



DEVELOPING SOCIAL CAPITAL IN THE PUNJABI COMMUNITY

RESEARCH ON HOMOSEXUALITY RELATED ISSUES IN THE PUNJABI COMMUNITY

FINAL REPORT August 2005



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DEVELOPING SOCIAL CAPITAL IN THE SOUTH ASIAN COMMUNITY

Homosexuality

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FOREWORD

Homosexuality is one of the most contentious topics to be discussed in any community. The communities, their leaders, and their religions are all divided on this issue. In Canada, many groups are divided on this issue. The Federal struggle to redefine the “family” invokes enormous debate within the country, in particular when the question of gay marriages and same-sex benefits are discussed. Others relate the fight for gay rights to human rights.

Are there homosexual people in the Punjabi community and if so, what are their struggles for survival? This was the key question which the project attempted to answer. Throughout the project, our understanding of the gay lifestyle became more in-depth and our understanding of the struggles persons go through became more thorough and clear.

The Punjabi Community Health Center with the support of the Ontario Trillium Foundation has endeavored to conduct research on this sensitive topic which explored the complex issues surrounding homosexuality in the Punjabi community. We were trying to determine whether the Punjabi gay community exists and if so, where it is. In addition, we were looking at exploring and dealing with the complexities of the issues surrounding gay life styles. This study used qualitative data to delve deeper into these complexities. The study highlighted for us the cultural barriers, the shame, stigma, ostracization, the secrecy of relationships, language barriers, the lack of awareness of service providers and the lack of cultural appropriate service delivery. This is the first study that has been undertaken for the Punjabi community on issues surrounding the complexities of gay life style.

This study, we hope, will provide researchers, academics, gay rights activists, policy makers, organizations working on gay related issues, and others, an overview of issues surrounding homosexuality in the Punjabi community and, at the same time, help in identifying issues, developing programs and bridging gaps in policies and program implementation.

This research is dedicated to those gay men and women who have suffered in silence and had the courage to share their pain, hurt, and suffering with the research team. This research is dedicated to all gay men and women who are working to make this world a better place for all to live in peace and harmony. I sincerely thank every one who provided us their support and trust. Without their participation this study would not have been possible.

Baldev Mutta

ACKNOWLEDGEMENTS

The vision and work for building social capital in the Punjabi Community in the Region of Peel, has been greatly complemented by the relentless perseverance and persistent commitment of The Punjabi Community Health Centre (PCHC), established in the summer of 1990. The work on homosexuality issues in the Punjabi Community in the GTA has been groundbreaking in many ways: It is the first of its kind in the history of an ethnic community in Peel which makes it even more commendable in the light of the fact that it is publicly raising a forbidden issue seldom whispered about in the South Asian community. To be associated with a gay life style was to be stigmatized, ostracized, disowned and condemned from the community for life. If it ever became known that a South Asian was living a gay life style, then he/she was supposed to be “pitied” I was perceived as a result of past sins from a previous life, something to be swept under the carpet, and for to be hushed behind closed doors. To have drawn attention to, not only the challenges faced by the gays and lesbians, but also to their families and to bring to the surface the multiple ingrained challenges affecting the appropriate redress of this issue, its consequence of denial, neglect, lack of education and to recommend the development and accessibility of culturally appropriate services, is a phenomenal breakthrough for this project.

This initiative has benefited significantly from the efforts of the Punjabi Community Health Centre staff, in raising an issue seldom whispered about in the South Asian community. The working body of this report would not have been achievable, were not for the efforts of PCHC volunteers, the input of service providers and the input of community members.

Baldev Mutta conceived this project and ensured with others that the study was scientifically sound and useful to persons and organizations working within the South Asian community. This solid foundation is the key to help set the stage for implementing the recommendations from the project. Mr. Gordon Ralph and Dr. Joan Oldford of Memorial University of Newfoundland contributed significantly to the editing of the Final Report.

The project was completed with the support of the following persons:

The Project Supervisors –

Baldev Mutta and Amandeep Kaur.

Project Staff –

Rakhi Mutta

Data Entry and Analysis –

Rakhi Mutta

Research

Rakhi Mutta

Special thanks goes to all of the individuals within the Region of Peel and Toronto who participated in the research interviews and the community members who participated in the focus groups. An acclaimed note of thanks goes to the Alliance for South Asian Aids Prevention (ASAP) for their initial support, and in sharing resource material and continued support.

We would also be remiss if we do not acknowledge the contributions of Dr. Amarjit Singh for reading, editing, adding and providing valuable insights towards the completion of the report.

Thanks to the Ontario Trillium Foundation for funding the “Developing Social Capital in the Punjabi Community Project”. This research was timely and needed in order to address the critical needs of homosexuality within the South Asian community.

THE REPORT ORGANIZATION

The research endeavors to present the findings and recommendations to a variety of readers in the most comprehensive way. Consequently, the material is organized in a certain format. This is a research study that uses qualitative data to understand and highlight the complexities of the gay life style in the Punjabi community. The research used personal interviews and focus group methods to elicit information from the participants. The research was based on the principles of Participatory Action Research.

The chapters in the report are organized in a way to present information in a precise and comprehensive form.

The chapters present the following information:

- Chapter 1 - presents the executive summary.
- Chapter 2 - presents the general introduction.
- Chapter 3 - presents the introduction to the project, and the history of PCHC.
- Chapter 4 - summarizes the findings of the research.
- Chapter 5 - presents the summary of recommendations.
- Chapter 6 - presents the review of literature.
- Chapter 7 - entails detailed interviews and focus group discussions
- Appendices

CHAPTER 1

EXECUTIVE SUMMARY

The Punjabi Community Health Centre found it necessary to complete a comprehensive research study on homosexuality within the South Asian community because of the lack of support for and understanding of this topic within the South Asian community. There is a general consensus among professionals that any topic related to “sex and sexuality” is not discussed in the Punjabi community.

Approach

The research team used Participatory Action Research¹ methodology to undertake research within the Punjabi community. The research team wanted to use the research as a tool to build communities rather than to just gather the data. Thus, the participants were not just objects. They were the subjects who continue to be involved in many different ways in this project.

Methodology

The research team:

- worked in a cooperative and collaborative manner from beginning discussions to the analysis of the data and the compiling of the report.
- decided that the research would be based on the principles of Participatory Action Research.

¹ Please see appendix for a detailed overview of Participatory Action Research methodology.

- formed a support network which consisted of the Alliance for South Asian Aids Prevention (ASAP) service provider, the project worker and the two project managers who guided the research.
- reviewed existing literature related to homosexuality. There was minimal information available on homosexuality. The majority of the written information on homosexuality was provided by ASAP. ASAP provided leaflets and factual information. Books available on homosexuality were mostly related to poetry and short stories.
- developed questions for collecting qualitative data involving focus groups. The team felt that focus groups would be an important resource to elicit information which might not be otherwise available using other forms of data collection methods.
- attended Gay events, such as Gay pride parade, Queer Indian Mela, and Funk Asia. Queer Indian Mela, and Funk Asia are both events that are held for homosexual South Asian people.
- developed a questionnaire to collect qualitative data. The questionnaire was tested with one participant, revised, and finalized. The research team decided to interview five gay men and five lesbian women. But, we ended up interviewing 6 gay men, 3 lesbian women, and 1 transsexual who were South Asian.

Findings

Research Findings

Each data gathering process contains a section on the findings. There are three sections under the findings – (Part I) Literature Review, (Part II) One-to-One Interviews, and (Part III) Focus Groups.

The findings are categorized under four themes:

1. Shame and Stigma
2. Lack of Appropriate Services

3. Awareness and Education
4. Collaboration and partnership

Recommendations

Similarly, each data gathering process contains a section on recommendations. There are three sections under recommendations – (Part I) Literature Review, (Part II) One to One Interviews, and (Part III) Focus Groups.

The Recommendations are categorized under four themes:

1. Destigmatization of the issue
2. Culturally-Appropriate Services
3. Prevention Strategies
4. Partnerships

Summary

This study has presented strong evidence that homosexuality is very much a taboo topic within the South Asian community. There are no ethnic (South Asian) agencies that deal with this sensitive topic except for the Alliance for South Asian Aids Prevention (ASAP). Developing awareness and educating the South Asian community regarding the issue of homosexuality is the single most important finding of this research study.

CHAPTER 2

HOMOSEXUALITY RESEARCH PROJECT

History of the Punjabi Community Health Centre

The Punjabi Community Health Centre (PCHC) is a non-profit community based agency in the Region of Peel. It was incorporated as a community-based agency and as a resource centre in 1995.

Developed in the spring of 1990, the Punjabi Community Health Project in Peel was an innovative Health Promotion Project based on the principles of Community Development.

Vision

The Punjabi Community Health Centre strives to create a healthy and vibrant community, which values the cultural mosaic of the Region of Peel.

Mission

PCHC will serve the Peel community through community development, culturally appropriate service delivery, partnership with other organizations, research and asset inventories, developing resources and recruiting volunteers from within the community, and consulting and promoting diversity through community outreach.

Introduction to the Project

The Research on homosexuality in the South Asian Community is a community-based research and development project. The Punjabi

community Health Centre has been working on this project since the fall of 2001.

Information for this report was obtained from a variety of sources. Qualitative information was obtained through interviews and focus groups.

Qualitative information was obtained through interviewing ten Gays, Lesbians, and Transsexuals. The interviews were completed by the interviewer meeting with the interviewees at their convenience and their place of choice.

Background

The South Asian community is the largest ethnic community in the Region of Peel. According to the 2001 Canada census, Punjabi language was identified as the 2nd most spoken mother tongue, after English in the Region of Peel².

Large pockets of Punjabi population can be found in Malton, Mississauga and Brampton. The community is quite closely knit with its own media, small to medium-size businesses, a school, and religious institutions. It also accesses its own hospitality, travel and tourism industry. Nonetheless, it is not an isolated community.

Homosexuality is not a new phenomenon to the Indian culture. However, it has come to the community's attention as a problem for two reasons. Firstly, a radio personality became known in the community as a gay man and secondly, same-sex marriages and the same-sex benefits issues are currently debated in the Canadian society.

² 582350 persons identified English as their mother tongue. 58105 persons identified South Asian as their mother tongue. Only 12350 persons identified French as their mother tongue.

The Punjabi community was involved in this issue because three of the elected Members of Parliament are Punjabis and had to take a stand in favour of the above-mentioned issues related to homosexuality. There were many debates in the media about the issues and the debate is polarizing the Punjabi community into taking sides.

The Sikh religion has also been dragged into this debate. As all three members of Parliament are Sikhs, the question became “if one belongs to the Sikh faith, what is the responsibility of that person in relation to his faith and in relation to his personal views, would swing between the two poles and is irrelevant for its own sake representing his constituents.

The project team has researched this topic and has found that very minimal information is available on homosexuality in the Punjabi community. There are some brochures available in some South Asian languages which have been produced by the Alliance for South Asian Aids Prevention (a social service agency dedicated to work in the area of HIV/AIDS). First person an educational³ video has been discovered but the majority of resources are geared towards the “arts” community.

On the internet, information has started to emerge in the areas of homosexuality. Writers⁴ have initiated novels, short stories and poetry related to the themes of homosexuality. The majority of the information on the internet is of a social nature, e.g., – “how and where to meet someone”.

While research information on homosexuality is readily available within other communities, there is a paucity of research on homosexuality within the South Asian community. In addition, If there is research information on homosexuality, the majority of the time it is tied to the HIV/AIDS context.

³ Rewriting the Script: A Love Letter to our Families, Friday Night Productions,

⁴ Vikram Seth, Andrew Harvey, Hanif Kureishi, and Suniti Namjoshi – to name a few

Scope of the Study

The Punjabi Community Health Centre commissioned this study and the purpose of the study was:

- to determine the level of understanding of homosexuality in the Punjabi community
- to determine if any stigma is associated with being a homosexual in the Punjabi community
- to determine the individual, family and social needs of the Punjabi homosexuals
- to determine the readiness of the community to do something about the complexities of homosexuality

Objectives of the Study

The specific objectives of the study were to obtain an understanding of the following areas in the South Asian community:

- the complexities surrounding homosexuality in the Punjabi community
- the harm associated with “stigma” and the best ways to destigmatize homosexuality
- the ways to support families and individuals who deal with homosexuality
- socio-environmental factors which contribute to homosexuality complexities
- the current level of ethno-specific services available to South Asian homosexuals

Approach

The research team used a Participatory Action Research⁵ methodology to undertake research within the Punjabi community. The research team wanted to use the research as a tool to build communities rather than to just gather the data. Thus, the participants were not just “objects” of study. They were the “subjects”, who continue to be involved in many different ways in this project.

The researcher spent close to one-and-a-half years building rapport with the Punjabi and South Asian gay community. The researcher, who was also the project coordinator, spent a year-and-a-half going to spaces frequented by Punjabi and South Asian gays. These included: gay bars, gay dances, gay parties, meeting individually and in group events, attending gay parades, and visiting South Asian and mainstream agencies. *Without spending this initial “rapport building” and “learning time”, the depth and the quality of the research study would not have been possible. During this time, the researcher has made many friends who shared their “heart wrenching” personal stories which enhanced an understanding of the complexities surrounding homosexuality issues.*

The interviewer met with the interviewees over the course of six months. Telephone conversations were first held with all the interviewees to explain the project, and to make them feel comfortable.

The ten qualitative interviews were then conducted. The interviewees were very concerned with their names being revealed, and being tied to the project. They needed to be reassured many times that their identity would remain confidential. We have also “edited” (read deleted) some data which would have “exposed” them in the gay community.

⁵ Please see appendix for a detailed overview of Participatory Action Research methodology.

Methodology

The work plan consisted of the following: 1) Forming a research team, 3) Undertaking the review of literature, 4) Developing a qualitative research tool in order to collect qualitative data, 5) Developing focus-group questions and 6) writing the report.

2. The research team:

The research team was comprised of four individuals who had a history of experience working in the field of social work.

3. Review of literature:

The research team read several articles, research papers, and examined several internet sites in order to review the current research on homosexuality. The team discovered that research on homosexuality in the South Asian community in North America was scarce. However, some studies were relevant to this project. The literature section of this report contains the review of those studies.

4. Qualitative survey tool:

- I. Research questions were developed and they were critiqued by individuals belonging to the homosexual community. A revised draft was presented for their approval. The approved draft was then used for the individual interviews. The final questionnaire is included in the appendices.
- II. The interviewer contacted individuals belonging to this community, contacted the Alliance for South Asian Aids Prevention (ASAP), and advocates for this community as being for names and numbers of persons who would be interested in being interviewed for this project.
- III. The interviews were then transcribed onto computers.

5. *Qualitative data gathering process:*

4.1 Two focus groups were organized.

4.2 The discussion was noted by two scribes and then entered into the computer and analyzed.

Analysis

Each data set was analyzed for findings and recommendations.

Individual interviews were analyzed from written notes for themes. Individuals were not comfortable with a tape recorder being used for fear of being identified. Therefore, written notes were taken by scribes and transcribed into the computer and analyzed into themes.

Focus groups were analyzed from written notes for themes again, since individuals were uncomfortable, tape recordings were not used. The themes formed the basis for findings and recommendations.

Findings

Research Findings

Thus each data gathering process contains a corresponding section on the findings. There are three sections under findings – (Part I) Literature Review, (Part II) One-to-One Interviews, and (Part III) Focus Groups.

The findings are categorized under four themes:

1. Shame and Stigma
2. Lack of Appropriate Services
3. Awareness and Education
4. Collaboration and partnership

Recommendations

Similarly, each data gathering process contains a section on recommendations. There are three sections under recommendations – (Part I) Literature Review, (Part II) One to One Interviews, and (Part III) Focus Groups.

The recommendations are categorized under four themes:

5. Destigmatization of the issue
6. Culturally-appropriate Services
7. Prevention Strategies
8. Partnerships

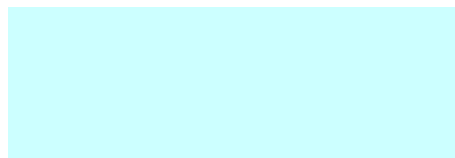
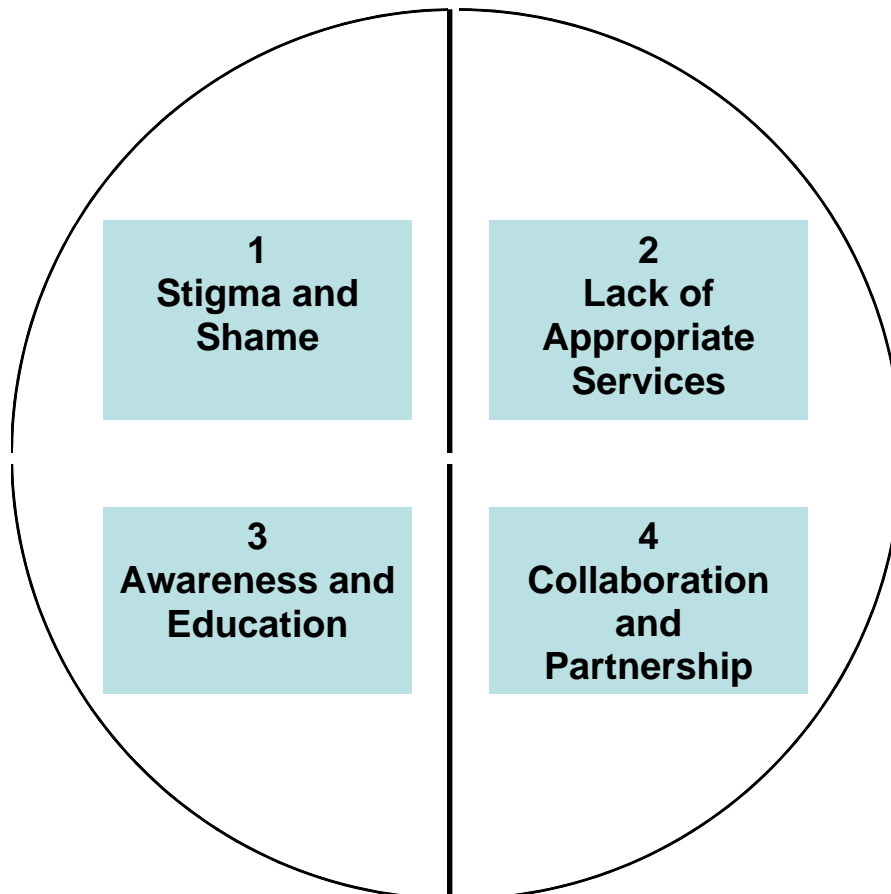
CHAPTER 3

SUMMARY OF FINDINGS

The findings presented in this section represent the views and opinions of men, women, youth, and individuals representing the gay community within the South Asian community. These men, women, youth and individuals from the gay community participated with great enthusiasm in this study. Almost all the individuals that we met during the course of the study informed us about the relevance and timely aspect of this study. The research team has tried to capture the experience, wisdom and knowledge of everyone that we talked to on the subject of homosexuality.

All findings can be compressed into four distinct areas:

Chart One



SUMMARY FINDINGS

<p>Shame and Stigma</p> <ol style="list-style-type: none"> 1. Review of literature identified shame and stigma associated with homosexuality and shared strategies through projects 2. Review of Research Reports indicated the following: <ol style="list-style-type: none"> a. Religion as barrier b. Fear of recognition c. Issues concerning identity 	<p>Lack of Appropriate Services</p> <ol style="list-style-type: none"> 1. Review of Research Reports indicated the following: <ol style="list-style-type: none"> a. need for developing culturally appropriate services 2. One-to-One findings identified the need for providing support to individuals and families and working to provide culturally appropriate services to the community.
<p>Awareness and Education</p> <ol style="list-style-type: none"> 1. Review of literature indicated references: <ul style="list-style-type: none"> • to homosexuality in ancient India • activities engaged in India at the present time • theoretical underpinnings to understanding the concept of homosexuality 2. Review of Research Reports indicated the following: <ul style="list-style-type: none"> • In South Asian culture, family is very important • there is a low priority of sexual health • there is sexual freedom in North America 3. One-to-One findings identified the need for raising awareness and educating the community, mainstream agencies and South Asian agencies, and for developing appropriate resources. 4. Focus Group findings identified the need to acquire skills to handle disclosure of homosexual behaviour by their loved ones. 	<p>Collaboration and Partnership</p> <ol style="list-style-type: none"> 1. Review of Research Reports indicated the need for partnerships between community and agencies. 2. Focus Group findings identified the need to provide culturally appropriate services by collaborating and partnering with mainstream agencies.

SUMMARY FINDINGS – REVIEW OF LITERATURE

Homosexuality in Ancient India - Findings

An overview of temple imagery, sacred narratives and religious scriptures does suggest that homosexual activities in form existed in ancient India. All this suggests that in ancient India, men who were unlike men in their unwillingness or incapacity to have intercourse with women, were deprived of their manhood and expected to live as women in the fringes of mainstream society. Perhaps this explains the existence of the hijra community in India. Hijra are organized communities comprised of males who express themselves socially as women. They are a mix of transsexuals, men who believed themselves to be women, transvestites, (men who dress in women clothes), homosexuals, (men who are attracted towards males), hermaphrodites (men whose genitals are poorly formed due to genetic defects or hormonal imbalance) and eunuchs, (castrated men).

Current Issues in South Asia - Same-Sex and South Asia Findings

The paper presents the picture of acceptance of homosexuality in different parts of the world. While some progress is being made (first gay pride in Calcutta on June 29, and a beauty pageant for homosexuals, lesbians and bisexuals organized in Kathmandu's National Theatre in May), still the homosexual community faces discrimination and repression through the laws which can be classed as anti-gay.

The context of social construction of masculinities in South Asia and the Kothi framework - Findings

The article talks about the importance to locate the issues of sexual health of males who have sex with males in a theoretical framework around the construction of masculinities in South Asia. It is important to understand that Eurocentric perceptions and values give a definition to heterosexual, homosexual and bisexual identities quite differently from how these phenomena are understood in South Asia.

Is it time for a new attitude toward homosexuality in South Asia - Findings

The article explores homosexuality in South Asia. Homosexuality is still illegal in India, Pakistan, Bangladesh and Sri Lanka. Films such as *Fire*, which pushed the barriers of social acceptability, have faced strong criticism in the region. Homosexuality in urban India is an open secret. Though it is illegal, no one has been punished for it. There is a large gay and lesbian population all over South Asia.

HIV, Sexuality and Identity In India - Findings

The article talks about how HIV/AIDS was combated in India. The initial help was provided to at-risk groups (gay men) through establishing support groups and help lines. Through education and a sense of community, the stigma and shame associated with their alternative lifestyles was erased. The exclusive support groups were considered effective in bringing pride and self-worth to marginalized groups.

Identity categories versus Identity continuum - Findings

The article talks about refraining from using Western categories of sexual behavior and orientation and building the project strategy on the firm basis of indigenous culture. The article explains how being gay has little meaning for the local MSM population in Calcutta. The terms used are *Masti-ka-larka* or *Line-ka-Larka*; both words are used to denote openness to male sexual behavior rather than to any sexual identity.

Homosexuality and South Asian Diaspora

Creating a better understanding of diversity within Asians communities of Montreal.

Findings

The paper presents the understanding of diversity in sexual orientation in Asian communities and presents the outline of a project to develop a better understanding among Asian families. Many people of Asian communities in Montréal still perceive minority sexual orientation as a taboo subject and even a disgrace. Many people do not have adequate or accurate information, and so

have responses of fear and rejection. Because of this, gay, lesbian, bisexual or transgendered Asian youth and adults of Montreal often experience great difficulty and pain, including fear and rejection from those people most important to them, their own family members. Culturally-sensitive posters were developed in order to enhance awareness.

