

Revisiting Female Power¹ and the Notion of African Feminism

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Abstract

This article works from the assertion that African feminism and gender discourse distinguishes itself from its counterpart in the global north by its attention to what are termed the critical indices of ‘bread, butter and power’ issues (Mikell 1997). This article addresses this broad theme through the refractive lens of some of the thematic concerns from a large empirical study of peri-urban African women (see Naidu 2013) and their experiences around the female condom. The article attempts to illustrate that any understanding of gender and feminism in Africa has to make contextual and situational sense to African women, and *their* local lived experiences and realities. By drawing on data from the female condom project (as a situational example), the article acknowledges that the female condom is a female initiated and female controlled intervention, and attempts to contextualise such an intervention within the context of gender and discursive power relations around the female body and female sexuality².

Keywords: African feminisms, gender, women, empowerment, tool

Introduction

Notwithstanding the on-going debate around whether there is such a thing as

¹ The title is a play on the conceptualisation of African Feminism being about ‘bread, butter and **power**’ issues.

² The paper entitled ‘Perceptions around Second Generation Female Condoms: Reporting on Women’s Experiences’, focused specifically on describing and reporting back on my Female Condom and Women’s Health project and appears in *Anthropological Notebooks* XIX-1 (2013) 25-34.

African feminism, this article takes the position that African feminism with its own discrete body of scholarship and practitioners, *does exist*. The feminist anthropologist Ifi Amadiume speaks of the context of ‘African women’s presence in international feminisms’ (Amadiume 2001:47), further giving credence to *both* the heterogeneity of feminisms, as well as ‘African feminism’, by positioning African women, not only within African feminism, but within ‘international feminism’. Indeed, her voice is one among others (also Ata Aidoo; Nnaemeka; Oyeronke) who loudly point out the independent development of African feminism that does not mimic its western counterpart in its search to address African specificities. Pointing out what is now patently clear about labelling and (western and imperialist) nomenclature, Amadiume (2001:48) asserted more than a decade ago that African women acted ‘as feminists, even if not quite identifying themselves as such’.

It was Mekgwe (2008:11), writing in the context of feminism in Africa, who reminded us that feminism, ‘both as an activist movement and as a body of ideas’, underscores the necessity for a ‘positive transformation of society’ where women are not marginalised but recognised and respected as ‘full citizens in all spheres of life’. Mekgwe however, also sounds her rather gloomy warning that this, had however, been alarmingly over theorised. Since her announcement (or dire pronouncement) in 2008, not much has changed. We are thus still confronted, amidst the fine hair splitting around whether there is such a thing as an African feminism or not, as *just how* to have sub-Saharan women fully recognised as bearing the cross of a double vulnerability, and being given the passport to full citizenship *out* of the entanglement of some aspects of that vulnerability. For me, an important aspect of this full citizenship, alongside what has been termed the ‘bread and butter and power’ issues (see Mikell 1997; Akin-Aina 2011) of African women, is that of proprietorship or ownership of body and (their) sexuality. This core issue of the right to perform and enact one’s body within personally chosen sexual scripts is fundamental to owning that citizenship passport. In fact, even in the conceptualisation of feminism that makes *contextual and situational sense* to African women, the third element in the triad, after ‘bread’ and ‘butter’, which speaks in very real and literal terms to issues of socio-economic deprivation and food (in)security, as well as to sexuality, is the issue of power.

I consent that many aspects of the emancipatory agenda that holds the attention of gender activists in the global-north is simply foreign in both

grammar (ideas) and speech (actions) to the women in the global-south. This is especially true in Africa, where reproductive rights and gender equality are perhaps differently understood (or differently positioned) by African women. However, I don't agree with Gwendolyn Mikell (1997) that African feminism is not preoccupied (or should *not* be preoccupied) with the female body, with perhaps the same intensity as women in the north. Quite the contrary, in many respects it is the bodies of women in the developing nations and the bodies of African women in the global-south that have been rendered 'docile' (Foucault 1975:149) by a cluster of colonial and postcolonial historical entanglements, as well as by traditional and cultural scripts that hold sway over how body and in this case sexuality should be enacted and enjoyed.

