

Condom Use among Homosexual Men

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Abstract A postal questionnaire survey of 262 homosexual men was carried out to investigate patterns of sexual behaviour and the use of condoms. Two hundred and twenty-nine of these subjects had been sexually active during the past year, with the mean number of male sexual partners being 8.09. One hundred and eighty men engaged in oral sex, and 117 ejaculated during this activity, of whom 103 (88%) did not use a condom. One hundred and sixteen men had engaged in insertive anal intercourse in the past year, and 102 had ejaculated during this activity. Of these, 32 did not use a condom. Some, however, only engaged in this activity within a monogamous relationship. The overall proportion of men who continued to engage in very high-risk sexual activity was small, however a different picture emerged if the sample was analysed in terms of the number of encounters with different men during the past year. Of the total estimated number of such encounters, almost half involved anal intercourse, and about half of these were unprotected. The reason for the apparent discrepancy is that those who continue to engage in high risk behaviour tend to be particularly sexually active.

Introduction

It is now generally recommended that homosexual men should avoid high risk sexual activity, but that if not they should use a condom to reduce transmission of the HIV virus, particularly during anal intercourse which is considered to be the highest risk sexual behaviour for HIV infection. However, the few studies which have examined condom use among homosexuals have shown that a large proportion of men fail to use condoms as a means of protection.

In studies of gay men in San Francisco, McKusick *et al.* (1985) found in 1983 that just under one third of the men in a non-monogamous relationship, and over one third of those who did not have a primary relationship reported unprotected anal intercourse. In 1985 one quarter still engaged in high risk sexual activity at least once per month (McKusick *et al.*, 1987). In an investigation of 745 gay men from New York City after the occurrence of AIDS, Martin (1987) reported that 49% continued to engage in receptive anal intercourse and that condoms were not used in 80% of occasions. Fox *et al.* (1987) in the Multicenter AIDS Cohort Studies conducted in Chicago, Baltimore, Pittsburgh and Los Angeles in 1986, and Valdeseri *et al.* (1987) in an examination of the Pittsburgh sample, found that two thirds of the men never or hardly ever used a condom during anal sex. In the U.K. only two

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out of 24 homosexual men in a pilot study reported that they used condoms routinely and regularly (Coxon, 1986), and in an investigation of 100 high risk homosexuals attending a sexually transmitted diseases clinic, 75% of the 16% men who had continued to engage in receptive anal intercourse with multiple partners failed to use condoms (Carne *et al.*, 1987).

A number of studies point to a change in sexual behaviour among homosexual men towards the safer practice of sex including fewer partners and a switch to low risk sexual activities (see review by Johnson, 1988). It is clear, however, that a large proportion of those who continue to engage in high risk activities such as anal sex do not use condoms as protection against HIV infection. The present investigation was carried out to provide systematic data on homosexual men's experiences of and problems with condoms, and to examine the reasons for not adopting them as a prophylactic.

Method

A sample of homosexual men with diverse sexual experiences was obtained through a variety of gay organizations and communities. Several groups participated, ranging from those with a membership of predominantly middle-aged couples to those whose membership comprised young single men. Two participating groups were social in nature and one was political. Hospital clinics also participated, as did organizations concerned with AIDS.

Five hundred and twenty questionnaires were distributed in Spring 1988. Two hundred and sixty-nine men returned completed anonymous questionnaires which represents a response rate of 53%. This is high for a study of this type as response rates for postal studies, and particularly for postal studies of sexual behaviour, are consistently low.

Definitions of homosexuality vary from one study to another. For the purpose of the present investigation, criteria for inclusion in the sample were that the respondent identified himself as homosexual or had experienced sexual contact with a man on at least one occasion in the previous 12 months. Seven of the respondents did not fulfil these criteria so that the final sample size was 262.

The questionnaire was designed to obtain data on number of sexual partners, length of relationships and frequency of sexual contact in the past year together with detailed information about mutual masturbation, anal intercourse and oral sex as well as the use of and problems with condoms during these sexual activities.

Results

Characteristics of the Sample

The sample was largely made up of professional middle class men (e.g. teachers, academics, social workers, charity workers, clergymen, nurses, etc.) ($N=169$). There were 27 men with skilled manual jobs, 13 were students, 14 men were unemployed, 21 were retired and 18 were prostitutes. The mean age of the sample was 37.06 years ($SD=14.31$ years).

The subjects were asked whether they would describe themselves as 'completely gay', 'mainly gay', 'bisexual', 'mainly heterosexual' or 'completely heterosexual'. Two hundred and four of the subjects described themselves as completely homosexual, 34 as mainly homosexual, 19 as bisexual, three as mainly heterosexual and two as completely heterosexual.