Managing Dissident Sexual Identities: Narratives of British Non-Heterosexual Muslims

Findings

This paper looks at the strategies the respondents (Muslim men and women who are homosexuals) have developed to negotiate and manage dissident sexual identities within a socio-cultural context that is disapproving of homosexuality.

The Formation of Homosexual Identities - Findings

This paper summarizes Troiden's model of the four stages of the formation of homosexual identity. Adapting to a gay, lesbian or bisexual identity is often a prolonged process. Adolescents and young adults may struggle with conflicts around sexual orientation long before they are able to label themselves as gay or lesbian adults.

Human Rights and Sexual Minorities - Findings

The paper presents the human rights perspective on sexual minorities around the world including India. In fact, most human rights organizations in India such as People's Union of Civil Liberties (PUCL) have not begun to address the question of the rights of gays, lesbians, bisexuals, transgender, hijras and others who are oppressed due to their sexuality.

Sexuality and law - Findings

The paper presents an overview of the law with respect to sexuality. One of the main demands of the campaign for the rights of sexual minorities in India has been the repeal of section 377 of the Indian Penal Code (IPC), which criminalizes sodomy.

Identity developments of Homosexual Youth and Parental and Familial Influences on the Coming out Process

Findings

The paper examines the literature on the identity development of homosexual youths, and parental and familial influences on the 'coming out' process. Research has indicated that homosexual adolescents who have close relationship with their parents and families tend to come out at a younger age and to experience more positive identities than those who have a poor relationship.

Identity formation in Homosexuals - Findings

1. The paper presents five stages of identity formation in homosexuals.

SUMMARY FINDINGS - RELIGIONS

Sikhism:

The article argues that the Sikh religion is a tolerant religion and present a religious quote to justify the acceptance of homosexuality.

Hinduism

The paper presents a view that Hindu sacred texts are silent on the status and appropriateness of homosexuality.

Islam

These two papers do not support the views on homosexuality and consider it a “sinful and perverted deviation”.

Christianity

The first paper argues that the words translated have been misinterpreted therefore homosexual behaviour has not been condemned.

The second paper argues that there is a clear passage in the Bible which prohibits homosexual behaviour.

Buddhism

The article outlines that there is no clear consensus on homosexuality in Buddhism. The article states that “from the Theravada Buddhist standpoint, all relationships: gay, lesbian or straight are often considered personal matters of mutual consent. If a relationship promotes the happiness and well being of both parties, then it is positive and acceptable”.

SUMMARY FINDINGS – RESEARCH REPORTS

Statistics

The research has demonstrated that homosexual activity among men is between 1.1% to 4.4% of the male population between the ages of 16 and over.

Partnership

Partnership projects need to be developed between mainstream and ethno-specific agencies in order to address the complex issues of homosexuality in the South Asian community.

Religion

Religion may be a barrier to HIV prevention in many South Asian communities:

- Homosexuality is expressly forbidden by most religious scholars.
- HIV/AIDS is regarded as a punishment from God, for people with “loose morals”
- The close association between HIV and taboo issues linked to sex and sexuality adds to the difficulty of addressing HIV in Muslim communities. HIV needs to be normalized to reduce the stigma surrounding it
- Resistance to discussion around HIV and sexual health within Muslim communities is justified by the belief that the Qu’ran teaches all that is necessary on these subjects. This lack of discussion denies Muslim PLHA’s social support
- Many Muslims see Islam and homosexuality as incompatible. Reconciling their faith and sexuality is a difficult issue for many LGBT Muslims

Culture

- In South Asian cultures, the family unit is considered paramount and is often an important source of support
- Prescribed gender roles view men as providers, the head of the family household
- Formal social services are not traditionally part of South Asian culture
- South Asian men are expected to marry
- Concern about how an individual is perceived and how this reflects upon one's family is very important in South Asian communities

Low Priority of Sexual Health

- Basic settlement needs such as finding employment, adequate housing and learning English preoccupy new immigrant South Asian MSM

Sexual Freedom

- North American culture offers more opportunity for sexual freedom for new immigrant South Asian MSM:
- In countries of origin, sex is not openly discussed and sexual abstinence before marriage is a normative expectation; dating is often prohibited

Fear of Recognition

- Many South Asian MSM fear being recognized by other community members in venues where they seek sex or gay bars/clubs
- South Asian MSM may fear accessing South Asian services such as ASAP, preferring the anonymity of mainstream service organizations

Issues concerning Identity

- The concept of a community of MSM does not exist among South Asians
- There is no concept of sexual identity among many South Asian MSM
- The social invisibility of alternative sexualities perpetuates the dominance of heterosexuality
- Individuals who define themselves by their sexuality or gender may be shunned

- Some South Asian MSM who do not identify themselves as gay or bisexual and who still believe HIV/AIDS is a gay disease, may not seek HIV testing services
- The passive sexual role is considered by some to be degrading, akin to being “womanly”, whereas the active sexual role is considered “manly”.

Use of Alliance for South Asian Aids Prevention (ASAP) Services

- Many South Asian MSM use ASAP services because they can communicate in their own languages while others perceive ASAP as an opportunity to socialize with other MSM
- A deficit exists in suitable and accessible venues in which South Asian MSM can socialize
- Mainstream South Asian communities hold the view that ASAP’s services are directed more towards South Asian MSM/gay men, making it difficult to reach the broader South Asian communities
- ASAP services for South Asian populations are limited because of funding
- South Asian communities support of ASAP also is limited since HIV/AIDS often is not considered a priority

SUMMARY FINDINGS – ONE TO ONE INTERVIEW

The following are the summary of findings from one-to-one interviews.

1. Individuals stated that support was the biggest need.
2. For the family, support was identified as the biggest need.
3. Educating the community, the need for a safe space and the need to go partying and finding sensitive companions.
4. The participants felt that having friends was very important. Some had bad experiences with friends but all had at least one good friend.
5. The majority of the participants felt that their family would not be supportive.
6. The majority of the participants agreed that the South Asian community is homophobic, hostile, dominated by “loudmouths”, and that the community believes homosexuality is a sin giving the community a bad name.
7. The participants were able to point out the derogatory names gays and lesbians were called which are as follows: Janana, Hijra, Gaandu, Galat Kaam Karne Wali Ladki, and Line Ka Ladka.
8. The participants recognized the importance of education and related awareness. This would be achieved through the usage of electronic (TV, Radio, Websites,) and print media (articles, flyers). In addition, arts and drama could also be explored as a medium to impart awareness. The need to explore the possibility of finding a celebrity who would champion the cause of gays and lesbians was expressed. Besides targeting the community, it was felt that both South Asian service providers and mainstream service providers be educated on the complexities surrounding gay and lesbian issues. A documentary about South Asian and alternative

lifestyle should be made. Finally ways to engage the religious community in destigmatizing the gay and lesbian issues should be explored.

9. The participants expressed that, compared to Toronto, Peel is a very conservative municipality. The participants also felt that there were no culturally appropriate services for South Asians available in Peel. The perception of the participants was that South Asian service providers were not sensitive to the needs of South Asian gays and lesbians.
10. The participants felt that “coming out of closet” was a mainstream term. For some, it had no relevance as it was based on “individualistic” aspirations and did not take into account the needs, complexities and challenges of the family. Family support and resiliency is needed for an individual to “come out of the closet”.
11. The participants felt that religious institutions would not be supportive of the issues of gays and lesbians.
12. The participants felt that the community’s perception that HIV/AIDS is directly linked to homosexual behaviour. In addition, they also felt that homosexual behaviour puts them at greater risk for contracting HIV/AIDS. A stigma is associated with both HIV/AIDS and homosexual behaviour within the Punjabi community. The community also assumes that, if one is gay, then, necessarily one has HIV/AIDS. Suggestions were made that safe sex should be practiced whether one is straight or gay. Finally, they felt that MSM (men having sex with men) are more at risk for contracting HIV/AIDS.

13. The issues pertaining to gays and lesbians demand a greater attention from the victims and perhaps that is the reason why many gays and lesbians devote their entire life to the cause.

14. Many individuals fluctuate between homosexual and heterosexual behaviours and many are bi-sexuals.

15. The majority of the participants were willing to assist in the project.

SUMMARY FINDINGS - FOCUS GROUPS

1. The participants had negative opinions and connotations about the word homosexuality.
2. The majority of the participants in the women's group had no clear knowledge about how one becomes homosexual. The majority in the men's group concurred that one is born a homosexual.
3. The women's focus group estimated the percentage of homosexual population in the white community to be at 1 in 100 and 1 in 1000 for the Punjabi community while men had estimated at 1 in 100 for the Punjabi community.
4. The participants in both groups had heard about gay relationships but had never really paid any attention. The participants in the women's group had no knowledge of anyone committing suicide as a result of being gay. The men's focus group did know of one young man who committed suicide as a result of being gay.
5. The participants in both groups felt that they had no skills to deal with someone's disclosure about being gay.
6. The participants in both groups felt that the person would not be welcomed at all in the family once disclosure has been made.
7. The participants in both groups felt that the family will experience extreme stress over the issue.
8. The participants in women's groups felt that "coming out" meant disclosing to others about their sexual identity. In men's groups they had no idea what "coming out" meant.
9. The participants in both groups felt that the traditional definition of family is more acceptable to the majority of the participants than the modern one.
10. The participants in both groups were of the opinion that the Sikh religion would not support a gay lifestyle. The participants in both groups were of the opinion that Islam would not support a gay lifestyle. The participants were divided over Hinduism, in the women's group, while the men's group felt that Hinduism would not support a gay life style..
11. The participants in both groups felt that they would not be able to do much due to family obligations.
12. Both groups felt that the community would benefit from education about the homosexual issue by using, existing groups to talk about this issue and by

using radio, television, websites for youth, and workshops in order to raise awareness.

13. The group identified the need to create appropriate services by the Punjabi agencies by working together with the “white” (mainstream) agencies.

CHAPTER 4

SUMMARY OF RECOMMENDATIONS

The research study brought into light the fact that homosexuality is prevalent in the Punjabi Community. Gay, lesbian, transsexual and transgender Punjabis are experiencing challenges both at home and outside. There is no culturally appropriate service in the Region of Peel and these individuals are unable to seek professional help for their challenges due to a variety of reasons. The following recommendations are suggested which would address the needs of the Punjabi gay community.

Recommendations one:

Develop comprehensive programs aiming at the destigmatization of homosexuality through a variety of means including:

- More research on specific issues related to homosexuality
- Establishing linkages with the struggles back home
- Developing South Asian centric perceptions and values related to homosexuality issues
- Fostering linkages with faith leaders
- Developing culturally appropriate resources

Recommendation two:

In order to deal with the complexities of homosexuality issues, PCHC should develop culturally appropriate:

- Support groups for individuals and families

- Drop-in programs for individuals
- A therapeutic group program for individuals and family members

Recommendation three:

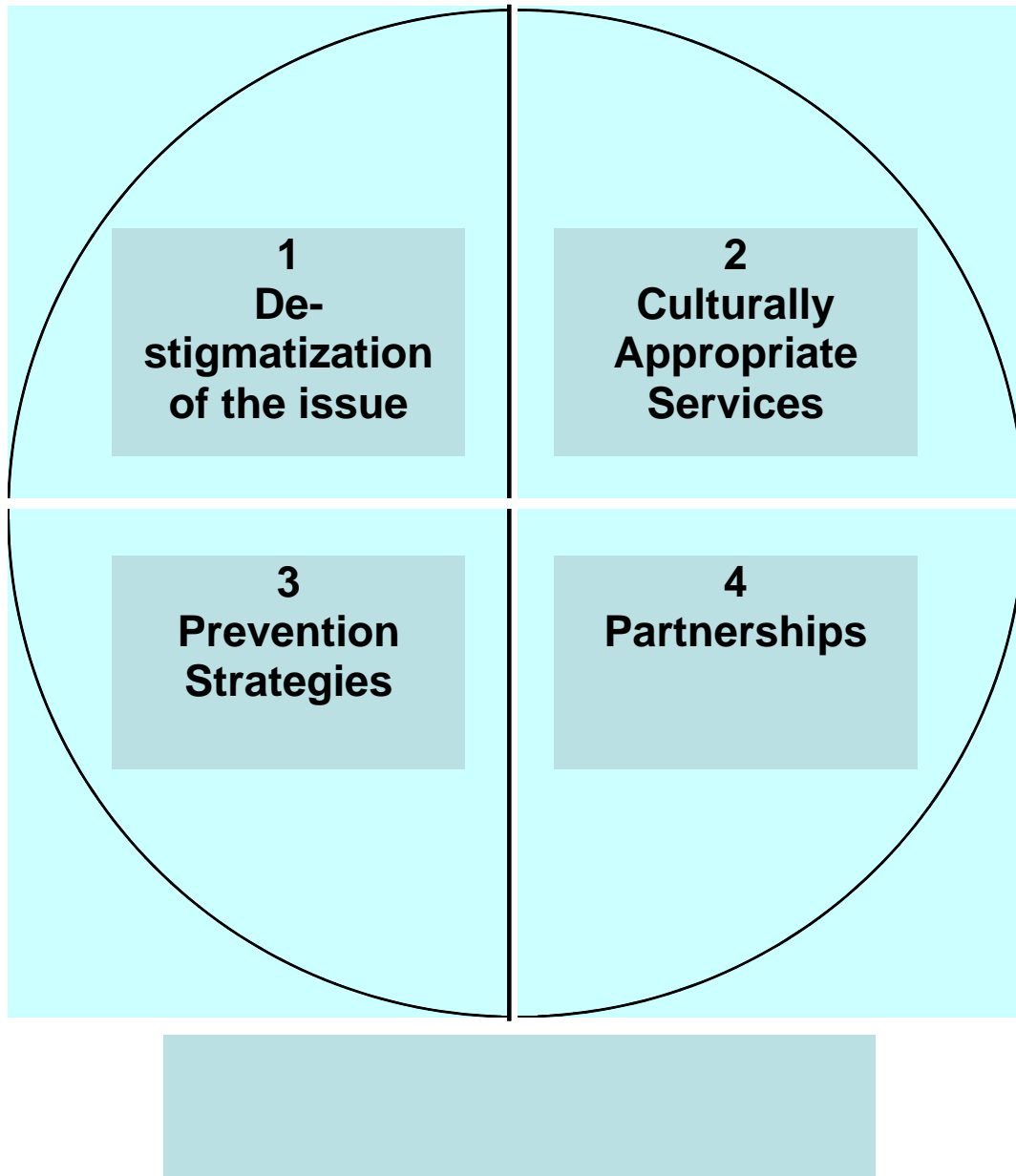
In order to educate the Punjabi community, the preventive programs should be comprised of:

- awareness campaigns,
- educational work shops,
- use of electronic mass media (internet, radio, television)
- plays and dramas,
- use of poets, writers and other artists to develop “literature that encompasses minority and human rights issues”
- resources (videos, handbooks, brochures)

Recommendation four:

Develop partnerships with mainstream service and other South Asian service providers in order to provide culturally appropriate services to the South Asian community.

Chart Two



SUMMARY RECOMMENDATION – REVIEW OF LITERATURE

1. Explore more about the Indian sub-continent's past history and alternative lifestyles.
2. Establish links with the struggles of homosexuals happening in the Indian sub-continent.
3. Help make homosexuality legal in the Indian sub-continent.
4. Understand that Eurocentric perceptions and values give a definition to heterosexual, homosexual and bisexual identities which are quite different from how these phenomena are understood in South Asia.
5. Target high-risk groups such as MSM that have been successful in India.
6. Refrain from using Western categories of sexual behavior and orientation definitions and use indigenous cultures definitions. Example, the term used is Masti-ka-larka or Line-ka-Larka and both the words are used to denote an openness towards male-to-male sexual behavior, rather than any sexual identity (within the MSM community in India).
7. Develop projects which enhance the relationship building between family members and their gay, lesbian, bisexual or transgender Asian youth and adults. The project should take into account the “coming out” context and challenges for the South Asian community.
8. Develop skills-related projects in order to develop skills to negotiate and manage dissident sexual identities in diverse communities. The stages on the formation of the homosexual identity could also be included.

SUMMARY RECOMMENDATION – RELIGION

1. There is no conclusive evidence that homosexual behaviour is recognized and accepted in any of the major religions. Each article has its own interpretations on homosexuality.

SUMMARY RECOMMENDATIONS- RESEARCH REPORTS

1. Develop culturally-appropriate education for the South Asian community.
2. Seek more funding in order to develop culturally-appropriate services to the South Asian services.
3. Make existing HIV educational materials relevant and available to the South Asian languages.
4. Address self-esteem issues in relation to homophobia, racism and classism.
5. Use community development principles to initiate projects which will encompass awareness, outreach, education, collaboration with faith leaders, and anonymous HIV/AIDS informational telephone hotlines.
6. Target South Asian women when doing outreach to South Asian MSM. This way, wives/girlfriends of South Asian MSM will be targeted as a group.
7. Raise awareness among policy makers, mainstream agencies and funders around the issues of homosexuality in the South Asian community.
8. Use “Muslim champions” (leaders from within the Muslim community) to promote sexual health messages, including imams, mosques’ trustees and funders, women, teachers and peer educators.
9. Focus on HIV as a public health issue, as distinct from ethical or theological discussions on homosexuality, in health promotion messages for Muslim communities.
10. Strike a pragmatic balance between cultural sensitivity and the imperatives imposed by the HIV epidemic in work with Muslim communities.
11. Develop partnership projects between mainstream agencies and ethno-specific agencies serving South Asian community in the areas of homosexuality.
12. Develop support groups for individuals and families.
13. Educate the community about the issues surrounding gays and lesbians including addressing “homophobia”.
14. Develop community development projects which can educate the family about issues pertaining to gays and lesbians.

15. The electronic and print media to be used as a medium to educate the community around the issues of homosexuality.
16. The “Arts” (drama and poetry) could be used as a medium to educate the community about homosexuality.
17. Educate the community by making a documentary of South Asians and alternative lifestyle.
18. Educate mainstream service providers and provide sensitivity training.
19. Educate South Asian service providers and provide sensitivity training.
20. Find ways to engage the religious community in opening a dialogue on homosexuality.
21. Develop culturally appropriate services for the South Asian community in the Region of Peel.
22. Put in place a variety of support systems for South Asians who want to “come out of closet”. A project could be developed to create those systems.
23. Educate the community about HIV/AIDS and homosexuality and the link between them.

SUMMARY RECOMMENDATIONS - ONE TO ONE INTERVIEW

1. Develop support groups for individuals and families
2. Educate the community about the issues surrounding gays and lesbians including addressing “homophobia”
3. Develop community development projects which can educate the family about issues pertaining to gays and lesbians
4. Use the electronic and print media as a medium to educate the community around the issues of homosexuality
5. Use the arts (drama and poetry) as a medium to educate the community about homosexuality
6. Educate the community by making a documentary of South Asians and alternative lifestyles.
7. Educate mainstream service providers and provide sensitivity training.
8. Educate South Asian service providers and provide sensitivity training.
9. Find ways to engage the religious community in opening a dialogue on homosexuality.
10. Develop culturally-appropriate services for the South Asian community in the Region of Peel.
11. Put in place a variety of support systems for South Asians who want to “come out of closet”. A project could be developed to create those systems.
12. Educate the community about HIV/AIDS and homosexuality and the link between them.

SUMMARY RECOMMENDATIONS – FOCUS GROUP

1. Develop culturally-appropriate projects to raise awareness in the South Asian community about the complexities of homosexuality.
2. Educate the South Asian community about current factual information on homosexuality.
3. Prevent suicides amongst South Asian youth who are gay.
4. Develop skills-related training for families in order to deal with disclosures about being homosexuals or “coming out”.
5. Develop projects in order for families to remain united, even when a family member discloses about being gay.
6. Educate the community about expanding the definition of the family.
7. Start a dialogue on homosexuality with faith leaders of all major religions.
8. Start an awareness campaign to educate the community around the issues of homosexuality via: radio, television, websites for youth, and develop skills in educational workshops.
9. Develop culturally-appropriate services for the community by collaborating with mainstream agencies.

CHAPTER 5

REVIEW OF LITERATURE

Homosexuality in Ancient India

The paper presents the picture of homosexuality in ancient India. An overview of temple imagery, sacred narratives and religious scriptures does suggest that homosexual activities in form existed in ancient India. The constructions in Hindu temples, walls and gateways show a range of sculptures. In them there were also erotic sculptures depicting elephants copulating with tigers, monkeys molesting women, while men mate with asses. Once in a while hidden in niches of the khajuraho, one finds images of either women erotically embracing other women or men displaying their genitals to each other, the former being more common. There have been many explanations offered for these images ranging from the apologetic to the ridiculous. These images show the idea of 'same sex' and what is termed as 'unnatural intercourse' did exist in India. In Indian epics and chronicles, there are occasional references to 'same sex' intercourse. For example, in the Valmiki Ramayana, Hanuman is said to have seen rakshasa women kissing and embracing those women who have been kissed and embraced by Ravana. More common are the stories of women turning into men and man turning into women. In the Mahabharata, Drupada raises his daughter, Shikhandini, as a man and even provides him with a wife. When the wife discovers the truth on the wedding night, her father threatens to destroy the Drupada kingdom. The timely intervention of Yaksha saves the day as he lets Shikhandini use his man hood for a night and perform his husbandly duties. In the Skanda purana, two Brahmins, desperate for money, disguise themselves as a newly married couple and try to dupe a pious queen in the hope of securing rich gifts. The god turns the Brahmins dressed as women into real women and two Brahmins end up marrying each other. According to folk narratives from Koovagam in Tamilnadu, the Pandavasa were told to sacrifice Arjuna's son, Aravan, if they wished to win a war at kurushetra. Aravan refused to die as a virgin. As no woman was willing to marry a man doomed to die in a

day, Krishna turned into a woman, married Aravan, and spent the night with him. One can interpret these tales as the repressed homosexual fantasies of a culture. Mohini, the female incarnation of Lord Vishnu became a woman to trick demons and tempt sages. In the Brahmavaivata Purna, Mohini tells brahma, “Any man who refuses to satisfy a willing women in her fertile period is a eunuch”. This idea is explicit in the Mahabharata when Arjuna is deprived of his manhood after he spurns the sexual attention of the nymph, Urvashi. Consequently, the mighty archer is forced to live as a eunuch dance teacher called Brihanalla in the court of King Virata for the year. This suggests that in ancient India, men who were unlike men, unwilling or incapable of having intercourse with women, were deprived of their manhood and expected to live as women on the fringes of mainstream society. Perhaps, this explains the existence of the hijra community in India. Hijra are organized communities comprised of males who express themselves socially as women. They are a mix of transsexuals, men who believe themselves to be women; transvestites, men who dress in women’s clothes; homosexuals, men who are attracted towards other males; hermaphrodites, men whose genitals are poorly formed due to genetic defects or hormonal imbalances, and eunuchs, castrated men. In one of the many folk stories associated with Bachcharaji, the goddess was once a princess who castrated her husband because he preferred going to the forest and behaving as a woman, instead of coming to her bridal bed. The manu smirit scorns female homosexuals. It stated that, if a girl does it to another girl, she should be fined two hundred (pennies), be made to pay double the bride price and receive ten whips. But, if mature women do it to a girl, her head should be shaved off or her two fingers should be cut.

www.gaybombay.cc/reading/art0001.html

Findings

An overview of temple imagery, sacred narratives and religious scriptures suggest that homosexual activities in some form existed in ancient India. All this suggests that in ancient India, men who were unlike men, unwilling or incapable of having intercourse with women, were deprived of their manhood and expected to live as women in the fringes of mainstream society. Perhaps this explains the existence of the hijra community in India. Hijra are organized

communities comprised of males who express themselves socially as women. They are a mix of transsexuals, men who believe themselves to be women; transvestites, men who dress in women's clothes; homosexuals, men who are attracted towards males; hermaphrodites, men whose genitals are poorly formed due to genetic defects or hormonal imbalances and eunuchs, castrated men.

