Understanding poor sexual health in black British /Caribbean young men in London: A qualitative study of influences on the sexual behaviour of young black men

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Declaration

I, Makeda Gerressu, confirm that the work presented in this thesis is my own. Where information has been derived from other sources, I confirm that this has been indicated in the thesis.

Signed:
Abstract

**Background:** Young black British/Caribbean men continue to be at disproportionally high risk of acquiring sexually transmitted infections (STI) in the UK. The processes underlying these findings are not well understood. This study sought to examine the influences that put these young men at higher risk by exploring the social context of their sexual attitudes and behaviours, with a focus on the impact of their identities as black, young and male.

**Methods:** I conducted in-depth interviews with 20 young men and 12 key informants from GUM clinic and community settings in North West London from December 2009 to January 2011 to explore social factors that influence sexual partnerships and behaviours. The data were examined using thematic analysis.

**Findings:** Neighbourhood norms and peer pressure were very influential on sexual behaviour and beliefs from first sexual awareness into adulthood. Intergenerational age mixing and hypersexualised stereotypes created pressure for early sexual debut and restrictions in the expression of black masculine identities. Failed proximate relationships and fear of emotional distress promoted the dissociation of sex and emotion and a disregard for young women. The limited consequences of infidelity and acquiring STIs created little disincentives to sexual risk taking. However, young men reported good access to and experiences of GUM clinics.

**Conclusions:** Ethnicity expressed as cultural influences did not determine sexual behaviour, instead, limiting environments, the power of the local area, peers and stereotyped expectations were detrimental. The combination of black ethnic identities and urban male youth culture in deprived settings created social environments that encouraged particular expressions of masculinity and expectations. The central role of social exclusion and consequent vulnerabilities were overlooked by some key informants in exchange for ethnic or family problems risking the engagement in gender stereotypes overlooking the vulnerabilities and struggles of young men.

These findings have implications for sexual health education, prevention and service provision. There is a need to increase opportunities for young black men in academic
achievement, employment opportunities particularly in deprived areas and to better understand the impact of early sexual debut. Young men also need greater freedom in the ways they are able to express their male identity. Two key points of intervention were identified in the study, early in secondary school and at the beginning of college.
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Abbreviations

BME Black and Minority Ethnic
GP General Practice
GUM Genitourinary Medicine
HPA Health Protection Agency
KI Key Informant (label for quotes)
LAC Looked After Children
MSM Men who have sex with men
Natsal National Survey of Sexual Attitudes and Lifestyles
PATSI Patient Access and the Transmission of Sexually Transmitted Infections
STI Sexually Transmitted Infection
SRE Sex and Relationships Education

(…) words/ sentences I removed from quotes
… pause of participant
[ ] words I inserted into quotes for clarity
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Chapter 1 Introduction

As a target population in the UK, young black Caribbean men are at higher risk of acquiring an STI by virtue of their gender, ethnicity and age. This study focuses on young British black Caribbean men who have sex with women. It will provide a textured portrayal of the context in which young black Caribbean men develop and experience sexual relationships. This work will also consider the wider environmental and social influences on their sexual health and risk behaviour. It is an opportunity to contribute to the health inequality literature, to inform the development of targeted interventions, to tailor health promotion and education and to identify potential points of intervention within young men’s lives.

In this chapter, I will provide some of the background details which are relevant to this discussion. It will become clear that young black Caribbean men experience particular forms of sexual health risk behaviours which are worthy of further examination. This chapter will present and discuss literature exploring the need to focus on heterosexual men, the higher risk of poor sexual health identified among black Caribbean men, particularly young men, and their disadvantaged socioeconomic circumstances. The limitations identified in the literature are also presented, such as the problems of using ethnicity as an explanatory variable and of pathologising social variables.

1.1 Background

1.1.1 Focusing on heterosexual men

Both at an international and national level, heterosexual men have been identified as an important but under targeted group in the field of sexual and reproductive health (Hawkes and Hart, 2000). There are a few clinically effective interventions, based on rigorous randomised controlled trials (RCT), available in community or sexual health settings (Stephenson et al., 2000, Ward et al., 2004); but these focus primarily on interventions that target women, and men who have sex with men (MSM) (Centres for Disease Control and Prevention, 2009, Stephenson et al., 2000). Reviews of behavioural interventions have reported a dearth of interventions targeting heterosexual men and highlighted the need for developmental research with them to better understand factors underpinning their sexual behaviour (Elwy et al., 2002, Ward et al., 2004). Studies focusing on young people have advocated for the importance of gender specific
interventions that engage young people using their own conceptual frameworks in relation to sexual partnerships and perceptions of risk and behaviours (Elam et al., 1999, Low et al., 2002, Sinha et al., 2007). For example by incorporating young people’s prioritization of relationships and trust rather than focusing only on personal health considerations in education and health promotion (Low et al., 2002). These studies give support to the aims of this study and its focus on young black Caribbean men.

1.1.2 Sexual health among black Caribbean men
National surveillance data, national population surveys and clinical and community based studies have all identified a higher risk of poor sexual health among black Caribbean men, acknowledging and emphasizing the need to target this group (Elam et al., 1999, Elwy et al., 2002, Fenton et al., 2005, Low et al., 2002, Macdowall et al., 2006, Ross et al., 2003, Testa and Coleman, 2006, Health Protection Agency, 2012, Health Protection Agency, 2013). For example, over a fifth of gonorrhoea diagnoses made in clinics in 2006 were among black Caribbeans, yet they only comprise 1% of the UK population (The UK Collaborative Group for HIV and STI Surveillance, 2007b). In 2009 the rate of gonorrhoea in black ethnic groups in England was over eight times higher than in white ethnic groups (Savage et al., 2011). This has led to some authors emphasising the importance of delivering information in a “culturally competent” manner (Elam et al., 1999, Fenton, 2001, Testa and Coleman, 2006). Measures of poor sexual health in these studies included disproportionately high rates of STIs, early sexual debut, inconsistent condom use, lower levels of sexual health knowledge, concurrent sexual partnerships and high numbers of sexual partners compared to other ethnic groups.

Despite several UK studies reporting higher STI risk behaviours by black Caribbean men, the differences in reported behaviour are not as great as the variations in STI rates (Elam et al., 1999, Fenton et al., 2005, Low et al., 2002, Testa and Coleman, 2006). It is less clear what cultures or elements of these should be targeted. These findings suggest that sexual health inequalities are a consequence of complex interactions of social factors (including culture, ethnicity, gender, religion, education, socioeconomic status and youth) and their impact on socialization and sexual behaviour (Fenton et al., 2005, Low et al., 2002, Nazroo, 2003, Sinha et al., 2007). However, there has been little work exploring the epidemiological finding through the effects of cultural identity or
environmental and social factors on sexual risk behaviours in the UK (Jayakody et al., 2005).

1.1.3 Age and sexually transmitted infections
Young men and women age 16-24 years are disproportionally affected by STIs and have been identified as a crucial population for targeted health promotion (Health Protection Agency, 2012, The UK Collaborative Group for HIV and STI Surveillance, 2007a, The UK Collaborative Group for HIV and STI Surveillance, 2007b, Health Protection Agency, 2012). In 2006, they accounted for 65% of chlamydia, 55% of genital warts and 48% of gonorrhoea diagnoses in UK GUM (genitourinary medicine) clinics (The UK Collaborative Group for HIV and STI Surveillance, 2007b). The National Chlamydia Screening Program found that in 2006-2007 chlamydia positivity was 14% among black Caribbean young people compared to 10% and 9% among white and black African young people respectively (National Chlamydia Screening Programme, 2007). Moreover, in 2011-2012, positivity in England was higher among males than females suggesting higher levels of undetected chlamydia among men as the screening program involves testing asymptomatic young people outside GUM clinics (Department of Health, 2004, Health Protection Agency, 2012).

1.1.4 Research findings exploring the drivers of ethnic inequalities in STI rates
A challenge in exploring sexual health inequality particularly among ethnic minority groups, is the need to ensure there are no hidden socio-economic differences that can explain the ethnic variations. Analyses of Natsal-2 data found no association between social class and STI transmission (Fenton et al., 2005), however several studies conducted in GUM clinics across England in the 1990s found associations of chlamydia and gonorrhoea with various socioeconomic measures including area level material deprivation scores (Townsend score), and inner city deprived areas (Low et al., 2001, Monteiro et al., 2005). In some instances, associations with deprivation varied between chlamydia and gonorrhoea. Shahmanesh et al. (2000) reported greater clustering of gonorrhoea compared to chlamydia in the more deprived Super Profile classification groups\(^1\) in Birmingham. Lacey et al. (1997) found similar associations between

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\(^1\) Super Profile (SP) classification is geodemographic system used as an indicator of socioeconomic status which groups households into one of 10 categories (A-J) according to characteristics of the household and neighbourhood (Shahmanesh et al. 2000).
gonorrhoea and deprivation in Leeds. In contrast, a 13 clinic London study that examined geographical and demographic clustering of gonorrhoea cases over 6 months in 2004 found no association with the Townsend score of area level material deprivation (Risley et al., 2007). However, the incidence of gonorrhoea among heterosexuals was highest in socially deprived boroughs. There was a strong association between the proportion of the population reported to be of black ethnicity and the heterosexual incidence of gonorrhoea.

There is an array of empirical evidence exposing the socioeconomic disadvantage experienced by many people from ethnic minority groups (Gilroy and Lawrence, 1988, Kalra, 2003, Nazroo, 2006, Riley et al., 2009, Clifton, 2010, Jivraj and Khan, 2013, Nazroo and Kapadia, 2013). Ethnic minority people are more likely to live in deprived urban areas, reflecting poorer employment and housing opportunities. Almost three-quarters of Caribbean people (72%) live in the lowest area deprivation quintile (Townsend Deprivation Score²), while 8% live in the top two quintiles (Nazroo, 2006).

In 2011 London had the highest rate of acute STIs in England. The rates among those living in the most deprived areas were more than three times higher than those in the least deprived areas of London and living in a deprived area remained a risk factor after adjusting for gender and ethnicity (Health Protection Agency, 2012).

In contrast to other minority groups, black groups (an aggregate of black Caribbean and black Africans) have been found to experience similar levels of employment disadvantage regardless of whether they lived in a deprived neighbourhood or not (Jivraj and Khan, 2013). Based on the 2011 census data, about 61% of black Caribbean men aged 16-49 years were employed full-time in England and Wales compared to about 72% of white English men. At 16%, unemployment rates among black Caribbean men were almost three times those of white British men (at 6%) (Nazroo and Kapadia, 2013). Across all ethnic groups young men under 25 years of age had higher unemployment rates than older men. This has a particularly negative impact among ethnic minority groups as they have younger age structures. In 2009, almost half (48%) of black or black British young people (aged 16-24) were unemployed compared to

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² A measure of area level deprivation which combines four variables: house ownership, car ownership, overcrowding, and unemployment (Risley 2007).
20% of white young people (Clifton, 2010). The socioeconomic disadvantage experienced by young black Caribbean men in terms of labour market discrimination is exacerbated by disadvantages in education, health and housing and can constrain opportunities to live outside deprived urban areas.

Based on the greater concentration of ethnic minorities in deprived areas, several studies conducted analyses adjusting for ethnicity and deprivation, but both were found to be independently associated with STI transmission (Lacey CJ, 1997, Low et al., 2001, Shahmanesh et al., 2000). Shahmanesh et al. (2000) suggested that there may be greater sexual mixing among high risk people in high prevalence areas as an explanation for the ethnic association remaining after adjusting for socioeconomic status. Zenilman et al. (2001) proposed that even though over time the number of partners may be similar among people with low and high STI prevalence, key determinants of STI risk are immediate social networks; further, that sexual partner concurrency is higher in high STI risk groups.

According to clinic based studies conducted over the last two decades, living in deprived neighbourhoods was found to increase the risk of STI acquisition (Lacey CJ, 1997, Low et al., 2001, Monteiro et al., 2005, Shahmanesh et al., 2000). This includes a four-fold increased risk found in deprived socioeconomic groups compared to affluent ones in a Leeds (1989/93) and among patients attending 11 GUM clinics in south and central London (1994/5) men in the third and fourth quartile of ward level deprivation having 2.3 (95% CI 1.9-2.9) and 2.2 (95% CI 1.8-2.7) times the risk of gonorrhoea compared to the most affluent first quartile. Monteiro et al. (2005) found that gonorrhoea showed the strongest linear trends showing an association between elevated risk and more deprived socioeconomic status. They reported relative risks of 3 to 4 for the lower socioeconomic groups (e.g. Those in the most deprived group had 4 (95% CI 2-8) times the risk of acquiring gonorrhoea compared to those in the most affluent group). Chlamydia, genital, herpes and genital warts did not show such clear associations with deprivation even though across all 4 STIs socioeconomic group 8 which is predominant in central and urban areas of Leeds had the particularly elevated risks.
On a population level, an association was not found in the second National Survey of Sexual Attitudes and Lifestyles (Natsal-2) between individual social class and reports of STI diagnoses in the last 5 years (Fenton et al., 2005). However, a strong association was reported between chlamydia prevalence and area-level deprivation in the 2010 Natsal-3. These were measured respectively via urine samples collected from 18-44 year old participants and the index of multiple deprivation (IMD)³ (Sonnenberg et al., 2013). Natsal-3 analysis highlighted complex and inconsistent association patterns between sexual behaviours and attitudes, and social determinants such as education levels, individual socioeconomic status and area level deprivation suggesting an intricate relationship between deprivation and STI acquisition (Mercer et al., 2013).

The authors reported greater variation between participants grouped by the two individual-level measures of socioeconomic status (educational attainment and National Statistics Socio-Economic Classifications (NS-SEC)) than between participants divided by area level deprivation. Participants with academic qualifications were significantly less likely to report first heterosexual intercourse before age 16 than those with no academic qualification (among men, age adjusted OR 0.75 95%CI 0.65-0.85 among those with qualifications typically gained at 16 and OR 0.24 95%CI 0.1-0.3 among those studying for or having attained further academic qualifications) and it was also less frequent among participants in managerial and professional occupations than those in lower socioeconomic occupations. This pattern was reversed among women for the odds of having 10 or more lifetime partners. The odds of same sex experiences or contact were also higher among those with higher educational attainment and those in managerial and professional occupations. There was a similar pattern in reporting oral sex in the last year and in reporting greater tolerance towards non-exclusivity in marriage; however there was a reversed pattern for reporting anal sex and an unclear pattern in relation to attitudes to one-night stands (Mercer et al., 2014).

McDaid et al. (2012) conducted a scoping review on sexual health research with heterosexual men and concluded that the effect of deprivation on the sexual health of heterosexual men required further research. These studies did not focus on ethnic

³ The index of multiple deprivation combines seven area level characteristics to create an overall deprivation score based on: employment, income, health, education, barriers to housing and services, crime, and living environment (Jivraj and Khan 2013).
minorities and the authors found that while studies reported higher STI rates among men in the most deprived areas, poverty was not a sufficient explanation for this association. Rather, these findings led to hypotheses about risk perpetuated by a combination of high risk sexual behaviour and the high risk sexual networks that individuals in these areas are restricted to, which further facilitates the transmission of STIs. Disorderly physical environments have also been hypothesised to be better causal indicators of sexual risk taking than deprivation alone with the development of the broken windows index (Cohen et al., 2000). The authors developed the index to measure levels of structural damage, garbage in the streets, graffiti, abandoned cars and the state of neighbourhood public high schools. Disorderly physical environments showed a stronger relationship with gonorrhoea rates than poverty (measured by low income, low education and high unemployment figures) and are thought to influence the association via psychological distress and depression.

Although a causal pathway cannot be determined by their cross sectional study, Cohen et al. (2000) suggest that physical deterioration of a neighbourhood may be a marker for a risk factor for gonorrhoea or itself a risk factor and speculate about a dynamic relationship between environment and behaviour. This combines an individual level and structural level explanation. At the individual level, high risk behaviours are thought to cluster within deteriorating neighbourhoods due to the concentration of individuals with few behavioural restraints who engage in high risk sexual behaviour and neglect themselves delaying seeking healthcare. At the structural level, a deteriorated physical environment that is unsafe and at high risk of vandalism may signal the absence of anyone who cares and the absence of expectations of positive behaviours. This would provide few deterrents to engage in behaviours considered antisocial and few reasons not to engage in high risks sexual behaviour and drug use; furthermore, for some, sex and drugs may become coping mechanisms within a difficult environment (Cohen et al., 2000).

This suggests that while the focus on studies about black men has been on their sexual behaviour and risk taking, the higher risk of STI acquisition may also be influenced by their increased likelihood of living in socio-economic disadvantage. A combination of longitudinal, cross-sectional and clinical studies emphasise the importance of exploring environmental circumstances. Distress and depression can lead to substance abuse
(Elkington et al., 2010), weaken immune systems (McEwen, 1998) and be further compounded by feelings of marginalisation (Karlsen and Nazroo, 2002).

Further, perceived racial and ethnic discrimination as well as passive reactions and tendencies to internalise these experiences have been linked most consistently to negative mental health outcomes while associations with physical health have been more variable (Paradies et al., 2015, Williams and Mohammed, 2009). The absence of direct links to sexual behaviour however should not preclude indirect repercussions. The Racial discrimination in school, the labour market and the criminal justice system are likely to increase the risk of social exclusion among young black Caribbean men. England’s Social Exclusion unit defined social exclusion as “a shorthand for what can happen when people or areas suffer from a combination of linked problems such as unemployment, poor skills, low incomes, poor housing, high crime, bad health and family breakdown” (Social Exclusion Unit, 2001) (para 1.2). Social exclusion has been associated with teenage parenthood and sexual risk taking in the UK (Social Exclusion Unit, 1999). The young people at greater risk of taking sexual risks or deciding to get pregnant were identified as those with unhappy childhoods who grow up with poor material circumstances, dislike school and have little expectations or aspirations for their future (Harden et al., 2006).

A US review of social determinants of STI disparities points to how differences in group prevalence have been found to overwhelm the effects of individual sexual behaviour (Hogben and Leichliter, 2008). The authors suggest a model based on the premise that adverse social determinants of health create a destructive environment which leads indirectly to STIs. The epidemiological context which includes sexual networks and core areas is hypothesised to mediate the relationships between social determinants and the likelihood of STI acquisition. They suggest that segregation, as the organising social determinant, overlaps and interacts with the other key determinants (health care provision and use, social status and disparities in incarceration). These social determinants interact with social norms and STI characteristics to influence the epidemiological context of sexual networks and core areas (STI clustering, neighbourhood disorganisation and disruption and the broken window index) which in turn interact with behaviour and impact on the nature and probability of acquiring an STI (Hogben and Leichliter, 2008).
Based on analyses of a nationally representative probability sample in the United States (US), Laumann and Youm (1999) report that low risk behaviour such as having only one partner in the last year can be undermined among African American populations in particular due to the greater likelihood of selecting partners with different risk behaviours and a greater likelihood of assortative partner selection (choosing an African American partner) compared to other ethnic groups. So for example, a black woman who only has one partner is five times more likely than a white counterpart to have a partner who would be considered a core transmitter (reporting 4 or more partners in the last year). This supports the idea that high risk networks become problematic even for those in the group displaying low risk behaviour.

Poverty, indicators of disregard for the community such as the broken window index, density of alcohol outlets, inadequate healthcare, residential segregation, low sex ratios (due to the disproportional incarceration of black men, which facilitates concurrent partnerships and makes long term stable relationships more difficult), all contribute to create higher risk sexual networks (Hogben and Leichliter, 2008).

This provides further support for the need to examine environment along with individual behaviour, but studies from the US were found to be of limited relevance to the UK setting. Although African Americans have been long identified to have disproportionately high STI rates including HIV and also have a history of marginalisation including the imposition of sexualised identities, there are key differences in health care provision, geographical segregation, political history and their positions in US society. Equivalent immigrants from the Caribbean also have a separate identity to African Americans in the US and are included in research as a comparison group to African Americans. Further complications in making comparisons arise from the large rural African American populations studied in sexual health research, problems of unequal comparisons with other ethnic groups and a focus on very deprived study populations with alcohol and drug addiction problems.

Levels of acculturation have been identified as key in influencing sexual attitudes and lifestyles (Elam et al., 1999); however there is little evidence of acculturation being explored in clinic or population level UK studies on sexual behaviour. The exception is
a case control questionnaire study conducted in Birmingham comparing black Caribbean male GUM clinic attenders (aged 16-35 years) diagnosed with gonorrhoea to a community control group (Ross et al., 2003). Analyses were conducted looking at differences in ancestry, degrees of acculturation in the UK and differences in religious beliefs and zeal. This was in an attempt to reveal factors which may be hidden within ethnic categorizations. Acculturation was investigated to see if a lesser degree of acculturation increased the risk of gonorrhoea by reducing partner choice and creating small sexual networks in which rates can become high very quickly (Ross et al., 2003).

Associations with acculturation as measured by language spoken at home, length of time living in the same place and place of birth were contradictory and there was no association between gonorrhoea and place of birth, religious belief or frequency of church attendance (Ross et al., 2003). A key limitation of the study, which was not adequately discussed, was the acculturation measure which included speaking English at home and length of time living in one place. Neither were particularly relevant measures of acculturation among people of Caribbean origin in an age group (16-35 years old) of likely mobility. This study represents a welcome first attempt but it has not been followed up or repeated with improved measures of acculturation.

The failure to identify mediating factors to explain the association between ethnicity and STIs has been attributed to complex STI transmission determinants, such as sexual mixing patterns, undiagnosed disease prevalence, cultural factors and the difficulty in measuring the effects of discrimination and the relevant elements of deprivation (Fenton et al., 2005).

Patterns of clinic use do not explain the higher gonorrhoea prevalence as there is no evidence of higher levels of attendance for testing resulting in increased levels of gonorrhoea detection (Ross et al., 2003). Further, genetic variations based on ethnicity have not been identified for chlamydia and gonorrhoea (Zenilman et al., 2001), while findings about ethnic differences in partner notification success have been less clear. In part this is the result of studies measuring partner notification success differently. The measures used include the attendance of contacts at clinic and the attendance and successful treatment of patients in addition to different follow up times and different comparison groups. Where differences in rates of partner notification success were
found, there were reports of black Caribbean men and women being less likely to attend clinic, however no ethnic differences were identified in having at least one partner successfully treated for gonorrhoea within 28 days of the partner notification interview (Apoola et al., 2005).

Several UK based qualitative studies provided more in depth contextual clarifications of the seven themes⁴ identified in Marston and King’s (2006) review. I will present these next. Mohammad et al. (2006) explored the experiences of becoming men, how these influenced sexual risk taking and ways of improving sexual health services among young men of Caribbean and African backgrounds in London. The study identified an opportunity to incorporate sexual health promotion and sexual negotiation within a broader context in which young men needed support to transition into manhood and to achieve their goals.