Sexual Relationships

Of the total sample of 262, 33 had not had a male sexual partner in the past year. This

represents 12.6% of the overall sample. No further questions were relevant to this group, which did not differ significantly in age from the remainder. The average number of sexual relationships with different partners per man during the past year was 28.39 (maximum=380). This value was however highly skewed and somewhat inflated by the number of prostitutes in the sample. If these are left out, the mean number of relationships in the past year was 8.09 (SD=17.27, maximum=270). With the data re-coded into the categories '1', '2-3', '4-10', '11-29' and '30 or more' for number of partners, the median category was '2-3' although towards the top end of this category. A more detailed examination showed that 104 (45%) men had a relationship lasting for over 1 year, and 53 (51%) of these men had been completely faithful to this partner during the past year. Although only 49 (21%) of the men had more than 10 partners in the past year, 134 (59%) of the whole sample of sexually active men had engaged in at least one 'one night stand'.

For subjects other than prostitutes, there was no significant correlation between age and the number of sexual relationships within the past year ($r=0.02$, NS), so that the older respondents had as many partners as the younger ones. The average length of relationship was 146.9 days (SD=141.7) when prostitutes were included, and 160.99 days (SD=140.3) when they were excluded.

The median frequencies of sexual activity reported was 2-3 times a week. Looking just at the 53 men in stable single partner relationships, the median frequency was again 2-3 times a week, which did not differ significantly from that of the other men in the sample.

Mutual Masturbation

Two hundred and twenty-three men (97%) had received manual stimulation from a partner, 120 (54%) of these had done so once a week or more during the past year, and 160 (71%) more often than once a month. Of the 223, 210 (94%) ejaculated during this activity.

Respondents were asked how long masturbation lasted during a session of lovemaking. Response categories were 'less than 1 min', 'about 1-5 min', 'about 5-10 min', 'about 10-20 min' and 'more than 20 min'. The modal frequency lay between '1 to 5 min' and '5 to 10 min' suggesting that about 5 min was the norm. Only 11 subjects (4.8%) reported spending less than 1 min on this activity, while 45 (19.7%) reported that they spent more than 20 min.

Only 16 of the 223 subjects (7%) who received manual stimulation from a partner reported the use of a condom, and of these only one used them all the time. Two hundred and seventeen respondents gave reasons for not using condoms during masturbation. One hundred and seventy four (80%) felt that this was unnecessary as masturbation is considered to be 'safe sex'. Thirty two (15%) reported that they didn't like condoms, mainly because of lack of sensitivity or discomfort. The remaining 11 (5%) gave other reasons such as unavailability or habit.

Oral Sex

One hundred and eighty individuals (79% of the sexually active men) experienced oral stimulation from a partner in the past year. Of these, 78 (43%) did so once a week or more. One hundred and seventeen (65%) ejaculated during oral sex at least on some occasions, and 22 (12.2%) ejaculated during oral stimulation once a week or more. One hundred and seventy eight men, 78% of the sexually active sample, had given oral sex during the past year, of these 88 (49%) had done so once a week or more.

The reported median duration for receiving oral sex was 'about 1-5 min', with only 12 persons reporting that it lasted less than 1 min and only 15 reporting more than 20 min. The

median time for giving oral stimulation was somewhat longer at '5-10 min'. It seems likely that the discrepancy is due to subjective and psychological aspects of time perception. As might be expected there was a positive correlation (0.20, $p < 0.01$) between duration of oral stimulation and frequency of ejaculation by this activity.

Of the 117 men who ejaculated during oral sex, 103 (88%) never used a condom. One hundred and fifty-seven men gave reasons for not using a condom during oral sex: 102 (65%) reported that they felt it was unnecessary to do so, either because ejaculation did not occur during this activity, because they were involved in a monogamous relationship or because they considered this to be a low risk behaviour; 40 (25%) gave dislike of condoms as a reason, and 50% of these mentioned taste as an off-putting factor; 15 (10%) did not use condoms during oral sex for other reasons, such as lack of availability and irresponsibility. Of these men who ejaculated during oral stimulation and did not use a condom, 73 (71%) had had more than one sexual relationship during the past year.

Anal Intercourse

One hundred and sixteen individuals (51% of the sexually active men) reported that they had engaged in insertive anal intercourse during the past year. Of these 28 (24%) had done so once a week or more, and 49 (42%) more than once a month. One hundred and two (88%) ejaculated during this activity.