Current Issues in South Asia

Same-Sex and South Asia

The paper presents the picture of acceptance of homosexuality in different parts of the world. June was the watershed month for homosexual rights in the West. On June 10, 2005, a court in the province of Ontario, Canada, declared same sex marriages as legal. Since the federal government has not appealed the decision, Canada has become the third country in the world, after Belgium and the Netherlands, to legalize same sex marriages, and hundreds of same sex couples have already taken advantage of the ruling. In Nepal, in May, the Blue Diamond (NGO) working to promote homosexual rights, held a beauty pageant for homosexuals, lesbians and bisexuals in Kathmandu's National Theatre. The homosexuals' community in South Asia, particularly in India, has been making news as well. On the 29th of June, the city of Calcutta hosted the first ever gay pride march in the subcontinent. The Indian Council of Medical Research is debating the adoption of guidelines that would allow lesbian and single mothers to conceive babies.

Even in big cities, where conditions of equality have improved over the last couple of decades, and where there is now some limited semblance of social life for members of the community, especially for those who are wealthy and have access to clubs and the internet, there are significant hurdles in the path for equality. Homosexuals are still subject to many forms of discrimination, in particular, housing and employment. What makes all these forms of social discrimination particularly odious is that gay men and lesbians lack legal protection in Asian countries. For example, after its independence, India adopted the British penal code dating to the 19th century. Section 377 of the code relates to homosexuality: "whoever voluntarily has carnal intercourse with the order of any man, woman or animal, shall be punished with the imprisonment for life, or with imprisonment which may extend to ten years and shall also be liable to a fine." The situation in Pakistan is still worse, where there is a religious law calling for up to 100 lashes or death by stoning. In Sri Lanka, sex between men is punishable by 12 years in jail, while the existence of lesbianism is not even acknowledged in the penal code. Bangladesh, Bhutan

and Nepal all have similarly repressive laws on homosexuality. Thus, the laws, which should be meant to protect people rather than to discriminate against them, especially those regarding sexuality, must change. The scrapping of South Asia's anti – homosexuality law is important. Often the law must change before social mores do. Legal protection is probably the only way that South Asia's homosexual community can be guaranteed social rights, protection from exploitation and, importantly, health rights.

www.himalmag.com/2003/july/commentary_sa_2.htm

Findings

The paper presents the picture of the acceptance of homosexuality in different parts of the world. While some progress is being made, (first gay pride in Calcutta on June 29 and a beauty pageant for homosexuals, lesbians and bisexuals was organized in Kathmandu's National Theatre in May), still the homosexual community faces discrimination and repression through the laws which reflect the attitudes of the anti-gay community.

The context of social construction of masculinities in South Asia and the Kothi framework

This paper arises from studies Aditya Bondyopadhyay has conducted in Bangladesh and India, and the work of NFI. It is important to locate the issues of the sexual health of males who have sex with males in a theoretical framework around the construction of masculinities in South Asia. Sexual Identities take shape within psychosocial and historical processes which, in turn, are contextualized by culture and language. Therefore, one finds that different cultures often translate similar words and phenomena into different meanings, with inherent subtleties typical of that culture. Therefore, at the very beginning, it is important to understand that Eurocentric perceptions and values give a definition to heterosexual, homosexual and bisexual identities which is different from how these phenomena are understood in South Asia. In South Asian cultures, the behavior and experience of the male is affected by socio-cultural realities, such as the invisibility of sexual behavior, segregation of the genders, acceptability of male homo-sociality and homo affectionalism, male dominance over public space and discourse, a culture of shame where family and community respect and honour holds sway, compulsory and arranged marriage, pressure of reproduction, understandings of sexuality in only a reproductive sense, joint families and the negation of the self before the community and the family. Male behavior is further defined by gender roles attributed to males and females within the society, especially when important defining events in life such as the assumption of adulthood, are defined by such gender roles.

Naz Foundation Briefing Paper 8.

Findings

The article talks about the importance of locating the issues of sexual health of males who have sex with males in a theoretical framework around the construction of masculinities in South Asia. It is important to understand that Eurocentric perceptions and values give a definition of heterosexual, homosexual and bisexual identities which are quite different from how these phenomena are understood in South Asia.

Is it time for a new attitude toward homosexuality in South Asia

The article explores homosexuality in South Asia. Homosexuality is still illegal in India, Pakistan, Bangladesh and Srilanka. Films such as Fire, which pushed the barriers of social acceptability have faced strong criticism in the region. Homosexuality in urban India is an open secret. Though it is illegal, no one has been punished for it. There is a large gay and lesbian population all over South Asia.

http://news.bbc.co.uk/1/hi/talking_points/debates/south_asian/874271.stm

HIV, Sexuality and Identity In India

The paper outlines and presents the pictures of AIDS/HIV with respect to sexual minorities in India. It was in the mid 90s that NGO's like the Delhi based Naz Foundation, began to focus on HIV transmission in the men having sex with men (MSM) population, with the initiative of self identifying gay men. Gay men's assumed promiscuity and penchant for anal penetrative sex earned HIV/AIDS, the unfortunate epithet of the 'gay disease' in the West. And so, too, in India, support groups and help lines were a first step in bringing these "at risk" groups out into the open. Through education and a sense of community, the stigma and shame associated with their alternative lifestyles had to be erased. The exclusive support groups are considered effective in bringing pride and self worth to marginalized groups. In a culture that shuns expressions of sexual plurality, boys who dress like girls, men who love men, and others like them on the fringes, are hungry for a space to call their own. Khan, in 1995, wrote that sexual identities arise within the context of the psychosocial and historical dynamics that are mediated by culture and language. Differing cultures have different meanings and the social invisibility of sexual behaviors, gender segregation, Indian male homo affectionalism, male ownership of public space, shame cultures, a personal sense of self subsumed into a family sense of self, and male and female social roles, all have a central impact upon the construction of sexual behaviors that are framed by differing contextual identities.

www.infochangeindia.org/analysis06.jsp

Findings

The article talks about how HIV/AIDS was combated in India. The initial help was provided to at risk groups (gay men) through establishing support groups and help lines. Through education and a sense of community, the stigma and shame associated with their alternative lifestyles was erased. The exclusive support groups were considered effective in bringing pride and self worth to marginalized groups.

Identity categories versus Identity continuum

The articles outline the view regarding homosexuality in Calcutta. The word gay has little meaning, political or otherwise to most members of MSM networks in Calcutta and its suburbs. It is often used lightly to refer to males, who either have, or are open to having, sex with other males. In Bangla and in Hindi the terms used are line - er chhele or line ka larka. The word game is also used by some people instead of line. Both the words are used to denote openness to male-to-male sexual behavior rather than any sexual identity. This way of referring to each other reflects the widespread perception among MSM that male-to-male sexual activity does not constitute a widely acceptable criterion around which all MSM can define themselves as a community. For most MSM such a suggestion is incomprehensible and a community building on the basis of a not-so-serious "game" (often called "masti" in Hindi), is seen to be unnecessary and devoid of meaning. The words "game" or "line," therefore, suggest sexual activity and sexual pleasure and may be considered an indigenous way of viewing those males who are categorised as MSM. The socially constructed views of femininity and masculinity significantly influences risk behavior, health-seeking behavior, decision-making power, condom negotiation and access to health information and services. No prevention programme can be a success if such gender-related differences are not addressed. It is imperative that Western categories of sexual behavior and orientation not be used, but rather build the project strategy on the firm basis of indigenous culture.

Findings

The article talks about refraining from using Western categories of sexual behavior and orientation and building the project strategy on the firm basis of indigenous culture. The article explains how being gay has little meaning for the local MSM population in Calcutta. The term used is Masti-ka-larka or Line-ka-Larka and both words are used to denote openness to male-to-male sexual behavior rather to than any sexual identity.

Homosexuality and South Asian Diaspora

Creating a better understanding of diversity within Asians communities of Montreal.

The paper presents the understanding of diversity in sexual orientations in the Asian community and presents the outline of a project to develop better understanding among Asian families. Diversity in sexual orientation is a reality that can no longer be hidden. Minority sexual orientation-gay, lesbian, bisexual, or transgender-is now better understood and accepted in the wider society. The Quebec Charter of Human Rights and Freedoms, offers all citizens protection from discrimination on the bases of race, ethnicity or national origin. The same charter also offers all citizens protection from discrimination on the basis of sexual orientation. However, many people of Asian communities in Montréal still often perceive minority sexual orientation as a taboo subject and even a disgrace. Many people do not have adequate or accurate information, and so have practical reflexes of fear and rejection. Consequently, gay, lesbian, bisexual or transgender Asian youth and adults of Montreal often experience great difficulty and pain, including fear and rejection by those people most important to them, their own family members. The main goal of the project was to develop understanding among Asian families, of the diversity in sexual orientation or identity, including gay, lesbian, bisexual or transgender, within Asian communities of Montreal. To achieve the goal, a small series of effective, culturally-sensitive posters, in various languages showed members of various Asia communities interacting positively with a gay, lesbian or bisexual member of their family or friend. These educational posters will be displayed in various in various public places, such as in Chinatown, community centers, street and on mall notice boards.

www.geocities.com/glamtl/poster_application.htm

Findings

The paper presents the understanding of diversity in sexual orientation in the Asian community and presents the outline of a project to develop better understanding among Asian families. Many people of Asian communities in Montréal still perceive minority sexual orientation as a taboo subject and even a disgrace. Many people do not have adequate or accurate information, and so

have practical reflexes of fear and rejection. Because of that, gay, lesbian, bisexual or transgender Asian youth and adults of Montreal often experience great difficulty and pain, arising from the fear and rejection by those people most important to them, their own family members. Culturally-sensitive posters were developed in order to enhance awareness.

Managing Dissidents Sexual Identities: Narratives of British Non-Heterosexual Muslims

This paper aims to highlight two themes from a government-funded qualitative study of 20 female and 22 male, second-generation-British-non-heterosexual Muslims, primarily of South Asian origin. These themes focus on the strategies the respondents have developed to negotiate and manage dissident sexual identities within a socio-cultural context that is disapproving of homosexuality. On the individual/cognitive level, they acknowledge that Islamic written sources and culture indeed censure homosexuality. Reconciling their sexuality to religion is therefore an uphill task. Nevertheless, they rationalize this difficulty as a test of life. Most employ a context-specific strategy of compartmentalizing their sexuality and religion. There is, however, an increasing effort to reframe Islam within a sexuality-affirming paradigm, through the critique of culture/tradition, and the reinterpretation of written sources. On the interpersonal level, the respondents also encounters great difficulty in familial and kin relations. This difficulty is often compounded by two factors: i) the cultural pressure for marriage as a social and religious duty; ii) the pervasive social perception that homosexuality is a 'western disease' of the secular majority society. On the whole, the management of their identities is a reflective and multi-faceted process, drawing upon both the Western and the South Asian cultural base patterns. The paper concludes that the negotiation and management of sexual identities are situated within, and therefore mediated through, a significant ethnic/cultural and religious context. This highlights, among others, their social position as a sexual minority within an ethnic/cultural minority in British society.

Sources: www.un.es/ESA/Abstracts/Abst_m25.htm by Andrew Yip

Findings

This paper looks at the strategies the respondents (Muslim men and women who are homosexuals) have developed to negotiate and manage dissident sexual identities within a socio-cultural context that is disapproving of homosexuality.

The Formation of Homosexual Identities.

This paper summarizes Troiden's model on the formation of homosexual identity. Adapting to a gay, lesbian or bisexual identity is often a prolonged process. Adolescents and young adults may struggle with conflicts around sexual orientation long before they are able to label themselves as gay or lesbian or adults. Troiden offers one view of the development of gay or lesbian identity.

The first stage is **Sensitization** which occurs before puberty and involves often the feeling of being marginalized and made to feel different from peers.

The second stage is **Identity confusion** as one feels unstable or incongruent, a gay or lesbian person may feel compelled to enter the next stage. This stage occurs in adolescence as individuals begin to recognize feelings and behavior that could be labeled homosexual. The adolescent at this stage may experience conflicts between his or her former identity (either a false identity or one focused on positive, nonsexual attributes of the earlier period), and newly emerging sexual impulses which are known to be socially denigrated.

This is followed by a third stage called **Identity assumption** which occurs, on average, for males at ages 19-21 and for females at ages 21-23 years. It is related to a reduction in social isolation and an increase in contact with other lesbian and gay men. A primary task is to manage social stigma.

The final stage is **Commitment** which involves the integration of homosexuality to the extent it becomes a state or way of being, rather than a description of sexual behavior. Thus, it is consistently reflected in both love and life choices. This stage includes the accomplishment of a same-sex love commitment and is marked by the identification of oneself as gay, lesbian or bisexual to non-homosexual individuals.

R.R (1998). The formation of homosexual identities.
Journal of homosexuality, 17(1/2),43-73

Findings

This paper summarizes Troiden's model of four stages on the formation of homosexual identity. Adapting to a gay, lesbian or bisexual identity is often a prolonged process. Adolescents and young adults may struggle with conflicts around sexual orientation long before they are able to label themselves as gay or lesbian or adults.

Human Rights and Sexual Minorities

The paper presents the human rights perspective on sexual minorities. The founding document on which most human rights organizations base their advocacy is the Universal Declaration on Human Rights. From this initial document has emerged a whole series of human rights declarations, conventions and treaties pertaining to the rights of various marginalized groups and communities such as children, women, indigenous people, disabled people, prisoners, religious and ethnic minorities, refugees, etc. However, one significant absence in international human rights law has been an articulation of the specific interests of sexuality minorities. It is only in the final decade of the 20th century that the gay/lesbian/bisexual/transgender movement brought forward the rights of those discriminated against because of their sexuality.

In 1991, Amnesty International for the first time came out with a policy to support the rights of people imprisoned because of their sexual orientation or because of engaging in homosexual activity in private. In the mid 1990's the Human Rights Committee held that the anti-sodomy law of Tasmania violated the right to privacy and the right to non-discrimination guaranteed to all persons under the International Covenant on Civil and Political Rights. In Scandinavia, the provision of equal rights for sexuality minorities, including marriage rights, was an important breakthrough. The other major development has been the South African constitution, which for the first time expressly prohibited discrimination on grounds of sexual orientation.

While the scope of human rights has been extended to include hitherto marginalized communities at the global level, a similar movement is yet to take place in India. In fact, most human rights organizations in India such as People's Union of Civil Liberties-PUCL have not begun to address the question of the rights of gays, lesbians, bisexuals, transgender, hijras and others who are oppressed due to their sexuality. Sexuality is sometimes viewed, even in liberal and radical circles, as a frivolous, bourgeois issue. There has been sharp

increase in attacks on sexual minorities in Bangalore, including harassment and illegal detentions by the police of gay and bisexual men in public recreational areas. All sexuality minorities, i.e., gay, bisexuals, lesbians, transgender, transvestites, hijras and other homosexual men and women, suffer different degrees of social and political marginalization due their sexuality and or gender.

www.pucl.org/topic/gender/2003/sexual_minorities.polf

Findings

The paper presents the human rights perspective on sexual minorities around the world including India. In fact, most human rights organizations in India such as People's Union of Civil Liberties (PUCL) have not begun to address the question of rights of gays, lesbians, bisexuals, transgender, hijras and others who are oppressed due to their sexuality.

Sexuality and law

The paper presents an overview of the law with respect to sexuality. One of the main demands of the campaign for the rights of sexual minorities in India has been the repeal of section 377 of the Indian penal Code (IPC), which criminalizes sodomy.

In 1994, the AIDS Bhedbhav Virodhi Andolan (ABVA), a human rights activist group, filed a public interest petition in Delhi High court challenging the constitutional validity of section 377. The petition was filed in the wake of the report of a medical team that visited Tihar jail in Delhi and reported a high incidence of sodomy in the wards. However, the ABVA became defunct soon afterwards and the petition never came up for hearing.

It was only in 2001 that the legal process was revived, when the Naz Foundation, a non-governmental organization (NGO) working with human immunodeficiency virus/acquired immune deficiency syndrome(HIV/AIDs) related issues, approached the Delhi High Court with a request to reinterpret Section 377 as not criminalizing private consensual sex between adults. The petitioners have argued that Section 377 affects HIV/AIDS' prevention efforts, and, that criminalizing predominantly homosexual acts, in effect, provides moral and legal sanction for continued social discrimination against sexual minorities. The government stand on this issue is that that law does not run separately from society and, when Section 377 was brought under the statute, it "responded to the values and mores of the time in Indian society".

Women's rights' activists have also come out strongly in favour of repealing Section 377. Reacting to the government's stand, Brinda Karat of the All India Democratic Women's Association(AIDWA), in an open letter to the Union Law Minister, said: if we were to accept the government's standpoint, then many of the legislations concerning women's rights and even dalits rights would never have been enacted, since even today there are many sections of society who

consider wife beating or dowry practices to be consistent with tradition and cultures, just as they consider untouchability to be the natural order of society. Whatever the final decision of the court, it is clear that the battle for the repeal of Section 377 is only the first step of a larger struggle for the rights of sexual minorities in the country.

www.flonnet.com/fl2026/stories/20040102002209500.htm

Findings

The paper presents an overview of law with respect to sexuality. One of the main demands of the campaign for the rights of sexual minorities in India has been the repeal of section 377 of the Indian penal Code (IPC), which criminalizes sodomy.

IDENTITY ISSUES

Identity developments of homosexual youth and parental and familial influences on the coming out process

The paper examines the literature on identity development of homosexual youth, and parental and familial influences on the coming out process. Research has indicated that homosexual adolescents who have close relationship with their parents and families tend to come out at a younger age and to experience more positive identities than those who have poor relationships. Theories on the formation of a homosexual identity and the coming out process have outlined stages through which an individual passes. A person can be in more than one stage at a time as well as return to a previous stage. According to Zera (1992), Cass (1979) was the first to articulate a model of homosexual identity.

Cass proposed that individuals go through six non-age specific stages:

- 1) identity awareness- the individual is conscious of being different;
- 2) identity comparison- the individual believes that he or she may be homosexual, but tries to act heterosexual ;
- 3) identity tolerance- the individual realizes that he or she is homosexual;
- 4) identity acceptance- the individual begins to explore the gay community;
- 5) identity pride – the individual becomes active in the gay community;
- 6) synthesis- the individual fully accepts himself or herself and others.

Troiden (1989) has postulated that an individual goes through four stages in the formation of a homosexual identity: **sensitization, identity confusion, identity assumption, and commitment**. Unlike Cass, Troiden's stages are age specific. In the sensitization stage, beginning before puberty, an individual has homosexual feelings or experiences without understanding the implications for self identity. In the identity confusion stage, which usually occurs during adolescence, the individual realizes that he or she may be homosexual. In the identity assumption stage, the individual comes out as homosexual. In the commitment stage, an individual adopts a homosexual life style. Sullivan (1984) has proposed that, during preadolescence lesbians and gay males do indeed perceive themselves to be different from peers, although this difference is not

usually understood in terms of homosexuality. Such youth go through an initial stage of ignoring same-sex feelings, followed by a period of actively suppressing these feelings.

Coleman (1982) described five developmental stages: **precoming out, coming out, exploration, first relationships and identity integration**. In the precoming out stage, individuals know something is different about themselves, but are conscious of same-sex feelings. In the second stage, coming out, individuals have admitted to themselves that they have homosexual feelings, although they may not have clear understanding of their sexuality. Individuals then move into the exploration stage, where they experiment with their newly recognized sexual identity. There are three developmental tasks that individuals face in this third stage: they must develop interpersonal skills for meeting those of similar sexuality: they need to develop a sense of personal attractiveness; and they must learn same sex relationship skills. In the final stage, they bring together both their public self and private self to create an integrated homosexual identity.

Mc Donald (1982) found, using a sample of 199 gay adolescents and adults, that 15% had not achieved a sense of “positive” identity. McDonald asserted that some **homosexuals communicate their identity conflicts through somatic illnesses, suicide attempts, or various behavior problems**.

A healthy resolution is to accept the fact that one is different, and Roesler and Deisher (1971) concur. They found in a sample of 60 adolescents gay males, that the mean length of time between first homosexual experience and coming out was four years. This transitional period was characterized by emotional turmoil; 48% of the sample had visited a psychiatrist and 31% had attempted suicide. It is found that lesbians feel most comfortable with their sexual orientation when both parents accept their homosexuality. However, the mother

acceptance was found to be more important as compared with the father acceptance.

www.findarticles.com/cf_0/m2248/135_34/60302525/print.ihtml

Findings

The paper examines the literature on identity development of homosexual youth, and parental and familial influences on the coming out process. Research has indicated that homosexual adolescents who have a close relationship with their parents and families tend to come out at a younger age and to experience more positive identities than those who have a poor relationship.

Identity formation in Homosexuals

The paper presents stages of identity formation in homosexuals.

The first stage is identity confusion. This stage is marked by a conscious awareness that homosexuality has relevance to the individual act his or her behavior.

The second stage is identity comparison in which an individual admits the possibility of his or her homosexuality and can now examine the wider implications of that tentative commitment.

The third stage is characterized by an increased commitment to the possibility of being gay/lesbian, commonly expressed in statement, “I probably am a homosexual”,

The fourth stage is characterized by an increasing contact with homosexuals. The person accepts rather than tolerates a homosexual self-image or identity.

In the fifth stage, identity pride, individuals use strategies to revalue homosexual others more positively. In the sixth stage called identity synthesis, individuals see both the good and bad in other homosexuals. Homosexuality is integrated with other aspects of self.

www.pflagphoenix.org/education/identity_formation.html

Findings

The paper presents five stages of identity formation in homosexuals.

Men who have sex with men and gay men

This paper focuses on men who have sex with men and on gay men. The research conducted by the Naz foundation has been on the male to male sexual behavior as a significant factor in STD/HIV transmission in India. The men do not consider themselves as different. They know many men who enjoy sex with other men. They do not play husband and wife roles, thinking it rather silly, since both are men. About three quarters (72%) of truck drivers in North Pakistan who participated in a recent survey published in Aids Analysis Asia admitted that they had sex with female sex workers. There is sufficient anecdotal evidence to indicate that in the other countries of the sub continent, similar levels of male to male sexual behaviors exist as part of a broader sexual repertoire. It has been found that assumption is often made that same gender sexual behavior must mean the person is a homosexual, or gay while male to female sexual behavior must mean that person is heterosexual. In these discoveries, procreative “heterosexuality” is seen as normal, while other behavior are seen as perverse or foreign. However, these constructs seem to have little contemporary or historical validity in India. This reductionist ideology is a recent invention from the 19th century, which has consequently acted to reduce the rich diversity of alternate sexualities. Much same-sex sexual behaviours involve non-penetrative varieties, mutually indulged in a framework of friendship and sexual play, while in other situations, urgent sexual discharge and sexual “need” is the significant factor. However, the denial of variation in history in many Western and Indian discourses has given rise to a prevailing construction of sexuality, where a “procreative and penetrative” sexual ideology is the only sexuality that is seen as relevant. Significant amounts of male-to-male sexual behaviour occur within family environments and networks, between male relatives and friends.