From the perspective of the study participants, becoming a man involved taking on responsibilities, being in control, and achieving a range of independences (including financial and social independence). This transition however was experienced as a struggle. In some instances, specific dramatic events triggered a desire in the young men to alter their lives. These changes often involved taking on family responsibilities and moving from multiple casual to stable sexual relationships. For some, similar dramatic life experiences did not lead to any life changes and they were among the highest risk takers with chaotic and risky relationships.

Qualitative studies exploring STIs among young people have found gender to be a greater influence on normative beliefs about sexual health than ethnicity (Connell et al., 2001, Gerressu et al., 2009, Sinha et al., 2007). The fact that the participants were mostly London born and educated may contribute to shared experiences and influences from school and wider society (based for example on urban youth culture), leading to the dominance of a peer culture over ethnicity based cultural differences among second

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⁴ 1) Young people tend to use subjective and unreliable indicators to assess the STI risk of sexual partners. 2) Condoms can be associated with lack of trust in a partner and can be stigmatising. 3) Gender stereotypes play a critical role in determining social expectations and sexual behaviour. 4) Sexual partners have a strong influence on sexual behaviour. 5) There are social penalties and rewards for sex. 6) Reputations play a key role in the social control of sexual behaviour. 7) Difficulties in communication about sex can be caused by social expectations.
and third generation ethnic minorities (Connell et al., 2001). The blurring of differences particularly between men of different ethnic backgrounds has been reported in relation to teenage pregnancy and sexual lifestyles (Connell et al., 2001, Fenton, 2001).

Elam et al. (1999) reported that men and women in the five ethnic minority communities studied (Jamaican, Nigerian, Ugandan, Indian and Bangladeshi) all valued monogamy as an ideal in a loving relationship; however, having concurrent sexual partners was considered acceptable for men (but not women) among some of the young Jamaican, Nigerian and Ugandan men. Concurrent sexual partnership, long term casual partners and one off casual sexual partnerships were a norm. Jamaican and African men with strong religious views were an exception. In contrast, serial monogamy featured in the sexual histories of Jamaican and African women (Elam et al., 1999). This suggests that these women risk exposure to concurrency of which they may be unaware. Gendered differences in the awareness and context of concurrent sexual partnerships were also identified in qualitative research conducted in North West London among young people of different ethnic backgrounds (Gerressu et al., 2009).

Further community studies of sexual behaviours and attitudes among young ethnic minority groups have not included a sample of white respondents to compare variations in gender norms, perceptions and experiences of concurrency across ethnic groups.

Sinha et al. (2007) suggest that although cultural behaviours such as religious and community norms do influence the behaviour of young people, too much importance may be being attached to cultural differences between them. They advocate for the flexible delivery of sexual healthcare and highlight the importance of avoiding assumptions based on preconceived ideas about culture, religion, ethnicity, youth and gender, as these can have different meanings to individual young people and be expressed through different sexual behaviours.

Elam et al. (1999) report that Jamaican young men were more likely to learn about sex at or before puberty from a variety of sources and to have had first sex at an earlier age (ranging from age 9 to 15 years) compared to young men in the other ethnic minority groups. Those who reported first sex before 16 years of age also tended to describe a high exposure to sex during their childhood, being very curious, wanting to learn about sex, wanting to experience it young and having the opportunity to experiment. The
partner at first sex was usually someone they knew or a causal partner and first sex did not occur within a relationship or evolve into one. The first experience tended to be followed by several sexual partners. When young and single, the use of sex manuals and pornography was considered acceptable and helpful in preparing for sex and in providing confidence within partnerships (Elam et al., 1999).

A subsequent study among young people from three black and minority ethnic (BME) groups (Jamaican, Bangladeshi and Indian) also found Jamaican young men to be the most sexually active and experienced, but also to know the least about contraception (French et al., 2005). Poor sexual health knowledge was a factor in STI rates, especially among the more sexually active participants identified by Testa and Coleman (2006) in their study among black and minority ethnic (BME) young people in London schools.

Despite their early sexual debut, young Jamaican men were also found to receive little parental or adult guidance about sex due to an expectation that they would learn through experience (Elam et al., 1999). This contrasted with women who received cautionary messages about sex and pregnancy instead of relevant basic information. The absence of parental or adult guidance about sex made alternate sources more important for boys; these consisted of friends and young male relatives.

Sex and Relationship Education (SRE) in schools was found to be helpful in providing health information for young people but to occur too late, because it was after many were already sexually active (Elam et al., 1999, Testa and Coleman, 2006). Factors influencing early sexual experiences among the Jamaican young people included interactions with parents, curiosity about sexual matters and early exposure to and experiences of sex. Elam et al. (1999) suggest that in order to alter this behaviour, self-efficacy, better knowledge and formal learning may be important.

Connell et al. (2001) offered behavioural and material causes to explain the ethnic disparities in sexual health. The influence of being young incorporated a sense of invincibility, a desire to experiment with sex and (among men) compete through sexual conquests. Gender issues were discussed in terms of women’s need to be loved and the exploitation of this need by men. Negative attitudes to condoms were a problem along with fatalistic attitudes and feelings of powerlessness to make positive changes in life. The latter concern was attributed by the authors to the generally lower socioeconomic
status of black people in the UK. Perceptions that clinics were not seen as youth friendly were also identified as barriers to health service use as were anxieties about the lack of sensitivity of staff towards young black people in terms of avoiding assumptions and stereotypes (Connell et al., 2001).

1.1.5 Limitations identified in the literature
Attention has also been drawn to the abundance of unsound research into ethnicity and health more generally, resulting from basic errors and incorrect assumptions in epidemiological studies of ethnicity (Bhopal, 1997). These errors include inconsistent definitions of ethnicity, failure to compare like with like (e.g. inner city deprived populations compared with whole population samples), the categorising of heterogeneous people into one group and the failure to adjust for appropriate confounding factors (Bhopal, 1997, Lee, 2009, McKenzie and Crowcroft, 1994, Senior and Bhopal, 1994). The resulting focus on assumed biological or genetic differences, including behaviours incorrectly attributed as set cultural differences to heterogeneous groups, draws attention away from more general inequalities (Bhopal, 1997, Lee, 2009, Nazroo, 2003, Senior and Bhopal, 1994).

Many studies have identified associations between STIs and ethnicity, with higher rates among black ethnic groups. However, there is little understanding about the causal mechanisms underlying these associations. Assumptions about the cultural or biological drivers of ethnic health inequalities encouraged a focus on ethnic differences in promiscuity and morality (Bhopal, 1997), ignoring the structural drivers of health inequalities which disproportionately expose those with ethnic minority backgrounds to socioeconomic and health disadvantage. While patterns of good and bad health have been found to mirror deprivation across different population groups, the effect of social and economic inequalities on ethnic inequalities in health remain debated (Nazroo, 2006) and in many studies and policies, ethnicity is still treated as the cause of health inequalities rather than a potentially unrelated factor (Mir et al., 2013).

While acknowledging the importance of categories for empirical research and the need to move beyond a context specific understanding of a category such as ethnicity, Nazroo warns against looking at ethnicity as an explanatory concept. He suggests that ethnic inequalities should rather be the focus to be understood and explained, considering their
permanence despite the presence of multiple identities, the varying strengths of ethnic identities and the fluctuations of ethnic identities, such as changes in the meaning of categories and the development of new ones (Nazroo, 2014).

Both stakeholders in black communities and health researchers echo concerns about the discrepancy in the amount of health research identifying black communities as higher risk groups in the UK and the limited resulting progress in reducing health inequalities (Bhopal, 1997, Connell et al., 2001, Mohammad et al., 2006). The health research which exists looking at these groups has focused on associations with indicators of promiscuity, academic underachievement and antisocial behaviour, with underlying explanations attributed to race and biology rather than other factors such as social class, lifestyle and employment opportunities (Bhopal, 1997). In particular, sexual health research, looking at ethnic inequalities in STIs has raised concerns about the potential for stigmatizing communities and racial stereotyping with implications on willingness to participate and trust in research findings and intentions (Connell et al., 2001, Elam et al., 1999).

1.1.5.1 Inclusion and involvement of black communities in research
All research occurs within a political context and sensitivity concerns that arise from researching sexual health with young black men have been recognized in the literature (Connell et al., 2001, Elam and Fenton, 2003). Hence the importance of having local people interested, supporting and involved in the planning and implementation of the research. Concerns about stigmatization need to be considered given the real or perceived research fatigue, the negative associations with STIs, stereotypes of promiscuity and the historical discrimination experienced by black communities. This has been illustrated by the observation among professionals working with black Caribbean young people that “research targeting Jamaican young people in recent years has focused on crime, gang culture and STIs” (French et al., 2005). The sensitivity of sexual health research particularly among black Caribbeans and black Africans has also been found to be a possible barrier to participation (Anderson et al., 2009).

This study - Young Men & Sexual Health (YMASH) - developed out of previous work in Brent (North West London) as a response to a locally identified need to target young
black men. It built on existing previously established collaborations with professionals working on or invested in improving the sexual health of young people in Brent with the hope of helping to alleviate the concerns and scepticism of people who feel that resources better used for action or solutions are expended on more research (Connell et al., 2001), or that the black community has been the subject of much health research but with fairly little progress (Mohammad et al., 2006).

The focus of the first half of this chapter has been to introduce some of the key themes to be explored through this thesis. The next section of this chapter outlines the aims and structure.

1.2 Aims
The aim of this thesis is to better understanding the mechanisms that put young black British/Caribbean (referred to hereon as black Caribbean\(^5\)) men at disproportionally higher risk of acquiring STIs, to inform sexual health promotion and the development of more effective education and service provision.

The overall research question is: What influences encourage black Caribbean young men (aged 16-24) to be at a disproportionally higher risk of acquiring STIs and how can they be modified?

In attempting to answer this question, the study focuses on how the young men construct their male, ethnic and youth identities and how their perceptions of these identities influence their sexual partnership formation and sexual behaviour. The sexual risk taking behaviours of particular interest are overlapping multiple sexual partners (concurrency) and sex without condoms along with knowledge about sex and relationships and experiences of sexual debut.

This study postulates that the pathway leading to higher risk of STIs among young black Caribbean men is a function of their identity as male, black and young and the associated exposures and restrictions these identities afford them. My decision to

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\(^5\) Black Caribbean as a broad ethnic group in this study refers to young men who are British of black Caribbean ancestry and were born in the UK or moved to the UK before secondary school (age 11). It was selected as the ethnic grouping based on its use in the 2011 Census, the National Survey of Sexual Attitudes and Lifestyles (Natsal) and GUM clinics where patients are asked to self-identify their ethnic group. Under the broader Black/Black British heading the options are: Caribbean, African, Other Black background ONS 2009. Final recommended questions for the 2011 Census in England and Wales. ONS.
incorporate broader aspects of their lives was particularly influenced by a desire to move away from ideas about problems of dysfunctional black cultures or stereotypes of hypersexualised black men. I will present the social environments within which sexual behaviour develops and operates in order to address a public health gap and provide valuable knowledge for health promotion and programming, health service delivery, education, policy making and future research.

1.3 Thesis structure

In the next chapter, I present the literature review. It includes an overview of UK based research on ethnic differences in sexual health and the health inequality models which informed the qualitative research. The chapter ends with a brief historical background of the Caribbean population in the UK and an overview of the research on the experiences of black Caribbean men in terms of interactions with the judicial and educational systems and the outcomes of disadvantaged socioeconomic circumstances.

In Chapter 3 I present the research methods of this qualitative study. I conducted semi-structured in-depth interviews with 20 young men recruited from a GUM clinic and community settings and 12 key informants who work in professional roles. The chapter includes reflections on my position as the interviewer as well as the young men’s experiences of being interviewed.

Chapter 4 sets out the context of the young men’s lives, exposing the wider influences on their sexual attitudes and behaviours. This entails their physical environment and socioeconomic circumstances. In particular the power of estate influences are highlighted through the impact on the ways to enact male identities and the particular relevance of peer groups, along with the difficulties of making alternative choices given the abundance of negative influences and limited academic, economic and relationship success.

Chapter 5 continues exploring more distal influences following on from the physical and social environment to focus on the young men’s perceptions of their identities as male, black and young and how these are expressed through sexual behaviour. This includes a discussion about the impact of discrimination and powerful sexual stereotypes that add pressure on the young men and require concerted efforts to escape
from. The chapter ends with an overview of how the young men’s gendered stereotypes also affect their perceptions of women generally and more specifically the ones living locally.

In Chapter 6 proximal influences on young men’s attitudes and behaviours are revealed by discussing how young men’s sexual awareness developed, their early sexual experiences, and their sources of information and sex education. Their sexual trajectories are followed by an overview of the realities of relationships they grew up with and live around as well as external pressures they considered influential. Finally sources and gaps in support and advice are presented both from the perspective of the young men and key informants.

Chapter 7 focuses on sexual behaviour. I present qualitative findings about the young men’s attitudes and behaviours in relation to sex and relationships. These are explored through their relationship histories and justifications for different partnership choices. Unintended consequences of sex are discussed as observed and experienced by both young men and key informants followed by their perceptions and explanations for the local sexual health situation.

In Chapter 8, I conclude by discussing the limitations of the study, providing an overview of the study findings, and discussing the implications of this work for future research, public health policy, health promotion and programme planning, education and service delivery.
Chapter 2 Literature review

This chapter begins with a focused review of the research examining ethnic differences in sexual health as they relate to young black Caribbean men in the UK. It begins with some of the macro-level structural factors which frame the experiences of young black British men in London. This includes a brief review of the migration history of black people to the UK and details of the experiences of black Caribbeans in the UK particularly young black Caribbean men. This is key to understanding some of the challenging social positions they hold, the negative ways they are depicted and how discrimination and stereotypes have and continue to impact on their interactions with the educational and judicial systems, as well as their sense of self and perceptions of their sexuality. The sexual health research is heavily focused on epidemiological studies which are able to describe ethnic associations with STI acquisition but are limited in their ability to explain them. These data will be presented and will be followed by an introduction of the theoretical perspectives that influenced the research process and a brief overview of the historical and current positions of black Caribbean men in the UK, to provide context to the study.

The chapter ends with a discussion of the importance of intersectionality as an approach which enables recognition of the ways in which multiple identities combine to produce, for example, particular experiences of ethnicity which are gendered, aged and classed and correspond to particular places and times, both in themselves and in their impact on health-related behaviours.

2.1 Ethnic identities

Race and ethnicity have been used together and separately to describe different things in different studies within health research (Lee, 2009, Senior and Bhopal, 1994). Race has been described in the past as an immutable characteristic and was used to group populations according to supposed genetically determined characteristics. The idea of race as a biological construct has been discredited by social scientists exposing racial ideology and categories as products of social and political interests (Ford and Harawa, 2010). However, there are ongoing debates in medical and health inequalities research about the use of race as a determinant of health through the role of genes (Fine et al., 2005, Ford and Harawa, 2010).
Ford and Harawa (2010) distinguish racialised and ethnic identities in a helpful way. Race is described as a social construct associated to phenotype and or ancestry which has been used to confine people’s positions in social hierarchies based mainly on skin colour. In contrast, ethnicity is defined as a context specific social construct that groups people with shared sociocultural traits. It is used to distinguish populations and determine personal or group identity and consist of two dimensions: the attributional and relational dimensions. The attributional dimension relates to particular sociocultural traits (e.g., language, diet, culture of the group) and the relational dimension encapsulates the relationship between a defined group and the society in which it is located. This is helpful for understanding social stratification and social exposures that affect the health of different ethnic groups (Ford and Harawa, 2010). However the grouping of people by ethnicity can be problematic as a result of being used inconsistently, neglecting sub-group differences or leading to the racialisation of research findings at the expense of class, lifestyle or socio-economic status (Senior and Bhopal, 1994).

The influence of ethnicity as an element of identity and the meaning of this affiliation to young black Caribbean men must be understood in order to explore its influence on sexual behaviour and risk taking. In relation to how individuals behave throughout their lives, common and distinct behaviours and beliefs are believed to be associated with different ethnic groups, so the experience of individuals will also be influenced by what these behaviours and beliefs are believed to be and mean to people outside the group (Nazroo and Karlsen, 2003).

Hall illustrates the importance of external processes involved in the development and expression of cultural identity (Hall, 1995) (p8):

*Identity is not only a story, a narrative which we tell ourselves about ourselves, it is stories which change with historical circumstances. And identity shifts with the way in which we think and hear them and experience them. Far from only coming from the still small point of the truth inside us, identities actually come from outside, they are the way in which we are recognized and then come to step into the place of the recognitions which others give us. Without the other there is no self, there is no self-recognition.*
The focus on ‘ethnic minority’ identity has historically been about defining the difference between the minority groups and the majority and underplaying differences within groups. However, the characterisation of an identity will affect how it is experienced as well as the self-image of those defined by it. In this way, whether positive or negative, the characterisations by others will influence the identities of the individuals within that group as well as their interactions with others (Nazroo and Karlsen, 2003).

2.2 Medicalised masculinities and the sexualisation of black men

Epidemiology is accused of being a medical vision of health while the field of men’s health is criticised for considering masculinity as detrimental to men and women. Rosenfeld and Faircloth (2006) describe medicalisation as the control of medicine in defining and regulating social problems; and liken the transformation of masculinity into a risk factor, to the medicalisation of health which focuses on the individual at the expense of contextual political issues. This, they argue, makes it harder to appreciate that men can be victims of the systems of power and control they live in (Rosenfeld and Faircloth, 2006).

Medicine has played an important role in the historic portrayal of black men in the West. They have been portrayed as sexual savages and in need of being controlled with medicine, images used both to ‘prove’ their inferiority as a race and to control their sexual behaviour. A hypersexualised and insatiable sexuality was constructed, resulting in the creation both in medicine and the wider society of the inherently dangerous and deviant black male (Hickey, 2006).

Sexuality was a fundamental differentiating factor between white and black men in the 19th century. White masculinity was viewed as a powerful but controlled and a moral force that protected and dominated. In contrast, black masculinity was viewed as an exaggerated masculinity which was animalistic and deviant. While sexual morals were believed to be inherent to white men, black men were thought to be untamed and immoral. These beliefs helped justify the medicalisation of black men’s’ bodies as race sciences gained popularity in the 19th century and into the 20th century (Hickey, 2006). Black men were viewed by scientists and doctors as inherent criminals and sexual perverts and medical necessity dictated that their sexuality needed to be controlled for
the greater good of society. To this end physicians recommended castration as punishment and preventive measures (Hickey, 2006).

Ideas about the dangerous black man and the demonisation of black male sexuality have been carried into the 21st century, along with the stereotypes and myths about black men’s genitalia, promiscuity and sexual desires (Hickey, 2006). The remnants of colonial legacy rhetoric continue to problematize black men and position them “as potential sexual or political aggressors and perpetrators of sexual risk” especially in the media (Serrant-Green, 2004, p.98). These are preconceptions young black Caribbean men are likely to encounter and need to negotiate, intensifying the relationship between ethnicity, gender and sexuality.

Young men have reported using stereotypes of sexual prowess to their advantage in seducing sexual partners (Alexander, 1996, Serrant-Green, 2004). However, the potential for harm to these young men’s perceptions of relationships, self-efficacy and sexual risk-taking behaviour resulting from these hypersexualised stereotypes should not be under estimated. Internalising such widely held and experienced stereotypes about sexuality can compound peer pressure among young black Caribbean men (Serrant-Green, 2004). Research concerning black men and sexual health in the UK has also tended to focus on the negative relationship of sexual health to ethnicity (Connell et al., 2001, Mohammad et al., 2006, Serrant-Green, 2004). Serrant-Green (2004, p.155) found that some participants in her study about black Caribbean men’s sexual health decisions and risk activities stereotyped them as “sexually irresponsible and often insatiable individual[s] who had a high risk attitude to sexual activities”.

Collins (2005) defines sexual politics as the specific set of ideas and social practices influenced by gender, ethnicity and sexuality that frame how men and women treat one another and are perceived and treated by others. She points out that racism plays a central role in black sexual politics due to the profound effect it has had on black people (Collins, 2005). This emphasises the importance of understanding how young black Caribbean men perceive their male identity and how they manage the different expectations people have of them.
2.3 Black Masculinities

The meaning of manhood can only be understood and enacted in relation to other men and to women and requires self-positioning in terms of gender, ethnicity and class (Archer, 2001). Men are sexualised at a young age with expectations to act in ‘masculine’ ways and begin heterosexual dating when visible attributes of masculinity appear during adolescence (Smith et al., 2005). Male sexual activity is accepted and valued by society as a measure of masculinity but the same is not true for females and femininity. Experiences and expectations of masculinity are inevitably intertwined with social structure and social resources and therefore may vary by ethnicity and socio-economic status among other social categories of power differentiation. White (2002) suggests that to address men’s health effectively “masculinity needs to be explored in terms of how it is played out under different social circumstances by different groups or categories of men” (p. 273).

Courtenay (2000) focuses on the idea of alternate masculinities in discussing black and other minority masculinities, describing them as gender constructions that result from the inability to attain the hegemonic masculinity. This refers to the culturally dominant, idealised masculinity at a given time and place through claims to authority and institutional power (Connell, 1995). In European and American society, hegemonic masculinity is represented by heterosexual, highly educated upper-class white men (Courtenay, 2000). As the socially dominant gender construction, femininities and other forms of masculinity are subordinate to it.

In the absence of access to the social power and resources needed to construct hegemonic masculinity, alternative, usually more harmful resources are sought to construct validated masculinities. In the case of black masculinities in America and Europe, the stereotype assumes communities in which status is gained though embracing toughness, violence, fearlessness, risk taking and sexual prowess with no tolerance for disrespect (Courtenay, 2000).

Wright et al. (1998) challenge the assumption of hegemonic masculinity as an aspiration for all black boys, suggesting that the ways they construct their masculinities should not be simply viewed as reactions to the unattainable hegemonic masculinity and be characterised by confrontation and aggression. Instead they argue for the possibility of multiple black masculinities with fluidity between them. Alexander (1996) also
challenges the portrayal of limited constructions of black masculinity as simply reactions or resistance to racism and the resulting powerlessness. She reframes it as an extension of male power:

Black masculinity is then perhaps best understood as an articulated response to structural inequality, enacting and subverting dominant definitions of power and control, rather than substituting for them. Rather than a hostile and withdrawn entity, the black peer group can be seen as a base for interaction and negotiation with society. It forms a loose collective that is internally neither homogenous nor unified and externally disparate in its intent and attitudes.

