophobia

A major challenge for HIV/AIDS education is how to turn feelings of repulsion against men who have sex with men into feelings of love, respect and civility. Homophobia in Trinidad and Tobago, as in the Caribbean more generally, is located within a particular system of ideological thought and practice that includes a cocktail of resistance from conservative religious and parental views.

In this climate, what are the opportunities and challenges for sexual rights in Trinidad and Tobago today? We

need to work on unlearning and relearning how to overcome the draconian cultural biases against LGBTQ rights in the Caribbean. Here we are talking about addressing generations and generations of colonially reinforced oppressive and dehumanizing thought processes. How do we learn to unlearn an entire generation of taboos, sexual stigmatization, and Caribbean mores around a fixed and nationalistic understanding of masculinity, sex and homosexuality? It starts with overturning our archaic laws, addressing poverty and illiteracy, and promoting youth education, feminist education, and education on human rights.

Conclusion

The moral regulation, bionationalism, and state-ordained homophobic violence that construct a heteronormative discourse where words hurt, the social action of gay men is shamed, assaulted and embarrassed, and men are forced into a hypermasculine masking of their true desires and behaviors, must shift from hate to love, respect and acceptance. To cure HIV/AIDS we cannot and must not suffer from a shortage of love, kindness, empathy, respect and forgiveness. The pernicious forces are not the men themselves but the social, cultural, religious and political forces and relations producing fear, stigma, shame, and response, namely homophobia, hypermasculinity and heteropatriarchy. These forms of discrimination are ample evidence that Caribbean MSM want the same rights as everyone else.

The complex, multilayered gender roles and sexual taboos embedded in a colonial system must be challenged and unlearned in order to create a more successful human rights and HIV/AIDS education that gets the message across. Because masculinity is tied to how dominant, violent or hypermasculine you are, and how much risk you can engage in, the challenge is to develop HIV/AIDS strategies sensitive to the many forms that dominant hypermasculinity takes while also embracing different and/or soft masculinities. Masculinity is not a fixed concept and is fraught with conflicting and contradictory behaviors, attitudes and messages in different contexts and situations. To this end, HIV interventions must understand the link between the fragilities of different masculinities and the tropes they embrace as they are constructed and reaffirmed. There are also cultural, racial and the colonial sexualization of racism issues to be unpacked here, such as economics and colourism to relationships and the conservative traditional masculine roles that are maintained and produced in sexual encounters between MSM. The challenge is how to reach MSM who do not adhere to the norms of Caribbean hyperheterosexualization and hypermasculinity. More challenging is the modern construction of family, non-cohabiting couples, same-sex or same gender loving couples, non-sexually exclusive couples alongside monogamous homosexual and heterosexual couples, raises more challenging interventions for education and social change. We know very little about and do not want to talk about these different forms of families; hence there is limited information or research to work from. This type of education needs to be directed towards health care providers, HIV educators, the family, the community and others involved in HIV prevention and awareness campaigns.

Opportunities exist therefore for research that can investigate and address HIV and health promotion in ways that challenge hegemonic masculinity and nonconforming traditional stereotypical constructs of manhood. We have done a great deal of work for MSM but very little has been done for "gender nonconforming" men who blend attributes stereotypically associated with various forms of masculinities and femininities (Connell, 1987). More risk taking in HIV public discourses must be taken through postering, media messages, and social media outreach (twitting, blogging, facebook and interactive websites for comments and education). More men who are gay in public life and have high profiles need to join the struggle, take coming our risk, and be constructively engaged, because we all have levels and measures of responsibly. By been open about our sexual orientation, we by extension seek our rights to public expression, public intimacy and our sexual identity. As MSM, we must also ask ourselves what stands to be gained or lost if we commit and connect personally with the work and lives of others in order to achieve recognition, respect and rights. Admittedly, one's mouth is muzzled by who feeds it and what it eats, but one's body also belongs to oneself. Therefore it is important to ask what social meanings and violence are inscribed in silence and how it relates to freedom, justice, respect and equality.

When people are empowered, have better access to resources without the attachment of taboos, they can take control of and make healthier choices around HIV prevention. To be an agent means to be capable of exerting some degree of control over the social relations in which one is enmeshed and that one lives through daily. In turn, this implies the ability to transform those social relations that violently socially and culturally police men who "act effeminate and men who have HIV" lives, bodies, minds and conditions. AIDS education needs to assist male MSM, street sex workers, and those living in isolation, denial, shame, and poverty become agents who understand their situation and vulnerability. Understanding marginalization, stigma, and discrimination is equally important as while promoting speaking out and challenging internalized homophobia and emotionality. But most importantly, MSM must see that homoeroticism can be used as resistance and this seems to be an appropriate starting point.

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