Khan Shivananda (2001). Cultures, Sexualities and Identities: Men who have sex with men in India. *Journal of Homosexuality*, 40(3/4), 99-115.

www.virtualcity.com/youthsuicide/homosexuality-india.htm#khan

Findings:

The paper argues that recent theories have acted to reduce the rich diversity of alternate sexualities in India, (engaging in same sex behaviour doesn't mean that the person is homosexual).

The article goes on to say that “there is sufficient anecdotal evidence to indicate that in other countries of the sub continent, similar levels of male-to-male sexual behaviors exist as part of a broader sexual repertoire. It has been found that the assumption is often made that same-gender sexual behavior must mean the person is a homosexual, or gay, while male-to-female sexual behavior must mean that a person is heterosexual. In these discoveries, procreative “heterosexuality” is seen as normal, while other behavior are seen as perverse or foreign. However, these constructs seem to have little contemporary or historical validity in India.”

SUMMARY OF FINDINGS – REVIEW OF LITERATURE

Homosexuality in Ancient India

Findings

An overview of temple imagery, sacred narratives and religious scriptures does suggest that homosexual activities in some forms existed in ancient India. All this suggests that in ancient India, men who were unlike men, unwilling or incapable of having intercourse with women, were deprived of their manhood and expected to live as women on the fringes of mainstream society. Perhaps this explains the existence of the hijra community in India. Hijra are organized communities comprised of males who express themselves socially as women. They are a mix of transsexuals, men who believes themselves to be women; transvestites, men who dress in women clothes; homosexuals, men who are attracted towards males, hermaphrodites, men whose genitals are poorly formed due to genetic defects or hormonal imbalance and eunuchs, castrated men.

Current Issues in South Asia - Same-Sex and South Asia

Findings

The paper presents the picture of acceptance of the homosexuality in different parts of the world. While some progress is being made (first gay pride in Calcutta on June 29 and a beauty pageant for homosexuals, lesbians and bisexuals was organized in Kathmandu's National Theatre in May), still the homosexual community faces discrimination and repression through the laws reflect the attitude of the anti-gay community.

The context of social construction of masculinities in South Asia and the Kothi framework

Findings

The article talks about the importance of locating the issues of the sexual health of males who have sex with males in a theoretical framework around the construction of masculinities in South Asia. It is important to understand that Eurocentric perceptions and values give a definition of heterosexual,

homosexual and bisexual identities which is quite different from how these phenomena are understood in South Asia.

Is it time for a new attitude toward homosexuality in South Asia?

Findings

The article explores homosexuality in South Asia. Homosexuality is still illegal in India, Pakistan, Bangladesh and Srilanka. Films such as Fire, which pushed the barriers of social acceptability, have faced strong criticism in the region. Homosexuality in urban India is an open secret. Though it is illegal, no one has been punished for it. There is a large gay and lesbian population all over South Asia.

HIV, Sexuality and Identity in India

Findings

The article talks about how HIV/AIDS was combated in India. The initial help was provided to at-risk groups (gay men) through establishing support groups and help lines. Through education and a sense of community, the stigma and shame associated with their alternative lifestyles was erased. The exclusive support groups were considered effective in bringing pride and self-worth to marginalized groups.

Identity categories versus Identity continuum

Findings

The article talks about refraining from using Western categories of sexual behavior and orientation and building the project strategy on the firm basis of indigenous culture. The article explains how 'being gay' has little meaning for the local MSM population in Calcutta. The term used is "Masti-ka-larka" or "Line-ka-Larka" and both the words are used to denote openness to male-to-male sexual behavior rather than any sexual identity.

Homosexuality and South Asian Diaspora

Creating a better understanding of diversity within Asians communities of Montreal.

Findings

The paper presents the understanding of diversity in sexual orientation in the Asian community and presents the outline of a project to develop better understanding among the Asian families. Many people of Asian communities of Montréal still perceive minority sexual orientation as a taboo subject and even as a disgrace. Many people do not have adequate or accurate information, and so react with fear and rejection. Because of that, gay, lesbian, bisexual or transgender Asian youth and adults of Montreal often experience great difficulty and pain, from the fear and rejection by those people most important to them, their own family members. Culturally-sensitive posters were developed in order to enhance awareness.

Managing Dissidents Sexual Identities: Narratives of British Non-Heterosexual Muslims

Findings

This paper looks at the strategies that the respondents (Muslim men and women who are homosexuals) have developed to negotiate and manage dissident sexual identities within a socio-cultural context that is disapproving of homosexuality.

The Formation of Homosexual Identities

Findings

This paper summarizes Troiden's model of four stages on the formation of homosexual identity. Adapting to a gay, lesbian or bisexual identity is often a prolonged process. Adolescents and young adults may struggle with conflicts around sexual orientation long before they are able to label themselves as gay or lesbian or adults.

Human Rights and Sexual Minorities

Findings

The paper presents the human rights perspective on sexual minorities around the world including India. In fact, most human rights organizations in India such as People's Union of Civil Liberties (PUCL) have not begun to address the question of rights of gays, lesbians, bisexuals, transgender, hijras and other who are oppressed due to their sexuality.

Sexuality and law

Findings

The paper presents an overview of the law with respect to sexuality. One of the main demands of the campaign for the rights of sexual minorities in India has been the repeal of section 377 of the Indian penal Code (IPC), which criminalizes sodomy.

Identity Issues

Identity developments of Homosexual youth and parental and familial influences on the coming out process

Findings

The paper examines the literature on identity development of homosexual youth, and parental and familial influences on the coming out process. Research has indicated that homosexual adolescents who have close relationship with their parents and families tend to come out at a younger age and to experience more positive identities than those who have a poor relationship.

Identity formation in Homosexuals

Findings

- The paper presents five stages of identity formation in homosexuals.

SUMMARY RECOMMENDATION – REVIEW OF LITERATURE

1. Explore more about Indian sub-continent's past history about alternative lifestyles.
2. Establish links with the struggles of homosexuals happening in the Indian sub-continent.
3. Help make homosexuality legal in the Indian sub-continent.
4. Develop an understanding that Eurocentric perceptions and values gives a definition to heterosexual, homosexual and bisexual identities quite different from how these phenomena are understood in South Asia.
5. Target high risk groups (such as MSM who were successful in India).
6. Refrain from using Western categories of sexual behavior and orientation definitions and use indigenous cultural definitions. Example, the term used is "Masti-ka-larka" or "Line-ka-Larka" and both the words are used to denote openness to male-to-male sexual behavior rather than to refer to any sexual identity (within the MSM community in India).
7. Develop projects which enhance the relationship building between family members and their gay, lesbian, bisexual or transgender Asian youth and adults. The project should take into account the "coming out" context and challenges for the South Asian community.
8. Develop skills-related projects in order to develop skills to negotiate and manage dissident sexual identities in diverse communities. The stages on the formation of the homosexual identity could also be included.

CHAPTER 6

RELIGIONS

Homosexuality and Sikhism

Sikhism is a very tolerant religion and seeks to find truth rather than adhere rigidly to rules. Homosexuality is not specifically banned in any of the writings of the gurus, but they do rather stress that God has intended people to live as man and wife, or to be a celibate, with no deviations from this design. This ambivalence allows most Sikhs to be very tolerant of homosexuality and accept a homosexual individual, while still regarding the practice as against God's design.

www.ethnicity.net/sikh_sexual_health.htm

Homosexuality and Sikhism

This essay presents the picture of Sikhism with regards to homosexuality. There is nothing in Guru Granth Sahib that condemns homosexuality. Some people assume that it is a western disease but in doing so they overlook hijra culture that has a long history in India, and a number of prominent Indian figures who are believed to have had gay relationships. They include Maharaja Ranjit Singh, who was known to have male and female's concubines alongside his numerous wives. The Sikh religion has always preached supreme tolerance and equality for all. Guru Gobind Singh himself said "manas ki jat sabhe ekhi pechanbo" – all of mankind is one. This needs to be taken, not only in context of gender, race and religion, but also of sexual orientation. Sikhism is the religion of tolerance and acceptance and it is estimated that there are 2 million gay Sikhs world-wide to be accepted, instead of being shunned, for their sexuality.

www.sikh.com/gsdno/articles/essay/07232001homosexualryandsikhism.htm

Findings:

The articles argue that the Sikh religion is a tolerant religion and presents a religious quote to justify the acceptance of homosexuality.

Hinduism and Homosexuality

The paper presents views and excerpts of a long continuing debate regarding homosexuality with regard to Hinduism. The law book of Hindu frowns upon pre-marital sex and absolutely condemns extra-marital affairs. Marriage is said to fulfil 3 functions: Prajaa, progeny for perpetuation; Dharma, the couple has prime responsibility for performing acts of charity, piety, ritual etc; Rati, the pleasure of companionship. Besides some minor punishments prescribed for people caught in indulging in lesbian and homosexual acts, Hindu texts are silent on the status and appropriateness of homosexuality. But the unwritten form is that these things are not acceptable. People who indulged in these acts did it secretly. Another view point given by Shaivite is that homosexuality exists in nature and by definition is natural. Studies on animals and other species have shown that homosexuality is present and it has been here as long as mankind, according to a lot of historical documents. There is no natural rule or Hindu rule that says that two people of the same sex can't love each other.

www.hindulogy.biz/_wsn/page2.html

Findings

The paper presents a view that Hindu sacred texts are silent on the status and appropriateness of homosexuality.

(Islamic Perspective) Homosexuality and Lesbianism

The paper presents views on homosexuality and lesbianism with regard to Islam and various scientific findings. Homosexuality and lesbianism have been dubbed as an alternative life style, personal preference, a natural variation, etc. Where homosexuality was considered an illness by the Association of Psychiatrists, it is now removed from the list and replaced by homophobia. Arguments in favour of tolerance to homosexuals are that homosexual behavior is biologically-based, and not merely learnt from society. Early opposition to homosexuality was that such behaviour cannot produce children and is unnatural. Homosexual behavior is also found in animals. They found that the males of some species of exotic fishes off the coast of Japan imitated the behavior of female species in order to prevent other males from impregnating their mates. And some rare butterflies from the coast of Africa had males exhibiting female's behavior during mating season. In 1993, Dr. Dean Hamer, a researcher at the National cancer Institute, claimed to have discovered the first concrete evidence that gay genes really do exist. Homosexual orientation was supposedly transmitted to males on the X chromosomes from the mother. However, replication of his study failed to produce any links between the two. Islam considers homosexuality to be the result of a choice. It is inconceivable that God made people homosexuals. Islam instructs parents to separate beds by the age of ten in order to avoid sexual experiences which may result from childhood experimentation. Distinctions are made strongly between males and females in order to make their behavior more acceptable. Prophets cursed men who imitated women and women who imitated men.

www.allahuakbar.net/gay/homosexuality.htm

Islam and Homosexuality

The paper examines the references in the Quran with respect to homosexuality. There are five references in the Quran which have been cited as referring to gay and lesbian behavior. According to a pamphlet produced by Al-Fatiha, there is a consensus among Islamic scholars that all humans are naturally heterosexual. Homosexuality is seen by scholars to be a sinful and perverted deviation from the norm. All Islamic schools of thought and jurisprudence consider gay acts to be unlawful. They differ in terms of penalty. Al-Fatiha

estimates that 4,000 homosexuals have been executed in Iran since their revolution in 1979. Ten public executions of homosexuals have been performed in Afghanistan by the Taliban army. Ahmadi Muslim Jam'at was a Canadian Muslim group they once published essays on homosexuality and Islam which views homosexual behavior as a symptom of the decadence of society. As this process continues, people find and invent even more bizarre and perverted means to satisfy natural urges, and trends like: child and adult pornography, bisexuality, homosexuality and bestiality appear.

www.religioustolerance.org_isla.htm

Findings

These two papers do not support positive views on homosexuality and consider it a “sinful and perverted deviation”.

Bible and homosexuality

The paper presents the view in the Bible with regards to homosexuality and how the original Bible references have been misquoted and misinterpreted. It has been found that the original Hebrew and Greek writings with various English translations of the Bible, discrepancies emerge. There are many passages in the English Bible which clearly condemns same-sex activities. But when one of the original Hebrew or Greek texts is studied, the passages are either ambiguous or are unrelated to consensual homosexuality within a committed relationship. Two words which are often mistranslated in many places in the Hebrew Scriptures are: 'qadesh' and 'to'ebah'. Qadseh means a male temple prostitute who engages in ritual sex; it is often mistranslated as "sodomite" or "homosexual". To'edah means a condemned foreign Pagan religious cult practice, but often translated as "abomination". However, of the many of Jesus' instructions and prohibitions, few have a sexual component and none condemns homosexuality. Many conservatives believe that certain translations are essentially free from error, e.g., *the King James Version* and *the New International version*. Thus, when they read some of the passages that clearly and unmistakably condemn homosexuality, they are inclined to trust the translator and conclude that God hates homosexuality. Unfortunately, many groups of translators have been heavily biased against certain people, including witches, gays and lesbians; many have tended to wrap their translations accordingly. Each Bible translation reflects the world views, beliefs and mind sets of its translators. Their personal biases distort their work. There is an additional complexity facing the translator: today's society is different from that of Biblical times. It is also difficult to find a current English word that closely matches Hebrew or Greek terms.

www.wordpolicy.org/globalrights/sexorient/bible-gay.html

Homosexuality and Bible

The paper presents the overview of homosexuality with regards to Christianity. Christians have judged homosexual behavior to be contrary to the will of God and destructive to a human community. At times they did so against pervasive cultural trends in societies where homosexuality was an accepted practice; at

other times they succeeded in molding public attitudes and social mores and laws. There has been unambiguous biblical condemnation of homosexuality. “You shall not lie with a male as with women: it is an abomination”, “If man lies with a male as with women, both of them have committed an abomination: they shall be put to death: their blood is upon them.

www.christianadvice.net/homosexuality_and_the_bible_Mansuer.htm

Findings

The first paper argues that the words translated have been misinterpreted, therefore, homosexual behaviour has not been condemned.

The second paper argues that there is a clear passage in the Bible which prohibits homosexual behaviour.

The Buddhist religion and Homosexuality

The paper presents the view on homosexuality with regard to the Buddhist religion. There are many schools, sects and subsects of Buddhism. As with Christianity, no consensus exists within Buddhism about gay and lesbian relationships. Buddhism is more concerned with whether an action is helpful and based on good intentions. Many women, gays and lesbians have been attracted towards the Buddhist religion because of its relative lack of misogyny and homophobia when compared to most monotheist religions. From the Theravada Buddhist standpoint, all relationships: gay, lesbian or straight are often considered personal matters of mutual consent. If a relationship promotes the happiness and well being of both parties, then it is positive and acceptable.

www.religioustolerance.org/hom_budd.htm

Findings

The article outlines that there is no clear consensus on homosexuality in Buddhism. The article states that “from the Theravada Buddhist standpoint, all relationships: gay, lesbian or straight are often considered personal matters of mutual consent. If a relationship promotes the happiness and well being of both parties, then it is positive and acceptable”.

SUMMARY FINDINGS - RELIGIONS

Sikhism:

The articles argue that the Sikh religion is a tolerant religion and present a religious quote to justify the acceptance of homosexuality.

Hinduism

The paper presents a view that the Hindu sacred texts are silent on the status and the appropriateness of homosexuality.

Islam

These two papers do not support positive views on homosexuality and consider it a “sinful and perverted deviation”.

Christianity

The first paper argues that the words translated have been misinterpreted; therefore, homosexual behaviour has not been condemned.

The second paper argues that there is a clear passage in the Bible which prohibits homosexual behaviour.

Buddhism

The article outlines that there is no clear consensus on homosexuality in Buddhism. The article states that “from the Theravada Buddhist standpoint, all relationships: gay, lesbian or straight are often considered personal matters of mutual consent. If a relationship promotes the happiness and well being of both parties, then it is positive and acceptable”.

SUMMARY RECOMMENDATION – RELIGION

1. There is no conclusive evidence whether homosexual behaviour is recognized and accepted in any of the major religions. Each article has its own interpretations in favour of and against homosexuality.

CHAPTER 7

RESEARCH REPORTS

- 1. An HIV Research Needs Assessment of MSM in Ethno-Cultural Communities: Perspectives of Volunteers and Service Providers. (The report can be downloaded from ASAP's website.)**

Introduction

This research study identified key issues around HIV

Findings

Religion may be an HIV prevention barrier in many South Asian communities:

- Homosexuality is expressly forbidden by most religious scholars.
- HIV/AIDS is regarded as a punishment from God, for people with “loose morals”

Family/ Marriage/Gender Roles

- In South Asian cultures, the family unit is considered paramount and is often an important source of support
- Prescribed gender roles view men as providers, the head of the family household
- Formal social services are not traditionally part of South Asian culture
- South Asian men are expected to marry
- Concern about how an individual is perceived and how this reflects upon one's family is very important in South Asian communities

Low Priority of Sexual Health

- Basic settlement needs such as finding employment, adequate housing and learning English preoccupy new immigrant South Asian MSM

Sexual Freedom

- North American culture offers more opportunity for sexual freedom for new immigrant South Asian MSM:

- In countries of origin:
 - Sex is not openly discussed
 - Sexual abstinence before marriage is a normative expectation; dating is often prohibited

Fear of Recognition

- Many South Asian MSM fear being recognized by other community members in venues where they seek sex or gay bars/clubs
- South Asian MSM may fear accessing South Asian services such as ASAP, preferring the anonymity of mainstream service organizations

Issues concerning Identity

- The concept of a community of MSM does not exist among South Asians
- There is no concept of sexual identity among many South Asian MSM
- The social invisibility of alternative sexualities perpetuates the dominance of heterosexuality
- Individuals who define themselves by their sexuality or gender may be shunned
- Some South Asian MSM, who do not identify as gay or bisexual, as they still believe HIV/AIDS is a gay disease, may not seek HIV testing services
- The passive sexual role is considered by some to be degrading, akin to being “womanly”, whereas the active sexual role is considered “manly”.

Use of ASAP Services

- Many South Asian MSM use ASAP services because they can communicate in their own languages while others perceive ASAP as an opportunity to socialize with other MSM
- A deficit exists in suitable and accessible venues in which South Asian MSM can socialize
- Mainstream South Asian communities hold the view that ASAP's services are directed more towards South Asian MSM/gay men, making it difficult to reach the broader South Asian communities

- ASAP services towards South Asian populations are limited because of funding
- South Asian communities support for ASAP also is limited since HIV/AIDS is often not considered a priority

Many of the issues for South Asian MSM that participants related to HIV/AIDS were linked to immigration status. As such, differentiation is often necessary between the concerns of new immigrant South Asian MSM (up to 5 years residence in Canada, and also including refugees) and those of first-generation South Asian MSM. First-generation is understood as those born in Canada to South Asian immigrant parents, as well as those who immigrated to Canada at an early age. With exceptions, new immigrant MSM do not self-identify as gay or bisexual, whereas first-generation MSM likely do.

Recommendations

1. Program Priorities

- Continue to do culturally-appropriate education at the secondary and post-secondary level to young South Asian MSM to increase awareness about HIV/AIDS issues, with the added objective of addressing homophobia, racism and classism
- Gear HIV education materials for South Asian MSM in bathhouses
 - Language used for HIV educational materials should be community-specific
 - Employ visually-appealing educational materials in bathhouses
- Support outreach in bathhouses and other places to reach South Asian MSM:
 - Utilize outreach workers fluent in various South Asian languages
 - Extend ASAP's outreach mandate into the Halton and Peel regions

- Recruit more outreach workers to cover the Halton and Peel regions and to implement diverse forms of outreach
- Make existing HIV educational materials available in South Asian languages, especially in Tamil, and as well in English
- Develop new HIV educational materials in South Asian languages, especially in Tamil, as well as in English
- Initiate an anonymous and confidential hotline to educate community members
- Conduct HIV education at religious classes in local community centers or via phone lines (interviews) to reach women as a target group.

2. Core Prevention Principles

- Recognize the diversity within South Asian MSM populations
- Address “self-esteem” issues in relation to homophobia, racism and classism
- Translate HIV educational materials to appropriate literacy levels
- Emphasize the need to protect oneself and one’s partner (both male and female) in HIV prevention messages

3. Community Development

South Asian Community Development workers are needed to:

- Increase awareness of the existence of South Asian MSM, especially among South Asian women;
- Continue outreach and education through South Asian media to increase awareness of HIV/AIDS and to encourage support for South Asian PHAs.
- Collaborate with faith leaders, political leaders, cultural leaders and role models (in sports, academia, government, entertainment, etc.) to increase awareness of HIV/AIDS in the community and to encourage support for South Asian PHAs
- Develop an anonymous HIV/AIDS information telephone hotline to provide services in various South Asian languages

4. Increase Capacity in Outreach and Educator

- Target gay bars, bathhouses, the internet, South Asian social support groups such as Khush, Al-Fatiha (queer muslim group), and ethno-specific and mainstream ASOs (ASAP, ACT etc) to reach South Asian MSM who identify as gay or bisexual
- Target South Asian women when doing outreach to South Asian MSM. This way, wives/girlfriends of South Asian MSM will be targeted as a group
- Build outreach capacity by recruiting workers and volunteers
- Raise awareness among policy makers (including boards of education, ASAP funders, Health Canada, Ontario Ministry of Health and local health departments) of the needs and issues faced by South Asian populations

5. Program Needs

- Build capacity towards community-based health research by working in partnership with other ASOs and other HIV-related research units/universities
 - Establish an Education committee at ASAP, comprised of South Asian individuals experienced in community-based health education
 - Establish a Research committee at ASAP, comprised of South Asians individuals experienced in community-based health research
 - Train ASAP staff members about health research methods

2. MUSLIM, SEXUAL HEALTH AND HIV REPORT OF A NAZ PROJECT LONDON EXPERT FORUM

Introduction

This was a report of a forum that took place in London UK.

The goals of the forum were

- To provide Naz Project London with guidance on matters of sexual health and HIV within their Muslim target communities
- To discuss key issues of concern regarding sexual health
- To identify resources and approaches which could help to sustain the sexual health of Muslims living in London

Findings

- The close association between HIV and taboo issues linked to sex and sexuality adds to the difficulty of addressing HIV in Muslim communities. HIV needs to be normalized to reduce the stigma surrounding it
- Resistance to discussion around HIV and sexual health within Muslim communities is justified by the belief that the Qu'ran teaches all that is necessary on these subjects. This lack of discussion denies Muslim PLHAs social support
- Many Muslims see Islam and homosexuality as incompatible. Reconciling their faith and sexuality is a difficult issue for many LGBT Muslims

Recommendations of the forum

- Promote the discussion of sexual health and HIV in Muslim communities
- Use “Muslim champions” (leaders from within the Muslim community) to promote sexual health messages, including imams, mosques trustees and funders, women, teachers and peer educators
- Give opportunities to Muslim young people to discuss issues around sexual health and HIV, to assist them in reconciling the conflicting messages they may receive

- Focus on HIV as a public health issue, as distinct from ethical or theological discussions on homosexuality, in health promotion messages for Muslim communities
- Strike a pragmatic balance between cultural sensitivity and the imperatives imposed by the HIV epidemic in work with Muslim communities

3. A PRELIMINARY ASSESSMENT OF THE HIV PREVENTION NEEDS OF HOMOSEXUALLY ACTIVE SOUTH ASIAN MEN OUTSIDE OF LONDON

Introduction

To take forward the task of developing and implementing a strategic approach to targeted HIV prevention for gay and bisexual men in England.