(Alexander, 1996, p.137)

There is agreement about the limitations on marginalised men’s possibility to “expand the range and legitimacy of different forms of masculine behaviour” (White, 2002, p.279). However, while acknowledging the restrictions faced by black boys in their ability to create new masculinities, the ability of many to reject the negative stereotypes they are confronted with must not be forgotten (Wright et al., 1998). Opinions that ascribe black men’s stereotyped violent, hypersexualised masculinities to a reinvention resulting from an inability to mimic the white patriarchy or attain the hegemonic male threaten to inadvertently move the problem away from structural to cultural causes (Courtenay, 2000, Sewell, 1997). This then enables researchers and policy makers to side-line the influence of historical legacy, stereotypes and discrimination in the process of marginalisation which then influences the wider structural determinants.

Connell (1995) describes, for example, how worryingly attempts to understand high levels of violence among black men in the US have shifted from examining the black labour force changes in American capitalism towards political solutions pointing to counselling programs to resocialise black men. This undermines the shaping of black masculinity in the US, by the powerful interaction of vast unemployment and urban poverty with institutional racism. UK studies, involving mainly white male participants have also found that men from deprived areas are restricted in the masculinities they are able to draw on and this combination of fewer resources and narrower definitions are likely to have negative impacts on sexual health (McDaid et al., 2012, O’Brien et al., 2005). Further, traditional masculinity norms were found to include the need to prove
power and control through sexual conquests and a perception of health-seeking as feminine.

2.3.1 Education and school identity
Problems faced by young black Caribbean men in their interactions with the education system and their school identity provide a salient example of external restrictions on the ways they can express black male identities, on the influence of stereotypes and the impact of discrimination. The institution of education and the influence of school also feature prominently in both Dahlgren and Whitehead’s Rainbow model and Brofenbrenner’s model.

In 2007/08 the rate of permanent exclusion was almost three times higher for boys than girls across all ethnicities; however, Caribbean students were nearly twice as likely as the whole school population to receive a fixed period exclusion and three times more likely than white pupils to be permanently excluded (Department for Children Schools and Families, 2009). Black Caribbean boys experience disproportionately higher levels of punishment in schools compared to other ethnic groups. Only 15% of permanently excluded young people are reintegrated into mainstream school which consequently hinders the successful transition into adulthood, employment and independence for most of these young people (Wright et al., 2005).

The contemporary concern in education policy in England with white working class children and their portrayal as the lowest attaining group has created a dominant concern with social class inequalities among white boys in particular, removing race inequality from the agenda. This inequality however impacts higher education and employment opportunities. When race inequality is discussed in the media, it is often along with assumptions that the problem lies only with black boys and blame placed on their families and communities, and on them, as prone to aggression and unsuited to academic study (Gillborn et al., 2012).

Examining links between the school identities of young black Caribbean men and the link between school and masculinity is particularly relevant given that children are in school during adolescence, as they go through their physical and mental development and learn about society and what is expected of them within it (O'Donnell and Sharpe,
Within education, masculinities, or the practices that identify individuals as men, are valued in terms of success and failure. Considering that patterns of success and access to higher education and employment are associated with class and ethnicity, less academically successful working class and black boys have been found to be particularly disadvantaged (O’Donnell and Sharpe, 2000, Sewell, 1997, Wright et al., 1998). Ethnicity is an important element in determining how masculinity is expressed, and studies in schools have found that black boys end up in the difficult position of being exotised in terms of sport, music and style while also chastised for being confrontational (Sewell, 1997, Wright et al., 1998). They are also likely to be regarded as highly aggressive and sexualised by teachers, their white male peers (both working class and middle class) and themselves.

Black boys’ positions as both sexy and a sexual threat in school results in the burden of them having to try to define themselves in a system that challenges both their ethnicity and their gender (Sewell, 1997). The tensions around the sexuality of black men thus start in school through traditional prejudices where they are viewed as either hypersexualised or as requiring the denial of race and sexual identity to eliminate any threat (Sewell, 1997). The position of black Caribbean boys in British schools, as “the darling of popular youth sub-culture and the sinner in the classroom” has made them “too ‘sexy’ for school” (Sewell, 1997, p. ix). Further, the consequence of their positioning in the narrow context of sport, music and crime with focus on their physical attributes rather than their minds, has been the representation of black Caribbean boys as “anti-school”.

French et al. (2005) found that in communities in which parents and young people valued education and believed establishing a good career was important before having children, young people were likely to want to wait to have children. Although Jamaican and Bangladeshi young people acknowledged the importance of having a good education and career, some felt that often barriers got in the way of these goals. These concerns were also voiced by Jamaican parents. Jamaican young men had little confidence and self-esteem relating to their educational and employment future, which was identified as a barrier to reducing teenage pregnancy and STI rates.

The more recent study by Gillborn et al. (2012) focused on black middle class parents of black Caribbean origin in order to explore the way race, class and gender inequality
interact and influence the experience of schooling in England. The authors found common concerns about teachers having low expectations of black children and additional problematic cumulative effects of “heightened control and disciplinary punishment” (Gillborn et al., 2012, p131). Academic successes and failures are still considered to be a function of family and community specific characteristics, so while low parental expectations and lack of parental commitment continue to be blamed as a key cause of underachievement, the enormous influence exerted by the expectations of white teachers are ignored. This problem is highlighted by the small gap between economically advantaged and disadvantaged black students compared to the wide gap between the equivalent white students in terms of educational achievements (Gillborn et al., 2012). The authors concluded that despite being armed with enhanced cultural and social capital and involved in their children’s schools, middle class black parents with high ambitions for their children had no protection from schools having low expectations of black pupils or the cumulative additional control and discipline targeting them.

French et al. (2005) noted that educational attainment and employment opportunities among Bangladesh young people were poorer than for black Caribbean young people; however they suggested that, for Bangladesh young people, these disadvantages may be countered by the stronger influence of religious beliefs on behaviour and attitudes to sex and teenage pregnancy. This buffer was less prominent among Jamaican young people as compared to the other BME youth, (i.e. Ugandan, Nigerian, Indian and Bangladesh respondents) as their views and attitudes on sex were less likely to be attributed to a specific minority cultural value or belief system (Elam et al., 1999, French et al., 2005).

Acculturation is particularly relevant to young people born in the UK or who arrived at a young age and reflects the reduction in the influence of their parents’ traditional cultural patterns, while adopting new ones from their surroundings (Elam et al., 1999). In the 2011 census, over 80% of respondents who identified as black Caribbean reported their national identity to be British or English only, just over 10% identified solely a non UK identity (Jivraj, 2013).
2.4 Ethnic differences in sexual health

The 1990, 2000 and 2010 National Surveys of Sexual Attitudes and Lifestyles (NATSAL 1, 2 and 3 respectively) provide the only nationally representative data on sexual attitudes and lifestyles of 16-74 year old residents in Great Britain. Fenton et al. (2005) analysed variations in sexual health outcomes and high risk sexual behaviour by ethnicity using Natsal-2 which included a boost of respondents from the four largest UK ethnic minority groups (black Caribbean, black African, Indian and Pakistani) (Fenton et al., 2005). After adjusting for key demographic and behavioural risk factors including social class, statistically significant increases in STI risk remained among: black African and black Caribbean men; men aged between 25 and 34 (rather than 16-24); and those reporting homosexual partnerships, unprotected last sex and 2 or more partners in the last 5 years. Among 18-24 year old men, prevalence of STIs was higher among those reporting: having had first sex before 16 years of age; friends, parents and others as the main source of information about sex rather than school; and those not sexually competent6 at first sex. Only the differences by main source of information were statistically significant. After adjusting for other variables, education level (measured by school leaving age with or without qualifications) and source of sex education were still associated with sexual non competence among young men and women. Among all age men, the prevalence of reporting regret about first sex decreased as age at first sex increased (Wellings et al., 2001).

Black Caribbean and black African men reported higher numbers of lifetime heterosexual partnerships and partnerships in the past 5 years compared to other ethnic groups explored (Fenton et al., 2005). Differences between groups in the prevalence of men reporting 10 or more partners were smaller (42%, 41% and 35% among black Caribbean, black African and white men respectively) compared to those reporting two or more partners in the past 5 years (66%, 63% and 48% respectively). Differences in partnership status between the groups may influence these prevalence figures as 51% of black Caribbean men and 48% of black African men reported single marital status compared to 39% of white men reported. About a quarter of black Caribbean men reported concurrent sexual partnerships compared to just over a third of black African men and 1 in 7 white men.

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6 Sexual competence is a composite variable that uses four variables relating to circumstances at first sex: regret, willingness, autonomy and use of contraception at first sex (Wellings et al. 2001).
In Natsal-2 black Caribbean men reported the lowest median age at first sex (15 years old) and were the most likely to report first sex before the age of 16; 56% did so compared to just over a quarter of African and white men (Fenton et al., 2005). After adjusting for socioeconomic factors, first sex before age 16 was not associated with reporting STIs for men or women; however, it was associated with early pregnancy for women (Wellings et al., 2001). The absence of an association between sex before age 16 and STIs among men was also reported in Natsal-3 (Sonnenberg et al., 2013).

Jayakody et al. (2011) investigated the influence of ethnic background on early sexual activity among secondary school students in East London using a longitudinal survey (11-14 year olds followed up at ages 13-16). They found a clustering of high risk behaviours (ever had unprotected sex, sex before age 13 and two or more sexual partners) among black Caribbean, black African and mixed ethnicity young men but also found high risk behaviour reported by young adults in all ethnic groups. The sexual behaviour patterns of different ethnic groups were found to diverge in very early adolescence. Across the whole sample, depressive symptoms and poor family support increased the likelihood of early sexual debut and high risk behaviours, as did smoking and taking drugs. Low peer support was found to be protective independently of mental health and family support which the authors attributed to sex being mainly relational.

GUM clinic based studies focus on individuals with higher sexual risk behaviour compared to the general population and also report associations between black ethnic groups and STI diagnoses. Gerver et al. (2011) compared sociodemographic characteristics, sexual risk behaviours and reported STI diagnoses between 18-44 year old black Caribbean respondents from Natsal-2 and patients recruited at a south London GUM clinic. Clinic male participants were younger and more likely to be single but there was no difference in the proportions reporting first sex before age 16. Clinic participants were more likely to report more than 10 lifetime partners, more than 2 partners in the last year and concurrent sexual partnerships in the last 5 years compared to men in the general population. Clinic participants were also more likely to report STIs (excluding HIV) and condom use at first sex with last partner. The authors acknowledged problems with comparing a UK wide population sample with an urban clinic sample even within one ethnic group, but a restriction to only London based
Natsal-2 participants would not have provided a large enough sample and there are no other population level data available.

Associations with black and black Caribbean ethnic groups and STI diagnoses have been reported for gonorrhoea and chlamydia in several clinic studies (Hughes et al., 2000, Lacey CJ, 1997, Low et al., 2001, Monteiro et al., 2005, Shahmanesh et al., 2000). Differences within black ethnic groups were explored in more detail in clinic based studies in London and Sheffield in which patients self-identified their ethnicity (Evans et al., 1999, Hughes et al., 2001, Hughes et al., 2013, Low et al., 2001). Despite the small sample size of some studies, the authors emphasized the need to acknowledge heterogeneity within the aggregated black group and appealed for disaggregated analysis even when the separate ethnic group numbers are small. Evans et al. (1999) found no difference in sexual risk taking behaviour between black African and black Caribbean men, but found a strong link between young Caribbean men and gonorrhoea and chlamydia infections. Low et al. (2001) found that among men, black Caribbeans aged 20-24 had the highest rates of gonorrhoea. At all ages their rates were 2-3 times higher than in black Africans. Overall rates of gonorrhoea and chlamydia found in the study were higher in black Caribbeans and those classified as black other, compared to black Africans. This contrasts with the higher rates of HIV diagnoses in the latter group. Age or levels of residential area deprivation did not explain the differences in gonorrhoea and chlamydia rates (Low et al., 2001).

In the process of determining the characteristics of patients likely to present with repeat acute STI infection and repeat gonorrhoea, clinic studies in London and Sheffield reported on data from patients attending between 1994 and 1998 (Hughes et al., 2001) and between 2004 and 2008 (Hughes et al., 2013). Black Caribbean ethnicity was independently associated with acute STI reinfection (Hughes et al., 2001). In contrast, when examining gonorrhoea reinfection, the initial association with black Caribbean ethnicity did not remain significant in multivariate analysis (Hughes et al., 2013). A past infection with gonorrhoea (before 2004), two or more partners in the last 3 months and living in the most deprived areas of Sheffield however, remained independently associated with greater risk of repeat diagnosis. These findings support hypotheses of densely connected sexual networks within defined geographical areas, in which people have multiple links with people who are linked among themselves, thus facilitating the
persistence of gonorrhoea (Hughes et al., 2013). While more conflicting results have been reported about chlamydia infections, gonorrhoea has been more consistently associated with higher numbers of partners and concentrations have been identified in deprived areas (Das et al., 2005, Monteiro et al., 2005, Shahmanesh et al., 2000).

Epidemiology relies heavily on statistical data analyses which focus on identifying statistically independent associations. Diez Roux and Auchincloss (2009) suggest that the simplification of reality in these models can be problematic in studying dynamic relationships. Measurement is essential but also a key challenge in studying social determinants of health, because current measures of social group attributes and contexts are particularly crude. What is not measured cannot be tested and good scientifically relevant measurement hinges on clearly specified concepts or hypotheses. Hence, the need for a previously specified construct leads good measurement to be associated with good theories (Diez Roux and Auchincloss, 2009).

The majority of the UK studies investigating ethnic differences in sexual health have tended to be epidemiological studies. Epidemiology does not provide value free science and many studies acknowledge that ethnicity is likely to be a marker for other factors that we have not yet identified or are unable to measure accurately (Bhopal, 1997, Fenton et al., 2005, Hughes et al., 2000, Low et al., 2001). Sexual health researchers have also drawn attention to the risks of making assumptions based on cultural expectations, as this might underestimate young people’s sexual health needs or make them feel stigmatized (Connell et al., 2001, Griffiths et al., 2008, Sinha et al., 2007). There is also the additional danger of the concept of ethnicity getting used as an objective truth rather than a contextualised identity (Pickett, 2010, Stubbs, 1993).

Qualitative studies are particularly well placed to investigate the contextual aspects of sexual behaviour and to capture social influences. They explore perceptions and experiences with the aim of investigating context instead of quantifying and also focus on processes and answering ‘how’ and ‘why’ questions (Ormston et al., 2014).

In 2006, the Lancet published a global systematic review of qualitative studies examining factors that shape young people’s sexual behaviour (Marston and King, 2006). The review identified seven themes present to varying degrees in the wide range of
countries assessed. Among these, only one theme was associated with a need to improve knowledge, namely the tendency of young people to use subjective and unreliable indicators to assess the STI risk of sexual partners. The rest were all related to social expectations about sex, penalties and rewards for sex, the power of reputation and the detrimental influence of gender stereotypes in terms of restricting sexual behaviour and communication between partners.

These themes illustrate how social and cultural forces are strong influences on sexual behaviour globally. They also help explain why the provision of information to increase risk awareness about STIs, combined with the provision of free condoms, although important, are not generally sufficient to alter sexual behaviour. Furthermore, the seven themes provide a starting point from which to build local profiles of social context. The authors advocate this in order to better inform the work of policy makers and sexual health professionals and to guide intervention development.

While qualitative studies highlight the importance of social influences, the focus of many STI and HIV prevention programmes has been on tackling the more easily addressed problems of ignorance and barriers to contraceptive access (Marston and King, 2006). Among qualitative studies, many end up describing elements of the same seven themes identified in the review, instead of providing more in depth contextual clarifications.

2.5 Health inequalities
In order to better understand the disproportionate STI risk among young black Caribbean men, it is important to consider the influences on the development of ethnic inequalities in health more widely. Of particularly importance is the recognition of the impact of this, which requires some examination of the unequal living conditions deemed wider determinants of health (Nazroo, 2006).

The purpose of this section is to provide a very brief introduction to the theoretical frameworks in health inequality research which helped shape the interview topic guides and the aspects of the young men’s lives I decided to explore in the qualitative interviews.
Social epidemiology emerged as a study of the social factors that determine ill health in the 20th century. It combined holistic models of health that emerged between the two world wars with the social medicine framework developed in the 1940s to incorporate sociological frameworks within epidemiological investigations. Social epidemiology encompasses three main theories: psychosocial, social production of disease and/or political economy of health, and ecosocial and multi-level dynamic frameworks (Krieger, 2001).

Ecosocial theories involve multidimensional and dynamic frameworks and aim to generate hypotheses to help guide specific investigations and actions (Krieger, 2001). They can provide a good structure for the analysis of data on ethnic differences in health and these analyses need to consider the complex interactions between factors such as demographic and economic circumstances, attitudes, and the impact of racial discrimination (Nazroo, 2006).

Although ethnic sensitivity has a role to play in addressing health inequalities, the increasing attention on ethnicity in public health has been critiqued as a shift from racial determinism to cultural determinism. This has contributed to studies examining the effects of different forms of disadvantage as well as theoretical shifts in social epidemiology (Krieger, 2001). These include for example, racism as a changing and dynamic phenomenon that produces relations of dominance and subordination based on ethnicity. This looks beyond individual and institutional policies towards general inequalities that lead, for example, to disproportionate numbers of black people being subordinate, oppressed and in situations producing ill health in terms of material poverty, housing, employment and unemployment (Stubbs, 1993).

Social, political and economic processes are considered key to the development of epidemiological profiles (Krieger, 2001). Ecosocial theories provide a helpful alternative to popular theories that inadvertently place the blame for disease on individuals. Conferring inordinate agency on individuals while undermining structural barriers can result in criticism being laid on individuals for not choosing a healthy lifestyle and not dealing better with stress. Instead, ecosocial theories put emphasis on economic and political determinants of health, including structural barriers to healthy life choices. The fundamental causes of social inequality in health are identified as economic and political institutions and decisions that cause, impose and maintain
economic and social privilege and inequality (Krieger, 2001). The solutions thus focus on healthy public policies to reduce poverty and income inequality.

Studies exploring ethnic variations in health continue to assume or seek biological and cultural explanations despite the shifts in theoretical approaches (Fine et al., 2005, Sankar et al., 2004). The culturalist approach is condemned by Ahmad (1993) for explaining inequalities in health and access to health through cultural differences and failings. He suggests that this then leads to solutions which ignore the possibility of discrimination at the personal and institutional level within health and other services. Instead, the solutions are focused on the need for minority ethnic communities to integrate into the majority culture and on increased ethnic sensitivity from health professionals (Ahmad, 1993).

In relation to sexual health, assumptions about the cultural or biological drivers of ethnic health inequalities encourage a focus on ethnic differences in promiscuity and morality (Bhopal, 1997), ignoring the structural drivers of health inequalities which disproportionately expose those with ethnic minority backgrounds to socioeconomic and health disadvantage. By extending the idea of embodiment to the integration of behaviours, expectation and norms based on externally imposed factors, such as stereotypes and socially transmitted masculine norms, the ecosocial approach takes account of structural and social influences. It was useful in guiding my investigation of the influences of ethnicity and masculinity on sexual behaviour and attitudes to sex and relationships among young black Caribbean men.

Dahlgren and Whitehead’s (1991) socio-economic rainbow model (See Figure 1) provides a helpful visual representation of the wider determinants of health which operate at different levels of influence to impact on individual and community health (Dahlgren and Whitehead, 1991). It was a helpful starting point for me given the focus on biology and culture often leaves wider determinants of health overlooked or given minor importance. In the rainbow model, cultural environment is present as a distal influence on individual lifestyle factors, while other structural elements such as education, employment and housing are given importance. The authors present the model with a focus on the development of policies and strategies to tackle health inequality. It is an interdependent system developed with a view to assist in examining
policies across levels. The factors identified as threatening health, promoting health and protecting health are categorised into policy levels that can influence major structural environments, material and social conditions of life, social and community support and lastly individual lifestyles and attitudes (Dahlgren and Whitehead, 1991).

Figure 1: The main determinants of health

The Main Determinants of Health

Source: Dahlgren and Whitehead, 1991

The rainbow model was helpful in considering living and working conditions as influences on health, but for a study of ethnic health inequalities it is missing a key factor, namely a way to take into account the impact of racism on the identified institutions, structural influences, social networks and individuals. In the process of exploring health inequalities among ethnic minority groups, it is crucial for racism to be considered as a social force that structures the social and economic disadvantages they experience (Nazroo and Williams, 2006). Experiences of and awareness of racism have been found to be central to the lives of ethnic minority people, to have physiological effects and to be associated with negative health outcomes (Bhui, 2005, Gravlee, 2009, Karlsen and Nazroo, 2002, Nazroo and Williams, 2006, Paradies et al., 2015). This includes self-reported fair or poor health and the assessment of the presence of common mental health disorders (i.e. anxiety and depression) on a continuous scale in two cross sectional national representative surveys conducted in the UK (Bhui, 2005, Karlsen and
Nazroo, 2002). Racial discrimination perceived as unfair treatment at work resulted in a 2.9-fold (95%CI 1.2, 7.3) greater risk of mental disorders among black Caribbeans (Bhui, 2005).

The negative physical and psychological consequences can result directly as a consequence of racist victimisation and discrimination or indirectly when institutional racism results in people being essentialised as biologically and/or culturally different. This in turn leads to exclusion as well as social and economic disadvantage leading to negative health outcomes (Karlsen and Nazroo, 2002). A recent systematic review and meta-analysis which included cross sectional and longitudinal studies across 12 countries found a stronger association between racism and negative mental health outcomes (such as depression, anxiety and psychological stress), compared to physical health (most commonly, blood pressure and hypertension, and outcomes related to being overweight). Further, for negative mental health outcomes, the effect size was larger in studies presenting cross sectional data than the effect size in studies presenting longitudinal data and in non-representative samples compared to representative ones (Paradies et al., 2015).

Variation in exposure to serious stressors, those that are not preventable by individuals by changing behaviour and are deemed to structure individuals’ experiences across time and disrupt lives, are key to linking status and health. These include stressors such as economic strain and experiencing unfair treatment as the result of discrimination (Pearlin et al., 2005).

When comparing data by ethnic groups it is important to remember the variation between and within groups. Differences in age structure, family and household composition, geographic location and economic situation also need to be considered in the development of policies to tackle the inequalities (Nazroo, 2006). For example, the variables available for measuring socioeconomic position are crude and most studies collect these measures at one point in time rather than collecting life-course data. Although health inequalities seem to mirror socioeconomic inequalities across different population surveys, the effect of social and economic inequalities on ethnic inequalities in health are debated. Views vary with socioeconomic inequalities believed to have very little if any effect, some effect along with the cultural and genetic ethnic factors
associated with ethnicity, and substantial effect as the predominant determinants of health inequalities (Nazroo, 2006).