One hundred and six (46%) engaged in receptive anal intercourse in the past year. Of these, 35 (30%) had done so once a week or more, and 50 (47%) more than once a month. Anal sex was not always reciprocal. Only 86 men (38% of the sexually active sample) reported that they had not ever engaged in either insertive or receptive anal intercourse during the past year. The median reported duration of insertive and receptive anal intercourse was 8 min and 10 min respectively.

Of the 116 men who engaged in insertive anal intercourse, an estimated 39 (34%) did so on every occasion of sexual activity. These subjects had sex with an estimated 2,059 sexual partners between them within the past year. A further 17 subjects engaged in insertive anal intercourse with about half of their partners, and these accounted for an estimated additional 197 encounters with different partners. Accumulating estimates further, 24 subjects had insertive anal intercourse on about every fifth occasion accounting for a further 252 different partners, and those who had insertive anal intercourse less than one time in ten accounted for another 113. Thus the total estimated number of different partners for the sample of 116 men who engaged in insertive anal intercourse during the past year therefore 2,621. This compares with an estimated overall number of different partners for the whole sample of sexually active men of 5,598, so that almost half of the sexual relationships with different partners involved anal intercourse.

Of those 102 men who ejaculated during insertive anal intercourse, 32 (31%) did not use a condom. After excluding the non-users of condoms who restricted anal sex to a stable relationship, it was found that eight (25%) of the men who stated that they ejaculated during insertive anal intercourse outside a primary relationship did not use a condom.

Thirty-seven respondents gave reasons for not using a condom during anal intercourse. Twenty-two (60%) stated that this was not necessary because they only engaged in this activity as part of a monogamous relationship and often both partners had been tested for HIV. Nine (24%) stated that they disliked condoms either because they were uncomfortable, unromantic or caused a loss of erection. The remaining six (16%) reported either that condoms were not available or that they had simply behaved irresponsibly. Of these six, one

subject reported that "you only become HIV+ once", while another stated that "punters are willing to pay more for sex without a condom".

Seventy-three men in the study responded to the questions concerning sexual dysfunction during condom use. Problems of impotence, premature ejaculation and retarded ejaculation were all found and attributed to the use of condoms. Thirty-nine (53%) men reported a decreased ability to obtain and maintain an erection during anal sex as a result of condom use. Seventeen men (23%) reported an increased incidence of premature ejaculation, and 35 (47%) reported delay in ejaculation.

Male Prostitutes

The total number of different sexual partners reported in the sample was 5,598. However, over 50% of these were due to the activities of eight people, and 75% due to the activities of 13 people, all prostitutes. Ninety percent of these sexual relationships were undertaken by 19 people, representing 8.3% of the sample, and of these 19 almost all were prostitutes.

A number of male prostitutes did not use condoms. Of the 14 prostitutes who engaged in receptive anal intercourse, eight insisted that their partner use a condom all the time, one reported the use of a condom by the partner on some occasions, while for the remaining five the partner never used a condom. These five between them claim to have received over 1,589 (42%) of the estimated total 3,778 anal penetrations from different partners within the whole sample during the past year.

Discussion

Three quarters of the sexually active men had more than one partner in the past year. The average number of partners per man was 28 when the prostitutes were included and eight when they were excluded. Almost 60% of the sexually active men engaged in sexual activity at least once a week. Mutual masturbation was almost always included in sexual activity, often to the point of orgasm. Very few men used condoms during masturbation, mainly because this was considered to be a safe activity. Almost 80% received oral sex from a partner, and two thirds of these men ejaculated during oral stimulation. Almost 90% of those who ejaculated in this way did not use a condom. One quarter of those who gave reasons for not using a condom during oral sex reported that they did not like condoms, and over 50% of these mentioned taste as an off-putting factor. Half of the men engaged in insertive anal intercourse. Almost 90% ejaculated during this activity of whom one third did not use a condom. One quarter of those who gave reasons for not using a condom during insertive anal intercourse gave dislike of condoms as the reason for failure to use them. About half of the men reported problems in sexual functioning associated with condom use.

The frequency of sexual activity for homosexual men in the sample was higher than that found for heterosexual couples (Golombok *et al.*, 1984). Another difference from heterosexual relationships is found for age. With heterosexuals, frequency generally decreases with age, yet with the homosexual sample no such correlation was found, the correlation of sex with age (excluding prostitutes) being -0.03 .