Key Findings

Using adjusted figures from the National Survey of Sexual Attitudes and Lifestyles (NSSAL), Sigma Research concludes that in any given year,

‘...the percentage of homosexually active men in England is somewhere between the 1.1% recorded in NSSAL and 4.4%These percentages mean that there are at least 206,195 homosexually active men aged 16 or over in England (1.1%) and probably not more than 824,780 (4.4%).’

(Hickson, F et al, CHAPS R&D Review 1997, page 16)

Ethnic group difference in the prevalence of homosexual activity has not been sufficiently investigated so it is not known whether South Asian men are more or less likely to engage in homosexual activity than men from other ethnic groups. Assuming no difference in homosexual activity, these same percentages can be applied to the South Asian male population ages 17 and over which is 473, 811 (9). This means that in any one-year period, there are at least 5212 (1.1%) homosexually active South Asian men, and probably not more than 20, 848 (4.4%). It is known that the black and ethnic minority population has a significantly younger age structure as compared with the white population. It is also well understood that sexual activity declines with increasing age. Therefore, taking into consideration adjustments for age, the true figure is more likely to be closer to the higher estimated figure than the lower estimate.

Of all homosexually active men (206, 195 to 824, 780), it can be estimated that between 5,212 to 20,848 are South Asian. In other words, 2.5% of all homosexually active men in England are South Asian.

Recommendations

1. CHAPS partner agencies, outside London are not currently involved in targeted HIV prevention work with homosexually active South Asian men. Within CHAPS, there is a need for an informed discussion, and planning, on whether and how agencies can realistically and effectively conduct targeted work with South Asian men, particularly within the framework of CHAPS national strategy.
2. The CHAPS agencies need to reach a consensus, within and between themselves, on the most appropriate ways to geographically prioritize work with South Asian men. This report recommends that London and the West Midlands are prioritized above all other geographical areas. However, Greater Manchester, West Yorkshire, and Leicestershire are a secondary priority.
3. BOSS and the LLGBC are the two agencies outside London currently conducting targeted HIV prevention work with homosexually active South Asian men. These agencies, along with Naz, and other interested agencies, should meet with the following aims:
 - To share knowledge and expertise
 - To prioritize health promotion aims for South Asian men
 - To identify and prioritize, settings and methods for work with South Asian men
 - To identify subject areas for research on South Asian men
 - To identify printed resources that can be used with South Asian men
 - To identify gaps in available printed resources
 - To discuss the scope for collaborative work

4. The CHAPS research agency, Sigma Research, and Naz should work closely to develop and conduct needs assessment recruitment using a South Asian male sample. The research should be designed in a way that will allow useful comparisons with other gay male samples and in a way that can inform HIV prevention work with South Asian men.

SUMMARY FINDINGS – RESEARCH REPORTS

Statistics

The research has demonstrated that homosexual activity among men is between 1.1% to 4.4% of the male population between the ages of 16 and over.

Partnership

To develop partnership projects between mainstream and ethno-specific agencies in order to address the complex issues of homosexual issues in the South Asian community.

Religion

Religion may be an HIV prevention barrier in many South Asian communities:

- Homosexuality is expressly forbidden by most religious scholars.
- HIV/AIDS is regarded as a punishment from God, for people with “loose morals”
- The close association between HIV and taboo issues linked to sex and sexuality adds to the difficulty of addressing HIV in Muslim communities. HIV needs to be normalized to reduce the stigma surrounding it
- Resistance to discussion around HIV and sexual health within Muslim communities is justified by the belief that the Qu’ran teaches all that is necessary on these subjects. This lack of discussion denies Muslim PLHAs social support
- Many Muslims see Islam and homosexuality as incompatible. Reconciling their faith and sexuality is a difficult issue for many LGBT Muslims

Culture

- In South Asian cultures, the family unit is considered paramount and is often an important source of support
- Prescribed gender roles view men as providers, the head of the family household
- Formal social services are not traditionally part of South Asian culture
- South Asian men are expected to marry
- Concern about how an individual is perceived and how this reflects upon one's family is very important in South Asian communities

Low Priority of Sexual Health

- Basic settlement needs such as finding employment, adequate housing and learning English preoccupy new immigrant South Asian MSM

Sexual Freedom

- North American culture offers more opportunity for sexual freedom for new immigrant South Asian MSM:
- In countries of origin, sex is not openly discussed and sexual abstinence before marriage is a normative expectation; dating is often prohibited

Fear of Recognition

- Many South Asian MSM fear being recognized by other community members in venues where they seek sex or gay bars/clubs
- South Asian MSM may fear accessing South Asian services such as ASAP, preferring the anonymity of mainstream service organizations

Issues concerning Identity

- The concept of a community of MSM does not exist among South Asians
- There is no concept of sexual identity among many South Asian MSM
- The social invisibility of alternative sexualities perpetuates the dominance of heterosexuality
- Individuals who define themselves by their sexuality or gender may be shunned

- Some South Asian MSM who do not identify as gay or bisexual, as they still believe HIV/AIDS is a gay disease, may not seek HIV testing services
- The passive sexual role is considered by some to be degrading, akin to being “womanly”, whereas the active sexual role is considered “manly”.

Use of Alliance for South Asian Aids Prevention (ASAP) Services

- Many South Asian MSM use ASAP services because they can communicate in their own languages while others perceive ASAP as an opportunity to socialize with other MSM
- A deficit exists in suitable and accessible venues in which South Asian MSM can socialize
- Mainstream South Asian communities’ hold the view that ASAP’s services are directed more towards South Asian MSM/gay men, making it difficult to reach the broader South Asian communities
- ASAP services towards South Asian populations are limited because of funding
- South Asian communities support of ASAP also is limited since HIV/AIDS often is not considered a priority

SUMMARY RECOMMENDATIONS- RESEARCH REPORTS

1. Develop culturally appropriate education for the South Asian community
2. Seek more funding in order to develop culturally appropriate services to the South Asian services
3. Make existing HIV educational materials relevant and available to the South Asian languages
4. Address “self-esteem” issues in relation to homophobia, racism and classism
5. Use community development principles to initiate projects which will encompass awareness, outreach, education, collaboration with faith leaders, and an anonymous HIV/AIDS information telephone hotline
6. Target South Asian women when doing outreach to South Asian MSM. This way, wives/girlfriends of South Asian MSM will be targeted as a group
7. Raise awareness among policy makers, mainstream agencies and funders around the issues of homosexuality in the South Asian community
8. Use “Muslim champions” (leaders from within the Muslim community) to promote sexual health messages, including imams, mosques’ trustees and funders, women, teachers and peer educators
9. Focus on HIV as a public health issue, as distinct from ethical or theological discussions on homosexuality, in delivering health promotion messages for Muslim communities.
10. Strike a pragmatic balance between cultural sensitivity and the imperatives imposed by the HIV epidemic in working with Muslim communities.
11. Develop partnership projects between mainstream agencies and ethno-specific agencies serving the South Asian community in areas of homosexuality.

CHAPTER 8

ONE ON ONE INTERVIEW #1 (Transsexual)

Ten one-to-one interviews were organized. On an average it took 1.5 hours to complete the interviews. All interviews were scribed and no tape recorder was used. The researcher made sure that minimum grammatical changes be made to sentences.

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?

- **Personal Needs**

Individuals need somebody they can talk to, somebody such as a counselor. They need somebody that can relate to them, somebody that can understand them because families that are Indian are normally close minded. The most important need for anyone that is GLBTT is support. They need to know that they are not going crazy. My experience has been this with being curious. If you ever once get the doubt of being gay, and they are strong enough that they are bothering you, you will always be gay. You may repress your feelings, and ignore them but those feelings will always be there. That's why you need a safe environment and open minded peers who can help you to develop your sexuality.

- **Family needs**

The families need to be more educated, and more open minded. They need to understand that these are not abnormal issues any more; they are very normal and many families are dealing with these issues. For example, my mother still has issues; she sent me a get well card that said 'you'll always be my son'. She calls me by a name that I have chosen, but once you are gone, she will once again call me "beta." Families also need a lot of support. They spend a lot of their time wondering and worrying about the community, their relatives and friends

instead of worrying about their child. The family needs to be given the skills to be able to answer questions properly. What happens many times is that they don't have enough skills to answer questions or even explain things to themselves. When this happens, they either live in denial, minimize the situation, or try to cover it up. The family should never try to cover up the situation because the community already knows, and this will just make it worse because they know the family is vulnerable. The family should be able to answer questions to society, relatives and friends, this will keep people from talking about them behind their backs. People are always curious; answering questions will help people not to be so homophobic.

- Social needs

The Punjabi Community needs to be more sensitive and more accepting. The mainstream community is moving ahead with gay marriages and our community has trouble even accepting that this happens in our community. Men in our community will have an even harder time accepting homosexuality because of their egos and because of their masculinity. But things are changing in the mainstream community, which will change our community. For example, friends use to be the number one sitcom, now it's Will and Grace. That's a show about two gay men and two straight females and that's number one. Not to mention all the ads about HIV/AIDS and that they are putting and directing towards minority communities. In the movie Boys Don't Cry, the actress won an award. So things are changing slowly. The second generation is a little more educated, things just move one day at a time. Society needs to be more sensitive towards the family; they need to understand what the family is going through. But because of the lack of education, society laughs and ridicules the family, which causes the family to be more isolated. The main thing is just to be educated about it, and erase the myths about it.

2. What is their perception of the Punjabi community regarding homosexuality?

- Any friends who are supportive

My friends were all supportive, so I was very lucky. But if someone is coming out of the closet and their friends turn their backs on them, well then I guess that they weren't really true friends in the first place. The other reason I believe that my friends were supportive was because I was honest from the beginning. I think this is where mistakes are made; you can't tell lies to your friends and tell them you have girlfriends when you're gay, or, boyfriends when you're really a lesbian.

- Family: supportive or hostile

My experience is the family is never supportive initially. They themselves are confused and scared, maybe even embarrassed. Initially, the family will disown you, threaten you and hate you. Most likely they will kick you out of the house, or be in denial and think they can change you. This is very hard because when you decide you finally want to come out with the truth you are in such pain, in such extreme pain that all you really want is the support of your family. These are the most important people in your life and you really need their support and their help because you, yourself are still confused. My cousin who was the closet to me, cut me off after I came out with the truth. That was really hard, because he should have known the whole time, but he ignored the facts. To this day I don't talk to him or his family.

- General community: supportive or hostile

Society may not be supportive but they never say anything to your face. Their reactions? Well, they smirk and laugh but all behind your back. A lot of times there are pauses and people don't know what to say. No one has ever said anything to me, but then again I am very strong, and was always sure about myself. But for people who aren't so sure a lot of stuff happens. Sexual advances happen and in very degrading ways, a lot of homophobic behaviour, violence, name calling etc. Punjabi guys are more accepting of lesbians because it's their fantasy to see two women

together. This is not only a Punjabi thing; I think society in general is just more accepting of this type of thing. I think another thing the Punjabi community thinks is that when someone is gay and Punjabi, that these types of people are giving the Punjabi community a bad name.

3. In order to raise awareness in the community, what media influences would be best suited?

▪ Radio

A radio talk show would be a good idea just to get information out within the community.

▪ Television

Movies are a good idea by doing biographies and people sharing their stories so everyone can know what others are going through, and, also, so that those who are confused can relate.

▪ Website

Websites are not a good idea, because the majority of the community is uneducated, and these are the views that we are trying to change.

▪ Articles

Articles are a good idea, especially in Punjabi. Articles should be done on sexuality in general and on different types of life styles, what gay sex is, and biographies of different types of people in the Punjabi community. But I don't feel that Punjabis are that great readers.

▪ Workshops

Workshops are a good idea, however, I'm not sure how you would get people to come to a workshop like that.

▪ Flyers

I'm not sure how you would distribute flyers within the community.

Obviously, you wouldn't go to a media and start distributing them; you would definitely get a homophobic response.

▪ What I think is the most important thing.

To start having sexuality classes before you hit middle school; something that embraces all types of sexuality and allows people to explore

- Local Punjabi celebrities need to support gays and lesbians. This will raise awareness about the issue. Even local Punjabi politicians should get involved and talk about these issues.

4. Is there a difference between Toronto and Peel gay scenes?

Yes, a huge difference. I have not even heard of a Peel gay scene. The only Punjabi gay thing that I have heard of in the Peel region is the support group that the Punjabi Community Health Centre was trying to start; other than that; nothing.

There are a lot of gay people living in Peel; the majority of my friends live here. However, we all end up travelling to Toronto to party. One, because Peel's party scene is very small; forget the Gay scene. Second, more people are open in Toronto, and more accepting. It is much easier to be yourself in Toronto because there are more people and from all different walks of life. Another reason is that there are more people that I can relate to and feel comfortable with. More gay community downtown and more exposure, not to forget that Toronto as a city, is more supportive and that the gay village is located downtown.

5. “Coming out of the Closet” – Can this be safely done in the SA community. Do SA gays want to “come out of the closet”?

I think people start coming out of the closet when they've had enough. When they are honestly sick and tired of lying, or when the pressure becomes too much, when parents start pressuring about getting married, settling down, and that sort of thing.

I came out with the truth during the middle of an argument, when things had gotten to be too much, and there was too much pressure. I just blurted out the truth to my brother. When I look back now, there were many things I

could have changed and I would have preferred to have sat down with my family and told them that way.

I think the Punjabi gays and lesbians want to come out of the closet because they see all their other friends being supported, friends from other communities; this type of support is very important to the individual. I don't see safety as an issue within the family. I think it's because, when the truth comes out, the family still believes that the child is just seeking attention, or being heavily influenced by their white friends.

Coming out to the community I think is safe, although it depends on which community you are coming out to; there are still many challenges.

6. Religion versus Homosexuality – any thoughts?

I'm not too sure what the Sikh religion says about love and homosexuality. What I do know is that it says that all men, regardless of background, religion, etc., are created equal. I think that this is the most important point. If you have a clean heart, and you are a good person and are gay, I think God would value this higher than being straight and being a bad person. I'm not that religious but there are certain things I don't agree with. For example, mixing sex and religion. There have been cases when people have the Guru Granth Sahib at home and have not been taking care of it. But I don't think that this is a gay issue or straight issue; it is just an issue of disrespect.

7. HIV/AIDS and Homosexuality – any thoughts?

I think that HIV/AIDS has been portrayed as a homosexual disease. It has been branded by the media as a homosexual disease. I think the Punjabi community is just as guilty for thinking this way.

The other difficulty about HIV/AIDS is people in the Punjabi community don't know how it is contracted. They don't even talk about sex, let alone safe sex, so this is the problem.

8. What does the gay lifestyle mean to you?

- **Often some gays/lesbians spend their entire life devoted to gay issues**
- **Some gays are gays only some of time**

I think when someone dedicates their lifestyle to being gay, it is because they are insecure. They are scared of being themselves in mainstream society. It is very difficult sometimes, especially if you have no support. When you have no support, you are going to seek support where you can get it. You get support from people that are like you. That causes people to move to the gay village and surround themselves with people who are like them. But generally people surround themselves with people who are just like them. Different cultural groups stick together and different religious groups stick together; it is all very similar. I don't think there is anything wrong with it, but I would recommend that people, regardless of sexuality, meet new and other people.

9. Would you assist in this project?

Yes, I would definitely like to assist with this project, whenever I have spare time.

INTERVIEW #2 (Lesbian)

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?

- Personal needs
The needs of a South Asian lesbian would be support, respect and someone to talk to. For me, I needed a shoulder to cry on constantly.
- Family needs
Family needs support and they need to be educated.
- Social needs
The community just needs to be educated, and that is the biggest thing. They are the key to letting the family function and the individual function.

2. What is their perception of the Punjabi community regarding homosexuality?

- Any friends who are supportive?
My friends are supportive, and I guess that's why I chose these friends, you know, and you're always careful who you tell anyways, because it's such a sensitive issue.
- Family: supportive or hostile?
Family, I don't know if they would be supportive or hostile but they would be disappointed and I can't deal with that. My family has given me everything, and I feel obligated to them; that's exactly where I am confused.
- General community: supportive or hostile?
The general community as we already know is not supportive and they are very hostile. It is difficult to come out of the closet

3. In order to raise awareness in the community, what media influences would be most suitable?

This is always a difficult question to answer because the things off the top of my head, that seem the easiest to do, would also cause an uproar in the

community. The radio, television and articles seem like the easiest things to do, but they could also hurt the community. The community may not be ready to take this information in.

I think you need to start with the young people, with youth, because, honestly, the parents aren't going to change at their age. I would invest most of the energy in youth and younger children.

4. Is there a difference between Toronto versus Peel gay scene?

Yes, there is a difference between the two scenes. There is no gay scene in Peel, but there is a huge one in Toronto. I also have to tell you that I am not in the scene as much as others are. I know of the major South Asian gay events but I don't attend them very often.

5. “Coming out of the Closet” – Can this be safely done in the SA community. Do SA gays want to “come out of the closet”?

Coming out of the closet is very tricky, because you want to be true to yourself, but, at the same time, you want to be fair to your family. You know we were raised a different way, very family and community-oriented. I think a lot of time people forget that. Just because you are gay doesn't mean that you all of a sudden forget all the values that your parents have given to you.

I still haven't come out of the closet, and I would love to but I don't know when I will. However, I am honest to myself, I know that I am a lesbian, and I decided that I come comfortable living like this. If there comes a time when I can't live like this, well then I won't, but until then I am happy. There are times when I wish that I could just be open and honest to everyone, but then I have to remember that I am Indian. It's the same secret as an Indian girl having a boy-friend, when she is suppose to have an arranged marriage.

Yes, I do think coming out of the closet is possible in the South Asian community but it depends on the individual and their family. Some of my friends have come out of the closet and their families have supported them,

but then some have been disowned. I'm not ready yet, to come out so I won't make a hasty decision.

6. Religion versus Homosexuality – any thoughts?

Have the religious institutions done anything to support me? no. But I am still religious and have a deep respect for all religions. In the South Asian community religious institutions have a great deal of power, and they can, if they wanted to, help with destigmatizing the issue. Will they? I don't know, maybe later in another twenty years.

7. HIV/AIDS and Homosexuality – any thoughts?

Growing up I always heard that HIV/AIDS was a gay disease. It was a punishment received to gays by God for being gay. It's disgusting, and its upsetting, but it is a reality.

Lately, with all the attention going to Africa and AIDS, I think that there is a difference. But regardless, I think there is a lot of stigma attached to both HIV/AIDS and homosexuality. The moment someone finds out you're gay, they wonder if you have the disease, and that is hard for someone to deal with.

8. What does the gay lifestyle mean to you?

- **Often some gays/lesbians spend their entire life devoted to gay issues**
- **Some gays are gays only some of time**

There has been a lot of light on the gay lifestyle. Things are different, it used to be a lot harder to be a lesbian before. But with shows such as Will and Grace, and Queer Eye for the Straight Guy, things are changing, but very slowly. People like Ellen, who have come out of the closet have helped. But if these are the only homosexuals who the community is seeing, then there is also a certain stereotype that comes along with it.

I am a lesbian and I take that with me everywhere, just like I am an Indian and the fact that I am a woman; I know that these are all strikes against me, but this is me. If some people choose to support gay issues and devote their entire lives to it, then they are allowed to.

9. Would you assist in this project?

I would love to assist in this project, depending on what it is you require.

INTERVIEW #3 (Gay man)

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?

- Personal needs

The individual needs to be comfortable and at ease with themselves.

They need support, but my advice is this: if your family and friends are not going to be supportive, don't waste your time thinking about it. They just need support.

- Family needs

The family also needs support and a lot of it. But would they be willing to accept it? Would they be willing to seek "outside" help? Would they be more interested in covering up rather than seeking help? These are some of the questions that need to be answered.

- Social needs

The Punjabi community is very homophobic. The religious leaders and political leaders are interested in seeking popularity. They want support within the community and are not interested in standing up for rights. The community needs education and awareness.

2. What is their perception of the Punjabi community regarding homosexuality?

- Any friends who are supportive?

I have a few good friends. They all stuck with me through my very difficult times. But, my partner went through hell, when his best friend betrayed him. It would be very difficult to survive in the South Asian community.

- Family: supportive or hostile?

My family would never be supportive. They have a reputation to live by. They would be embarrassed if anyone found out that I am gay. In the South Asian community, it is very difficult to survive because everybody is in the business of spreading lies through gossip.

- General community: supportive or hostile?

Punjabi community is hostile, period. It is a homophobic community. It would need a lot of education to deal with its insecurities.

- What kind of name calling, remarks etc are perpetuated against gays/lesbians?

They generally talk very negatively about gays and lesbians. I am not familiar about the exact names, but what they say is not very nice.

3. In order to raise awareness in the community, what media would be best suited?

The best medium to be used is television, followed by radio. The messages should be very sensitive. Perhaps articles in the newspapers and magazines could also be written, which would educate the community about the issues pertaining to gays and lesbians.

The avenues which could be explored are websites and setting up displays and distributing flyers at the Punjabi Melas. Perhaps for the enlightened, workshops could be organized.

We may need to seek a “celebrity” who would champion the cause of gays and lesbians.

4. Is there a difference between Toronto versus Peel Gay scene?

Peel is a conservative, Waspish area. There is not too much progressive going on. There is nothing available for South Asian gays and lesbians in Peel. I have met many gays and lesbians who are residing in Peel but come to participate in the gay scene in Toronto.

5. “Coming out of the Closet” – Can this safely done in the SA community. Do SA gays want to “come out of the closet”?

I think South Asian people would have difficulty coming out. Why? The community is homophobic. Why would you want to risk damaging your “reputation” and your family’s “reputation”? What purpose would be served? If the purpose is to make a “political statement,” then one would end up paying a very heavy price.

I would not suggest people to come out at this time unless one's family is absolutely progressive and doesn't give a damn about others.

6. Religion versus Homosexuality – any thoughts?

I am not sure what the stand of various religions is. I am not a very religious person. By that I mean, I am not a practicing Hindu.

Religion, unfortunately, has divided people rather than uniting them. Does it even matter what religion says? Can we all live in peace and support each other.

7. HIV/AIDS and Homosexuality – any thoughts?

I think that HIV/AIDS has been portrayed as a homosexual disease. It has been branded by the mass media as a homosexual disease. The Punjabi community also believes that HIV/AIDS is a homosexual disease.

Is there some truth to it? Yes, there is, but there are also other reasons for contracting HIV/AIDS.

8. What does the gay lifestyle mean to you?

I am finally very happy as to who I am. It took me a long time to accept who I am but now I am in peace with myself.

• Often some gays/lesbians spend their entire life devoted to gay issues

We need to spend our time on these issues because we are discriminated against. Unless we keep on fighting, we would not make changes in the society's perception of who we are.

• Some gays are gays only some of time

Some gays and lesbians are bi-sexuals.

9. Would you assist in this project?

Yes, I would definitely like to assist with this project, whenever I have spare time.

INTERVIEW #4 (Gay man)

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?

- Personal needs
Individual needs for the homosexual community, is support for them from the moment that they are curious. They need support groups for specifically South Asians
- Family needs
Family needs education and the coping skills to deal with shame and stigma.
- Social needs
The community would benefit tremendously from awareness around the issues of homosexuality. The community is ripe with myths and misconceptions about homosexuality.

2. What is their perception of the Punjabi community regarding homosexuality?

- Any friends who are supportive?
I was lucky; my friends were very supportive. Actually, my coming out of the closet was a very positive experience. You see, they always thought I was gay, and my coming out of the closet actually helped ease the tension that was felt amongst my friends.
- Family: supportive or hostile?
Just as my friends, my family always suspected I was gay. I told them and they were supportive. Actually they surprised me; my mother and sisters were great. But they didn't want me to tell any of my extended family or the community. They said they would support as long as no one else found out.
- General community: supportive or hostile?
I guess I have been very lucky, because I have never had anyone say anything to me about being gay. But I am well aware that a lot of gay men have not had the same positive experience that I have had.