Attempts are often made to adjust for the socioeconomic inequalities between ethnic groups, but this is not straightforward as the measures often employed cannot fully account for the influences of ethnicity on socioeconomic status. For example, incomes in the same occupational classes vary between different ethnic groups (Nazroo, 2006). This variation suggests that using single or crude indicators of socioeconomic position such as the Registrar General’s class to adjust for socioeconomic differences, is not ideal when attempting to look at the effect of ethnicity on health inequalities (Nazroo, 2006). Adjusting by socioeconomic group in Natsal-2 analysis was based on occupation. Higher occupational class and educational attainment can result in lower income among ethnic minorities as well as underemployment. This in turn can unduly restrict housing tenure and location options for ethnic minorities contributing to concentrations in deprived areas (Harrison, 2003). In light of this, the variation in health outcomes that remains, after socioeconomic differences have been adjusted for, cannot be assumed to be ethnic effects through cultural or genetic factors (Nazroo, 2006).

The difficulty in adjusting for socioeconomic inequalities is also of particular relevance in research on young people. Employment and income will be affected by whether individuals are in education or not. To overcome this, parental occupation is often used as a measure of young people’s social class. However, these indicators are likely to be of lesser relevance to their sexual behaviour than other factors such as aspirations, family support and peer influences. Gender norms, peers and sexual partners have been identified as strong influences on young people’s behaviours across cultures and continents (Marston and King, 2006). These strong influences are likely to be associated with neighbourhood and school ethos.

Moving down to a narrower focus from Dahlgren and Whitehead’s socioeconomic rainbow and policy levels, Brofenbrenner’s ecological theory of development model (See Figure 2) draws attention to the interactions and bi-directional influences within and between the layers of individual and environmental determinants of behaviour (McLaren and Hawe, 2005). This is important because it highlights the different social interactions that shape and are shaped at different levels, by individual characteristics and behaviours. The bi-directional influences are considered to have the strongest
impact in the closest microsystem and move out to community, environment and societal influences (McLaren and Hawe, 2005). This model adds detail to the broader structural elements in the rainbow model by narrowing in on interactions which are fluid and amenable to consideration within historical and cultural contexts at different levels, whether by ethnicity or geography. It was particularly helpful for the process of exploring the formation of masculine and sexual identities and captures an element of reciprocal influence.
Figure 2: Brofenbrenner’s ecological theory of development (adapted)

Source: McLaren and Hawe, 2005
Ecosocial theories incorporate ideas about the integration of the environment into the individual as embodiment (Gravlee, 2009, Krieger, 2001). The two models worked well in highlighting the importance of physical, social, cultural, and historical context in exploring sexual behaviour.

2.6 Caribbean migration to the UK

In this section of the chapter I will discuss the Caribbean migration to the UK to provide socio-historical context for the examination of the sexual health practices of black Caribbean men. It will show that black men, and young black men in particular have had a negative relationship with social institutions and this has been seen to play an important part in their opportunities, self-identities and positions in society. This has an impact on sexual attitudes and behaviours.

People’s migration histories have shaped their experiences of the UK and influenced the opportunities available to them, including housing options, employment opportunities, social standing and socioeconomic status. The first large groups of black settlers to the UK began to arrive in 1948 with the passing of the 1948 Nationality Act which gave citizens of Britain’s colonies and former colonies UK citizenship and the right to residency in the UK (Nazroo, 2006). Almost 500 Jamaicans arrived on the Empire Windrush on June 22nd 1948 mostly in search of work. Spouses and children followed the economic migration and migration from the Caribbean continued throughout the 50s. A decade later, 124,000 West Indians had arrived in Britain since the end of the war (Fryer, 1984).

By the mid-1970s, 40% of the black people in the UK were UK born. Racial discrimination led to difficulties in education, employment and housing for those born in Britain of Asian and West Indian parents (Fryer, 1984). This “second generation” was a cause of concern from the late 1960s as the black youth were considered a “social time bomb” and the social construction of young blacks was viewed as a “complex of disabilities” caused by their own background and inability to integrate into the wider society (Solomos, 1988 p.157). This led to feelings of powerlessness and negative experiences among this generation of young black Caribbeans who were to become the parents of the target group in this study. The negative experiences took the form of unemployment, institutional racism, media and other stereotypes, misrepresentation,
deprivation, alienation and social exclusion; with the additional frustration that their disadvantage was ignored by policy makers who blamed the victims. These experiences of distrust and mistreatment are then easily transmitted across generations contributing to the environment and circumstances of the study target population. This in turn can increase the risks of social exclusion which then has an impact on aspirations, feeling about being valued in society and health, including the cost and outcomes of sexual risk taking.

Limited employment opportunities for the children of recent immigrants were identified by the government along with problems of economic depression and racial discrimination post Second World War, but rather than tackling the problem itself, policies aimed at providing more youth clubs and social facilities were put in place to prevent the dangers of unemployed youngsters roaming the streets. The fear was that black areas were a threat to law and order with the potential for unrest when the second generation children reached employment age, faced discrimination leading to unemployment and became alienated or turned to crime (Solomos, 1988).

In the 1970s relations between black communities and the police were deteriorating. Black youth in particular were seen as a problem with the cause attributed to alienation and cultural conflict. There were mugging scares and moral panics about the law and order problems in black communities (Solomos, 1988). Many complaints were made by black communities about police harassment, the harsher treatment of black people during arrest and the police tendency to assume that any black sub cultures were criminal. The resulting anger and resentment felt by young black people along with stop and search activities by police were cited as key factors leading to the alienation of black youth in the run up to the 1981 riots and successive disturbances (Kalra, 2003).

After the 1981 riots there was some critique of the way in which black youth were pathologised, but cultural and social failings continued to be used to explain the high levels of unemployment among black youth. These failings included their attitudes to work, poor language skills, educational disadvantage and the additional problem of being concentrated in poor areas of inner cities (Solomos, 1988). Views about the cause of the riots shifted from environmentalist ones stemming from alienation produced by disadvantage and discrimination to biological culturalism blaming the “rootlessness” of black Caribbean youth as the problem. This was seen as an inevitable consequence of
people with different traditions and “alien cultural practices” moving to Britain (Gilroy and Lawrence, 1988, p.123).

The problems of the second generation were aggravated by sensational and stereotyping media portrayals (O'Donnell and Sharpe, 2000). During the 1970s and 1980s, young black people were labelled by the state, media, police and race relations experts as having certain characteristics including being “alienated, vicious little criminals, muggers, disenchanted, unemployed, unmarried mothers, truants, class-room wreckers” (Solomos, 1988, p.158). These collective characteristics became a starting point even for youth workers and community workers trying to help young black people. It also led to discrimination and associations of the “second generation” with themes of “disadvantage”, “social handicap” and the “threat of violence” (Solomos, 1988, p.159). Instead of examining problematic institutions and policies, individuals were pathologised with immutable negative characteristics and as members of weak and inadequate cultures with problematic family background and community life (Solomos, 1988).

2.7 The impact of discrimination and marginalisation

Discrimination faced by black youth, children of immigrants who arrived in the 1950s and 60s in school, as well as in the transition from school to work, led to their economic and social marginalisation (Solomos, 1988). This was addressed as a law and order concern with an impact on government policies and the development of interventions that focused more on dealing with the consequences of the marginalisation of black youth than changing the conditions that created their circumstances (Solomos, 1988).

Marginalisation through the criminal justice system continues in the 21st century to be a problem for black Caribbean men. Kalra (2003) identifies the criminal justice system as a key institution that provides members of a society a sense of true citizenship. He nominates the policing system as the predominant process through which ethnicity based differential treatment by the criminal justice system is experienced. If the police are then seen as regulating the boundary between childhood and maturity, this places the institution at the heart of the political development of youth cultures (Gilroy and Lawrence, 1988).
The full-scale inquiry following the 1981 Brixton Riots, was conducted by Lord Scarman. The resulting Scarman report acknowledged the loss of confidence and trust in the police by communities but focused on racial disadvantage and inner city decline instead of institutional racism in the police force. The denial of racism in the police force was overturned by Lord McPherson, who in 1999 conducted the judicial inquiry into the heavily criticised conduct of the Metropolitan Police driving the investigation of the racist attack in which Stephen Lawrence was killed (McGhee, 2005). The McPherson report identified institutional racism in the Metropolitan Police Force. The report included 70 recommendations aimed at “the elimination of racist prejudice and disadvantage and the demonstration of fairness in all aspects of policing” (Home Office, 1999) (para 47.2).

In 2009, the report that looked at the progress ten years on from the McPherson report found that while most of the recommendations had been implemented, there were still areas of concern particularly relating to stop and search practices and the composition of the police force (Department for Communities and Local Government, 2009). In 2007-2008 Home Office figures still illustrated a pattern of differential treatment (Riley et al., 2009). While 2% of the population aged 10 and over in England and Wales was black in 2001, in 2007/2008, 15% of the male prison population was black, 13% of stop and searches involved black suspects and 7% of complaints against the police were made by black people. Black people were also almost 4 times more likely to be arrested and nearly 8 times more likely to be stopped and searched than white people (Riley et al., 2009). Furthermore, according to the 2007/08 citizenship survey, 28% of people from ethnic minority communities felt that as a result of their race they would be treated worse by the police or another criminal justice agency (Department for Communities and Local Government, 2009). Again this points to past circumstances involving distrust and mistreatment being repeated across generations.

Although the development of minority ethnic middle classes reflects reduced social exclusion, the disproportionately higher rates of homelessness among minority ethnic groups including young black men indicates a continuing housing disadvantage (Harrison, 2003). There are variations of housing experiences within ethnic groups as well as between groups based on generation, gender and household income. Social renting, for example, is of particular relevance for female headed households, due to the
difficulties single parents encounter in other types of housing and there is a higher proportion of single mother families among black Caribbeans compared to other ethnic groups (Department for Communities and Local Government, 2007, Platt, 2009).

2.8 Conclusion

This chapter has provided a brief summary of the different theoretical frameworks that guided the qualitative research through the decision to explore different aspects of the young men’s environments and identities. The overview of black Caribbean men’s past and present circumstances in the UK provides a social and political context within which to interpret the findings of the study along with the discussion about ethnic and male identities and the ongoing sexual stereotyping of black men.

National, community and clinic based quantitative studies carried out in the UK have reported associations between black Caribbean young people, higher STI rates and greater sexual risk behaviour; however, the underlying mechanisms leading to these inequalities are not clear. Epidemiological research has limited value in its ability to provide explanations for the variations in different groups of people or to answer questions about how sexual health is negotiated, perceived and experienced by different groups (Serrant-Green, 2004). The clinical and epidemiological studies looking at health and ethnic inequalities have provided a good starting point but also illustrate the tendency within these studies to simplify complex social relations into crude variables while the influence of power relations including inequalities and discrimination are less prominent (Stubbs, 1993).

The seven themes identified in Marston and King’s (2006) review provide possible explanations for young people’s inconsistent condom use and poor use of contraception in spite of good knowledge and condom access. They were used to guide the content of the interview topic guides together with the adapted Brofenbrenner’s ecological theory of development model and Dahlgren and Whitehead’s socioeconomic rainbow model. Several gaps were also identified. A better understanding needs to be gained of the

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7 1) Young people tend to use subjective and unreliable indicators to assess the STI risk of sexual partners. 2) Condoms can be associated with lack of trust in a partner and can be stigmatising. 3) Gender stereotypes play a critical role in determining social expectations and sexual behaviour. 4) Sexual partners have a strong influence on sexual behaviour. 5) There are social penalties and rewards for sex. 6) Reputations play a key role in the social control of sexual behaviour. 7) Difficulties in communication about sex can be caused by social expectations.
motivations for and consequences among peers of protective behaviours that do not conform to socially expected or stereotypical behaviours. The social context of sexual partnerships also needs to be explored in order to capture a wider range of influences; including for example, the driving forces that lead to sexual behaviour change among young people, and how sexual experience, age and generational differences influence partner selection, contraceptive use and communication about sex (Marston and King, 2006).

Against a backdrop of continuing disadvantage, in education, employment, housing and experiences of the criminal justice system, the impact on the development of particular forms of ethnic and masculine identity among black Caribbean young men needs to be examined with a focus on the influences in turn on the formation of relationships and on sexual behaviour. Deprivation in itself has been identified as a risk factor for bacterial STIs. Among young black Caribbean men, social expectations and reputations are likely to be closely tied up with ethnic and gender identity, but how these develop and are interpreted and experienced will depend on contextual circumstances which need to be better understood. In order to develop relevant sexual health interventions targeting these young men and to tailor health promotion and service provision, it will be important to understand the meaning of masculinity, ethnicity and relationships in their lives. How young black Caribbean men develop their male and ethnic identities and are subsequently able or unable to negotiate different sexual behaviours and relationships, has not been explored in depth in the UK.

As part of a wider attempt to develop alternative approaches to conceptualise and investigate health determinants, the intersectionality paradigm provides an ideal option. As a theory of knowledge which aims to expose and interpret the numerous intersections of oppression and privilege, it started as a key feature of feminist analysis in the 1960s to challenge the dominant importance given to gender as the key dimension of experience, and has been used in different disciplines (Hankivsky and Christoffersen, 2008). It was important particularly to black women, to acknowledge the influence of other forms of oppression on social identity at a time when there were essentialist notions of femininity as white and blackness as male, excluding black women from both identities (Brah and Phoenix, 2004). This left black women in a position where they were denied the possibility to fight for their rights as women in the form of feminism
that was relevant to their particular struggles as black women and they were also denied the right to fight as a minority group with needs and circumstances that were different to those of black men. Intersectionality as a framework gave a voice and legitimacy to black feminists and acknowledged their power struggles by nature of being female and black at a time when the particular position and experiences of black women seemed to be invisible.

While the biomedical and epidemiological models are problematic in their inclination to frame determinants of health as single reducible categories, intersectional frameworks strive to capture “the complexity of lived experiences and concomitant, interacting factors of social inequity, which in turn are key to understanding health inequities” (Hankivsky and Christoffersen, 2008, p.271). The tendency of epidemiological studies to consider identity and context characteristics separately to uncover independent and additive effects has led to difficulties disentangling relative contributions (Fenton et al., 2005). The intersectional approach complements past health research by concentrating on the web. It enables all aspects of the individual to be examined. The framework started with a focus on ethnicity and masculinity hence the similar focus in this literature.

Intersectionality has been particularly significant as an approach to explore intertwined systems of oppression. It has been important in maintaining the focus on the complex and multifaceted nature of power relations as well as the heterogeneity of experiences within social categories (Brah and Phoenix, 2004). So instead of privileging one category of social identity, it attempts to understand the details of the experiences and positions created at the intersection of two or more axes of oppression. This is considered a new status and more than just the sum of its individual parts, so the convergence is of interest rather than the sum of categories. Thus multiple categories of social identity are given importance and the meaning and relationship between the categories are questioned in order to look at the dynamics of power and understand situations of disadvantage. This helps avoid tendencies to homogenise disadvantaged groups based on static representations of culture (Hankivsky and Christoffersen, 2008).
I will present my research exploring the association between young black Caribbean men and increased risk of STI acquisition through the concept of intersectionality as the integrating framework. The decisions and choices of the study participants, in relation to sexual behaviours and partnerships, can be best explained through this concept which is ideal for its focus on the convergence of the young men’s different identities. As this chapter has shown, gender and ethnic identities as well as socioeconomic positions have particular influences on the freedoms and restrictions which shape daily life. As an integrating framework, intersectionality allows these to be examined in relation to the convergence of these identities. This new status can then be placed at the centre of the ecosocial theories and is then key to both the interactions of individuals with different aspects of society and the investigation of the different determinants of health. Sexual behaviour is best understood as an element of wider interactions and positions in society as a relational activity.

The recognition of the difficulty posed by the reality of fragmenting identity and the difficulty of reflecting this in public health and epidemiological research is of particular importance. People exist simultaneously as part of many social categories that have been created to label different human characteristics and elements of status such as ethnicity, gender and social class. The framework of intersectionality draws attention to this and the idea that people have multiple roles and voices in life, with the importance of specific roles or status characteristics being given lesser or greater importance based on particular circumstances (Grillo, 1995). It highlights the juncture of the different aspects of identities. In the next chapter I will present the methodology of this study.
Chapter 3 Methodology

In this chapter I describe the methods I used in this study to answer the main thesis question: What influences lead black Caribbean young men (aged 16-24) to be at a disproportionally higher risk of acquiring STIs and how can these influences be modified? The overall work I carried out as part of the NIHR training fellowship included a quantitative phase in which I conducted secondary analysis of Natsal-2 data and secondary analysis of the Patient access and transmission of sexually transmitted infections (PATSI) study dataset. The Natsal-2 analyses influenced my decision to explore sexual debut but are not included in this thesis. My PATSI analyses did not identify disproportionate provider or patient delay experienced by black Caribbean men. The PATSI analyses across ethnic groups by gender have been written up in a paper published in Sexually Transmitted Infections (Gerressu et al., 2012) and the relevant analyses focusing on men only are presented in appendix A, but this thesis focuses on the more substantial qualitative element of the fellowship work. As a result of the PATSI findings, I decided not to directly investigate health seeking behaviour and care pathways in the qualitative interviews. Instead, this qualitative study explored the context within which relationships and sexual partnerships were formed and the influences of the different aspects of the young men’s identities as perceived by young men and individuals working with young men. This was achieved through in-depth interviews with 20 young men and 12 key informants.

I cannot say I started out with clear opinions about my position within the research but this changed as the research progressed. Initially I mainly had ideas about areas of influence and wanted to gain a better understanding of the epidemiological findings placing young black Caribbean men at disproportionally high risk of STIs.

I had identified some aspects of young men’s lives to explore based on previous research, the literature as well as conceptual and theoretical frameworks but was not testing a hypothesis about their relevance to or method of influence on sexual health. The data collection was thus inductive and I adopted a more interpretative approach (Reid et al., 2005). My plan was to provide contextual and explanatory data about the poor sexual health outcomes experienced by young black Caribbean men by describing their social and sexual experiences and how they perceived these aspects of their lives in relation to relationships and sexual behaviour. Although there is room for improvement
in the process of making comparisons by ethnicity and age in public health research, as discussed in chapters 1 and 2, I did not embark on this research questioning the veracity of findings about disproportionate STI risks among black Caribbean men.

The idea for this study developed from my previous work on the Young Brent Project (Gerressu et al., 2009). This was a research project focusing on the sexual health of young (predominantly Caribbean) women in the North West London borough of Brent. I developed links within Brent with a variety of community organisations, youth clubs and a GUM clinic. Through discussions with both staff members of these different organisations, and qualitative work with young men and women, young black men were identified as a target group in urgent need of sexual health promotion and behavioural interventions as a result of high risk sexual health practices including concurrent sexual partnerships, inconsistent condom use and high numbers of partners. Further discussions involving other London based youth workers led to my decision to focus on aspects of male and ethnic identity and informed initial ideas about the research design.

Findings from the Young Brent Project (Elam and Gerressu, 2008) informed the first draft of the topic guides with broad topics of possible interest. Then the literature review, the quantitative analyses and the consultation process were used to further develop and refine them. The topic guides were developed in order to explore different aspects of the young men’s lives from their own perspectives and from the perspectives of key informants (see Appendices B and C respectively).

Professionals who had contact with black Caribbean men in different aspects of their lives were selected as key informants in order to gain perspectives on a variety of influences on relationships and sexual behaviours. The individuals selected worked in sexual health as well as other areas identified in the literature as influential on aspects of the male, youth and ethnic identity of young black Caribbean men; these included professionals in the fields of education, male social development and youth offending.

I will present my theoretical approach and the research design for the thesis next. This includes the original design and the evolution of the research process, the data collection process, my experience of the fieldwork, reflections about my position in the research, and the experiences of the young men.
3.1 Theoretical approach

An inductive approach was used to answer the research question. Each phase of the study informed the next one. Qualitative methods were chosen as the most appropriate for exploring the ways individuals in certain settings understand, explain and act in the process of managing their daily lives (Miles and Huberman, 1994). Interviews are recognized as a means of activating, stimulating and cultivating the ability of respondents to interpret their knowledge and experiences (Holstein and Gubrium, 1997). I chose to use in-depth interviews because they would enable me to explore both the narratives participants chose to share and to better understand the meanings they gave to their experiences and social worlds (Miller and Glassner, 1998).

I approached my research with a view that there is a multidimensional nature to reality. Serrant-Green (2010) emphasises the fact that since research occurs in particular historical and political contexts, it is important to consider that the accepted dominant reality should also be examined as a socially constructed product of power relationships within different social environments. Considering the influence of the dominant perspectives on what research is conducted and funded, as well as how it is interpreted, diverse experiences need to be considered within the context of life in an inequitable society rather than presented as resulting simply from personal choice (Serrant-Green, 2010).

In her discussions about social research for social change, Fine (1998) describes the risk of “romanticizing narratives” and the associated retreat from analysis. The concern is that hidden assumptions may then lead to convictions that people act rationally in their interest and that oppressed people are not harmed by their marginality. This made it particularly important to make the personal experiences of the young men central to the research and to relate their experiences to the influences of their positions in society instead of focusing just on personal choice.

The nature of the topics being explored in order to address the study research question required an approach that could allow for and recognise the multiple realities of the young men and key informants resulting from the time and place they were in. Under the premise that there is no essence to the experience of being a member of any particular group that is constant through space and time, the anti-essentialist viewpoints influenced my work (Fine, 1998, Grillo, 1995, Serrant-Green, 2010). These
acknowledge the importance of contextualizing features in society, research and researchers, including power discrepancies and inequality. I wanted to examine the experiences of the young men and the meaning they attributed to sexual partnerships and sexual behaviours but also to understand the influences that lead to their experiences and beliefs. I found that an anti-essentialist, interpretative approach to the research was ideal to explore the societal, community and individual values and norms as perceived by the participants.

The intersectional approach was also important as what started with ideas about the importance of masculinity, ethnicity and being young as three clear characteristics became a more complex web including deprivation with different aspects being important at different ages. The goal of the intersectional approach is to simultaneously examine the social and health effects of key context and identity characteristics. This provides the opportunity to focus on the simultaneously experienced outcome of the merging of identities, context and experiences (Griffith, 2012).

Intersectionality has been critiqued for being useful conceptually but problematic for functional use (Griffith 2012). Crenshaw (2011, p.223) describes the critique as the understanding of intersectionality as “a good candidate on paper but without a usable methodology it has no ready-to-work skills.” She responds by suggesting that as methodologies tend to be discipline specific, it is the absence of a prescriptive methodology that enables the concept to travel and cross discipline borders. The purpose is to allow the analysis of dynamic interactions of systems of power across various institutions and contexts.

Intersectionality applies to everyone- no one exists outside the matrix of power, but the implications of this matrix-when certain features are activated and relevant and when they are not- are contextual (Crenshaw 2011, p.230).