The perpetual reference point (in heterosexual relations) has been against that of the man, the male body and male sexual pleasure. Amadiume claims that women have 'more individual choices and freedoms, but less collective power'. She asks rather pointedly whether this suggests that modernity has in fact made (African) women more vulnerable (Amadiume n.d:2). This speaks directly (and rather loudly in my opinion) to the discursive notion of control and ownership of the female body. The female condom is a case in point. It is a contraceptive tool offered in the face of female empowerment, female individual choice and (female) 'freedom'. However, it is through probing the use and experience of such a 'female initiated' contraceptive artefact that we are able to lay bare some of the vulnerabilities that still lay embedded within certain categories of African women's realities around sex and body, and further radicalise the discourse on sexuality. It also lays bare the specificity of African feminism, where individual choice and freedom in the context of sex and contraception (type and choice) is not as straightforward as might be perceived in the west.

In her essay in a Codesria Bulletin entitled 'Sexuality, African Religio-Cultural Traditions and Modernity: Expanding the Lens', Ifi Amadiume, does exactly that; in other words, she stretches and expands the lens where she looks at both the so called normative 'prescribed sexual practices', as well as the labelled counter normative or so called 'subversive (sexual) alternatives'. She claims that '[T]here has been a lot of meddling with and fighting over women's sexual and reproductive organs' (Amadiume n.d:1).

This article in turn approaches the dialectics of 'body' and 'sexuality' through the refractive lens of issues that surfaced in a large empirical study

probing women's knowledge and perceptions around the female condom. I do not go into the details of the empirical data and ethnographic narratives elicited from that empirical study conducted with approximately 1220 Black African peri-urban women. The details are presented in a research report in the journal *Anthropological Notebooks* (see Naidu 2013) and the reader is referred to that paper. Instead I refer to some of the salient thematic notions that congealed and came up for critical attention through the study. The essay thus proceeds through the lens offered by these empirical points of reference and indexical issues around ideas of body, power and African feminism/s, within the context of the female condom.

That Thing Called the Female Condom

The female condom (FC) was brought into my office, in literal and conceptual terms by a female student who entered and revealed the condom to me physically from her handbag, as well as conceptually, within the research problem of her Masters study. My discipline head had sent along the Masters student in March of 2012, asking me to act as supervisor. The student was a mature, returning student with an activist background and appeared clearly committed to revisiting an incomplete study that she had begun a few years ago on the experiences of women using female condoms. Her interest was related to policy concerns and she was intent on having feedback from women around female condom use with the aim of being able to generate some recommendations that could translate into a grammar for policy. I began supervising the student and confess that quite synchronistically, her study came along at a point in time when my own research gaze was shifting from a landscape of feminist anthropology and gender and female body, to female body and sexuality within a projected wider public health context. The student's study was delimited to collecting and collating feedback from a relatively small cohort of women who had been exposed to female condom programmes and who were using the product. Although small micro studies are important qualitative works that create ethnographic windows into the experiences of the participants, the limited number of women/participants in certain studies, means that questions of a wider nature, including probing that of the critical mass of women *actually using* the female condom, cannot be gauged. Moreover, my own

intellectual leanings and understandings of African feminisms, alerted me to questions around the female condom and issues of taking body ownership and self-intervention in the context of STDs and the alarming statistics and feminised face of HIV/Aids (see Musaba *et al.* 1998; Feldblum 2001). All of this, I felt, demanded a large empirical study to be able to begin to ask questions within a larger and more meaningful sample population.

The point of insertion for my large empirical study (Naidu 2013), and a point that itself lies at the theoretical core of *this* article, was the rather obvious recognition that the female condom is designed to be used *inside* the female body. However, embedded in this simple and obvious assertion were complex corollaries around wider issues of exercising control over the ‘female’ body. The large empirical study (Naidu 2013) was thus cast against the assumption that female condom could potentially be a powerful contraceptive tool whose use the women could also (potentially) initiate and use against sexually transmitted diseases, and in so doing, also allow them to enact their own sexual scripts, and in some way exercise control over their (sexual) bodies, more especially with the high prevalence rates of HIV/Aids in the sub Saharan geo-political and situated context.