I have always been strong when standing up to the community but many are not as strong as me.

- What kind of name calling, remarks, etc., are perpetuated against gays/lesbians?

3. In order to raise awareness in the community, what media would be best suited?

The most important thing to do is to educate religious institutions and because that is not always possible, the most important thing for me, I would say, is to educate Indian service providers. There are so many ethnic South Asian organizations, yet the service providers are not sensitive to these issues. How many front line abuse counsellors would be able to counsel a gay or lesbian couple?

After educating the South Asian service providers, we should move to mainstream service providers. Mainstream service providers also need to be educated. They need to be educated on the South Asian culture, and problems that are specific to this culture. You can't educate the community on homosexuality, and then not have front line workers who can deal with the issues.

PCHC also needs to create pamphlets for the community that is sensitive. These pamphlets need talk about homosexuality things such as; 'so your child has told you they are gay or a lesbian?' And in very delicate terms, we have to remember that shock therapy does not work in our community. And then you can start the regular things, such as, the articles, the televisions shows, and the radio.

4. Is there a difference between Toronto versus Peel Gay scene?

I honestly have not heard anything happening in the Peel region when it comes to the gay scene. But many South Asian homosexuals reside outside of Toronto, but come to Toronto to party.

5. “Coming out of the Closet” – Can this safely done in the SA community. Do SA gays want to “come out of the closet”?

I came out of the closet because it was something I wanted to do. This might not always be an option for an individual; it depends on each case. Obviously, you need to scope out the family, their views, and their reaction. To me it's not worth getting killed for, but for some people it is.

6. Religion versus Homosexuality – any thoughts?

You know it's really hard to say. I've gone to the Mandir and tried to talk to the Pandits about homosexuality. They take you into the corner and speak to you about it then, but won't ever address the community about the issue. Homosexuality is a major part of our culture. In some of the old temples there are statues of the individuals of the third sex, and Gods have sometimes...

7. HIV/AIDS and Homosexuality – any thoughts?

HIV/AIDS is a deadly disease and there is a connection between homosexuality and HIV/AIDS. But, with precaution the risk can be managed. Straight people also take precautions when having sex. Some men use condoms strictly so that their partners do not become pregnant. The key to the discussion should be taking precautions.

8. What does the gay lifestyle mean to you?

- Often some gays/lesbians spend their entire life devoted to gay issues
- Some gays are gays only some of time

9. Would you assist in this project?

I will work behind the scenes and assist you.

INTERVIEW #5 (Lesbian)

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?

- Personal needs

I think they will need just some support, somebody to talk to. Somebody to help them understand their feelings, when they first start having feelings they don't understand.

- Family needs

The family will also need some support. Deep down the family knows that something is not right, but may not be able to pin point the exact "difference". Once the difference is known, then the family needs help to calm down, to overcome the disbelief and to re-look at their loved ones in a different light.

- Social needs

I don't think that this community will ever accept it. But if the regular community is accepting it, then Indians will too. The irony is that we Indians claim ourselves to be "tolerant" but are the most "hypocrite", when it comes to accepting differences.

2. What is their perception of the Punjabi community regarding homosexuality?

- Any friends who are supportive?

I have a few friends who are supportive, but very few. I also can't take the risk of letting the community or anyone else find out.

- Family: supportive or hostile?

Nobody in my family knows and they would never find out. They would never even be able to understand it or accept it. They don't understand the concept.

- General community: supportive or hostile?

- No, the general community can't accept it. They don't even talk about it. They talk about it, as if it is a sin.

- What kind of name calling, remarks etc are perpetuated against gays/lesbians?

3. In order to raise awareness in the community, what media would be best suited?

It is going to be very hard to do. Especially with the older people; it maybe very hard to educate. With the young people they will copy the white people. But you need to do it slowly. You may use TV, radio or the print material. Many of the older people can't read the papers, so it is hard to do it that way. But I think to talk on the radio is the best idea because it will get to the majority of people.

4. Is there a difference between Toronto versus Peel Gay scene?

I don't know about where all the Gays go and have a good time, because I don't ever party. But I think it will be in Toronto just because people are more open in Toronto. Peel seems to be more conservative. Wasn't it the mayor of Mississauga, who once said that there are no homosexuals in Mississauga and there is no racism in Mississauga?

5. "Coming out of the Closet" – Can this be safely done in the SA community. Do SA gays want to "come out of the closet"?

Coming out of the closet depends on the situation. You know, some families are supportive and some are not. See, in my case, it is very different. I was confused, and never got to experience and explore my sexuality. I had an arranged marriage at a very early age and was not allowed to explore.

Will I come out of the closet now, no? I have a husband, who is a good man and kids that I love. And there are things to think about; you can't be selfish.

When I was first curious, I didn't do anything to experiment. I never fought with my parents against an arranged marriage. I am Indian, and

there are responsibilities I have to other people. I can't only think of myself.

6. Religion versus Homosexuality – any thoughts?

It's hard because you're raised with your religion. So you can't turn your back on it, and you want to give it to your kids, but, also, it doesn't agree with how you really feel. The personal feelings are hard to reconcile with religious feelings. Who is to say what is right and what is wrong?

If religion accepted homosexuality, there would be no problems. This is pivotal; in accepting it. Proud of Salaam for being a religious homosexual agency.

7. HIV/AIDS and Homosexuality – any thoughts?

Didn't want to answer the question-

8. What does the gay lifestyle mean to you?

The fulfillment of feelings, desires and likings. Majority of human beings, on a daily basis, do what they like and gays also have the right to do what is right to them.

Gays are people to and would like to enjoy, dance, drink, socialize and have good time just like everyone else. Gay lifestyle, to me, means finding someone in whom I can merge. For me it means I can do with my sexuality, without any "restrictions" and condemnation.

- **Often some gays/lesbians spend their entire life devoted to gay issues...**

This may be stereotyping gays and lesbians. Just like straight people are enjoying a variety of activities, so are gays and lesbians. Some gays may be devoting their lives to this issue but certainly not everyone.

- **Some gays are gays only some of time ...**

Many gays are bi-sexuals, that much I know. But I really don't know much about this issue.

9. Would you assist in this project?

As long as the involvement does not reveal my identity.

INTERVIEW #6 (Gay man)

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?

- Personal needs
The need to belong, to be loved as a human being by everyone. The need not to be judged and looked down upon.
- Family needs
The family needs to be supportive but I know this is just a dream. It is not going to happen any time soon. I can also understand the dilemma of the family; they also have to live in the community and the “shame” is too much to bear.
- Social needs
The need to party, the need to go out and the need to have a safe space.
The need to live without fear and ostracization.

2. What is their perception of the Punjabi community regarding homosexuality?

- Any friends who are supportive?
Only one friend knows that I am gay. He is an exception to the rule. He is truly my friend.
- Family: supportive or hostile?
My family doesn't know that I am gay. They don't need to know that I am gay. I often feel guilty that, if my parents ever find out that I am gay, they would be devastated. They would be very hostile.
- General community: supportive or hostile?
Punjabi community is very hostile. They live the life of double standard. They are more interested in what “others” will think, rather than concentrating on themselves. The community is very homophobic and the ones that are homophobic are also very “vocal”.

The few that are supportive to gays are also the ones who tend to be quiet.

- What kind of name calling, remarks, etc., are perpetuated against gays/lesbians?

They call us with nasty, I mean nasty names. Do you want me to actually say it.

Yes, Please do say.

They call us: GANDU, HIJRA, LINE KA LADKA,

3. In order to raise awareness in the community, what media would be best suited?

I think TV and radio would be best suited followed by the print media. We could also experiment by drama and poetry but we need to experiment with these mediums.

Websites and e-magazines could also be explored. Although the younger population is more in touch with this medium, nonetheless, it is important to explore.

4. Is there a difference between Toronto versus Peel gay scene?

Yes, Toronto is more open and Peel is more conservative. In Peel there is no gay scene. Services for South Asians and Punjabi's are non-existent. The South Asian service providers in Peel are also homophobic. The staff and board members are all homophobic. I have never seen any South Asian service provider at any gay celebration.

5. "Coming out of the Closet" – Can this safely done in the SA community. Do SA gays want to "come out of the closet"?

Coming out of the closet is a "white" phenomenon. In the South Asian community this is not needed. The crux of the matter is that the "family" is much more important than "any other entity". Therefore, South Asians are not going to take "individualistic" decisions, to so-called "coming out". It is better to stay in the closet and enjoy life rather than come out and live the life of "hell".

6. Religion versus Homosexuality – any thoughts?

They both don't mix. Religious norms were developed by men which often don't make sense. The pope had Copernicus hanged for saying that the world revolves around the Sun – was that a religious act? We tend to mix up many non-religious thoughts, norms, acts and claim that they would be religious. Once we have given these entities religious name then we can select to accept some things and not to accept other things.

Homosexuality is a feeling, is a way of life. Some self-proclaimed religious persons would say that gay people should not exist. I think, homosexuality is not a choice, people do not choose to be homosexuals, they are homosexuals.

I guess religious people will never understand.

7. HIV/AIDS and Homosexuality – any thoughts?

Homosexuality has been linked with HIV/AIDS. There is some truth to it . For example, MSMs are more at risk for HIV/AIDS. But others may argue that so are sex trade workers and individuals who are IDUs. Gays could be more careful when they have sex.

8. What does the gay lifestyle mean to you?

- **Often some gays/lesbians spend their entire life devoted to Gay issues**

Homophobia, name calling, and gay bashing requires one to be an advocate. Their existence depends on fighting for gay rights.

- **While some gays are gays only some of time others are....**

There are gays and bi-sexuals and many in between. Sexuality is not just one thing. Many individuals fluctuate between homosexual behaviour and between heterosexual behaviour.

9. Would you assist in this project?

I would love to as long as it doesn't expose my identity.

INTERVIEW #7 (Gay man)

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?

- Personal needs

The personal needs of a gay South Asian man is basically support. They need support to be able to tell their families and friends. This support is more important when you are curious. I think most people first start feeling attracted to others when they are 12/13 years old. This is such a delicate age, you can be very confused. If all you are hearing is negative comments, or you are being told you are supposed to be attracted to women when you are not, this can be very confusing. I was so confused that I kept dating women, even when I was not attracted to them, and I spent all my time suppressing my true feelings for men.

- Family needs

The family also needs support. This is such a delicate issue; without extra support from outside people, such as counselors and friends, it becomes very difficult for the family. The family also needs to be educated; without education, they have no idea that it is not a disease or a choice, it is natural.

- Social needs

The community needs to be educated, and that needs to start with community leaders and religious leaders. The issue needs to be de-stigmatized, and we need to get rid of all the myths.

2. What is their perception of the Punjabi community regarding homosexuality?

- Any friends who are supportive?

To be honest, I've never had that many South Asian friends, and the friends I chose were always open minded. If before I told them the truth they made derogatory comments about homosexuals, then I would just pull away from them, and we would never be able to be friends; they would just never really know why. It would just seem as if we grew apart.

- Family: supportive or hostile?

In my family it's a split. Some of my family members are very open minded and supportive and I have even told them. Then on the other side there are others who think it's a sin, and I would never tell them.

- General community: supportive or hostile?

The general community is not supportive, and you can tell by the comments that are made. I think the more Indian a person is (meaning their whole life revolves around being Indian, they only have Indian friends, listen to Indian music, etc.) the more closed-minded they are.

- What kind of name calling, remarks etc are perpetuated against gays/lesbians?

3. In order to raise awareness in the community, what media would be best suited?

I must be honest, I think it is totally hopeless. In the Indian community nobody is going to change; they are just starting to tackle the issue of wife abuse. But, if you are going to try, I would say radio shows, and television, and a lot of articles. Another really good idea is trying to educate kids from an early age in schools and educating everybody, not just the Indian kids; everybody needs to work together to destigmatize these issues.

4. Is there a difference between Toronto versus Peel Gay scene?

There is a huge difference between the Toronto and Peel gay scene. That's why I moved to Toronto, because all the events happen there, and the commute is too much. I kind of like the fact that the gay scene is in Toronto; that way you don't have to worry about running into Indian people you may know.

5. "Coming out of the Closet" – Can this safely done in the SA community. Do SA gays want to "come out of the closet"?

I definitely think it is possible to come out of the closet in the South Asian community; it also depends on your family. I definitely plan on telling my parents; I have already told my brother, sister and my cousin. And they have

been extremely supportive, but besides my immediate family, and my close cousins, I don't want anyone else to know. I don't want anyone to give my parents a hard time. I don't really get along with my father but I love my mother and she is so supportive I know that she will support me, but I don't know about my dad.

6. Religion versus Homosexuality – any thoughts?

I'm atheist, and have been for as long as I can remember. I turned away from religion because every time I went to the temple it was a constant – 'this is right', 'this is wrong', etc. For example, if you cut your hair, or eat meat, or if you don't know how to pray, you are bad. Only if you follow these certain rules are you good, and that's unfair. There is no concept of good people from the heart, you can only be good, if you are an exact copy of everyone else.

I was young and sensitive and religion just wasn't there for me.

7. HIV/AIDS and Homosexuality – any thoughts?

The two are tied together. A lot of people always assume that, if you are gay, than you have the disease or you will definitely get it. Lately, I think that people are being more educated, but still people think that it is a homosexual disease.

That is another strike against you, remaining in the closet, and then imagine being infected with HIV/AIDS. Indian people don't understand HIV/AIDS, nor do they understand homosexuality, so this makes it very difficult.

8. What does the gay lifestyle mean to you?

- **Often some gays/lesbians spend their entire life devoted to gay issues**

I wouldn't say that my entire life is devoted to gay issues, but a huge component of it is. Just as big as me being brown. It goes with me everywhere I am, and I carry it with me. Every time I hear a comment about brown skin or about homosexuals, I take it with me, whether good

or bad. But there are some gays who are spending their entire lives devoted to gay issues because that is their passion, just like some people spend their lives devoted to issues such as child abuse.

- **Some gays are gays only some of time**

Their choice – it is hard for heterosexuals to grasp.

9. Would you assist in this project?

Yes, I would assist with this project as long as it is behind the scenes.

INTERVIEW #8 (Lesbian)

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?

- Personal needs

As a lesbian woman, my needs are to keep my sexual identity hidden. I am married and have two beautiful children. I would not want this to come out. I wish I was able to be free to do the things that I want to do.

- Family needs

I have a family and yet I feel that this is not a complete family. I wish I could live with my lover which I know is not possible.

- Social needs

Finding companions who are sensitive
Safe spaces for partying

2. What is their perception of the Punjabi community regarding homosexuality?

- Any friends who are supportive?

Two of my girl friends are supportive. Some university friends are also supportive.

- Family: supportive or hostile?

My family would not be supportive, if they found out that I am a lesbian.

- General community: supportive or hostile?

Our community is very very hostile and homophobic. The community is paranoid about gay lifestyles. Our community puts on this front of being “traditional” and “cultured” but they are all “liars”. Look at the violence against women that is perpetuated in India and in Canada. Look at the abortions Punjabi women go through because it is a girl. Look at the dowry deaths in India. These are the same people who would use the front of religion to condemn gay lifestyle. Abusers, wife beaters, cheaters (men who marry women to get immigration) all

proclaim in the name of religion their sovereign right to denounce gay lifestyle. I say to them that they are all a bunch of liars and manipulators.

- What kind of name calling, remarks etc., are perpetuated against gays/lesbians?

“galat kaam karne wali ladki”

3. In order to raise awareness in the community, what media would be best suited?

I would say that TV and radio would be the best medium. Would the community allow it? Would the conservative people complain to the TV and radio station? I don't know the answer to these questions.

The print would be a bit safer medium. The articles would be written in a more sensitive and caring manner.

I am also aware of the e-magazines that have come up in the South Asian community. Perhaps we could attract the younger audience through those magazines.

4. Is there a difference between Toronto versus Peel gay scene?

Absolutely, yes.

One can live rather safely in Toronto. But in Peel, it is not safe for the South Asian gays and lesbians. No wonder the majority of South Asian gays and lesbians end up in Toronto. Peel is very conservative.

5. “Coming out of the Closet” – Can this safely done in the SA community. Do SA gays want to “come out of the closet”?

Not an issue. This is not needed in the South Asian community. We (gays and lesbians) tend to hide our identity and are comfortable with it. In our culture, family rights are given precedence over individual rights and choices.

6. Religion versus Homosexuality – any thoughts?

Religious people are using double standards – it is o.k. to kill female children through abortion but it is not o.k. to be homosexual. Homosexuals are also religious and religion is not the sole property of “heterosexuals”.

7. HIV/AIDS and Homosexuality – any thoughts?

There is some truth to the fact that homosexual behaviour puts one at risk. Therefore, one needs to take precaution. But, not all homosexuals spread HIV/AIDS. HIV/AIDS is also spread through IDUs and other high risk groups.

8. What does the gay lifestyle mean to you?

- **Often some gays/lesbians spend their entire life devoted to gay issues**

How else would we have gotten our rights or some recognition about our lifestyle. No body gives you the “rights”, you have to “fight” for it.

- **While some gays are gays only some of time others are....**

Some gays/lesbians fluctuate between hetero and homosexual behaviours. Some are bi-sexuals. I do not know too much of this topic.

9. Would you assist in this project?

While remaining behind the scene, I would like to assist.

INTERVIEW #9 (Gay)

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?

- Personal needs
To be able to live with their lover/partner
- Family needs
We would also like to get married
We want our families to be supportive and understanding
We would also like to have children through adoption
- Social needs
We would like to go to places without fear of being “exposed” or “bashed”
We would like to create spaces where we can meet like minded gays and lesbians

2. What is their perception of the Punjabi community regarding homosexuality?

- Any friends who are supportive?
Yes, I have a couple of friends who are supportive but wish I could have more. It is not easy to “disclose” to others about your sexual identity.
- Family: supportive or hostile?
I have not informed my family. My family will “freak out” if they found out about my sexual identity.
My mother may not agree, but she would still visit me but not my father. He is a real macho man. He used to be very proud of me, when I used to wrestle. He would disown me, I can bet on it.
- General community: supportive or hostile?
The general community is hostile. There is no way the community, at the present time, would accept a South Asian gay or lesbian. This does not mean that there are not supportive individuals towards gays

and lesbians but they are usually very quiet and are intimidated by the “loudmouths”.

- What kind of name calling, remarks etc are perpetuated against gays/lesbians?

Janana, Hijra, Gaandu etc.

3. In order to raise awareness in the community, what media would be best suited?

I think television, followed by radio and lastly, the newspapers and magazines. It should be done with some sensitivity; otherwise, it could backfire. The community could also benefit from educational workshops. They could be couched while talking about “health issues”. I would suggest that a documentary should be made of South Asians who are living in an alternative lifestyle. This would be an eye opener for the community.

4. Is there a difference between Toronto versus Peel gay scenes?

Yes, Toronto is safe and Peel is conservative.

There is nothing in Peel for South Asian gays and lesbians. I would like to add that in Peel the South Asian service providers are prejudiced against gays and lesbians.

I would say that almost all the gays and lesbians go to Toronto to attend the social scene.

5. “Coming out of the Closet” – Can this be safely done in the SA community. Do SA gays want to “come out of the closet”?

I have not informed my family. I don’t think I ever will. For me, living a life like this is much better than living a life of guilt. Coming out means that the family will go thorough hell. What should they go through hell for?

Yes, many times they are on my case to get married but I tell them that I am not interested in any girl to get married.

6. Religion versus Homosexuality – any thoughts?

I am not very religious. South Asians don't know much about their religion, but would claim that homosexuality is against religion. These people lie to enter Canada, cheat on their wives, force women to abort female fetuses, take dowry, and then proclaim, as good moralists, that homosexuality is bad.

Bunch of hypocrites!

7. HIV/AIDS and Homosexuality – any thoughts?

Do they mix – just kidding.

Homosexuals should be careful while engaging into sexual behaviour. I think MSMs are a high-risk group. But, I would also like to caution that HIV/AIDS is not just caused by homosexuals.

8. What does the gay lifestyle mean to you?

- Often some gays/lesbians spend their entire life devoted to gay issues

I would say that gays and lesbians have a variety of tastes and choices to act on. I don't think they just participate in gay issues.

- While some gays are gays only some of time ...

I would say that some gays are bi-sexuals and many are in between the continuum. Some are gay for some time and then revert back to being heterosexuals.

9. Would you assist in this project?

I can't actively participate because I am in my final year of university. But if you need to bounce off ideas please call me – you have my phone number.

INTERVIEW #10 (Gay)

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?

- Personal needs
The needs of a South Asian gay man would be support, respect and someone to talk to. For me, I need a friend I could share my feelings.
- Family needs
Family needs support and they need to be educated. The shame is tremendous when they find out that their loved one is gay.
- Social needs
The community just needs to be educated, and that is the biggest thing. South Asian community is very homophobic but claims itself to be liberal and “tolerant”

2. What is their perception of the Punjabi community regarding homosexuality?

- Any friends who are supportive?
My friends are supportive, and I guess that’s why I chose these friends. One has to be careful who one discloses one’s sexuality to – it could ruin one’s life.
- Family: supportive or hostile?
My family is not supportive.
I decided to tell them that I am gay. Since then my father is having enormous difficulty accepting my sexual identity. He finds it very hard to meet my partner. Now reflecting back, I wish I never revealed my true identity. This is also leading to serious arguments between my mom and dad.
- General community: supportive or hostile?
The South Asian community is hostile and not supportive. I would say that our community is homophobic and practices discrimination. This community claims to be discriminated by ‘whites’ but then turns around and discriminates against ‘gays’.

- What kind of name calling, remarks, etc., are perpetuated against gays/lesbians

Because I am 2nd generation South Asian, I do not understand the actual name calling. They say “nasty” things, but I just don’t know what they mean.

3. In order to raise awareness in the community, what media would be best suited?

The radio, television and articles seem like the easiest things to do, but they need to be implemented in a very gentle manner. The community needs a gentle nudge not a push.

The question could be asked “who should be targeted?” I think we should begin with youth, followed by adults and finally the entire community.

Another important point is about raising awareness through workshops. Arts media could also be explored. Often drama and short skits may come in handy. I am just thinking out aloud “could a documentary be made of alternative lifestyles and South Asians” – could this generate some passionate discussion?

4. Is there a difference between Toronto versus Peel gay scenes?

Yes, there is a difference between the two scenes. There is no gay scene in Peel, but there is a huge one in Toronto. As far as I know, there is no gay scene in Peel. They all come to attend the gay scene in Toronto.

Peel is a very backward municipality. Even the service providers are not sensitive, not even the South Asian service providers. I have never seen a South Asian service provider from Peel attend any event organized by the gay community.

5. “Coming out of the Closet” – Can this safely done in the SA community. Do SA gays want to “come out of the closet”?

I came out because I was white washed and was with a white partner. Now that I have become much wiser, I realize that I could have spared myself

and my family a lot of anguish and bad moments, had I just kept the sexual identity to myself.