It is not meant to offer a grand theory about how power is constituted in all circumstances through structures and categories, but was developed as an analytic tool designed to magnify and highlight specific problems drawing attention particularly to dynamics that are overlooked (Crenshaw, 2011).
3.2 Aims and objectives

Aims

- To explore the context and wider social influences in which young black Caribbean men form sexual relationships and make decisions about sexual behaviour.
- To understand the pathways leading black Caribbean men to higher sexual risk behaviour and explore their perceptions of their male and ethnic identities.

Objectives

1. To identify how young men perceive their social surroundings influence their decisions about relationships and sexual behaviour.
2. To explore young men’s perspectives on and experiences of being male, black and young in relation to their views on relationships and sexual practices.
3. To explore the opinions of key informants working with young black Caribbean men in different professional capacities, about the social influences on the sexual behaviours of the young men.

Questions

- What are the restrictions and freedoms experienced by black Caribbean young men based on their male, black and youth identity in relation to relationships and sexual behaviour?
- What are the individual, community and wider social expectations of and pressures on black Caribbean young men in terms of relationships and sexual behaviour?
- How do these expectations influence their perceptions and behaviour in relation to relationships and sex?

3.3 Consultation

In the process of setting up an advisory group, in the first instance I contacted individuals involved in the Young Brent Project who identified young black men as a target group in urgent need of sexual health promotion and behavioural interventions. I then expanded my search to other contacts from my previous sexual health research and asked for further contact recommendations.
I set up an advisory group with one academic, a youth worker, a drug worker, a male development worker, a race equality think tank director and a mental health worker. One meeting was organized in March 2010 which was attended by 3 members but others were able to advise on the topic guides, framework, sampling frame and recruitment via e-mail, phone conversations and individual meetings.

I presented the study at a staff meeting at the GUM clinic recruitment site (May 2010) to discuss the study aims, design and data collection tools. For the community recruitment of young men, I started by consulting with two male social development facilitators (based in a community organizations and a secondary school) and a youth worker in Brent. My attempts to contact many of the community organizations and individuals involved in the Young Brent Project for the consultation process were not successful. Several of the organizations were disbanded due to loss of funding. Furthermore, individuals who had been particularly enthusiastic and helpful in the past, had left their posts or were not in a position to be involved due to funding concerns or job insecurity.

The majority of the key informant interviews were conducted before those with young men and included discussions about key areas that needed to be explored in the young men’s lives in order to better understand their sexual partnerships and behaviours. In this way they were also involved in the consultation process. I asked the key informants for their comments and suggestions on the study process and topic guides as well. Findings from the literature review, the key informant interviews and advisory group discussions informed the sampling frame (see Appendix D).

3.4 Data collection
The geographical focus of this study was the North West London borough of Brent. I made this decision for a number of reasons. Mainly, it was through community consultation in Brent that the idea for this research developed and the need to better understand young black men’s sexual behaviour was identified. Brent is also a very culturally diverse borough in London including a large black Caribbean population (Centre on Dynamics of Ethnicity, 2014). It has high STI rates as well as high levels of social deprivation and teenage pregnancy (Leeser, 2011). The GUM clinic from which participants were recruited serves a local mixed community. In 2002, a high proportion
(approximately 40%) of attenders was of black-Caribbean ethnicity; and the clinic accounted for approximately 2% of all UK gonorrhoea diagnoses (personal communication). In 2012, 47% of acute STIs were diagnosed among residents of Brent who identified as black (Health Protection Agency, 2012).

Brent is one of the 19 outer London Boroughs and has the largest proportion of ethnic minorities in London with 71% of the population reporting an ethnic group other than white British. Among them, 16% reported being black Caribbean and 14% being black African. Stonebridge and Harlesden are the wards with the highest concentration of both populations and are also wards with high deprivation scores. Brent has a population of about 300,000 people with a quarter aged 0-19 and is among the most densely populated outer London boroughs with a quarter of households considered overcrowded (Brent council, 2011a). It includes both affluent and deprived areas but falls within the 15% most deprived local authorities with the 3rd lowest average annual income in the country (16% of households earning on average £15,000 or less).

While employment and unemployment rates are only marginally lower and higher respectively to London and UK averages, there has been a sharp increase in people seeking Jobseekers Allowance and National Insurance credits (5.3% compared to a 4% London average in 2010), as well as in people claiming housing and council tax benefits from the council since 2008 (8% increase in Brent residents eligible) (Brent Council, 2011b). Employment rates for black or black British and Pakistanis/Bangladeshis are lower than the Brent average (59% compared to 64.4% respectively). There has been a 2% decrease in the proportion of the population reporting having no qualifications and at 19% this is marginally above the 18% Outer London average. Stonebridge and Harlesden reported lower than borough-wide percentages of residents with no qualifications (21-26%) and lower than average percentages of residents with level four or higher qualifications (20-25% ) compared to the 33% Brent average in 2011 (Brent Council, 2013).

Affordable housing, activities for teenagers and levels of crime were among the top ten key improvement priorities for residents in 2008/9 according to the MORI Place survey (Brent council, 2011b). The household tenure composition in Brent includes 44% of owner-occupied households compared to 32% privately rented and 24% socially rented.
households. Under 18 conception rates have fallen from 33.6 per 1000 15-18 year olds in 2008 to 18.5 in 2014 and remain below the London mean rate (Local Government Association, 2014). Children from Brent reported feeling more unsafe than national average figures with 35% feeling unsafe on public transport compared to 27% nationally and 16% feeling afraid going to and from school compared to 11% nationally (Brent council, 2011b).

In 2011, 28% of children (aged 16 and under) in Brent were living in poverty. This was defined as the percentage of children aged under 16 living in families receiving out of work benefits or tax credits while reporting an income lower than 60% of the median income (Brent Joint Strategic Needs Assessment, 2014). This figure is higher than the average of 20.6% in England and 26.5% in London but levels of child poverty varied widely by ward. They were highest in Stonebridge with 42% of children estimated to be living in poverty and lower in Kenton (10%) (Brent Joint Strategic Needs Assessment, 2014). Stonebridge and Harlesden also reported the highest youth unemployment figures at 3-4% compared to other wards in Brent, and the highest proportion of children receiving free school meals (44.2% and 38.7% respectively compared to the lowest proportion in Kenton 11.6% in 2010) (Brent council, 2013, Brent council 2011b). The highest proportion of Looked After Children (LAC) in Brent resided in Harlesden in 2009 (24%) and 41% of LAC were of black or black British ethnicity (Brent council, 2011b).

Young male participants were purposefully selected from the local GUM clinic and other community organisations based on the selection criteria and keeping the sampling frame in mind (See Table 1). Key informants were selected by the nature of their work with the target group.

In order to explore the young men’s social environment, their physical environment and neighbourhood in more detail along with the impact this had on their relationships and sexual behaviour, ethnographic work and participatory observation would have been a particularly well suited method of data collection but being a woman, older, and not of that environment, meant it was not possible. There were also discipline and time constraints given that the study started out as a mixed method one. However, my decision to include key informants and my experience of conducting a 2 year intervention
translation study in the same area, which involved spending time at community groups and organising workshops, were helpful in providing me with a better understanding of the physical environment, contributing to the development of the topic guides in order to address my objectives and facilitating the interpretation of data from the interviews.

In-depth interviews with young men and key informants working with the target group in relevant areas were a good alternative that enabled me to achieve the study aims of exploring the context and wider social influences in which sexual relationships were formed and decisions made about sexual behaviour as well as the pathways to increased sexual risk behaviour. This method also achieved my objectives of providing detailed information about young men’s perceptions of their surroundings and their perspectives on the influence of being male, young and black. Key informants then provided a more removed view while also being individuals involved in shaping the young men’s social environment by nature of their professional roles.

Focus groups were originally included in the study data collection plan in order to capture social interactions between young men but only 2 of 5 group sessions occurred. While some of the discussions reinforced findings from the interviews and were helpful for the interpretation and analysis of the interview data included in the thesis, the two sessions did not add new findings to the interviews. The interviews yielded more detailed and personal perspectives compared to the bravado induced by the presence of peers. Given this, and the time and effort involved in trying to organise the focus groups, I decided to exclude those data from the thesis.

3.4.1 Participant selection criteria: young men
Young men:

- Young men aged 16-24 years who define themselves ethnically or culturally as black British or black Caribbean, born and raised in London.
- Young men aged 16-24 years who define themselves ethnically or culturally as white British, born and raised in London.

My original plan was to focus on UK born young black Caribbean men who identify their ethnicity as black Caribbean or black British for the interviews. Compared to the findings about a broader need to better understand sexual risk-taking among young black men identified through my previous research project (the Young Brent Project),
the decision to narrow the focus from ‘black’ men to ‘black Caribbean’ men was in response to both findings from epidemiological studies and surveillance data. These findings helped me select black Caribbean men as a more targeted group at disproportionate risk of STI acquisition. Furthermore, this decision considered that the longer history of mass migration to the UK from the Caribbean compared to African countries would mean more similar UK based influences. Greater numbers of Caribbean British young people are UK born and second or third generation British, and have less contact with their parents’ or grandparents countries of origin (Elam et al., 1999, Lam and Smith, 2009).

I did not intend to include black African young men due to the considerable heterogeneity in this group, including their different migration history, religion, socio-demographic characteristics, and cultural influences. I was concerned that the influence of the great cultural and religious variations both within and between countries in the African continent (Elam et al. 1999) might be a challenge in exploring the influences of growing up in London. The more recent migration to the UK of people from different African countries has also been found to result in incredible variations in sexual attitudes and lifestyles both by nationality and by tribe within countries of origin (Elam et al. 1999).

Young men in particular however, have been found to have greater freedom than women across ethnic groups and to report less sexually conservative youth norms (Elam et al., 1999, French et al., 2005, Sinha et al., 2007). Further, influences on a sexualised black identity are likely to affect young men across black ethnic groups and may also be affected by the extent to which young men have adopted a more British identity. The importance of the degree of acculturation in influencing sexual lifestyles was raised by Elam et al. (1999) in their London based study on the relationships between ethnicity and sexual health. They discuss London norms for young people compared to the traditional cultural patterns of parents or older generations who were not raised or born in the UK. Acculturation was identified as particularly relevant among the longer established minority ethnic communities in the UK (such as Jamaican and Nigerian ones among black ethnic groups) suggesting that the emergence of a black UK identity was relevant for those with both Caribbean and African heritages. In light of this, I decided not to exclude young men who identified as black British and had African
parentage but to include them as points of comparison. One such young man whose parents were Nigerian was recruited from the clinic and another also of Nigerian descent was a friend of a participant recruited from the clinic.

The ethnic self-identification of young men who identified as black British, black Caribbean, black African or a combination of the three was not straightforward and drew on different markers of group affiliation. The two white young men I interviewed had grown up locally and spoke of mainly black and ethnically mixed groups of friends and sexual partners.

I decided to make two exceptions to the inclusion criteria of UK born young men for two young men who arrived in the UK before they were 10 years old after accidentally interviewing a young man who had moved to the UK aged 8. Recruitment difficulties were a consideration that made me reluctant to stop the interview and turn away an interested individual. After that, I found that across the interviews, although young men spoke of being aware of girls and one described a difficult first sexual experience before age 10, their main experiences of school and wider social influences on partnerships and sexual behaviour occurred after the age of 10 and towards the end of primary school. My key concern was to be able to explore the influences of their surroundings in London, and arrival before the age of 10 allowed for this.

3.4.2 Sample size and sampling frame: young men
I designed the sampling frame to select a heterogeneous sample of young men in terms of sexual experiences, educational attainment and employment, housing circumstances and STI risk perceptions. The scope of the sampling frame was to ensure that a wide spectrum of views and experiences were reflected within the number of individuals interviewed (Ritchie et al., 2006a). The primary quotas were based on the age of the young men and whether they were recruited as GUM clinic patients or from community settings. These were monitored carefully and influenced recruitment as key characteristics that are well established to influence the number of sexual partners and the risk taking behaviour reported by individuals respectively. Increased age is associated with a greater number of sexual partners while GUM clinic patients are more likely to report sexual risk taking compared to individuals in the general population. Primary quotas were monitored to ensure the participants’ age ranges covered 16-24
years and that participants were recruited across clinic and community settings. I also kept track of additional characteristics (secondary quotas) which did not influence participant selection but were deemed to have an influence on sexual behaviour and to be relevant to capturing a wide range of experiences (see Table 1).

Table 1: Sampling frame: number of interviews with young men

<table>
<thead>
<tr>
<th>Primary quotas</th>
<th>16-17</th>
<th>18-19</th>
<th>20-24</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recruitment site</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM</td>
<td>1</td>
<td>2</td>
<td>9</td>
<td>12</td>
</tr>
<tr>
<td>Youth group/ other</td>
<td>1</td>
<td>3</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16-17</td>
<td>2</td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>18-19</td>
<td></td>
<td>5</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>20-24</td>
<td></td>
<td></td>
<td>13</td>
<td>13</td>
</tr>
<tr>
<td>Secondary quotas</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Estate</td>
<td>2</td>
<td>3</td>
<td>6</td>
<td>11</td>
</tr>
<tr>
<td>Private</td>
<td>1</td>
<td>1</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Council on road</td>
<td>1</td>
<td>6</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>Occupation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Studying/ training</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Working (inc. part time)</td>
<td>2</td>
<td>7</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>Not in employment or education</td>
<td>1</td>
<td>5</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black British/ Caribbean</td>
<td>2</td>
<td>4</td>
<td>8</td>
<td>14</td>
</tr>
<tr>
<td>White British</td>
<td></td>
<td>2</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Mixed race</td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Black British/ African</td>
<td></td>
<td>3</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Self-identified STI risk</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>2</td>
<td>4</td>
<td>9</td>
<td>15</td>
</tr>
<tr>
<td>Medium</td>
<td></td>
<td>3</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>High</td>
<td></td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>
I had originally planned to interview up to 30 young men (aged 16-24 years) including up to 5 who identified as white British. I felt that the number was adequate to achieve saturation and reflected a realistic study plan given my objectives and time frame. Due to the time limits of the project and recruitment challenges I stopped recruitment after 20 interviews. I had recruited young men who identified themselves as black Caribbean, white and black African across the age ranges and recruitment sites I set out in my sampling frame so this decision was not deemed to hinder the study objectives. I felt I had achieved the diversity of my primary and secondary quotas (See Table 1) and that the interviews included demographic and behavioural diversity (e.g. age, number of partners, condom use, STI experiences). Only a small subset of white British and black African young men were interviewed because the purpose was not a detailed comparison of their experiences but to have some points of reference.

3.4.3 Recruitment of young men
Young male participants were purposefully selected from the local GUM clinic and other community organizations based on the selection criteria and keeping the sampling frame in mind (See Table 1). Recruitment was challenging both in the clinic and community settings, but the clinic recruitment was particularly difficult because after young men indicated an interest in being interviewed, they were asked to return on another day for the interview. The key demographic characteristics of the young men are presented in Table 2 with a more detailed table available in Appendix E.

In the GUM clinic setting, the approach initially adopted by reception staff members was to hand the study information sheets to young men when they first arrived at the clinic. However, it became apparent that this was not getting much interest. Giving the young men some detail on the study at the time they received the information sheet elicited some additional interest, but the receptionists were too busy to talk to the young men about the study in consistent depth. As a result of this, I decided to attend the clinic for many of its opening hours. This was time consuming but did increase the number of young men who expressed interest in the study.

Unfortunately, despite arranging a date and time for their interview, many of the young men did not attend and did not advise me that they were unable to do so. To reduce this non-attendance, I started sending reminder texts both the day before the interview and
on the day. I would also telephone the participant on the day of the interview. This helped but there were still many instances in which I did not get a response. Out of 73 young men from the clinic who agreed to be interviewed in principle, I was able to interview 12. They were all interviewed at the clinic (August 2010 - December 2010).

In the community setting, the fieldwork period (December 2009 - January 2011) coincided with drastic funding cuts being implemented across public sector organisations. This was detrimental to the community based recruitment of young men. Although there were individuals who expressed interested in the project, in letting me present it to their young men, in informing potential participants about it, and in recruiting young men, it was difficult for them to make this a priority due to job insecurities and uncertainties about the survival of their organisations. Young men recruited outside the clinic were mainly from youth groups at which I presented the project, but also included friends recommended by young men I had interviewed or clinic patients I approached and were not interested in participating themselves.

All the individuals recruited from community settings were given the information sheet by the contact person or by me. When I had presented the project at a youth group session, I asked interested individuals to either pass on their contact details to the youth group leader, or to contact me directly. I set up convenient times and places for the interviews to be conducted through the youth group leader or directly with participants. Four of the interviews were conducted at the GUM clinic and four at youth centres (July 2010 – January 2011).
<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Ethnicity</th>
<th>Education</th>
<th>Partnership/ marital status</th>
<th>Child</th>
<th>Occupation</th>
<th>Age at first sex (age of partner)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Andre</td>
<td>19</td>
<td>black British (Jamaican descent)</td>
<td>GCSE, in training</td>
<td>Single</td>
<td>No</td>
<td>Unemployed</td>
<td>13 (13)</td>
</tr>
<tr>
<td>Jay</td>
<td>22</td>
<td>white British</td>
<td>GCSE, left college</td>
<td>In relationship- 4 months</td>
<td>No</td>
<td>Unemployed</td>
<td>14 (15/16)</td>
</tr>
<tr>
<td>Nathan</td>
<td>20</td>
<td>white British</td>
<td>Excluded before GCSE</td>
<td>Single</td>
<td>No</td>
<td>Unemployed</td>
<td>12 (13)</td>
</tr>
<tr>
<td>Lawrence</td>
<td>24</td>
<td>black British (Caribbean descent)</td>
<td>GCSE, failed BTEC</td>
<td>Single</td>
<td>No</td>
<td>Unemployed</td>
<td>19 (18)</td>
</tr>
<tr>
<td>Darren</td>
<td>19</td>
<td>Guyanese and Irish</td>
<td>Finished college (IT)</td>
<td>In relationship - 5 years</td>
<td>No</td>
<td>Work-PT</td>
<td>11 (13)</td>
</tr>
<tr>
<td>Jordan</td>
<td>23</td>
<td>African (born in Jamaica)</td>
<td>A level Art design</td>
<td>In relationship- 8 years</td>
<td>Yes</td>
<td>Unemployed</td>
<td>11/12 (11/12)</td>
</tr>
<tr>
<td>Marcus</td>
<td>21</td>
<td>black African-Parent Nigeria &amp; Barbados</td>
<td>GCSE, left college</td>
<td>Single</td>
<td>No</td>
<td>Work-FT</td>
<td>15 (?)</td>
</tr>
<tr>
<td>Aaron</td>
<td>20</td>
<td>British African (Ghana, Jamaican grandparents)</td>
<td>BTEC electronics</td>
<td>Single</td>
<td>No</td>
<td>Unemployed</td>
<td>16 (16)</td>
</tr>
<tr>
<td>Moses</td>
<td>22</td>
<td>black African (parents Nigerian)</td>
<td>College City and Guilds certificate in electrical engineering</td>
<td>Single (2 long terms)</td>
<td>Yes</td>
<td>Unemployed</td>
<td>16</td>
</tr>
<tr>
<td>Gabriel</td>
<td>24</td>
<td>black Caribbean</td>
<td>NVQ (media)</td>
<td>In a relationship of 3.5 years</td>
<td>Yes</td>
<td>Work-FT</td>
<td>14/15</td>
</tr>
<tr>
<td>Janiel</td>
<td>19</td>
<td>black British (grandparents Caribbean)</td>
<td>GCSE, in college</td>
<td>Single</td>
<td>No</td>
<td>Unemployed</td>
<td>9 (11/15 (16)</td>
</tr>
<tr>
<td>Daniel</td>
<td>23</td>
<td>black Caribbean (Jamaican parents)</td>
<td>GCSE, left college</td>
<td>Single-has links</td>
<td>No</td>
<td>Work-FT</td>
<td>18</td>
</tr>
<tr>
<td>Dean</td>
<td>21</td>
<td>black Caribbean</td>
<td>NVQ (Electronics)</td>
<td>Single-has links</td>
<td>Yes</td>
<td>Work-FT</td>
<td>12/13 (12/13)</td>
</tr>
<tr>
<td>Jason</td>
<td>18</td>
<td>Jamaican English</td>
<td>Temporary college</td>
<td>In relationship- 8 months</td>
<td>No</td>
<td>Student</td>
<td>12</td>
</tr>
<tr>
<td>Emmanuel</td>
<td>18</td>
<td>black British</td>
<td>Finished college (sports science, in gap year)</td>
<td>Single</td>
<td>No</td>
<td>Student/ Work-PT</td>
<td>15</td>
</tr>
<tr>
<td>Adrian</td>
<td>20</td>
<td>black Caribbean</td>
<td>BTEC electronics</td>
<td>In relationship- 9 months</td>
<td>No</td>
<td>Work-PT</td>
<td>15 (16)</td>
</tr>
<tr>
<td>Andrew</td>
<td>17</td>
<td>black Caribbean</td>
<td>In college, 4 university acceptances</td>
<td>In relationship- 3 weeks</td>
<td>No</td>
<td>Student/ Work-PT</td>
<td>14 (16/17)</td>
</tr>
<tr>
<td>Alex</td>
<td>20</td>
<td>black African (parents Nigerian)</td>
<td>Finished college diploma</td>
<td>Single</td>
<td>No</td>
<td>Training</td>
<td>15</td>
</tr>
<tr>
<td>Tion</td>
<td>21</td>
<td>black Caribbean</td>
<td>GCSE, left college</td>
<td>Single</td>
<td>No</td>
<td>Work-PT</td>
<td>14 (16)</td>
</tr>
<tr>
<td>Michael</td>
<td>16</td>
<td>black British</td>
<td>GCSE, going to college</td>
<td>Single</td>
<td>No</td>
<td>Student</td>
<td>14</td>
</tr>
</tbody>
</table>
3.4.4 In-depth interviews with young men

The interviews with the young men lasted between 42 minutes and 1 hour and 40 minutes. They were guided by a topic guide (see Table 3 for the broad headings and Appendix B for the detailed guide) in order to provide some structure and ensure there was coverage with all participants of key topics to explore ideas of ethnic and male identity, views on relationships, sexual practices and social or behavioural mediators likely to influence young men's sexual health outcomes.