Particular thematic issues surfaced within the study with the women. From amongst the smaller group of the sampled women who had actual knowledge and familiarity of use with the female condom (approximately 111 from 1220 women), emerged issues that spoke directly to discursive notions of bodily ownership and control. Feminist writers like bell hooks, Margaret Locke, Judith Butler *et al.* point out that deeply embedded power regimes (that speak directly to the body politic) cohere around how women are represented in both popular discourses, as well as within medical and health interventions that are assembled for women (and women’s bodies). Promoting female condoms is one such intervention, and is positioned within female health discourses. It is also an intervention that one perceives to be female initiated and female controlled. In other words the condom was meant to be something that the woman wore on her body, and something that she, of her own accord, could decide to wear. Both these points made the contraception (intellectually speaking) highly attractive, and allowed a lens to probe the materiality of the female body, in both an empirical as well as a theoretical manner. Lewis, writing over a decade ago in an introduction to an anthology of papers on ‘African Feminism’ in the popular Journal *Agenda*, tells us that citing the reciprocity between theory and experience or

fieldwork, ‘draws attention to African women’s cultural expression as a vibrant yet often neglected or misrepresented form of theoretical and intellectual intervention’. This article is an attempt to show such a reciprocal relationship between theory and data.

The essay is divided into three sections that theoretically trace the contours of the **‘bread’**, **‘butter’** and **‘power’** metaphor that I believe holds powerful discursive sway in sub-Saharan Africa. Such an enterprise also allows us to confront ‘head on’ what the African feminist scholar Obioma Naemeka (2003: 362) refers to as *both* a ‘necessity’ as well the ‘prudence’ of ‘building on the indigenous’ in the construction of African feminist theory, that has in many respects suffered imperial intrusion. My own stance and entry into the intellectual discussion on African feminisms affirms the need for the recognition of African feminist theory by attempting to proceed through and building on the ‘indigenous’ as Naemeka puts it. The ‘indigenous’ in this instance, is my female condom research project that sought to elicit feedback and responses from particular categories of local peri-urban African women. Such responses in turn allow us to draw back the curtain on issues of ‘bread’, ‘butter’ and ‘power’ in the lived contexts of the women, by proceeding through the material artefact of the female condom and the meaning it has on issues of (female) body and sexuality. It is believed that ‘contextually-grounded African theories’ as well as context specific analytical tools have much to offer to ‘context-specific feminist engagements’ (Lewis 2001:5; see also Kolawole 2002). This article thus works to place the female condom (within such a context specific) African feminist discourse.

‘Bread’: Body and Sex

I use ‘bread’ to represent the (everyday) materiality of the female body. Bread is a vital staple that is often taken for granted as a commonplace everyday item in the domestic larder. It is a seemingly invisible article of food. It is nothing overly special as far as the taste and palate is concerned. As a staple food, its everyday (yet powerful) presence as a basic and stock item renders it almost invisible. Bread stands in direct antithesis to the mostly unheard of (in the average African home) European gastronomic luxury of something like truffles or caviar.

No one misses bread, until there is no bread in the house.

For a significant number³ of African heterosexual women (aged 22 to 38) interviewed within the female condom project (see Naidu 2013), their body was also something that they took for granted in their relationships with their partners. For these women, their body was there to facilitate having children and performing their roles as wives or partners. The feminist Judith Butler tells us that materiality of the body is a 'construction that emerges out of a field of power that shapes its contours, marking it with sex and gender' (Butler cited in Sperling *et al.* 2001:1158). Sex was something that these women felt they were obliged to perform *for* and *with* their male partners in and through their material bodies. However, not until that body was experienced in the context of overt male physical control or violence, did the women think twice about their embodiment as 'female' and (sexual) women. Narratives (Naidu 2013; Naidu & Ngqila 2013) of peri-urban African women complaining that they were concerned about the fidelity of the partners, alongside their (partners') occasional (or even frequent) demand for non-condomised sex, appeared to signal their awareness that their bodies were not necessarily safe within particular traditional scripts of male sexual behaviour.