It is not easy for the family to survive. Let me share with you what happened to me. Once I disclosed, my brother's wife found out. She went in her family and told them that I was gay. She not only told them that I was gay, but also told them a lot more which was not true. My parents were absolutely shocked. This was one way my brother's wife could get back at my parents. Once it was out, there was no stopping. My parents stopped attending family or friends' gatherings. They would not go anywhere. They were locked at home. Initially, people came to visit us to snoop around for some "juicy" information. We could clearly see that the people attending are trying to steer conversation in that direction. There were instances when my parents and my brother and his wife started arguments because of me. I started to feel responsible for the "mess" I had created. I was depressed and moved to another city. My mother is naïve. She keeps pestering me to get married. She thinks that, when a person starts living together, they get to know each other and fall in love. She thinks I would fall in love if only I married a girl. She thinks I need to "practice" being with a woman. She cannot understand why I will not marry a woman. I would not advise anyone to "come out" in the community – not a safe thing to do.

6. Religion versus Homosexuality – any thoughts?

Religious institutions are controlled by men – reactionary and backward men. One cannot expect any good to come from their leadership. I am not just talking about the gay issues but what about the abortions (girls are aborted), dowry deaths, discrimination against "untouchables" classes etc.? I am religious but I don't go to any religious institution.

7. HIV/AIDS and Homosexuality – any thoughts?

All I would say is that one should practice safe sex, whether one is gay or straight. HIV/AIDS does not differentiate between rich or poor, black or white, gay or straight.

Lately the attention is being diverted to Africa and some pressure is on gays. But regardless, I think there is a lot of stigma attached to both HIV/AIDS and homosexuality. The moment someone finds out you're gay they wonder if you have the disease, and that is hard for someone to deal with.

8. What does the gay lifestyle mean to you?

There has been a lot of light on the gay lifestyle. Things are different, it used to be a lot harder to be a gay man before. Things are changing but very slowly. White people have role models who are gays and lesbians but what about South Asians'. There are no South Asians who have "come out", who are also of high profile.

- **Often some gays/lesbians spend their entire life devoted to gay issues**

I think it is because they are discriminated against. They become passionate and an advocate for their cause.

- **While some gays are gays only some of time**

Some gays and lesbians are also bi-sexual.

9. Would you assist in this project?

I would love to assist in this project, depending on how much time I can spare.

FINDINGS – ONE TO ONE INTERVIEWS

What are the (3) needs of the Gay Punjabi/South Asians in the community?

The participants identified the needs in the following categories as follows:

- Personal Needs:
 - Counsellor
 - Someone they can relate to who is open-minded
 - A friend with a shoulder to cry on
 - Finding a support system that is reliable and safe
 - South Asian specific support groups for gays/lesbians
 - Someone who can help us understand and deal with “feelings”

Support was identified as the biggest need.

- Family Needs:
 - Family needs support and education around the issues and complexities of sexual identities
 - Family needs help to break the denial, minimization and cover-up

Support was identified as the biggest need.

- Social Challenges:
 - Community needs to accept that some people will be gay
 - South Asian men have greater difficulty because of their “ego” and “masculinity”
 - Community needs to be educated around these issues
 - The community is intolerant towards homosexuals and is homophobic
 - The need for a safe space
 - The need to go partying
 - Finding companions who are sensitive

Educating the community, the need for safe space, the need to go partying and finding sensitive companions were identified as significant needs.

5. What is your perception of the South Asian community regarding homosexuality?

Any friends who are supportive?

- Friends are supportive

The participants felt that having friends was very important. Some had bad experiences with friends but all have at least one good friend.

Family: supportive or hostile?

- Family is not supportive

The majority of the participants felt that their family would not be supportive.

General community: supportive or hostile?

- The South Asian community is hostile
- The South Asian community is homophobic
- The South Asian community is dominated by “loud mouths” who are very vocal
- In the name of culture and tradition, gay lifestyle is being rejected by the South Asian community
- “Ghettoized Indians” are more prejudiced against gays
- The South Asian community thinks gay lifestyle is a sin
- The Punjabi community thinks that gay lifestyle gives the community a bad name

The majority of the participants agreed that the South Asian community is homophobic, hostile, dominated by “loudmouths”, and the community believes that it is sin and that gives the community a bad name.

What kind of name calling, remarks etc. were perpetuated against gays and lesbians?

- They say nasty things
- Janana

- Hijra
- Gaandu
- Galat Kaam Karne Wali Ladki
- Line Ka Ladka

The participants were able to point out the derogatory names gays and lesbians were called which are Janana, Hijra, Gaandu, Galat Kaam Karne Wali Ladki, and Line Ka Ladka.

6. In order to raise awareness in the community, which media and medium would be best suited?

The participants agreed that the following media would be most suitable to raise awareness in the Punjabi community:

- Television could be used as a medium to raise awareness by showing movies, biographies and talk shows.
- Radio talk shows are another popular medium for raising awareness.
- Websites may become popular in the near future for the community. In the meantime youth will definitely access websites.
- Articles could be written in newspapers and magazines. There seems to be many South Asian e-magazines which could be used to raise awareness.
- Distributing flyers could be another way of reaching the community.
- Organizing workshops for the community by targeting youth and women.
- Find local celebrities who would champion the gay and lesbian cause.
- Find ways to educate the religious leaders, knowing that this is an impossible task
- Educate Indian service providers
- Educate mainstream service providers
- Educate the community through the medium of arts and drama
- Target youth for education to the community
- Make a documentary on South Asians and alternative lifestyle

The participants recognized the importance of education and awareness arising. This would be achieved through the usage of electronic (TV, Radio, Websites,) and print media (articles, flyers). In addition, arts and drama could also be explored as a medium to impart awareness. The need was expressed to explore the possibility of finding a celebrity who would champion the cause of gays and lesbians. Besides targeting the community, it was felt that both South Asian service providers and mainstream service providers be educated on the complexities surrounding gay and lesbian issues. Make a documentary on South Asians and alternative lifestyle. And, finally explore ways to engage the religious community in destigmatizing the gay and lesbian issues.

7. Is there a difference between Toronto versus Peel Gay scene?

The interviewees expressed that:

- There is no gay scene in Peel
- Gays and lesbians end up in Toronto to party
- Peel is not supportive to gays and lesbians but Toronto is
- Peel is more conservative
- No culturally-appropriate services for South Asians exist in Peel
- South Asian service providers in Peel are homophobic
- Toronto is safer than Peel

The participants expressed that, compared to Toronto, Peel is a very conservative municipality. The participants also felt that there are no culturally-appropriate services for South Asians available in Peel. The perception of the participants was that South Asian service providers were not sensitive to the needs of South Asian gays and lesbians.

8. “Coming out of the Closet” – Can this be safely done in the South Asian (SA) community. Do SA gays want to “come out of the closet”?

The participants expressed their opinions as follows:

- The participants had varied responses. Some had positive experiences while others had very negative. The majority would not “come out of the closet”.
- “Coming out of the closet” is a mainstream term. This has to be handled carefully as the choice will not just affect the individual but it will have its effect on the family as well.
- Family was cited as the biggest reason for not coming out. The family will be “shamed”.
- Owing to the South Asian communities homophobic tendencies, it is not easy to “come out of the closet”.
- One can “come out of the closet” only if one has a very strong family support.

The participants felt that “coming out of closet” was a mainstream term. For some, it had no relevance as it was based on “individualistic” aspirations and did not take into account the needs, complexities and challenges of the family. The family support and resiliency is need for an individual to “come out of closet”.

9. Religion versus Homosexuality – any thoughts?

The following were highlighted by the interviewees:

- Religious institutions are controlled by “reactionary” and “backward” thinking men who are not sympathetic to the gay and lesbian cause.
- The religious institutions are silent when violence against women is perpetuated, when women are forced to undergo abortion for bearing girl children, when men marry women for the sake of entering Canada, how can these institutions defend gays and lesbians?
- Homosexual people are also religious as religion is not the sole property of the heterosexuals.

- I'm not too sure about what it says in Sikhism – or whether it says anything directly about homosexuality. But what I do know, it says is that all people are created equally.
- I've tried talking to priests and they would take me in a corner and whisper about the topic, but these are never addressed in the main hall.
- If religion accepted homosexuality, there would be no problems. This is pivotal; in accepting it. – Proud of Salaam for being a religious homosexual agency.

The participants felt that religious institutions would not be supportive to the issues of gays and lesbians.

10. HIV/AIDS and Homosexuality – any thoughts?

The participants brought out the following issues:

- General perception in the community is that HIV/AIDS is directly linked to homosexual behaviour.
- The participants also agreed that homosexual behaviour puts them at risk for contracting HIV/AIDS.
- Both HIV/AIDS and homosexual behaviour have enormous “stigma” attached to them.
- It is important to practice safe sex whether you are straight or gay.
- There are a lot of assumptions made by the community that, if you are a homosexual, then you must be a carrier of HIV/AIDS disease.
- MSM (men having sex with men) are more at risk for contracting HIV/AIDS.

The participants felt that the community's perception is HIV/AIDS is directly linked to homosexual behaviour. In addition, they also felt that homosexual behaviour puts them at greater risk for contracting HIV/AIDS. Stigma is associated with both HIV/AIDS and homosexual behaviour within the Punjabi community. The community also assumes that, if one is gay, then necessarily one has HIV/AIDS.

Suggestions were made that safe sex should be practiced whether

one is straight or gay. Finally, they felt that MSM (men having sex with men) are more at risk for contracting HIV/AIDS.

11. What does the Gay lifestyle mean to you?

The participants identified the following issues pertaining to the above mentioned questions:

Often some gays/lesbians spend their entire life devoted to gay issues.....

- The need is greater for gays and lesbians to work on the issues related to homosexual issues.
- Nobody gives you “rights”; you have to fight for it.
- The gays spend more time on the “gay issues” because of the discrimination against them by the society in general.

The issues pertaining to gays and lesbians demand a greater attention from them and perhaps that is the reason why many gays and lesbians devote their entire life to the cause.

While some gays are gays only some of time others are.....

- Some gays and lesbians are also bi-sexuals
- Many individuals fluctuate between homosexual and heterosexual behaviour

Many individuals fluctuate between homosexual and heterosexual behaviours and many are bi-sexuals.

12. Would you assist in this project?

The participants had this to say:

- The participants wanted to assist in the project provided they remained anonymous.

The majority of the participants were willing to assist in the project.

SUMMARY FINDINGS – ONE TO ONE INTERVIEW

The following are the summary of findings from one to one interview.

1. For themselves as individuals, support was identified as the biggest need.
2. For the family, support was identified as the biggest need.
3. Educating the community, the need for safe space, the need to go partying and finding sensitive companions were identified as significant needs.
4. The participants felt that having friends was very important. Some had bad experiences with friends, but all have at least one good friend.
5. The majority of the participants felt that their family would not be supportive.
6. The majority of the participants agreed that the South Asian community is homophobic, hostile, dominated by “loudmouths”, and the community believes that it is (homosexuality) a sin and gives the community a bad name.
7. The participants were able to point out the derogatory names gays and lesbians were called which are: Janana, Hijra, Gaandu, Galat Kaam Karne Wali Ladki, and Line Ka Ladka.
8. The participants recognized the importance of education and the increase in awareness. This would be achieved through the usage of electronic (TV, Radio, Websites,) and print media (articles, flyers). In addition, arts and drama could also be explored as media to impart

awareness. The need was expressed to explore the possibility of finding a celebrity who would champion the cause of gays and lesbians. Besides targeting the community, it was felt that both South Asian service providers and mainstream service providers be educated on the complexities surrounding gay and lesbian issues. The participants suggested making a documentary about South Asians and alternative lifestyles. And, finally it was suggested that ways to engage the religious community in destigmatizing the gay and lesbian issues be explored.

9. The participants expressed that, compared to Toronto, Peel is a very conservative municipality. The participants also felt that there are no culturally-appropriate services for South Asians available in Peel. The perception of the participants was that South Asian service providers were not sensitive to the needs of South Asian gays and lesbians.
10. The participants felt that “coming out of closet” was a mainstream term. For some, it had no relevance as it was based on “individualistic” aspirations and did not take into account the needs, complexities and challenges of the family. The family support and resiliency is needed for an individual to “come out of closet”.
11. The participants felt that religious institutions would not be supportive of the issues of gays and lesbians.
12. The participants felt that the community’s perception is HIV/AIDS is directly linked to homosexual behaviour. In addition, they also felt that homosexual behaviour puts them at greater risk for contracting HIV/AIDS. Stigma is associated with both HIV/AIDS and homosexual behaviour within the Punjabi community. The community also assumes that, if one is gay then necessarily one has HIV/AIDS. Suggestions were made that safe sex should be practiced whether

one is straight or gay. Finally they felt that MSM (men having sex with men) are more at risk for contracting HIV/AIDS.

13. The issues pertaining to gays and lesbians demand a greater attention from those who are gay and lesbian and perhaps that is the reason why many gays and lesbians devote their entire life to the cause.
14. Many individuals fluctuate between homosexual and heterosexual behaviours and many are bi-sexuals.
15. The majority of the participants were willing to assist in the project.

SUMMARY OF RECOMMENDATIONS FROM ONE TO ONE INTERVIEW

1. Develop support groups for individuals and families
2. Educate the community about the issues surrounding gays and lesbians, including addressing “homophobia”
3. Develop community development projects which can educate the family about issues pertaining to gays and lesbians
4. Use electronic and print media as a medium to educate the community around the issues of homosexuality
5. Use the “Arts” (drama and poetry) as a medium to educate the community about homosexuality
6. Educate the community by making a documentary of South Asians and alternative lifestyles.
7. Educate mainstream service providers; provide sensitivity training.
8. Educate South Asian service providers; provide sensitivity training.
9. Find ways to engage the religious community in opening a dialogue on homosexuality.
10. Develop culturally-appropriate services for the South Asian community in the Region of Peel.
11. Put a variety of support systems in place to support South Asians who want to “come out of closet”. A project could be developed to create those systems.

12. Educate the community about HIV/AIDS and homosexuality and the link between them.

CHAPTER 9

FOCUS GROUPS IN DETAIL

Introduction

The research team organized two focus groups which were undertaken in the Region of Peel. The participants in the 2 focus groups were as follows:

- Focus group number two: 14 women
- Focus group number three: 16 men

The focus group discussion was not tape recorded. There were two scribes in each focus group. The discussion was facilitated by the facilitator whose main task was to keep the discussion moving.

The facilitator and the two scribes met after the focus group to compile their notes and come up with a report.

Focus Group Women 14 Participants

1. What comes to your mind when you hear the word “homosexuality”?

- Bad
- Mentally sick
- Dirty
- How can they do this?
- Are they trying to imitate whites?
- One woman said – men are homosexuals but not women.
- They must be not normal
- **Analysis:**
 - Some women were clearly not comfortable with the topic. Gradually all started to participate. The majority had negative opinions about the word homosexuality.

2. Can you tell me how does one become “homosexual”?

- I think by looking at others
- By learning from others
- They are born like that
- This must be due to their past sins
- This must be due to their karma
- We can't do anything about it because this is God's will. Only God knows why some things are different.
- **Analysis**
 - The majority had answers to this question. Only two women stated that perhaps they are born with it.

3. Can you tell me what percentage of the population is gay or homosexual?

- Very few
- No, there are many in the white community
- Why are there more gays in the white community than in the South Asian or Punjabi community?
 - It is because “the white culture is different” – “they are able to be more free” – “they are more open” – “they do not feel shy or are less shameful than us”
- **Analysis:**
 - The consensus was that in the Punjabi community it would be one gay person in 1000 and in the white community it would be 1 in 100.
- What about Hijra? Are they homosexuals? (question asked by a participant)
 - There was considerable debate around whether Hijras have sexual organs or not. The consensus was that they have sexual organs which are not fully developed.

- **Analysis:**
 - The majority had no clear answer. They estimated the population of gays to be 1 in 1000 for the Punjabi and 1 in 100 for the white community.
 - They also discussed about Hijras and concluded that they are gays.
- 4. Do you know of individuals in the Punjabi community who are gay or homosexual?**
- Yes, every body said “XX”, who is a radio show host. The discussion centered around him. He was married and he used to have sex with other guys. His wife found out and “all hell broke loose”. She left him when he did not stop. After some time he went back and got married again. She is still with him but the question is how long will she stay with him.
 - There was another young boy (16 years old) who talked and behaved like a girl. There were many similar-looking boys that he used to hang around with. My husband always used to make a comment that “he looks gay to me”. I did not understand what gay meant and, when I asked him he chuckled, and said “soon you will know what gay means – wait a couple of more years in Canada”.
 - There were two female students back home in my university. They always were together. They never talked to any boys. One got married and moved to Canada. She then asked her husband if he could divorce her and bring her friend over. He did divorce her and sponsored her friend. The threesome lived together for many years. When the boy’s parents came from India, he moved out and remarried. Only now can I make out that this was a “lesbian” relationship.
 - **Analysis:**
 - The participants had heard about gay relationships but never really paid any attention.
- 5. Do you know of any persons who may have committed suicide as a result of being gay?**
- No one knew of any person committing suicide as a result of being gay.
 - **Analysis:**
 - The participants had no knowledge of any person committing suicide as a result of being gay.
- 6. How would you help someone who disclosed to you that he or she is gay?**
- We won’t be able to help as we have no knowledge
 - Send them to the doctor. Maybe a doctor can help. Other participants said “what is the doctor going to do – the person doesn’t have fever”, “he is not going to give Tylenol”. This is an emotional issue but how to talk to a person with this problem. We don’t even know what to say.
 - I won’t be able to be of much help. I am with my in-laws. They would never let me help anyone, much less a gay person.

- **Analysis:**
 - The participants felt that they had no skills to deal with someone's disclosure about being gay.
- 7. What will happen to a person who says that: "I am gay?"**
- Be shunned
 - Ostracized
 - Ex-communicated
 - Disowned
 - Family will be disgraced
 - Difficulty marrying other siblings
 - Same for the family
 - Won't be able to live in the same city or town – would have to move somewhere else
 - **Analysis:**
 - The participants felt that the person would not be welcomed at all in the family once disclosure is made.
- 8. What will happen to a family whose child or adult says that: "I am gay?"**
- The family will never be the same
 - The mother will have to "hear" for the rest of her life
 - The mother will bear the father's anger or wrath and the in-laws wrath
 - There will be increased tension in the family
 - The men would have an excuse to drink – 'Look what you child did'
 - It will be very difficult to survive in the community
 - Other women will "gossip" and find pleasure in talking about the issue
 - **Analysis:**
 - The family will experience extreme stress over the issue.
- 9. Have you heard the term "coming out" before and what does that mean to you?**
- The participants were equally divided
 - It means that the person let the world know that he/she is a homosexual
 - Other participants said that "coming out" does not necessarily mean that one has to announce it to the world. It could also be that the person selects those who needs to know about the person's sexual identity.
 - **Analysis:**
 - The participants felt that "coming out" meant disclosing to others about their sexual identity.
- 10. (a) Can you tell me your definition of the family?**
- Husband, wife and children
 - Husband, wife, children and in-laws
 - Husband, wife, children, both in-laws
 - Husband, wife, children and his brother and his family
 - Single mother with children

(b) Would you agree to the definition that two women or two men become a family?

- I don't mind
- Yes, I would mind. This goes against the very definition of family.
- But, the definition of family has been changing. Even in the Punjab the family is no longer the same. Many seniors are not living with their sons.
- Every thing is changing. Now even the daughters have the right of inheritance from the father's property. This change we accepted. Why can't we accept this change?
- No, we can't accept this change because this is not natural. It is artificial.
- Even if this is artificial, who are we to pass a judgment on what is right and what is wrong.
- But, soon this will engulf everyone and no one will be left to marry in a normal way.
- Are you saying that everyone will become gay?
- Yes.
- But that is not how people become gay. They are born gay and not all are born gay. It is not about becoming gay.
- **Analysis:**
 - The traditional definition of family is more acceptable to the majority of the participants than a more modern one.

11. (a) What do you think is the stand of religion on homosexuality?

- The Sikh religion will not support being gay

(b) Are we saying that Sikh religion is intolerant?

- No, Sikh religion is tolerant but this is against religion

(c) Did the Guru's say anything about being gay?

- No, but this is not normal
- I think we need to do some studying
- I think Akal Takhat should be approached
- I think people would be scared to talk about it because of "fundamentalism and militant views of Sikhs"

(d) What about other religions?

- Islam – they would not accept gay lifestyle. A friend of mine who works with me in the factory told me that in the Quran it is written that a gay lifestyle is sinful.
- Hinduism – it is difficult to say because Hinduism is very complex. There are many Gods and Goddesses.
- I think the Hinduism would be tolerant – when I was young, we went to Khujrao and I saw all kind of sculptures depicting various styles. I think the Hindu religion would be more tolerant. But would Hindus culturally accept it, that's another story.
- We need to separate religion from culture.
- **Analysis:**
 - The participants were of the opinion that the Sikh religion would not support gay lifestyle.
 - The participants were of the opinion that Islam would not support gay lifestyle.
 - The participants were divided over Hinduism.

12. If you met a gay person, would you:

- | | |
|---|--------------------------|
| a. Be repulsed? | No |
| b. Feel pity? | Yes, we will feel pity |
| c. Be in a denial? | No |
| d. Be tolerant or not tolerant? | We will be tolerant |
| e. Accept the individual? | With difficult |
| f. Support the individual? | May not be able to do so |
| g. Celebrate with them? | No |
| h. Join with them to activate in their cause? | No |

- i. The participants felt that they would feel pity for the individual. They recognize that these individuals go through many difficulties. No body chooses difficulties.
- ii. They also elaborated that they would be tolerant because they are also human beings. So what if they are different...
- iii. They would talk to the individual but would not be able to support them. Their own "family" obligations would prevent them from being helpful to others.

II Analysis:

- II Participants would not be able to do much due to family obligations.

13. Would the community benefit from education about homosexuality and what would be the best medium?

- The community would benefit from education about homosexuality. But, how would they attend these seminars.
- It was decided that the education should be imparted slowly in conjunction with other groups.
- The suggestions were to use radio, television, websites for youth, and workshops.
- Community needs education about how to seek help. Our Punjabi agencies need to provide help in this area. The white agencies need to be more sensitive. Both should somehow work together.
- **Analysis:**

- II The community would benefit from education about the issue.
- II The community could use existing groups to talk about this issue.
- II The community could use radio, television, websites for youth, and workshops

Any other issue that comes to your mind

This group was very good.

I am glad that I participated.

I learnt something new today.

Focus Group Men 16 Participants

1. What comes to your mind when you hear the word “homosexuality”?

- Sick
- Will spread disease – HIV/AIDS
- Imitating whites
- Bring shame to family
- Not a normal behaviour
- **Analysis:**
 - Men were comfortable with the topic. Everyone participated. The majority had negative opinions about the word, ‘homosexuality’.

2. Can you tell me how one becomes “homosexual”?

- They are born with it. No, if the father or mother is gay, then there are greater chances of a person turning out to be gay. No, that’s not true. This has nothing to do with “learning”. You must be born with it.
- I know that at about 12 years of age, boys and girls start liking each other. But for some reason some girls and some boys only like members of the same sex. I don’t know why it is, but it is.
- Perhaps it is related to hormones.
- What do the doctors say (they seem to have answers for everything?)
- Doctors want to make money and they would do surgery for every little thing. If you want a short “tummy”, they will do the operation; if you want longer penis size they will do the operation. Here in Canada everything is a business.
- Maybe some day these doctors will come up with a pill. If you take it, you will become a heterosexual.
- **Analysis:**
 - The majority concurred that one is born a homosexual.

3. (a) Can you tell me what percentage of the population is gay or homosexual?

- In white community it is quite wide spread and accepted
- But, in the Punjabi community there aren’t that many gays. Perhaps they are all underground.
- I would say that in the white culture there is quite a strong opposition to homosexuality. It is not true that all whites are in acceptance of gay lifestyle.