Table 3: Headings from the young men’s in-depth interview topic guide

<table>
<thead>
<tr>
<th>Introductions</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Background</td>
<td></td>
</tr>
<tr>
<td>General information</td>
<td></td>
</tr>
<tr>
<td>Friends and leisure time</td>
<td></td>
</tr>
<tr>
<td>Being a young man</td>
<td></td>
</tr>
<tr>
<td>Identity</td>
<td></td>
</tr>
<tr>
<td>Sex and Relationships</td>
<td></td>
</tr>
<tr>
<td>STI Awareness &amp; Susceptibility</td>
<td></td>
</tr>
<tr>
<td>Condom use</td>
<td></td>
</tr>
<tr>
<td>Pregnancy</td>
<td></td>
</tr>
<tr>
<td>Alcohol and drugs</td>
<td></td>
</tr>
<tr>
<td>Sexual Experiences</td>
<td></td>
</tr>
<tr>
<td>Sexual awareness and attitudes</td>
<td></td>
</tr>
<tr>
<td>Help and support</td>
<td></td>
</tr>
<tr>
<td>Future plans</td>
<td></td>
</tr>
<tr>
<td>Experience of interview</td>
<td></td>
</tr>
</tbody>
</table>

All participants were given the information sheet to read and the consent form to sign before the interview started which included consent to audio record the interview.

Young men received £15 in high street shopping vouchers as a token of appreciation for their time at the end of the sessions. They also received a sexual health helpline and website sheet (see Appendix F).

All the interviews with the young men were conducted in private rooms, face to face in an informal atmosphere. We sat at rectangular tables generally on each side of a corner. At the GUM clinic, all interviews were conducted in the clinic staff meeting room while the interviews at youth services were conducted in small private rooms.

The topic guide included open ended questions and probes but also allowed for flexibility. The sequence of discussion topics during the interviews varied depending on whether participants touched on other areas of interest while discussing a topic early on.
in the interview. Some interviews focused more on certain areas than others but the beginning and end of each interview had a set structure.

After I introduced myself and the study and had participants sign the consent form, all the interviews started with participants providing some background demographic information. This was followed by initial questions about their daily lives and experiences of growing up and living in the local area. This helped ease the young men into the interview, particularly those who seemed a little uncomfortable or shy. The topic guide was organised under the following headings: Introduction; Demographics; General information; Friends and leisure time; Being a young man; Identity; Sex and relationships (with timeline); Learning about sex and sexual experiences; Sexual experiences (linked into timeline); STI awareness and susceptibility; Condom use; Pregnancy; Alcohol and drugs; Help and support; Plans for the future; Experience of interview.

At the end of the interview I asked the young men about their plans for the future and about their experience of the interview. I incorporated a relationship timeline as a visual data collection tool during the interview which I drew out on a blank sheet of paper in front of the young men. I started completing it as I went through the questions about early awareness of girls and sex and added to it as they spoke about different sexual partnerships (see Appendix G for examples). This functioned as an aide memoire as recommended by Arthur and Nazroo (2006) in order to get a more accurate sequence of events. It also provided a visual representation of their partnerships.

### 3.4.5 Participant selection criteria, sample size and recruitment: Key informants

Key informants were selected on the basis that they were individuals who in their professional roles worked with young black Caribbean men in fields of importance to their lives that were influential on male, youth, ethnic identity or sexual behaviour. They included individuals based in North West London, in other London boroughs or working across London. The inclusion of key informants in the research provided an opportunity to compare and contrast the views of the young men with those of professionals working with them.

They were recruited both during the initial consultation process to refine the topic guide for young men and during the fieldwork with young men. I recruited 12 professionals
working with young black men in different capacities within secondary school, the youth justice services, community and GUM clinic based sexual health services, family and male development services and housing services (See Table 4). They were approached as individuals working in relevant roles who had expressed an interest in the target group during my previous sexual health work, as contacts made at community meetings and individuals recommended by contacts or key informants who had already participated in the study.

Table 4: Characteristics of key informant interview participants

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Sex</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary school</td>
<td>M</td>
<td>English teacher/ Head of department</td>
</tr>
<tr>
<td>Youth offending team (YOT)</td>
<td>M</td>
<td>Prevention/ early intervention youth worker</td>
</tr>
<tr>
<td>Youth offending team (YOT)</td>
<td>F</td>
<td>Reparation officer</td>
</tr>
<tr>
<td>Housing association</td>
<td>M</td>
<td>Youth worker/ Young man</td>
</tr>
<tr>
<td>GUM medicine clinic</td>
<td>F</td>
<td>Health advisor- lead for young people</td>
</tr>
<tr>
<td>Male development service</td>
<td>M</td>
<td>Project manager/ Mentor</td>
</tr>
<tr>
<td>Community sexual health services/ GUM clinic</td>
<td>M</td>
<td>Male development worker/ Sex &amp; relationship education lead</td>
</tr>
<tr>
<td>Independent- Gun crime and family education programmes</td>
<td>M</td>
<td>Youth facilitator</td>
</tr>
<tr>
<td>Secondary school</td>
<td>F</td>
<td>Group development worker/ Student mentor</td>
</tr>
<tr>
<td>GUM clinic</td>
<td>M</td>
<td>Consultant physician</td>
</tr>
<tr>
<td>GUM clinic</td>
<td>F</td>
<td>Sister/ Health advisor</td>
</tr>
<tr>
<td>GUM clinic</td>
<td>M</td>
<td>Clinical nurse specialist</td>
</tr>
</tbody>
</table>

3.4.6 In-depth interviews with key informants

The key informant interviews lasted from 47 minutes to 1 hour and 47 minutes. They were conducted in person and over the phone using a topic guide (see Table 5 for the broad headings and Appendix C for the detailed guide). Phone interview participants were sent the information sheet and consent form via e-mail and returned it by fax or e-mail prior to the interview. Those who were interviewed in person signed the consent...
form before the interview started. Face-to-face key informant interviews were conducted in their offices and in private rooms or areas at their places of work.

**Table 5: Headings from the key informants’ in-depth interview topic guide**

<table>
<thead>
<tr>
<th>Information about the participants and their work</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Information about the young people they work with</td>
<td></td>
</tr>
<tr>
<td>General socio-cultural and health issues for young Caribbeans</td>
<td></td>
</tr>
<tr>
<td>Peer groups and leisure activities</td>
<td></td>
</tr>
<tr>
<td>Relationships</td>
<td></td>
</tr>
<tr>
<td>Sexual health</td>
<td></td>
</tr>
<tr>
<td>Support needs for young people</td>
<td></td>
</tr>
<tr>
<td>Support needs for people working with young men</td>
<td></td>
</tr>
<tr>
<td>Experience of interview</td>
<td></td>
</tr>
</tbody>
</table>

I developed the topic guide with the aim of collecting key informants’ views about the sexual health of the young black Caribbean men and of consulting them about the important areas of the young men’s lives that needed to be explored in the study. The following headings were included: Information about their organisation and their role within it; Information about the young people they work with; General socio-cultural and health issues for young black Caribbeans; the influence of peer group and leisure activities; Relationships; Sexual health; Support needs for young people; Support needs for people working with young men.

I started all the key informant interviews by introducing myself and the study. The paths the interviews took were quite varied due to the different areas the key informants worked in and the different aspects of young men’s lives they felt able to comment on or had exposure to.

**3.5 Analysis**

There are many approaches to qualitative research and analysis. In the absence of agreed rules and procedures such as those found in quantitative analysis, the common feature of qualitative approaches is a desire to interpret qualitative data using explicit systematic methods in order to draw conclusions about the complex social worlds being examined (Coffey and Atkinson, 1996, Miles and Huberman, 1994).

The different forms of qualitative research are based on different philosophies, traditions and epistemological positions and the different methodologies include varying
levels of flexibility. Beliefs about scientific enquiry, what knowledge is and how it can be acquired (epistemology), opinions about the shape of the social world, what constitutes reality and what can be known about it (ontology), influence how qualitative research is conducted and how the methods and findings are interpreted (Snape and Spencer, 2006). Miles and Huberman (1994, p4) argue for the importance of researchers making their positions and preferences clear because “to know how a researcher construes the shape of the social world and aims to give us a credible account of it is to know our conversational partner”.

In the process of representing or reconstructing social phenomena, qualitative methods can be more prescriptive, like grounded theory which focuses on generating theory about social processes. Alternatively they can be less prescriptive, like Huberman and Miles’ (1994) systematic approach that offers a variety of ways to conduct the three linked analytical processes: data reduction, data display, conclusion drawing and verification (Coffey and Atkinson, 1996). The meaning of analysis and how it should be conducted is disputed by qualitative researchers but there is agreement about the need for a comprehensive and methodical process. Keeping this in mind, I decided to follow the less rigid suggestions of Coffey and Atkinson (1996), who argue that analysis does not require adherence to one approach or set of techniques.

I conducted a thematic analysis of the data and included techniques derived from framework, grounded theory and phenomenology approaches. The elements of the grounded theory approach I used were in the data collection process, with each interview feeding into the next one in terms of topics to explore further, the memo writing during the data collection, and the progress of the coding process from initial line by line selection of text into many codes, in order to build relationships between codes and to find dimensions. I broadly followed the five stages of the framework approach to begin analysis which involved familiarisation, identification of a thematic framework, indexing, charting, and mapping and interpretation as well as developing a conceptual index to apply to all the transcripts (Ritchie et al., 2006b). I also used writing as part of the analysis process. The use of writing and rewriting is key to phenomenological analysis which aims to comprehend reality by capturing the essence of phenomena through descriptions of the meaning of the lived experience by participants. Writing about the young men’s interpretations of their lives, helped me to
move from details to abstract concepts with a focus on their realities. As forms of interpretative analysis and of more general inductive methods of interpretation, these methods involved a process of decontextualizing and recontextualising the data (Starks and Trinidad, 2007). I describe my analytical process in more detail next.

I kept detailed field notes and wrote analytic memos throughout the data collection and analysis stages of my research. This helped me to keep my ideas together, to add probes and notes to my topic guides and to develop theoretical and abstract codes (Jeon, 2004). I included notes on informal discussions with academics, youth workers and other community organisation staff members during the consultation process and the recruitment stages of the study. I made notes of community meetings and youth group sessions I attended, as well as notes on individual interviews, group sessions and informal conversations with participants.

After each interview I wrote a short summary including topics to explore further in future interviews and I added notes on the topic guide including new probes or ideas to clarify questions. For example, several young men seemed to find the question about their perception of their social class difficult to answer, or seemed uncertain about what I was asking, so I reworded it a few times. The summaries included the feel of the interview, my impressions of the participant and of how the interview went, areas of questioning I had missed, and ideas for analysis. These notes provided me with the opportunity for general reflections. They were the basis for the iterative interviewing process and also helped me to start thinking about themes, codes and their relationships for analysis. Analytic memos are considered key to analysis in grounded theory (Glaser and Strauss, 1967).

The interviews were recorded using a digital recorder. The files were sent to a professional transcription company for transcribing and I then checked the transcripts against the recordings making corrections where necessary. I listened to the interviews and read them several times in order to devise a first set of labels or codes to organize the transcripts. I then went through the transcripts and conducted line by line coding based on my descriptive codes.

Various sources, already discussed, contributed to the selection of areas of enquiry included in the topic guides. I was not approaching the analysis without any preconceived
ideas, since I wanted to look at aspects of young black Caribbean men’s identities and their impact on sexual behaviour, but I did not have a hypothesis to test, I wanted to explore the influence of the different factors in McLaren and Hawe’s (2005) adapted Brofenbrenner’s ecological theory of development framework. The framework did not direct the analysis, but helped the initial broad coding process and provided a place to start in organising the voluminous transcript data, without being restrictive. The data were imported into NVivo (2010), a qualitative data management software package that I used to apply the codes to the transcripts. The initial broader codes were broken down further as I went through the interviews. I then moved from generating initial concepts from the data to grouping them into categories as well as identifying broader categories. This required a move from themes that were close to the original text to more analytic and theoretical themes and linking categories (Coffey and Atkinson, 1996).

I created a conceptual index (see Appendix H) based on the framework approach (Ritchie et al., 2006b), which I applied to all the transcripts as advocated by the framework approach. However, I did not follow the next step of building summary matrices. Instead, I grouped the segmented text according to the initial conceptual index codes using NVivo (2010) and interrogated the data further in that format. This process also involved constantly going back to the original interviews to make sure I did not lose the context of the excerpts and to avoid misinterpreting data.

I started with very broad codes, so using NVivo to organize the data into categories and themes for analysis suited my need for flexibility to regroup different extracts better than using Excel to build summary matrices. The initial codes included labels from the general topics used to organise the topic guide, as well as ‘in vivo’ codes derived from the participants’ words (Spencer et al., 2006).

I started the process of describing the data by organizing the coded text under three broad groupings: environment, identity and relationships and sexual behaviour. During the process of writing about the young men’s experiences and views and incorporating the information provided by the key informants, I also created visual displays of the data (see Appendix I). The process of writing and creating a visual display, enabled me to regroup the data moving from the initial conceptual index to more abstract themes and to start making links between beliefs, circumstances and actions moving up steps of analytical abstraction (Miles and Huberman, 1994).
I reviewed the relationship timelines (Appendix G) I had used to map the young men’s partnerships and re-read the data broken down by the conceptual index codes. I applied the constant comparative method suggested by Glaser and Strauss (1967) by examining, for each code, the similarities and differences between the participants. This revealed patterns of behaviour, the common influences and circumstances and the deviant cases; but I did not generate any typologies or develop theory. This had not been the aim of the research. I had set out to gain a better understanding of the mechanisms leading to the disproportional risk of acquiring STIs among black Caribbean young men by describing the context of their sexual relationships as well as the patterns and meanings of their experiences and behaviours. I proceeded to “use writing to compose a story that captures the important elements of the lived experiences” (Starks and Trinidad, 2007, p.1376).

The process of writing and rewriting helped me to rethink relationships between codes, conceptual links between categories and to think about the different dimensions and grouping of codes and broader themes.

I found intersectionality to be an ideal theory to frame my analyses around because it removed the need to give greater importance to any one of the key characteristics identified. Initial attempts to structure my findings around theories of masculinity, youth studies and ethnic identity had been challenging because they required at least an implicit decision about whether it was being male, young or black that was most influential on relationships and sexual behaviour. This led to several unsatisfactory attempts to structure and restructure my findings. The outcomes resulted in themes being forced together when in reality there was a fluidity that was not well captured. While these elements of their identities along with their deprived environments were important, it was sometimes difficult for the young men themselves to discuss their opinions and experiences as a result of single characteristics and to disentangle the influences of these traits and circumstances. I read about intersectionality as I was searching for a way to understand and present the web of identity without being forced to disentangle it. Intersectionality provided the ideal solution by allowing the focus to be on the interactions of the young men’s different identities and circumstances along with the dynamics of power resulting from their positions in society.
3.5.1 Reliability and validity
A key concern with qualitative research is quality control. Miles and Huberman (1994) encourage transparency including systematic and explicit methods of drawing conclusions and testing them as well as “methods that are credible, dependable and replicable in qualitative terms” (p.2).

One of my supervisors (SK) read two transcripts using my coding frame and coded them manually. We then discussed differences of opinion on themes used to code the transcripts. Another supervisor (GE) read three transcripts without my codes and we discussed descriptive codes, emergent themes and my interpretations of the data as well as the next level of analysis including the dimensions of themes. This process was beneficial to my analysis of the data: it helped me to think through my coding rationale and to refine some of the descriptive codes and themes.

The process of consistently coding and charting each interview transcript, comparing between individuals and the ease of returning to the context within each interview using NVIVO helped me ensure that the findings remained grounded in the data. Maintaining a systematic methodology was necessary to support the reliability of the analysis and to provide assurance that the analysis is repeatable and would lead to similar conclusions.

3.6 Ethical considerations
I did not expect serious ethical problems with the study. Young men were asked to discuss personal and intimate details about their relationships and sexual behaviour. Sex and relationships as topics of investigation are considered sensitive (Elam and Fenton, 2003, Legard et al., 2006). Accordingly, the study was designed keeping this in mind. I relied on my past experience of researching sexual health among young people and on the lessons learned by others researching sexual health among ethnic minority groups in the UK (Anderson et al., 2009, Elam and Fenton, 2003, Higginbottom and Serrant-Green, 2005).

Key informants were interviewed in their professional capacity and I had the opportunity to discuss the study and how it was developed before their interviews to allay any concerns. The young men’s information sheet was clear about the study topic and that participants would be asked about their relationships and sexual behaviour. It stated that participants could stop participation at any time and I also reiterated this at the beginning of the interviews. There was the possibility that difficult experiences
could be brought up during the interview and that discussions about sexual risk taking might raise some concerns for participants. In light of this, I put together a helpline and website information sheet with the numbers and websites of organisations that could provide advice, facts or someone to talk to about sex and relationship concerns (see Appendix F). All participants including key informants received this sheet. All the young men interviewed outside the clinic were also given an additional leaflet about the GUM clinic with contact details and opening hours.

I anticipated that some young men might feel a little embarrassed about discussing their sexual behaviour so the topic guide was purposely structured to start with more general discussions about their lives and interests. This was in order to ease participants into the interview and to give them time to get comfortable talking about themselves. My previous experience in qualitative sexual health research also helped me to put participants at ease. There were a few young men who seemed initially a little tense but they all seemed to relax by the end of the interview. Some young men mentioned their initial apprehension when I asked about the experience of the interview but also said they had enjoyed it and had been able to be honest. I was also able to change topics when I felt participants were uncomfortable. This happened once during the discussion of one young man’s father and another time when a young man spoke about having a sexual experience when he was nine years old.

Generally, I did not find that young men were apprehensive about discussing different aspects of their sexual health. Relationship and sexual matters did not appear to be considered a particularly personal topic by participants, however there were young men who expressed discomfort about discussing family relationships, family relationship breakdowns and absent fathers. During recruitment, the greater deterrents to participation were the request for those recruited from the clinic to return there and for approximately 45 minutes of their time rather than concerns about the research topic.

At the outset of the study I used several strategies both to engage with the target group and to overcome sensitivity concerns. I piloted the topic guide with professionals working with the target group in different aspects of their lives as well as with a black Caribbean young man employed as a youth worker. I discussed recruitment with an advisory group (composed mainly of black Caribbean men), with GUM clinic staff members, and members of community organisations. Furthermore, the study developed
as a result of local concern about the need to understand what was leading to high STI rates, high partner turnover and concurrent sexual partnerships among young black men. This was particularly important considering the apprehension voiced at past meetings with community workers about “too many studies focussing on young black men’s promiscuity and involvement with gangs, drugs and violence.” It was also emphasised in the advisory group meeting that “the study should not become a case of going in and studying the ‘problem’ young men.”

Recruiting from the GUM clinic and through youth workers meant that the study had some legitimacy from institutions and individuals the young men had interactions with and trusted. There was an A4 poster about the study on the wall in the clinic waiting area with my picture on it following recommendations from a GUM clinic staff meeting about the study.

Through these different strategies, I was able to address the general and specific considerations proposed by Elam and Fenton (2003) to tackle research involving sensitive issues and ethnic minority groups. These included providing clear explanations about the study and confidentiality procedures, taking care in the structure and content of the interview, involving local professionals and a young man working with the target population, providing options for support after the interview and having previous training and experience in qualitative research.

Ethics approval for this study was obtained from the Brent Medical Ethics Committee and R&D approval was obtained from the North West London NHS Hospital Trust.

3.7 Interview dynamics
The simplification of social life into “genuine” or “accurate” private accounts, derived from personal experiences and feelings, in opposition to public accounts influenced by cultural norms, has been described as problematic (Rhodes, 1994). This would imply the superiority of the private account over the public one, which is considered insincere. It also alludes to the existence of a single truth to be uncovered, failing to take into account the complexity of social life and the possibility of holding various beliefs that may be contradictory (Rhodes, 1994).
An alternative option is to view the interview as an active interaction involving the construction of information rather than simply an occasion for the discovery and conveying of it (Holstein and Gubrium, 1997). I sit somewhere between the more traditional positivist view of the interview as a neutral means of transmitting knowledge and obtaining a true reflection of the realities of the social world, and the social constructionist view. The latter identifies the interview as a dynamic meaning-making occasion which cannot reveal knowledge about the social world due to its interactive nature resulting instead in a collaborative construction of the social world (Holstein and Gubrium, 1997).

Interview participants are not just passive subjects and repositories of knowledge, nor are interviewers on a hunt for the truth. There is the option to move away from the mirror reflection of the social world sought by positivist research and to aspire to reveal the meanings people give to their experiences and social world (Miller and Glassner, 1998).

The social setting of the interview shapes how and what information is exchanged so exact consistency cannot be expected from interviews conducted in different circumstances, which have been described as circumstances of production (Holstein and Gubrium 1997 p117).

[The] social milieu in which communication takes place [during interviews] modifies not only what a person dares to say but even what he thinks he chooses to say. And those variations in expression cannot be viewed as mere deviations from some underlying ‘true’ opinion. For there is no neutral, non-social, uninfluenced situation to provide that baseline. (Pool, 1957:p192 quoted in Holstein and Gubrium 1997, p120)

Meaning, according to Holstein and Gubrium (1997) combines the how and what of experience via procedures and resources used to understand, structure and represent reality. It also reveals persistent interpretive resources such as the interviewer’s topics of interest, biographical details and local ways of perceiving those topics. They suggest that the validity of answers should not be based on how they conform to meanings held by respondents but on how well they relay specific circumstances in ways that are locally understandable (Holstein and Gubrium, 1997).
I did not find it difficult to build a rapport with participants during the interview and felt that the young men were quite comfortable with me based on what they felt able to say, body language and laughter during the interviews. They disclosed sensitive information about past involvement in crime, including robberies, muggings and drug dealing. They were also forthcoming about behaviours towards women which they suggested might not be considered socially acceptable or which they were not particularly proud of. In this way they were not avoiding experiences and decisions which contravened socially acceptable behaviour but instead either justified them or explained how they followed slightly modified social norms. They linked these norms mainly to their group of friends, the perceived local norms “round here” or “in North West [London]” and to being young. These narratives provide an opportunity to explore their “frame of explanation” (Silverman, 2005)(p. 157).

Despite these observations, I am aware research cannot be value free and it is likely the young men felt I would have a female perspective particularly as the study was about sexual health and relationships. However, based on my past experience interviewing young men about sex and relationships, I did not expect that being a woman would prove to be a barrier to data collection. I was able to fulfil my role as interviewer to allow participants to tell many types of accounts, including those told from the point of view of their norms, those that conformed but expressed some reservations and those that presented alternative narratives.

I dressed casually and I felt this was particularly important in order to lessen the formality of the interviews with young men. This did not eliminate the power inequality that exists inherently in the research interview process, but I felt it went some way towards creating a less authoritative image of me as the interviewer. I also emphasized that the purpose of the interview was to hear about the young men’s views and experiences.