We do not know how representative our sample may be of the population of gay men as a whole. Clearly this larger population is intrinsically difficult to identify, and its scope somewhat dependent on issues of definition. It is also particularly difficult to sample this wider homosexual community in any systematic fashion. However we have no special reason to assume that our sample, with prostitutes excluded, differs in any special way from the population at large, and demographic and other factors imply that it may be reasonably

representative, at least of self-declared homosexuals. The data from the male prostitutes also suggests that an as yet unstudied group of heterosexual men who have recourse to male prostitutes on an occasional basis may be of some importance for future AIDS research.

It is also not possible to compare the findings of the present investigation directly with other studies which have looked at sexual activity and condom use among gay men as they all vary in sampling techniques and scales of measurement. It is clear, however, from all of the investigations, that in spite of the reduction in number of sexual partners and in unprotected anal intercourse which has occurred in recent years, a substantial number of homosexual men continue to engage in high risk sexual activity without using a condom.

Oral sex continues to be a very common activity among homosexual men, and in very few cases are condoms used. Generally the men seem to be aware of the risks associated with oral sex, and seem to recognize the need for precautions, often stating that they do not intend to ejaculate during this activity. In spite of this hesitation, however, a large number of men report ejaculation, and while the rate of swallowing of semen may have decreased in recent years, it seems likely that some semen is absorbed through mixture with saliva, as well as some pre-seminal fluid. Our results indicate that there is a lack of clear information on risk associated with this activity, and that the men seem to be placing a great deal of confidence in claims that this activity is 'safe sex'.

For anal sex there seems to be a wide knowledge among the sample that this is a very high risk activity, particularly as anal intercourse nearly always involves ejaculation. In spite of this, a substantial proportion of homosexual men still engage in anal sex outside a primary relationship without using a condom. A particularly worrying aspect is the large proportion of prostitutes in the study who do not use condoms during this activity. In many ways it seems that, as with adolescent drug abuse, there is a paradoxical effect whereby those who might seem to have the most to lose are psychologically blind to the risks involved. A further cause for concern arises from the discrepancy between the number of reported incidents of unprotected anal intercourse by prostitutes, and the relatively small number of homosexual men other than prostitutes who report having anal intercourse without a condom. This difference may partly be due to a form of questionnaire bias, with different groups of men stressing different aspects of their behaviour. Thus, while homosexual men generally may play down the number of instances in which dangerous activity occurred, the prostitutes may exaggerate as a form of bravado. Another factor may be that many of these prostitutes' clients are from a rather different sample from that of the present investigation, either of homosexual men who for various reasons are not involved in the gay community or in gay organizations, or who are usually heterosexual in their activity. Whatever the reason, our study does suggest greater focus on the activity of male prostitutes and their clients, rather than stable homosexual couples, may be required for a wider understanding of AIDS epidemiology.

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References

- CARNE, C.A., WELLER, I., JOHNSON, A.M. *et al.* (1987) Prevalence of antibodies to human immunodeficiency virus, gonorrhoea rates and changing sexual behaviour in homosexual men in London, *Lancet*, 1, pp. 656-658.
- COXON, A.J.P. (1986) *Pilot study of project on sexual lifestyles of non-heterosexual males* [Unpublished report].

- FOX, R., OSTROW, D., VALDESSERI, R. *et al.* (1987) Changes in sexual activities among participants in the Ten Multicenter AIDS Cohort Study, *Paper presented at the Third International Conference on AIDS*, Washington, D.C.
- GOLOMBOK, S., RUST, J. & PICKARD, C. (1984) Sexual problems encountered in General Practice, *British Journal of Sexual Medicine*, 11, pp. 210-212.
- JOHNSON, A.M. (1988) Social and behavioural aspects of the HIV epidemic—a review, *Journal of the Royal Statistical Society Series A (Statistics in Society)*, 151(1), pp. 99-114.
- MARTIN, J.L. (1987) The impact of AIDS on gay male sexual behavior patterns in New York City, *American Journal of Public Health*, 77(5), pp. 578-581.
- MCKUSICK, L., HARTMAN, W. & COATES, T.J. (1985) AIDS and sexual behavior reported by gay men in San Francisco, *American Journal of Public Health*, 75, pp. 493-496.
- MCKUSICK, L., COATES, T.J., WILEY, J. *et al.* (1987) Prevention of HIV infection among gay and bisexual men: analysis of two longitudinal studies, *Paper presented at the Third International Conference on AIDS*, Washington, DC.
- VALDESSERI, R.O., LYTTER, D., CALLAHAN, C. *et al.* (1987) Condom use in a cohort of gay and bisexual men, *Paper presented at the Third International Conference on AIDS*, Washington, DC.