(b) Do you think the population is one in ten or one in twenty or any other number?

- The participants thought that in the Punjabi community it would be 1 in a 100.
- **Analysis:**
 - They estimated the population of gays to be 1 in 100 for the Punjabi.

- 4. Do you know of individuals in the Punjabi community who are gay or homosexual?**
- Radio show host. Everybody in the community knows about him, that he is gay.
 - (This discussion was allowed by the facilitator to gauge the views and reactions of the participants.) The discussion centered around what gay lifestyle is. One participant claimed to personally know a man who is this host's lover. Every time this host wants to have sex, he phones this person. They both drink and this person "mounts on top of him and penetrates him". Other participants asked him if both were practicing safe sex to which he replied that he doesn't know if they are.
 - His wife seems to know that her husband is gay. His first wife had left him and now he lives with his second wife. There are "rumours" that other men were sleeping with him and his wife knows about it. Considerable disagreements occurred whether this could be true or rumors.
 - **The facilitator brought the discussion back to the question:**
 - Participants started to disclose other individuals they think were gay:
 - A young man who lives in the apartment buildings at Kipling is gay. I know this because his brother-in-law told me.
 - I know a man who is married but goes to Toronto. He has a partner in Toronto.
 - I know one woman who left her husband for another woman. She was a very educated woman. Everyone thought this was a great couple.
 - **Analysis**
 - The participants knew about gay relationships.
- 5. Do you know of any persons who may have committed suicide as a result of being gay?**
- Participants disclosed of one Sikh boy who committed suicide in the 1990's. The rumour had it that he was gay and he could not deal with his sexuality.
 - The participants also discussed that it would be very difficult to disclose the "real" reason for someone committing suicide.
 - **Analysis:**
 - The participants had heard about a young man committing suicide as a result of being gay.
- 6. How would you help someone who disclosed to you that he or she is gay?**
- Depends on what type of help is needed. We won't be able to keep him at our house or help him find a partner.
 - We won't be able to help as we have no knowledge of gay lifestyle.
 - I won't be able to help much. I am a married man and don't want any discussion on this topic in the home.
 - You think by listening your children will become gay (everyone laughs)

- **Analysis:**
 - The participants felt that they had no skills to deal with someone's disclosure about being gay.
- 7. What will happen to a person who says "I am gay"?**
- Shame for the family
 - Family will be disgraced
 - He or she will be shunned
 - He or she won't be able to live in the same city or town – would have to move somewhere else
 - Ostracized
 - Excommunicated
 - Disowned
 - Difficulty marrying other siblings
 - **Analysis:**
 - The participants felt that the person would not be welcomed at all in the family once disclosure is made.
- 8. What will happen to a family whose child or adult says that: "I am gay"?**
- The family will never be the same
 - I think the mothers should keep an eye on the children better than just talking on the phone all day long
 - If this happens to me, I will ask him to leave the house (I will try to persuade him to leave that lifestyle)
 - There will be increased tension in the family
 - It will be very difficult to survive in the community
 - Other relatives will "gossip" and find pleasure in talking about the issue
 - **Analysis:**
 - The family will experience extreme stress over the issue.
- 9. Have you heard the term "coming out" before and what does that mean to you?**
- The participants had not heard the term
 - **Analysis:**
 - No one knew about "coming out".
- 10. (a) Can you tell me your definition of the family?**
- Husband, wife and children
 - Husband, wife, children and in-laws
 - Husband, wife, children and his brother and his family
 - Single mother with children
 - Common-law relationship
- (b) Would you agree to the definition that two women or two men become a family?**
- No, I would not agree. Because the current definition is OK to me. I don't like to expand it.

- But, the definition of family has been changing. Even in India the family is no longer the same. Families are falling apart and family is not what it used to be. Tell me how many wives are willing to live with in-laws. They are doing it because they have no choice; otherwise, they would not want them to stay.
- **Analysis:**
 - The traditional definition of family is more acceptable to the majority of the participants than modern one.

11. (a) What do you think is the stand of religion on homosexuality?

- Sikh religion will not support being gay.

(b) Are we saying that Sikh religion is intolerant?

- No, Sikh religion is tolerant but this is against religion.

(c) Did the Guru say anything about being gay?

- No, but this is not right
- I think there should be no discussion about it

(The facilitator stopped the discussion on this particular topic.)

(d) What about other religions?

- Islam – they would not accept gay lifestyle.
- Hinduism – Pundits would never accept gay life style.
- **Analysis:**
 - The participants were of the opinion that the Sikh religion would not support gay lifestyle.
 - The participants were of the opinion that Islam would not support gay lifestyle.
 - The participants were of the opinion that Hinduism would not support gay lifestyle.

12. If you met a gay person, would you:

- | | |
|--|--------------------------|
| ▪ Be repulsed? | No |
| ▪ Feel pity? | Yes, we will feel pity |
| ▪ Be in a denial? | No |
| ▪ Be tolerant? | We will be tolerant |
| ▪ Accept the individual? | With difficult |
| ▪ Support the individual? | May not be able to do so |
| ▪ Celebrate with them? | No |
| ▪ Join with them to activate in their cause? | No |

- i. The participants felt that they would feel pity for the individual. They recognize that these individuals go through many difficulties.
- ii. They also elaborated that they would be tolerant because they are also human beings. "So what if they are different."
- iii. They would talk to the individual but would not be able to support them. Their own "family" obligations would prevent them from being helpful to others.

II Analysis:

- II Participants would not be able to do much due to family obligations.

13. Would the community benefit from education about homosexuality and what would be the best medium?

- The community would benefit from education about homosexuality.
- The suggestions were to use radio, television, websites for youth, workshops. Bring doctors who can talk about this subject with some authority.
- There is a need for the community to know where they can go for help in a nice and comfortable way. At this moment we don't know where help is available. Even people need to know how to seek help. Where are the agencies and which agencies would be helpful? Can both our agencies and white agencies work together? I think that would be the best solution.
- **Analysis:**
 - II The community would benefit from education about the issue.
 - II The community could use radio, television, websites for youth, and workshops

Any other issue that comes to your mind!

No

SUMMARY FINDINGS - FOCUS GROUPS

1. The participants had negative opinions and connotations about the word “homosexuality”.
2. The majority of the participants in the women’s group had no clear knowledge about how one becomes homosexual. The majority in the men’s group concurred that one is born a homosexual.
3. The women’s focus group estimated the percentage of homosexual population in the white community to be at 1 in 100 and 1 in 1000 for the Punjabi community while men had estimated at 1 in 100 for the Punjabi community.
4. The participants in both groups had heard about gay relationships but had never really paid any attention. The participants in the women’s group had no knowledge of anyone committing suicide as a result of being gay. The men’s focus group did know of one young man committing suicide as a result of being gay.
5. The participants in both groups felt that they had no skills to deal with someone’s disclosure about being gay.
6. The participants in both groups felt that the person would not be welcomed at all in the family once disclosure is made.
7. The participants in both groups felt that the homosexual individual’s family would experience extreme stress over the issue.
8. The participants in women’s group felt that “coming out” meant disclosing to others about sexual identity. The men’s group had no idea what “coming out” meant.
9. The participants in both groups felt that the traditional definition of family is more acceptable to the majority of the participants than modern one.
10. The participants in both groups were of the opinion that the Sikh religion would not support gay lifestyle. The participants in both groups were of the opinion that Islam would not support gay lifestyle. The participants were divided over Hinduism in the women’s group, while the men’s group felt that Hinduism would not support a gay life style.
11. The participants in both groups felt that they would not be able to do much due to family obligations.
12. Both groups felt that the community would benefit from education about homosexual issues and could use existing groups to talk about this issue. Radio, television, websites for youth, and workshops, could facilitate raising awareness.

13. The group identified the need to create appropriate services by the Punjabi agencies by working together with the “white” (mainstream) agencies.

SUMMARY RECOMMENDATIONS – FOCUS GROUPS

1. Develop projects to raise awareness in the South Asian community about the complexities of homosexuality in a culturally appropriate manner.
2. Educate the South Asian community about current factual information on homosexuality.
3. Prevent suicides amongst South Asian youth who are gay.
4. Develop skills-related training for families in order to deal with disclosures about being homosexuals or “coming out”.
5. Develop projects in order for families to remain united, even when a family member discloses about being gay.
6. Educate the community about expanding the definition of ‘family’.
7. Start a dialogue on homosexuality with faith leaders of all major religions.
8. Start an awareness campaign to educate the community around the issues of homosexuality via radio, television, websites for youth, and skills and educational workshops.
9. Develop culturally appropriate services for the community by collaborating with mainstream agencies.



BUILDING SOCIAL CAPITAL IN THE SOUTH ASIAN COMMUNITY

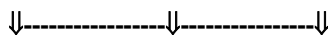
1. SUMMARY OF APPROACH TO HOMOSEXUALITY RESEARCH PROJECT

1. Social Policy Context of Project <ul style="list-style-type: none"> • Healthy Communities • Building Community Capacity • Building Social Capital • Valuing Diversity (Equity, access, etc.) 	↔	2. Purpose of Project <ul style="list-style-type: none"> • To develop individual, family and community's capacity to understand, acknowledge and address the challenges associated with homosexuality in the South Asian community.
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3. Project Objectives

- to determine the level of understanding of homosexuality in the Punjabi community
- to determine if any stigma is associated with being a homosexual in the Punjabi community
- to determine the individual, family and social needs of the Punjabi homosexuals
- to determine the readiness of the community to do something about the complexities of homosexuality



4. Approaches to developing asset inventory <ul style="list-style-type: none"> • Link the collection of data on homosexuality to issues and Aspirations identified by the respondents. (This gives the research personal and social meaning for the community). • Do an analysis of the implications of the research for program planning, activities etc. • Identify how the community can participate in the program planning and delivery of services. 	5. Research questions <ol style="list-style-type: none"> a. How is homosexuality defined in the South Asian community? b. What is the prevalence and complexity of homosexuality in the community? c. How do respondents think these concerns should be addressed? d. How would respondents like to contribute to addressing these concerns? e. Which health promotion strategies will be effective in the South Asian community? 	6. Research Methodology <p>A. Data Collection</p> <ol style="list-style-type: none"> (i) Qualitative research <ul style="list-style-type: none"> ▪ Ten one-to-one interviews ▪ 2 focus group (iii) Literature review <ul style="list-style-type: none"> • From previous survey/reports <p>B. Data Analysis</p> <p>C. Report Writing (Formal)</p> <ul style="list-style-type: none"> • Report for the Punjabi Community Health Centre • Presentation package on findings & recommendations • Summary of findings & recommendations for distribution to the community • Community forum to release findings <ul style="list-style-type: none"> ▪ Publish findings in academic journals
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* Data collection methods will be discussed in detail at the meeting.

Note: Definition (Homosexuality):

"a person who is physically and emotionally attracted to people of the same gender. Because this term has negative historical references, most homosexuals prefer the terms lesbians, gay, or bi-sexual".

Focus Group Questions

1. What comes to your mind when you hear the word “homosexuality”?
2. Can you tell me how one becomes “homosexual”?
3. Can you tell me what percentage of the population is gay or homosexual?
4. Do you know of individuals in the Punjabi community who are gay or homosexual?
5. Do you know of any persons who may have committed suicide as a result of being gay?
6. How would you help someone who disclosed to you that he or she is gay?
7. What will happen to a person who says “I am gay”?
8. What will happen to a family whose child or adult says “I am gay”?
9. Have you heard the term “coming out” before and what does that mean to you?
10. Can you tell me your definition of the family?
11. What do you think is the stand of religion on homosexuality?
12. If you met a gay person, would you:
 - Be repulsed?
 - Feel pity?
 - Be in a denial?
 - Be tolerant?
 - Accept the individual?
 - Support the individual?
 - Celebrate with them?
 - Join with them to activate in their cause?
13. Any other issue that comes to your mind?

NEEDS ASSESSMENT OF THE PUNJABI HOMOSEXUALITY COMMUNITY

INTERVIEW QUESTIONS

1. What are the (3) needs of the Gay Punjabi/South Asians in the community?
 - a. Personal needs
 - b. Family needs
 - c. Social needs

2. What is the perception of the Punjabi community regarding homosexuality?
 - a. Any friends who are supportive?
 - b. Family: supportive or hostile?
 - c. General community: supportive or hostile?
 - d. What kind of name calling, remarks etc., are perpetuated against gays/lesbians?

3. In order to raise awareness in the community, what media would be best suited?
 - a. Radio
 - b. Television
 - c. Website
 - d. Articles

4. Is there a difference between Toronto versus Peel Gay scene?

5. “Coming out of the Closet” – Can this be safely done in the SA community. Do SA gays want to “come out of the closet”?

6. Religion versus Homosexuality – any thoughts?

7. HIV/AIDS and Homosexuality – any thoughts?

8. What does the Gay Lifestyle mean to you?
 - a. Often some gays/lesbians spend their entire life devoted to gay issues
 - b. Some gays are gays only some of time

9. Would you assist in this project?

Participatory Action Research (PAR)

Participatory Action Research⁶ engages practitioners, researchers and citizens in a collaborative process to meet the specific needs of the community (Israel *et al.*, 1994). Participatory research⁷ originated from community development and determines the process whereby people are engaged in creating knowledge for themselves and they in turn take actions on the findings (The Royal Society of Canada, 1995).

In the less developed countries, PAR was used as a method to engage the masses in community development work (Brown and Tendon, 1983). The following characteristics form the basis of PAR (adapted from Israel *et al.*, 1994 & The Royal Society of Canada, 1995):

- The issues are identified by the citizens and not by the health care professionals.

- The collaborative process forces cooperation and collaboration between practitioners (community developers), researchers and citizens.

- Citizens have the wisdom⁸ (A Community Development Strategy for the Health Department, Region of Peel, 1989) to understand and assess their needs which can be incorporated by researchers in order to obtain valid and reliable results.

- This process ensures that citizens have control over the final outcome of the study. The decisions regarding research are made collectively by the research team which has representation from the citizens. Through this process the citizens do get empowered and develop leadership in order to take actions on identified needs.

The process used in this research report has already generated interest amongst seniors to address the identified needs. They have organized themselves into a seniors' group. They have named their group as SAHARA⁹ Seniors Group. They are meeting on a weekly basis and are working on a wall hanging¹⁰ that would depict various forms of homosexuality.

⁶ Israel, B.A., Checkoway, B., Schulz, A. & Zimmerman, M. (1994). Health education and community empowerment: Conceptualizing and measuring perceptions of individual, organizational, and community control. *Health Education Quarterly*, 21(2), 149-170.

⁷ The Royal Society of Canada (1995). Study of Participatory research in Health Promotion, University of British Columbia, Institute of Health Promotion Research.

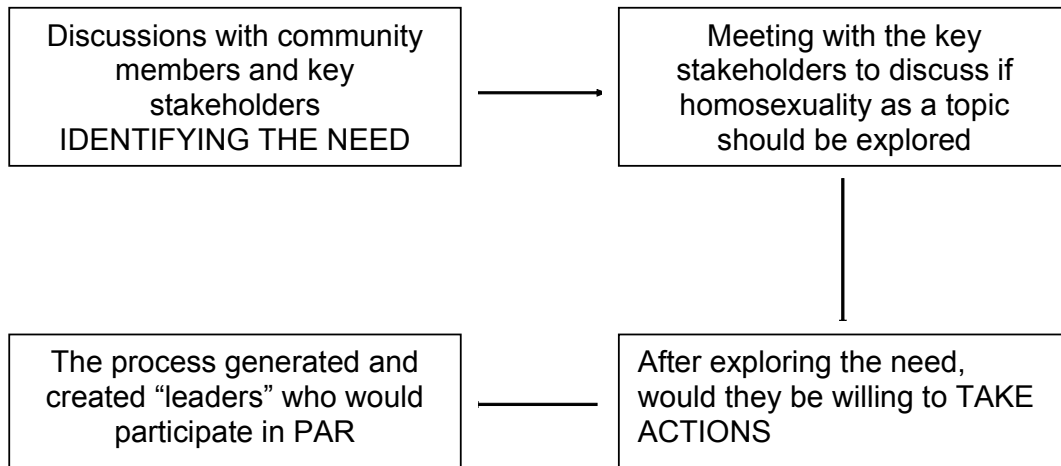
⁸ Commissioner and Medical Officer of Health, A Community Development Strategy for the Health Department, Region of Peel, January 1989.

⁹ SAHARA in South Asian language means "to support".

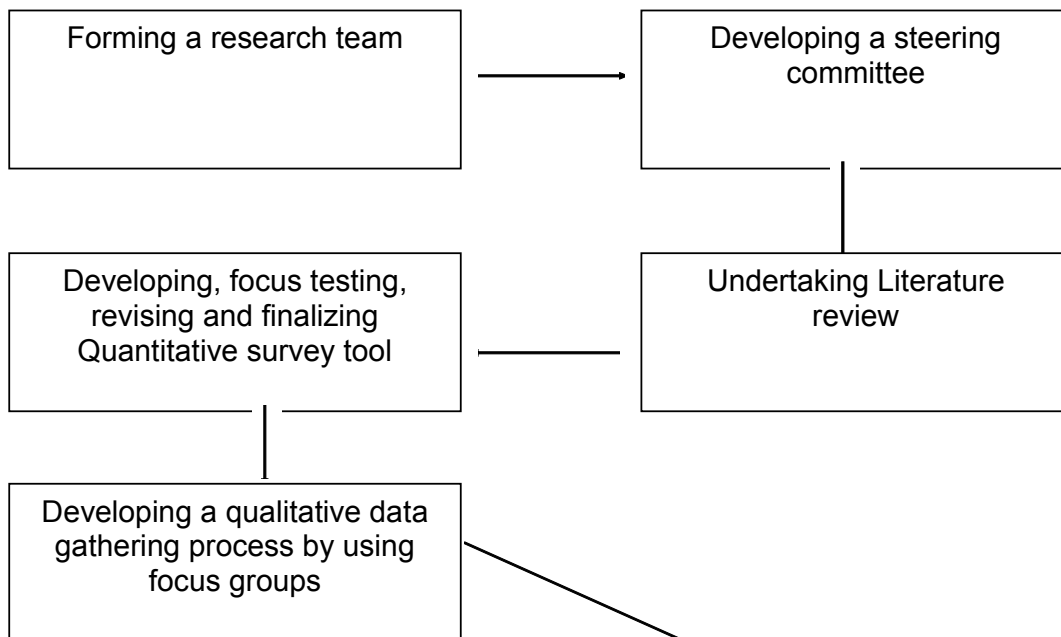
¹⁰ Wall Hanging is an arts and crafts activity that the SAHARA Senior's Group is undertaking which will be displayed at the PCHC's office to raise awareness of homosexuality within the community.

The process could be summarized as follows:

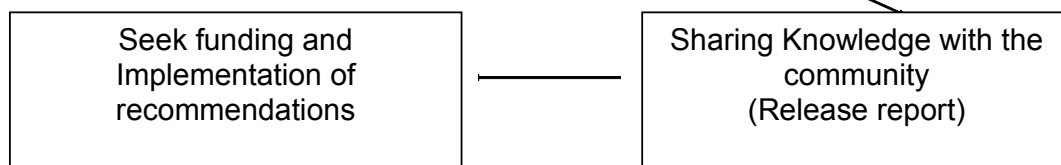
Pre-Research Work:



Research Work:



Post Research Work:



**BUILDING SOCIAL CAPITAL IN THE SOUTH ASIAN COMMUNITY
HOMOSEXUALITY RESEARCH PROJECT
FOCUS GROUP QUESTIONS**

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 - c. Be in a denial?
 - d. Be tolerant?
 - e. Accept the individual?
 - f. Support the individual?
 - g. Celebrate with them?
 - h. Join with them to activate in their cause?
13. Would the community benefit from education about homosexuality and what would be the best medium?

Any other issue that comes to your mind

BUILDING SOCIAL CAPITAL IN THE SOUTH ASIAN COMMUNITY

HOMOSEXUALITY RESEARCH PROJECT

CONSENT FORM

Greetings and Welcome!

The Punjabi Community Health Centre is a non-profit community based social service organization whose main mission is to deliver culturally appropriate social work intervention in the South Asian community. PCHC strongly believes in partnerships with other mainstream and ethno-specific organizations. PCHC has partnerships with Victim Services of Peel, Inter-cultural Neighbourhood Social Services, Catholic Cross-Cultural Services, William Osler Hospital, Can-Sikh Cultural Centre, and Sikh Heritage Centre.

Punjabi Community Health Centre (PCHC) also runs four programs:

1. SAHARA Men's group is a group program designed to meet the needs of South Asian men in the areas of addiction and anger management.
2. SAHARA Women's group is group program designed to meet the needs of women in order to deal with the aftermath of abuse.
3. Parenting sessions are organized in collaboration with the Mississauga Gurdwara, Art of Living, Peel District School Board, every month.
4. PCHC provides FREE problem gambling counselling.

Punjabi Community Health Centre has received four years funding from the Ontario Trillium Foundation to Build Social Capital in the South Asian Community. The purpose of the four-year project is to develop individual, family and community's capacity to understand, acknowledge and address the challenges associated with Homosexuality in the South Asian community. After the conclusion of the research phase, the project will continue to work with the community to address the identified challenges.

The research team is seeking your cooperation to participate in the one to one interview or in the focus group. Your knowledge, expertise, and beliefs will help us in identifying the complexities surrounding homosexuality issues. For the focus group the time commitment is three hours and for the one to one interview the time commitment is one and a half hours. If you need more information on any of the questions, please do not hesitate to ask me.

Please remember that you may withdraw at any time and you do not have to answer any question you wish not to answer. Please do not write your name on any of the handouts. All information given by you will be confidential and your name will not appear in any of the reports.

Thank you for your participation.

The Punjabi Community Health Centre will release its findings to the community by organizing a public forum. All participants are welcome to attend the community forum.

Thank you!

Rakhi Mutta
Researcher

BUILDING SOCIAL CAPITAL IN THE SOUTH ASIAN COMMUNITY

HOMOSEXUALITY RESEARCH PROJECT

CONTACT INFORMATION

Please contact any of the following persons if you have any questions about the project, the survey questionnaire, the interviews conducted, etc.

1. Rakhi Mutta
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2. Amandeep Kaur
Project Supervisor
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E-mail: amandeepkaur@pchealthcentre.com

BUILDING SOCIAL CAPITAL IN THE SOUTH ASIAN COMMUNITY

HOMOSEXUALITY RESEARCH PROJECT

STATEMENT TO TREAT INFORMATION COLLECTED FROM SOUTH ASIAN SENIORS

AS CONFIDENTIAL INFORMATION

Name of Interviewer: _____

The interviewer understands and promises to abide by the following terms and conditions:

1. The interviewer will not personally use or disclose the information collected from the persons interviewed to anyone.
2. The interviewer will keep the questionnaires completed in a physically secure location and give them to the Coordinator of the South Asian Community Health Centre as directed during the training session for interviewers.
3. The interviewer will return all completed and non-completed survey questionnaires to the Coordinator of the South Asian Community Health Centre at the end of the interviewing period.
4. The interviewer will not contact any individual to whom the personal information collected, relates, directly or indirectly, without the prior written consent of the person who provided the information and the Coordinator of the South Asian Community Health Centre.
5. The Coordinator of the South Asian Community Health Centre will ensure that no personal information provided by the persons interviewed will be used or disclosed in a form in which the individual to whom it relates can be identified, without the prior written consent of the said individual and the Coordinator of the South Asian Community Health Centre.

Signature of Interviewer: _____

Date:

Signature of the Coordinator: _____
South Asian Community Health Centre

Date: