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limits and boundaries with regards to sexual and drug-related practices. Some participants directly attributed sexual risk practices (e.g., increased number of sexual partners, reduced condom use) and related their accounts of HIV seroconversion to condomless sex under the influence of drugs. Others resisted this dominant public health discourse and instead suggested that they were able to navigate and explore boundaries often considered "risky" without acquiring or transmitting HIV or other harms. Instead these men suggested that they maintained strict personal rules about condom use with sexual partners and demonstrated awareness and knowledge of HIV transmission and safe injection practices. Recommendations are provided to facilitate the development of HIV, harm reduction, and sexual health educational initiatives and health promotion for this marginalized group that avoids using dominant and stigmatizing public health discourses on risk.

Safer Sex without a Condom: Expanding Discursive Boundaries in Understanding Youth Sexual Health

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Contemporary sexual health initiatives have often promoted condom use as one of the most important ways to avoid risks associated with young people's sexual activities, such as unplanned pregnancy and sexually transmitted infections. Examining the regulatory work of the discourse of sexual health among young people, in this paper I argue that this dominant discourse has positioned young people as (potential) health patients who have no knowledge about their own (sexual) body, are blinded by raging hormones, and therefore urgently need to be "saved" by sexual health educators through contraceptive knowledge, particularly condom use. I argue that the positioning of sex, condoms, and young people through this discourse has narrowly confined the notion of safer sex into very limited, mechanistic practices and simultaneously constrained young people's exercise of sexual agency. Drawing on empirical narratives from Indonesian young people I interviewed during my research, I explore possibilities of resistance towards this discourse in the constitution of young people's sexual subjectivities. The findings exhibit a range of other contextual and more relevant safer sex practices, which might expand the discursive boundaries in understanding youth sexual health.