The female condom, by placing its use within the hands of the women, in both a literal as well as figurative sense, could have been assumed as providing a powerful visual reminder to the women, of their sexuality, and their potential control over that sexuality. It was after all designed for them to use. The big selling point of the female condoms, as mentioned earlier, is that they are designed to be used on the female body; to be inserted *by* the female, into '*her*' body. All of these allude to the female condom being viewed as potentially empowering to the women. Findings from the Naidu (2013) study reveal however, that far from being empowering, the women that used the

³ This is not to say that all the women sampled (n=1200) in the empirical study (Naidu 2013) felt that way. However, the point being made is that a fairly significant number of women, almost a third of the women spoke in a matter of fact way about their bodies. Thus, while a large number voiced ownership and an awareness that their bodies belonged to them, it was nevertheless disconcerting that a significant number still spoke of their bodies in basic terms- as being for motherhood and for the pleasure of their male partners.

female condom grappled with the visual aesthetics of the female condom which are appreciably different from that of the male condom. They commented on how ‘shapeless’, and ‘huge’ the female condom appeared, once taken out of the package. The women bemoaned that such aesthetics appeared to feed, what they saw as ‘male thinking’ about female sexual organs as being big (and ‘loose’) and undesirable. It became obvious that merely making the female condom available for purchase and even free distribution did not alter the already embedded gendered power regimes that were imbricated in male-female bodily and sexual relations. Such embedded regimes undergirded the geometry of power that was skewed in favour of the male (body). For a significant and unfortunate number of African women, the female condom’s large and ill-fitting design served as a discursive reminder that the aesthetics of the shape and size of their bodies was not at the core of informing the actual design of the condom. Notwithstanding some new designs being tentatively marketed now, the bulk of the female condoms being distributed are the ubiquitously designed ‘generic’ one size fits all model. None of this made it any easier for these women to enact sexual scripts that also facilitated sexual pleasure. Their concerns, reinforced by a ‘product’ that was ill at ease with the exegesis of their bodies and their needs, in turn meant that their thoughts remained at the level of merely protecting themselves and their bodies with the female condom, rather than with enjoying themselves *while* being protected. It was Granqvist who pointed out that gender is ‘a social practice that refers to bodies and what bodies do’ (2006: 381). In this instance the gendered female bodies were reduced to protecting the materiality of body, and not much more, in terms of their own pleasure.

‘Butter’: Sex and Pleasure

If ‘bread’ signified the connotative materiality of the physical body, then ‘butter’ is the pleasurable additive to that bread. It is no exaggeration that even a modest sliver of butter on a slice of bread, enhances taste and the (overall experience of the) meal. Sex between partners in heterosexual relations, is meant to be, not only pleasurable for the male, but *also for the female*. This may appear a rather self-evident point. However, narratives from women interviewed, reveal that there are a number of women in

relationships where they are obliged to enact their sexuality within traditional scripts of masculinities (see Naidu 2013; Naidu & Ngqila 2013) and which denied them any active sexual pleasure⁴. To stretch the metaphor of *'butter on bread'*, one can safely add that even the slightest bit of (sexual) pleasure, heightens and enhances the sexual experience. However, many women from the group that had used female condoms complained about the 'fit' of the female contraception being uncomfortable, and they felt that the ill-fitting condom 'could also slip out at any moment'. This in turn further denied them any pleasure, in anticipation of the condom falling out.

Instead, these women voiced that their attention shifted to whether 'it was going to be okay' for the man. Informants (see Naidu 2013) shared that that 'FCs were not 'tight enough', causing an appreciable level of discomfort, and the feeling that they had to 'hold on''. These women were thus also holding on in psychological terms, as during intercourse, their concerns were about the condoms 'slipping off'. This in turn worked to minimise their enjoyment and fulfilment, as they were preoccupied with the condom, which they felt *'just did not fit right'*. They wished *'that there were better fitting versions'*. Yet any visit to the local supermarket or shop around the corner, reveals a mini smorgasbord of range and choice of selection (colours and textures and of course, different sizes!) of male condoms available as opposed to female condoms. Such choice is further entangled and imbricated with notions of sexual pleasure. While colour and texture (of male condoms) may arguably be for the pleasure of either sex, the choice of size is a design element that keeps the bodily exegetics of the male in mind!

⁴ This is not to imply that *none* of the women in the study acknowledged that sex was pleasurable to them. The point being made however, was that there were women who indicated that they were hesitant to openly demonstrate that they found sex pleasurable for fear of being 'negatively' perceived by their partners, as 'loose' and 'fast' women who craved sex. These kinds of responses from the large study precipitated the need for a smaller qualitative bolt-on study where women were selectively sampled. These women were in long standing relationships with their partners and husbands and shared experiences that indicated that they were compelled to enact their sexuality within traditional masculine scripts (see Naidu & Ngqila 2013).

Patricia McFadden, insisted that sexual pleasure was a feminist choice (McFadden 2002, see also the feminist anthropologist Amadiume 2001). While this may appear as a rather obvious statement in the context of western feminism and the global-north, in the context of certain communities of sub-Saharan women, and certainly for some rural and peri-urban Black South African women, it *was and is* an assertion that needs to be vociferously reiterated. Yet in certain (although not all-see Amadiume 2001), African contexts and certain African communities, female pleasure, desire and eroticism are still somewhat tabooed topics. Like the right to condomise, the right to expect full pleasure and communicate desire is a right that is not always able to be asserted. For the women, *asserting the right is not enough to ensure (obtaining) the right*.

The CODESRIA (Council for the Development of Social Science Research in Africa) 2012 programme and training around what they term as ‘African Sexualities’ states on their website that:

Patriarchal society, the colonial and post-colonial contexts show that the male body and the female body bear cultural meanings and representations that reflect power relations within society⁵.

Thus amidst the debate of diversity vs. essentialism, and around whether there is in fact an ‘African sexuality’ that may be different from other types of (western) sexuality or sexualities per se, is the acknowledgement that in the post colony, the female body and male body is differently constructed and bears different cultural meanings and reflections. What is obvious is that this differently constructed cultural meaning is indeed reflective of the power relations in society. Patricia McFadden’s (2002: 2) assertion rings loudly true that for a significant number of Black African women, the ‘connection between power and pleasure is not often recognised’. She goes on to say what is unfortunately true that, patriarchal power is premised and articulates around the suppression of women’s control and power and ownership over their own bodies (McFadden 2002: 2).

⁵ Council for the Development of Social Science Research in Africa (CODESRIA). Available at: <http://www.codesria.org/spip.php/article1563>.

‘Power’

‘Bread’, ‘butter’ and ‘power’.... Within the contours of our extended metaphor, power would be power over being able to ‘eat’ and feed oneself, to eat *when, how* and *what* one chose. Power in the context of the empirical study, is understood as the power and ability to initiate sex, to mutually control sex, and most importantly, to be in charge of one’s bodily health in the context of sexually transmitted diseases and HIV/AIDS.

Nnaemeka (2003: 363) makes the point that in certain poststructuralist contexts, ‘intellectuals erect discursive walls that insulate them from the social action (engagement) needed to promote social change’. Desiree Lewis (2001: 5) points to the work of the Nigerian-British feminist Amina Mama and the South African feminist anthropologist Elaine Salo, where they claim an intellectual chasm between the kind of theoretical work that comes from ‘deductive generalisation’ and ‘analytical distance’ and the ‘rigorous critique of intersecting power relations that stems from involvement in gendered African processes’. Some of these gendered African processes surfaced in the narratives of the women who claimed that notwithstanding the very real fears around HIV/AIDS for themselves (and their male partners) there were times that they felt powerless to demand its use. Through either subtle coercion, or overt force from the partners; they confessed that there were times they felt compelled ‘to give in’ to the sexual demands of the partners, even in the absence of condoms. Comments such as ‘... *why do men always have privilege in our lives and over our bodies ...*’ reveal this sense of powerlessness (see Naidu & Ngqila 2013).

In the regions of sub-Saharan Africa, three women are infected with HIV for every two men⁶. Barker and Ricardo (2005: viii) assert that ‘men’s use of condoms is still always, or frequently, much lower than desired’, and ‘varies according to the reported nature of the partner or relationship e.g. occasional partner, regular partner, or sex worker’. However, many interventions with African women seem not to fully address critical contextual gender issues. One such intervention is that of the female condom. The female condom thus emerges as a *possible* tool whose use the women could possibly initiate and control against also sexually transmitted diseases. However, as pointed out in an international impact study (Marseille & Kahn 2008) and certainly true within the local context as the empirical study

⁶ UNAIDS ‘AIDS Epidemic Update,’ December 2006.

revealed, the female condom lacks a consistent definition of plausible success and acceptance across the different groups of women surveyed⁷. Within the context of the study (Naidu & Ngqila 2013), there appeared norms related to (particular forms of) masculinity and sexuality, such as multiple partners as evidence of male sexual prowess, which placed women at higher risk of HIV infection. Yet such relatively widely publicised norms did not equate to greater power over bodily health and safety for the women.

While ‘bodily integrity’ (Guy-Sheftall 2003:34) is of course critical in the sub-Saharan context and issues around the seemingly feminised face of HIV/AIDS and the ravages of certain contexts of forced female circumcision, I have to add that for me, this bodily integrity also critically extends to ownership and proprietary rights over one’s body in the context of (what ought to be pleasurable) sexual activity. For many categories of African women, this is perhaps not as patronising as it may sound to the ears of Western feminists. Within the particular situational realities of many African women in rural spaces, or generally speaking women in relationships where the power geometries are angled out of their favour (see Mikell 1997; Dosekun 2007) – the male condom cannot always be easily demanded. These are contexts of gendered power imbalances and hegemonic (Connell 1995) masculinities that further pathologise the female body. Morrell (2001:33) asserts that, in the South African context, men respond differently to changing gender relations, and labels these as being reactive, accommodating or progressive. Notwithstanding the levels of agency increasingly exercised by (African) women, subtly coerced performances within a context of ‘traditional’ masculinized practices such as unprotected sex (meant to offer a more pleasurable experience to the male partner), leave some African women vulnerable and forced to negotiate a clutch of distressing health concerns around sexually transmitted diseases, and of course HIV/AIDS (see Kerrigan *et al.* 2000; Brijnath 2007). It is of course cause for concern that any (version of) masculinity asserted does not emasculate the ‘everyday’ agency and power over their own bodies that women *should* be able to articulate (see Naidu & Ngqila 2013).

⁷ Additionally the female condom is at present still much less cost-effective than the male condom based on analytical modelling and based on inherent design flaws that severely inhabit the success of their use.

Conclusion

African feminism which shows its own intellectual trajectory, benefits from an ‘ongoing process of self-definition and re-definition’ (see Akin-Aina 2011: 66) and of course should not capitulate to notions of a global sisterhood that seeks to identify and fix a ‘universalising’ feminist suffragette experience. Certainly some of the issues that surfaced in the study on female condoms lay bare the difference in women’s experiences in the context of the discursive ownership of body and sexuality. It was Obioma Nnaemeka (2003: 358) who reminded us a decade ago that theory has a central and critical role in helping to ‘scrutinise, decipher, and name the everyday’; adding that the, ‘practice of everyday informs theory making’. Our agenda as scholars and activists working with African women and African feminisms thus becomes less about importing ‘theoretical constructs’ that do not stimulate local context specific ‘critiques of epistemologies, methodologies and practices’ (Barriteau 2003: 3 cited in Roach-Baptiste 2011: 1) and more about confronting contextual realities and vernacular discourses that may have been rendered invisible, and potentially silent, even perhaps within the competing and loud dissensions around *what African feminisms is, and whether it actually exists*.

Sinmi Akin-Aina tells us that African feminisms are in ‘continuous flux; engaging with the context in which they are wrought’. She points out that African feminism should resist elements of Western feminism which have nothing to say about the African experience (2011:70, see also Gordon 1997). For her African feminism(s) is instead, and ought to be, a pluralism and heterogeneity that ‘captures the fluidity and dynamism of the different cultural imperatives, historical forces, and localised realities (Naemeka 1998: 5; Lewis 2001: 5). Data from the earlier study (Naidu 2013) allows us to further theorise that for many African women, it is seldom recognised that sexual pleasure is also their fundamental corporeal and emotional (spiritual even!) entitlement, even though certain so-called cultural (and gendered) practices may well work to exclude women from sites related to power in social and material ways (see McFadden 2003:3) and deny (for women) the relationship between sexual pleasure and power, while simultaneously conflating sexuality with reproduction.

I return to my opening comments and bone of intellectual contention with Gwendolyn Mikell (1997) who suggests that African feminism should

not be preoccupied with the female body, with perhaps the same intensity as women in the north. Probing the use of the seemingly empowering female condom amongst certain categories of Black African women has been able to grant a situated example and window into notions of sex and sexuality. It has also offered the discursive space for both empirical data as well as theory for contributing to the continuing discussion on African feminisms and the feminist enterprise and agenda. For me, bodily ownership is fundamental to any feminist agenda that works to dis-entangle women from traditional and cultural scripts that seek to control how body and sexuality ought to be circumscribed and enacted against the perpetual reference point of the man, the male body and male sexual pleasure.

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