Strategic self-disclosure has been suggested as a research strategy to manage unequal power relations, to build rapport and to manage concerns relating to race, culture and age within semi-structured interviews (Abell et al., 2006). However, I tried to avoid it as I did not perceive any particular benefit to be gained. I was prepared to answer questions the young men might have for me but none of them asked me about myself so
I left it for them to assume whatever they wanted about my background. In terms of the age gap between myself and the participants, I got the impression I was seen as quite a bit older by some of the younger participants who referred to me as “Miss” and maybe closer to their age by some of the older ones as I was invited on a movie date.

I was aware that my background could be interpreted in different ways and I preferred to let the young men make their own assumptions. The exception I made to self-disclosure was in asking participants to tell me their age when they used school years as timelines for events. I explained my questioning by saying I did not go to school here. Nothing further was asked of me. Clearly as a woman I was different to them and I am aware that there may have been some information they withheld or some exaggeration, but I did not get the impression any participant was trying to impress me. I did not see the kind of bravado I witnessed in past group discussions or in the clinic waiting room when young men were among their peers.

I acknowledge the possibility and likelihood that a male researcher may have been provided with somewhat different accounts or interpretations. However I did not find this problematic given that there was not one truth that I was trying to uncover. Exploring how young men chose to portray themselves was an important part of understanding their behaviour and the context within which they made decisions.

In terms of my own values, I made an effort to avoid expressing opinions about young men’s personal accounts or those of their friends having been deceitful or manipulative towards young women, or having mistreated them. As Miller and Glassner (1998) suggest, in order to minimize restrictions on which stories are told and how, I did not present myself as too deeply entrenched to normative views or as clearly opposed to them.

Some of the participants were also very dismissive of certain types of young women or made disrespectful comments about them. I was sorry to hear the lack of empathy and to find that sometimes the young men perceived partnerships and interactions as a struggle between men and women instead of seeking a way for both to benefit. However, I could still identify with some of their difficulties based on ethnicity and gender as well as understand their justifications for some of their behaviours. I attempted to challenge some of their contradicting arguments, but in my desire to focus
on their experiences and perceptions, I knew my role was not to make them more conscious of gender hierarchies or to have them take more responsibility for their actions and sexual decisions.

3.7.1 The influence of interviewer characteristics
A key feature of qualitative research involves the interaction between the interviewer and the participant. The influences of interviewers based on gender and perceived race, ethnicity and socioeconomic status are being increasingly investigated in UK based research (Adamson and Donovan, 2002, McLean and Campbell, 2003, Rhodes, 1994, Song and Parker, 1995). This includes research on the influence of more obvious characteristics such as ethnicity, for example the influence of white researchers interviewing black participants and the effects of different or partially shared cultural identities between researchers and participants (Rhodes, 1994; Song and Parker, 1995). The identity and age of researchers have been found to play a key part in the data generated by influencing recruitment and the interview process (Song and Parker, 1995; McLean and Campbell, 2003).

These studies have also explored how the way information is gathered, viewed and interpreted is likely influenced by gender, social class and professional and educational backgrounds. In light of this, reflexivity provides the opportunity to make the differences between the researcher and the participants explicit in relation to the possible effects on the research process (Higginbottom and Serrant-Green, 2005).

It would have been clear to all the participants that I am black, however they may or may not have thought I was of Caribbean descent. I think I look Ethiopian, which is my parents’ country of origin but I also have a slightly American accent and have been assumed to be Caribbean, American and Ethiopian while living in London. I grew up in Italy at a time when there were few minorities so again I was an outsider to their experience as British ethnic minorities but also understood the wider experience of being a minority and assumptions being made about expected behaviour based on being black from living in the US as a university student. My experiences however did not involve feelings and experiences of marginalisation in my country of birth or deprivation. Given my past and position during the fieldwork as a black woman in my
early-thirties I held both an insider and outsider position in relation to the young men I interviewed.

Song and Parker (1995) found that assumptions about the cultural identity of the interviewer had an impact on the information participants shared and that partial, full or little identification with the interviewers who were of mixed heritage, could facilitate, discourage or alter the focus of disclosure. The advantages and disadvantages of “insider-outsider” status as well as the relevance and importance of it have been debated in several discussions about the qualitative research process (Higginbottom and Serrant-Green, 2005, Ochieng, 2010, Rhodes, 1994, Song and Parker, 1995).

My position was also both insider and outsider with the key informants but as a researcher interviewing them in their professional capacity, I felt problems resulting from power differentials or discomfort were unlikely to be a concern with them. The key informants were of similar age or older than me and I had contact with some of them through previous research while others met me for the first time in the role of a graduate student. All the key informants also had an interest in the research topic or it was of particular relevance to their work. The key informants included mainly black British men of Caribbean and African descent as well as white British and Irish participants. Four of the key informants were women.

I share Ochieng’s (2010) views about the changing status of the interviewer at different points of the research and with different individuals. The importance of “social signifiers” can also vary within interviews. Rhodes (1994) argues for example that as a white researcher he did not feel that the difference between him and the black participants could be simply assumed to be an inhibiting factor. He describes how ethnicity, class, age, gender, education and professional status were other dimensions of differentiation and affinity that could override racial differences.

The advantages of matched interviews include the greater ease of creating an environment that facilitates the discussion of sensitive issues through shared language and shared cultural norms, knowledge and references. From the perspective of participants, they may feel increased trust and believe that the interviewer has the study population’s interest at heart and will make an effort not to stereotype or misrepresent it (Elam and Fenton, 2003). However matching by one or more characteristics can also
make it harder to make criticisms about the views or behaviours of people who share these characteristics or to report deviations from the expected norm within that group (Rhodes, 1994). Matching also requires researchers to make assumptions about the key factors that form the identity of the individuals within the study population. As the significance of different “social signifiers” may change based on the topic of conversation, other dimensions of differentiation and affinity must be kept in mind.

3.8 My experience of the interviews
I made an effort to present myself as objective, neutral and non-judgmental in order to minimize my influence in altering the information provided by participants (Ritchie and Lewis, 2006). This is good practice in order to reduce interviewer bias but I am also mindful of arguments about the futility of trying to eliminate the effects of researchers in social research. When the reflexive character is taken into consideration, Hammersley and Atkinson (1983) suggest it is more useful to acknowledge researchers as part of the social world that is being investigated and to try to understand the effects of the researcher. For this process it was helpful to recognise semi-structured interviews in particular, as social interactions in which interviewers are key instruments in the collection of data (Pezalla et al., 2012). Pezalla et al. (2012) describe both the unique attributes of the interviewer and their “natural style” of interviewing as important to consider in how they might encourage or discourage conversation, honesty and disclosure.

Reflecting on my interviewing style, I think I tended to be enthusiastic and encouraging of the young men. I made an effort to avoid sharing my views but did make references to what other men had said to me during earlier interviews to help them clarify their opinions and interpretations or to present alternative views.

3.8.1 My position
Ochieng (2010) describes the difficulties of remaining impartial in research among participants with whom you feel you share strong similarities. She describes how she subconsciously moved from earlier beliefs about being able to conduct value free research to a “conscious partiality” due to her position as both an insider and outsider while conducting research about families of African descent (like herself) living in North West England.
I thoroughly enjoyed interviewing the young men. I was able to empathise with some of the young men’s actions and beliefs even when I did not agree with them. I also found myself feeling frustrated and disappointed about some of the discrimination they had experienced and at the thoughts of the disadvantages they had already faced and difficulties they were likely to face in life as a result of deprivation and racism. In addition to the aims and objectives of the study, I had a personal interest in this research. I was concerned about how easily young black men were hypersexualised and perceived as predators or oppressors with less consideration about their vulnerabilities. I was also concerned about young women’s reports of being manipulated and deceived by young men in my previous research, which resulted in unknown concurrency and an increase in the risk of STI transmission (Gerressu et al., 2009).

I approached this research from a public health perspective in that I wanted to gain a better understanding of how these young men ended up at greater risk of acquiring STIs. I hoped it would help identify points of intervention in young men’s lives and inform services and interventions for them.

I believe my attempts to build a good rapport during the interviews were successful but I remained aware of the importance of interpreting and presenting these young men in a way that avoided reinforcing stereotypes or further stigmatising black men. I was struck over the years by how easily some people ascribed “promiscuity” as a cultural trait when I explained my research topic even though I never used that word. I objected to that as well as to comments in both academic and non-academic settings about a cultural dislike of condoms attributed to black men. My sensitivity to this may have made me particularly conscious not to unduly interpret findings as cultural practices but I equally did not try to explain away findings for fear that they may be used to add to cultural stereotypes.

I was also wary about making the study a comparison between young white men and black Caribbean men looking solely at ethnicity. This was to avoid comparisons that could give too much importance to racialised identities and ethnicity or “lapse into ethnocentrism” as suggested by Adamson and Donovan (2002). Furthermore, I embarked on this study wanting to explore the experiences of young black men without a comparative focus. It may be helpful to look at ethnic comparisons in greater detail.
once other relevant aspects of the young men’s lives are established but it seemed to assume too much homogeneity in both groups to start with a comparison. Assumptions have been reported by lay participants and sexual health professionals about black Caribbean men in the UK being poor sexual decision makers (Serrant-Green, 2004) and I embarked on this study feeling this may be unduly attributed to cultural explanations. The intersectionality framework was particularly helpful in enabling the combination of elements of their identities to be explored in terms of the resulting positions in society they hold which in turn has an impact on other important non-ethnic aspects of their lives.

I do not have illusions about the impartiality of research but like Ochieng (2010) hope that in acknowledging the different elements of my status as both insider and outsider in relation to the young men, I was able to remain aware of the influence of my identity on my interpretations.

3.9 Participants’ experience of the interview
At the end of the interviews with young men, I asked them how they found the interview and no one described a negative experience although some young men did voice a preference for it to have been shorter. Several young men expressed surprise that it had been different to their expectations of a more didactic or fact searching session. They had expected “more sexual questions” associated with sexual history taking or to be lectured to about abstaining or using condoms.

An element of the interview that was particularly appreciated by the young men was the opportunity to talk about relationships, their motivations and other aspects of their lives that they did not often get a chance to think and talk about. The opportunity to reflect on their past was found to be a helpful process in planning for the future and they valued the focus of the study on their opinions.

...I expected some talk about sexual health and stuff, but don’t really get to talk about this kind of stuff, so it’s been nice talking about that stuff.

IV  Okay, so how did you find it?
IE  Helpful. Get a lot off my chest, now, I can think clearly of what I’m doing, really. (...) because no one really asks me these questions in the channel
While some young men appeared very comfortable and confident from the beginning of the interview, it took a little longer for others to become comfortable. One young man was still a little reticent at the end of interview but nonetheless described a positive experience. With that exception, all the young men seemed to have enjoyed the opportunity to talk about themselves, be asked about their opinions and to discuss sex and relationships. Going over past relationships and looking at their sexual and relationship history on a timeline was mentioned in particular as a positive element of the interview and even described as, “like counselling”. Other UK based sexual health research studies with young men have reported similar appreciation of the opportunity for reflexivity, to speak about sexual health one-on-one and to be asked for their opinions (Hirst, 2004, Mohammad et al., 2006).

In response to my question about how easy or hard it had been to be honest during the interview, young men reported that they had not found it difficult to be honest. For some this was despite reporting behaviour that they acknowledged might not be seen as correct or ideal by everyone, and despite expressing guilt about some of their actions. Being honest was also described as easy because they did not feel they were being judged during the interview and felt it was a confidential set up with just one interviewer. They appreciated the fact that I was removed from their lives and anyone they knew. They also felt reassured that the information they shared would not be attributed to them which was important in enabling them to be honest.

Young men reported willingness to be interviewed for the vouchers they received, for the opportunity to share their opinions as well as for altruistic reasons. Those who discussed altruistic motivations said they thought it was important to be involved in research and that they valued helping other young people and expanding the information about what different people think about sex and relationships. Research was appreciated for enabling opinions to be formed by gathering information from young people rather than basing judgments on stereotypes. Furthermore it was valued for gathering information from a variety of young people of different ages and with different opinions and experiences in order to give better advice.
I think it’s actually quite good so at least when you do make your conclusion you can make your conclusion based on actual thoughts of young people not just by the consensus of what the media has on them…(Alex, age 20)

3.9.1 Participants’ experience of a female interviewer

In some ways, it is problematic to expect participants to tell an interviewer that it would have been easier for them to be interviewed by someone else based on ethnic background or other characteristics, but I still asked about what difference having a male or female interviewer might have made for the young men. This occurred at the end of the interview during discussions about the overall interview experience. In general, young men reported the sex of the interviewer made no difference; however, some participants suggested greater ease with one or the other. Among participants who said it was easier to speak to women, there were some who could not articulate further and others who pointed to the possibility of feeling judged by another man. This was explained as a problem resulting from the ability of other men to understand their positions and motivations enough to disagree with their actions or opinions. In contrast, women were viewed as different enough that they would not make judgements. Another explanation involved not wanting to discuss sex and relationships with another man because it was seen as an unwanted intimacy with an unknown man.

While the likelihood of experiencing a greater sense of camaraderie with a male interviewer was raised as an observation, a key concern among young men who said it would have been easier to have a male interviewer was about not offending a female interviewer.

It made it a little harder [having a female interviewer], because when you’re describing stuff, like links, and stuff like that, I know certain females can feel offended in the way we talk. But […] in my case anyway, it’s not that I’m trying to disrespect or anything, it’s just like, a lot of people use that word … (Jay, age 22)

I was pregnant during my fieldwork but I made an effort to conceal this in case it might make young men uncomfortable to talk about sex and relationships. I wore a big scarf in
order not to bring attention to my pregnancy and I believe that a combination of the scarf and the fact that I started showing late, helped me conceal my pregnancy during most of my fieldwork. Even the clinic staff were not aware I was pregnant until my third trimester. I think my pregnancy was more visible in the last three months during which I conducted only the last 3 interviews. I did not feel any difference in how I was perceived or related to by the young men in that time compared to the rest of the fieldwork. Furthermore, considering that for many of the young men seeing pregnant young women was not unusual, I was not expecting any drastic effect.

**3.9.2 Participants’ experience of a black interviewer**

As a woman, I held the clear status of an outsider while interviewing men. However, during conversations about cultural identity, it was not clear to me where I was being placed. Experiences of discrimination were discussed by several young men and these experiences were perceived as the result of assumed racialised black identity rather than a specific ethnic identity. In these instances participants recounted their stories to me as an insider.

Many of the young men reported an indifference to the ethnicity of the interviewer. However, there were concerns raised about not wanting to offend interviewers by saying something about people of their same background.

**IV**  
And how about the ethnicity of the interviewer? Does that make any difference?

*No it's not a problem at all. Again, I guess, if it was someone that I would make an assumption that they might have a problem with me saying something I might hold back on it. [...] Like I’ve spoken about other ethnicities being a certain way or doing certain things and I guess if I was speaking to someone who was of that ethnicity they might, you know, not like what I’ve said. But I’m not here to upset no-one.... (Gabriel, age 24)*

Although somewhat stereotypical comments about different ethnic groups were made, these were not generally critical, the most critical comments were about black men generally, as well as African and Caribbean culture in the UK. These criticisms were made by individuals of the same ethnic background. Related to this, participants
reported that they would have been reluctant to say negative things about black people to a non-black researcher.

This discomfort was described with both specific examples, such as providing information about family breakdowns and absent fathers, as well as in more general terms of feeling more comfortable discussing black people with a black person. None of the young men raised concerns about discussing their experiences of discrimination with someone of a different ethnic background.

Perceptions of class were discussed during the interview but I did not ask about the influence of the interviewer’s socioeconomic background or give any information about mine. Nevertheless, one young man mentioned the influence of the researcher’s class as a possible hindrance to the flow of the interview. In raising this attribute as possibly influential on the interview, he assumed I shared his background. This was in line with associations made during the interviews between white and posh areas compared to their own black and poor areas.

**IV Would it have mattered if the interviewer was of another ethnicity do you reckon?**

**IE** It might have if it was... it depends, I don’t want to say the ethnicity but... class, if they were like in a higher posh class it would be different because they wouldn’t understand at all what I was thinking, and if they just came from where they were from and didn’t understand about me they wouldn’t understand what I was talking about so the interview wouldn’t have flowed. They’d have asked more questions about... in like more because they wouldn’t have understood what I was talking about. (Michael, age 16)

I was surprised to find that he assumed I understood his life as I had found the circumstances of many of the young men difficult. Due to my accent, I thought it would be harder for the young men to make assumptions about my economic background and given that several young men spoke of women on their estates who went to university or partners who had been or were on their way, my involvement with a university was likely not a signifier of much difference to other women they knew.
3.10 Conclusion
The methods described in this chapter were valuable in exploring the mechanisms and social forces that lead young black Caribbean men to be at disproportionate risk of acquiring STIs. The preliminary secondary data analysis, the consultation process and the literature review guided the development of the theoretical base and the qualitative methods. In–depth interviews with young men and key informants working with the target group were the most appropriate way to capture the context, experiences and perceptions of young men and professionals. The qualitative methods allowed for the investigation of the simultaneously experienced outcome of identities, context and experiences within the framework of intersectionality. The next chapter will be the first of four data driven chapters about the young men’s accounts of their lives along with the perceptions of the key informants. In these I will present the young men’s social and economic environments, their identities as young, black and male in relation to sexual behaviour and then narrow into their sexual trajectories to end with sexual behaviour and attitudes towards sex and relationships.
Chapter 4 Local social and structural environments

In this first data chapter I will set the scene by describing the young men’s environments to provide the context within which the young men learned about sex, relationships and being men. This will include the wider level influences on their lives, their experiences of growing up and living in the area, the influence of peers, their perceptions of personal socioeconomic circumstances, experiences of discrimination and the strategies they used to navigate their surroundings.

I wanted to move away from a focus on individual risk behaviour and choices and from labels of sexual irresponsibility to look at restrictions imposed by more distal influences. This is also key within the framework of intersectionality in acknowledging the importance of the context created by the combination of identities and subsequent position of individuals within their societies. The focus of this chapter and the next one is to portray the environment created when deprivation, being black, male and young in London intersect. This will help to provide a better understanding of the options made available to the young men in terms of achievable expectations, peer influences and the freedoms and restriction in how to be men and interact with women, all of which influence sexual attitudes and behaviour.

The first half of this chapter focuses on how the young men experienced and perceived their neighbourhoods and estates. The young men described challenges associated with their surroundings including poor employment opportunities, deprivation and exposure to negative influences. These combinations created environments characterised by lack of achievement, frustrations and a need to assert masculinity as well as avoid vulnerability. This encouraged sexual risk taking and discouraged commitment to partners. The influence of friendship groups was powerful as were ideas about local norms and some young men were better able than others to avoid getting involved in trouble. The young men’s environments also had a strong impact on limiting the identities available to them which was further aggravated by discrimination. The chapter ends with a section on how the young men navigated their surroundings to resist some of the negative pressures and how they showed resilience to overcome adversity.
4.1 The influence of estate living

In order to set the scene in this section I will present the environments in which the young men primarily lived, who they spent time with and the how these circumstances shaped their social world. All but two young men grew up living in social housing. Experiences of social housing involved mainly living on estates but also in flats or houses on a road. All the young men lived in North West London and had spent most of their lives there. When I asked them to describe how they found the areas they grew up in, some positive descriptions were offered such as the area or estate being friendly or quiet and the pleasure of having young people around including friends close by and being able to spend time with friends outside. However, positive aspects were often outweighed by negative ones. Various challenges were cited: lack of opportunities, violence, fighting, drug dealing and muggings. All respondents had witnessed one or more of these local problems while some discussed involvement in drug dealing, robbing people or experiences of jail and juvenile detention.

Like most things in the lives of the young men, the negative and positive aspects seemed to be accepted to coexist closely. The negative aspects included limited leisure and employment opportunities, crime and violence, influential friendship groups that exerted particularly powerful peer pressure especially on estates, and a concentration of deprivation and frustration. While young men were generally aware of the detrimental consequences of these negative circumstances, they were not always conscious about the extent to which they influenced their social interactions, the choices available to them and had an impact on their relationships.

4.1.1 Limited leisure and occupational opportunities: boredom, ambition and motivation

The adverse impact of young people having little to do in the area was discussed as a problem by young men and key informants. It was seen to contribute to the attraction to drinking, smoking and troublemaking to alleviate boredom. The desire for money and the importance it was given, combined with this boredom facilitated young men being enticed into trouble.

It’s just for the youth round there [my estate]. I try to talk to them at times, but it doesn’t help. They need motivation as well. They need stuff to make them be motivated. As I said like, there’s nothing to do, do you know what I mean? The
reason why people may be outside every day smoking, drinking, causing trouble, because what [else] is there to do? (Jordan, age 23)

Discussions about idle time by key informants and young men included recognition of the unstructured and sometimes chaotic nature of teenage lives. This framed the problem of boredom as part of the nature of unstructured teenage lives but there were also concerns raised about how this was exacerbated by a prevalent absence of a sense of purpose or motivation. Key informants also suggested boredom and an abundance of spare time increased opportunities for sex.

If young people are busy and they've got things to do, they're less likely to, I'm not saying it's not going to happen, but the ones that kind of have scholarships here for football and stuff, they're focussed on that. They might be having sex, but it's, that's not their driving force. (Key informant (KI) 09)

There were further suggestions from key informants that sex as a form of entertainment for young men, became a way to fill time.

With these young people, some of them [young men and women] keep telling us they’ve got links (casual partners)... And as and when they are bored, they don’t have anything to do, they call up these links, they go to have sex. (...) I think in that spur of the moment when they don’t have anything to do and they’re bored…that occupies them.(…) I believe the real, real problem with them in their sexual health is they have too much time on their hands and they don’t know what to do with it. (KI11)

Although the young men did not quite speak about sex as a form of entertainment in the way key informants suggested, there were discussions about greater opportunities to have multiple partners when they had more free time, for example when out of employment or during the school holidays.

Leisure activities provided alternative ways for young men to occupy their time, to find something they were talented at and gain confidence. Young men described the importance of physical activities in their lives. For some involvement in sports had kept
them away from alcohol and drugs, additionally providing legitimate reasons to be different from friends, for others it had provided an outlet and a way to handle anger and frustrations.

4.1.2 Employment and future plans
The lack of local opportunities and the ease of illegal means of making money were concerns for young men, particularly those who were looking for employment. Three young men were in full time school or college, two spoke of their current jobs in terms of career paths and five young men were in full or part time jobs they wanted to change or needed training to develop further. The rest of the young men were looking for work.

The young men in school or working full time had structured daily routines while those looking for work described more varied days and different levels of motivation. Less frustration was expressed by young men who had clearer ideas about what they wanted and how they were going to achieve their goals.

All the young men had ideas about their future plans, but they ranged from vague plans to become rich to detailed paths towards specific professions. In spite of their surroundings they were hopeful about their chances of future economic success by legitimate means. Amidst the optimism though, there were vague or unrealistic goals which included no clear plans and no current attempts to work towards them. For example, Nathan who described no training or education since his school exclusion at 15 and said he hoped to get rich as a successful business man.

The realistic plans involved clear trajectories, determination and recognition of the effort and time required. They included developing entrepreneurial strategies and pursuing relevant training for better employment opportunities or pursuing formal education with specific professions in mind. Emmanuel described the people around him as “just over broke” but he was optimistic about his future and felt he had made the most of his circumstances.

Ambitions also extended into relationships and sexual behaviour in terms of influencing the type of partners some young men sought. Those who described themselves as ambitious expressed a preference for ambitious young women. Emmanuel felt that
having a job and aspirations pushed him to seek and find young women who had direction. Ambitious young women were described as having direction, expecting more from partners and taking greater precautions to avoid pregnancy.

Family and financial stability were important elements of young men’s plans for their futures. However, different timelines were proposed about their intentions to settle down and have children. Specific ideas about stability included supporting mothers, raising children out of the estate, having a steady job, saving for a mortgage or a pension and being happy.

4.1.3 The impact of crime and violence
Crime and violence were problematic aspects of many of the young men’s environments. While some had managed to avoid becoming involved in either, others said that trouble would come to them and that it was difficult to avoid. This led them to describe their estates and local surroundings as: “bad, ghetto, among the top ten worst estates in London, crazy, loud, rough and notorious with a bit of crime”.

Darren reported the most violent recent experiences among the respondents as well as concern that crime was getting worse. This was not unexpected as he was the only young man who also reported current involvement in “petty little crime.” He also lived on one of the estates with inter area conflicts.

The potential for violence ended up permeating many aspects of young men’s lives. For example, despite saying the local violence had little effect on him, Darren went on to describe the difficulty in getting away from the inter area disputes and spoke of restrictions about where he could go safely as well as the need for constant vigilance in his surroundings when he was just out to enjoy himself or at school. This spoke to the difficulty of staying away from trouble for some young men. Safety concerns were described as also influencing the movements of young men who were not involved in local disputes or criminal activity. Those who were able to stay away from local trouble attributed their success in part, to having alternative interests while growing up. These included concentrating on school, being happy staying at home watching TV or playing video games.

Young men also discussed safety concerns having influenced their parents in the past.
Emmanuel spoke about the efforts his mother made to keep him and his brother busy in order to reduce time spent idle outside, while Jason recounted not really feeling safe in his neighbourhood when he was 11/12 years old and resenting having to go home when it got dark. He remembered his irritation at his curfew because all his friends stayed out playing football.

I did not ask specifically about gangs and with the exception of Jason’s brief experience while abroad with his mother in the US, none of the young men mentioned current or past involvement specifically in gangs. The absence of any direct references to participation in gangs was despite references to current and past involvement with trouble related to territories, group movement restrictions, involvement in robberies with friends and group morals about unacceptable targets for robberies.

_Obviously I do know petty little crime, but... (...) It’s like do you know when people rob you and there’s some people they just like rob an old lady. No, we don’t do any of that stuff._ (Darren, age 19)

Young men spoke mainly of themselves as part of friendship groups while making references to gangs as external elements, but there were references to hierarchies of criminal activity severity as well as acceptable and unacceptable targets, as illustrated by Darren above. The local influence of gangs was acknowledged by young men when they spoke about their presence in school, on estates and as something some of their friends were involved in. They condemned gangs as a local problem in terms of violence and criminal activities rather than their presence per se.

The visibility of gangs in their surroundings, was seen as generating both an attraction to the lifestyle, considered difficult to resist, and a deterrent to it. The attraction included the ease with which young people could get caught up with the bad things happening around them. The common occurrence of crime and violence and the involvement of friends were identified as a challenge, particularly by those who had experience of this and had managed to get away or to grow out of what they perceived as “a common mindset”. Criminal activities such as drug dealing also provided a quick way to make money and obtain clothes and a lifestyle that was otherwise not available to them.
[The negative influence of growing up in the area was] probably like hood mentality, like thinking in certain ways or thinking that you have to sell drugs to make money... But I grew up out of that... but like before I’d be thinking, yes, you need to sell drugs or rob or steal or something to make some money. But it’s not really like that. (Dean, age 21)

The young men’s tendency not to focus on gangs contrasted with some key informants’ concerns about gangs, surges in recruitment and the associated violence. Key informants were also conscious of young men’s desire for an extended family on the streets, for a support network and of possible safety concerns drawing them to gangs.

Some young people will, you know, say that they're associated with a gang because they feel safe that way. Then, you know, they can feel as though they've got a network of people to back them up, kind of thing. (KI03)

While gangs were discussed by young men as part of local life, personal involvement in drug dealing and other illegal activities with friends were not framed in terms of being part of a gang or safety concerns. Among key respondents who focused less on the gang problems, alarmist media reports were blamed for exaggerating the gang problem. This included concern about the unhelpful tendency of media reports to always jump to conclusions of gang involvement when young black men were involved in violence. This was felt to perpetuate the idea of them being in gangs which made young people feel they needed to form groups and give themselves names further encouraging divisions.

4.1.4 Friendships
A greater tendency to spend time outside with other young people when living on an estate was discussed by young men and key informants.

If you’re not part of that estate or you’re not part of that group you are an outcast from that group, and youngsters who grow up and who grow up from year one to year 16 with the same set of friends on the same estate it’s very hard for them not to be included in what that group’s going to do. (KI02)
The formation of close groups of friends who lived in close proximity and grew up together was also seen to create a strong influence to participate in the activities the group got involved in, and the positive or negative nature of these activities depended on the individuals involved.

Jordan lived on one of the estates with high levels of crime including inter-area disputes and was particularly unhappy with his experiences. He felt it indicative of life in North West London as a whole and was convinced that had he lived in a different area he would have done better in school and been exposed to fewer negative influences in terms of friends and their drinking, smoking weed, behaving like they were single while in relationships and having little ambition. Some young men who did not grow up living on an estate believed that this had helped them avoid the temptations associated with estates. Others believed living off an estate made little difference either because they still socialised with friends on nearby estates, they doubted that living off the estate was necessarily protective, or pointed out that growing up on an estate did not lead inevitably to involvement in trouble.

The circumstance of having many young people living in close quarters was described by young men as having both positive and negative outcomes. The positive elements were related to growing up with many other young people of similar age, the proximity of friends and familiarity with other people living on the estate which provided a sense of closeness and an opportunity to make many friends. The negative aspects related to the importance for young people to fit in and belong and the resulting increased influence of peer pressure. For example, Jay who had spent two years in jail for a robbery explained how easy it was to lose sight of what was right and wrong while following friends and having a good time.

"If you’re enjoying yourself, you’re enjoying yourself, whether it’s wrong or right, but yes, I think you do get caught up in it. I think if you see your friends doing it, then you’re going to get involved, that kind of thing. It’s just whether you want to... it’s whether, after you’ve done it, whether you want to carry on doing it, or you realise it’s wrong. (Jay, age 22)"
Friendship groups were mainly associated with locations or activities, and referred to accordingly, for example school, college, estate, football and music friends. Some extended across school and home life while others remained separate. Football as well as writing and listening to music provided common ground for friendships and were the two main leisure activities that many young men were involved in growing up. In addition to friendship groups, young men also described more intimate individual friends whom they had known since childhood or with whom they had shared difficult past experiences.

The ethnic composition of groups varied. Some young men spoke of mainly black friends while others mentioned groups that included a range of ethnic backgrounds. Common interests were cited as the bonding factor of groups and the reason for shifts in friendship group compositions.

*A lot of black people around the area had a lot of white friends and stuff when I was younger. (...) I don’t know [what changes]. (...) you just find different friends that you have their interests [similar interests with] and stuff. (Marcus, age 21)*

The key informants who worked in schools made similar observations about shifts towards mainly black friendship groups in secondary school despite more mixed ones in primary school. Those who made these observations suggested that the drastic increase in the number of pupils in secondary school led individuals to gravitate towards others with whom they felt they had things in common with.

Gabriel’s experience was of people tending to stick to groups of their own ethnic background in school while on the estate he suggested growing up together and interest in football created friendships that had nothing to do with ethnicity. In contrast Michael had black British friends on the housing association estate and a more mixed group at school which he described as “a multicultural place”. Friendship groups seemed to be based on the local area composition and young men’s ability to relate to different aspects of people’s backgrounds.

Young men reported less mixing with girls within friendship groups as they got older.
While there were exceptions who spoke of having mainly female friends, generally group socialising involved other young men and then interactions with young women were one to one.

4.1.4.1 Intergenerational social mixing

A particular aspect of the friendship groups the young men encountered involved growing up together on estates socialising within groups which had age differences of up to 10 years. This exposed younger boys to the behaviour and language of older ones and could also further exacerbate the pressure to initiate and conform to older behaviours and activities at a very young age, through desires to emulate the older boys. The big age gaps were spoken about as part of the process of growing up, but even when it was not identified as particularly problematic, the exposure was associated with getting into mischief.

As from, let’s say 11 to 16, things started to change, I guess. A lot of people started growing up and then you was, you wanted to be like an older person who you saw living that adult kind of life. You know, you’re hearing that okay, well, they’re smoking or they’re drinking or they’ve had sexual intercourse, and these sort of things intrigued you from when you was 11…. (Gabriel, age 24)

Some young men identified the age gap as a concern when thinking back to when they were younger and described experiences of being exposed to and learning from bad examples. The intergenerational social mixing led to the greater influence of older boys and was seen as specific to the young men’s environment. Young men living on council estates spoke of greater opportunities to interact with older boys who gave little value to relationships and had multiple casual partners. The examples they set were then followed and seen as the norm by the younger boys. This was the case even among respondents who expressed having some reservations and guilt about disregarding young women’s feelings.

On the estate wise there were mostly boys and they were older. Like I had a couple my age and most of them were older than us so we used to look up to the older people…They could be two years to six years older to ten years older.

IV Okay, and what kinds of things did you learn from them?
Young men did not discuss current personal alcohol and drug use as having much impact on their lives despite some descriptions of daily cannabis smoking to relax. The ease of access to alcohol and particularly cannabis at a very young age however, was considered a negative aspect of the local area. Several young men spoke of being regular smokers in the past and being introduced to alcohol and drugs through local parties and by older boys they knew, friends or older siblings of friends starting from when they were 12 and 13 years old. Although many young men recognised that they had started drinking and smoking cannabis in an attempt to follow friends, the influence of peer pressure was discussed only as a past experience.

4.1.4.2 Peer pressure
Concerns about the negative influence of peers on young men were raised by key informants as well as young men.

*If you were talking about the number one issue for young people it’s peer pressure. It’s how to fit in with, a certain type of group which they believe they need to fit into (...)... So again it’s really about young people finding their own identity, as part of what young people go through is creating and identifying with something that they believe in and that they belong to. (KI02)*

Young men described how as children everyone would be together on the estate, outside, playing football and riding their bikes, then gradually interests moved to what the older boys and young men were doing. This led to some individuals getting involved in drugs and other trouble which could then create animosity within friendship groups.

*You know, people change as they grow up, yes, everybody in that neighbourhood was all together, we was all friends, and then later down in life when they hit high school and everything, everybody change, they think that they're bigger than others, they think that they're better than others. (...) Because they hang around with older people and then they get into drugs, they get into crimes and all that... (Jason, age 18)*
Young men who chose not to get involved in illegal activities described those who did, as making a choice and wanting to feel older or important for it. This perception contradicted the explanations provided by those who got involved and defended their involvement as a norm and a path taken for lack of alternatives or difficulty avoiding it.

Key informants also pointed to the additional pressures faced by young people on estates to follow the local crowds compared to the greater freedom enjoyed by young people living on a road or off estates. It was considered easier for those in the latter group to choose not to interact with other young people living on the same road.

*It’s a street mentality. It’s a street identity...growing up on the estates and growing up in on the road is so totally two different things because [on the estate] you are affiliated with the people you grow up around. (...) if you grow up in a house it’s not necessarily that you have to be friends with your next door neighbour, but if you grow up on an estate it’s kind of paramount that you know the rest of the youngsters on the estate.* (KI02)

Young men concurred with suggestions that those who did not have opportunities to become familiar with the other young people on the estate could become a little outcast. They were aware that friends could be a help or a hindrance, and also acknowledged the two way influences within friendship groups. Friends with very different lifestyles were described either to coexist within one group or as one of separate groups of friends respondents moved between. References were made to the “bad” and “lay around” friends or the “good”, “calm and quiet” or “motivated” group of friends with whom they enjoyed different activities. The different lifestyles included different attitudes to young women and relationships.

### 4.2 Experiences and implications of deprivation

Following on from the more proximal and direct influences of friends and other young people in the young men’s lives, this section presents the young men’s perceptions of their socioeconomic circumstances and the resulting limitations they faced in terms of privileges, relationship options and opportunities for life improvement.
In describing their circumstances and answering questions about social class, young men seemed to initially place themselves in the middle, comparing themselves to the people immediately around them. The language they used revolved around being rich, average and poor.

*I think it’s average now. I’m not on benefit. I’m not in need, so I think it’s average. I wouldn’t say I’m poor, and I wouldn’t say I’m rich. I think I’m normal... obviously I meet people that’s...people in my school that say, “Oh, my mum lives in a council flat, my mum don’t work, she drinks”. (Adrian, age 20)*

After initial responses about being average, young men made references to more deprived personal circumstances. This was not necessarily correlated to employment status or future prospects. Several young men described their socioeconomic situation as mainly working to survive and labelled themselves as “working class”, “lower class” or “people like us in the estates and in the ghetto.”

As part of the reality of deprivation, the possibility of being evicted was a concern. There was also a sense of not being afforded privileges, which were associated to “middle class” and “higher class” people. Young men spoke of working to survive instead of working for comfortable living. This involved paying bills, but did not for example enable independent living.

*About 70% of us [me and my friends] are working class. (…) We all work, and we work to survive, you know, to pay bills. (…) most of my friends...most of us live with our mums, you know, I suppose, still give them money to survive with, so you work for everything. (Marcus, age 21)*

Some young men were content with their average position in relation to their surroundings, while others felt it pushed them to work harder for what they did not have. The aspirations for a better future included having a secure job and owning a house which were associated with being middle class. Young men spoke about the comfort of savings, owning property, wealth being passed on by parents, avoiding the worry of eviction and having easier access to the top schools and universities. However, these were considered the benefits of privileges that were not afforded to them.
A more immediate concern about economic limitations young men spoke of related to being unable to afford the personal image they wanted. This was widened to a greater problem for the deprived people on estates compared to rich people. It was also seen to influence how young men behaved, felt about themselves and how they were judged by others. The attraction of drug dealing was linked by some young men to their peers’ inability to present themselves as they wanted and to the provision of fast money in addition to a way to fit in with friends who were doing the same. Adrian, for example, said his mother had always managed to provide for him; but referred to friends who were unable to afford the things they wanted.

*It's just money...it's just basically, it's money what they want to go buy new trainers, to go buy a new top, they want Polo, Ralph Lauren tops. (...) If you can provide the child with that, then basically there won't be a need to go and do other stuff, unless they're greedy, or they just want to fit in to do what their friends are doing. (...) But people that I know do it because their mum’s on benefit, their mum can’t really afford to buy them nothing...*(Adrian, age 20)

Young men attributed some of the parenting difficulties faced by black parents to their deprived environments, suggesting that young men were raised not to be victims which created a need to react to perceived threats. Their environment was seen to create an imperative for black mothers to put energy into keeping their sons out of trouble. This was considered an additional burden of deprived areas. Young black men were associated with deprivation and young white men with affluence.

*The way black people and white people are raised is like, two different things. (...) Like, round here, yeah, my mum and that yeah, she’ll pay equal attention in me getting my education and me not getting in trouble outside on road, while a white mum will put more time into her son’s education... there’s more problems that a black mum would have to look into. That’s why peoples are raised differently. In this environment, you have to be a certain way, innit? If you’re moist, the man will take your lunch money...* (Malik, age 16)
Being “moist” referred to weakness and being soft. Being seen as weak was considered to make young men vulnerable. These accounts from young men provided alternative explanations for the aggressive behaviour in school attributed to problematic family life by some key informants.

Opinions among young men about how socioeconomic circumstances influenced their relationships or opportunities with young women were mixed. Their outlooks ranged between those who felt their financial situation had no influence on their ability and decisions to approach young women, and those who felt that having money and prospects was crucial.

If I have money I don’t have to chase girls – they’ll come to me, they’ll chase me. (…) Money means power and girls are attracted to power. (…) I have to look at a certain girl and think, mmmm she’s out of my price range, ‘cause I don’t have enough…I can’t afford her. … Certain girls can be very materialistic because to generalise would be unfair. (Alex, age 20)

Having money was seen to provide greater opportunities for young men to groom themselves better and to attract young women by offering the potential of sharing in the wealth and providing future prospects. At the most cynical end of the spectrum, young men seemed unable to see why a young woman would be interested in a partner if he had no money.

The more money you have, the fresher you look, the more girls you get. (…) Well from a girl’s point of view, girls always want a share (…) Everyone wants to have money. (…) If you have no money, what’s going to… why would a girl want you? Like she’s going to think what are you doing? Are you getting anywhere? She wouldn’t pay interest. (Andrew, age 17)

Transactional sex was also described in response to questions about how financial circumstances influenced relationships. It was discussed as a calculated strategy that men and women might employ to improve their lives. After speaking more generally, Jordan clarified with a personal experience.
Well, I've had sex and I've not wanted to. I've had sex with someone because I've wanted something and if you don’t give this person sexual pleasure, then do you know what I mean? (...) Probably I was sleeping around, I needed somewhere to stay, I was fighting with my girlfriend or whatnot… (Jordan, age 23)

Fears about failing to live up to the expectations of young women were not limited to young men who were unemployed but included those who did not consider themselves to be in financial hardship. Daniel for example, described himself as middle class and as managing financially but feared being unable to live up to the expectations of certain young women. He described them as “high class” and “high maintenance”.

Like daddy’s little girl, [will want] like more guy with a lot of money, nice car, nice house, great job, stuff like that. (Daniel, age23)

Some of the older respondents presented less cynical views. They gave more tempered importance to money but employment was seen to provide greater freedom in how they presented themselves and to widen the options of leisure activities with a partner which increased the type of young women they felt able to approach. Lawrence was adamant that he needed to have a steady job and money in order to have a girlfriend so he could treat her the way he wanted. This meant that he maintained casual partners while he was between jobs.

There were also young men who did not feel their financial circumstances were an obstacle to attracting young women. Marcus explained how he had revised his previous beliefs that having more money lead to better relationships and better partners. This change was based on his experiences and those of his friends who were not restricted by their financial circumstances and jobs.

‘Cause I'm a bit older, I've learned from my friends, learned for myself, it doesn’t matter about your financial situation, to get with a certain type of girl, no matter who she is, most of the time. (...) But no matter what she does, you know, anything, doctor, nurse, any type of career that could be better than yours, it doesn’t matter. It just depends if she likes you, you know, and if you show something special about you that like, you know, she likes, then that's when
you get them... to me and my friends that’s what we see it as, and that's because we have a lot of girls that are doctors, you know, accountants, and ... my friend is a postman, my other friend is security, it just doesn’t really matter. (Marcus, 21)

4.3 Local identities
Having discussed the impact on the young men’s interactions with women and their relationships that were influenced by their positions in society and living in deprived estates, it is important to also consider wider influences that contribute to the local social environment. In this section I present how experiences of identity are shaped by the young men’s circumstances of living in deprived estates and areas. These identities include loyalty and affiliation with areas and associated expectations even when they are acknowledged as detrimental, limited successful local black male identities to emulate, limited ways to express masculinity, negative school identities and a proximity of failure within their close social spheres.

4.3.1 Living by local norms and expectations
Young men expressed feelings of loyalty to their areas and estates in spite of the shortcomings they identified. The boundaries drawn around what they considered their area could vary in size from wider North West London to specific neighbourhoods or estates and could also be revised depending on who they were interacting with.

For some young men, the place they grew up in was part of their identity. It provided a sense of belonging and it guided behaviour as well. References were made to estates and areas around them. Darren who had parents he felt close to, still mentioned how although his neighbourhood had problems it also raised him to be who he is.

Yes of course [Stonebridge is an important part of my identity], because like that’s where I’m from; that’s what made me go on and I’ve been through certain things, like, it’s mad…(...) Obviously it’s just an area, but that’s brought me up and I know the people from around here. (Darren, age19)

This sense of belonging was also tied to a feeling of comfort that came with familiarity. This was valued even by respondents who had become aware, as they got older, of the restrictions imposed by their areas and of the abundance of negative influences.
Because that was a place that I was growing up in, I only knew about Harlesden. I was like, yeah! This is the place. Obviously, as you grow up, you think of life and start thinking outside the box. Obviously, if you’re trapped in the system, that’s all you know about. You know that you want to move, but in the same sense, you want to stay because that’s what you know about. Your friends are there. (Tion, age 21)

References to North West London as an entity with particular rules and ways of thinking were made by young men irrespective of age. These rules extended to relationships and views about young women. Many references were made about learning the local norms and living by them, particularly during teenage years while older young men (over 20 years old) spoke of having grown out of it. Money was valued, committed relationships were not and relationships with young women were seen as transient. This mentality on their estates was contrasted with the possibility of valuing relationships had they grown up in a different environment, for example in a house on a road instead of an estate. There were also suggestions that the absence of fathers or alternate influences increased the impact of this mentality on some young men.

It affected me a lot [growing up on the estate], because it’s bad because like, I wouldn’t stay in a relationship for too long because of certain... like my mentality to think like how everyone thinks in the estate, like, okay, yes, girls are just girls and whatever. But whereas, if I was living on the roads I wouldn’t think like that, most probably I’ll think more, yes, I need a wife, settle down and stuff like that. (Dean, age 21)

4.3.2 Limited ways to be a man
Even though young men were aware of the influence of the area and the restrictions it imposed on them, some of the negative expectations of the local young black men were also acknowledged to coincide with their own desires for sex at a young age or for multiple partners. These local influences were not always considered restrictions but were discussed as features of the area and linked with it being deprived and predominantly black. This was also true of pressures related to the importance given to
ego, reputation, and the prescriptive ways to be a man. Several young men spoke about the ease of becoming trapped in a vicious cycle or of becoming a statistic. This related to “a lot of stereotypes against black boys”. These included assumptions about the kind of girl they are supposed to go for, based mostly on physical assets, about expectations they would drop out of school, get a girl pregnant or end up in prison. Striving to be an individual and wanting more than these low expectations was seen as a way of fighting the stereotype and “breaking these barriers”.

It was young men who had greater experiences outside North West London who were particularly aware and able to elaborate on the restrictions they faced due to their ethnicity and where they lived. Andrew and Emmanuel had football and sport coaching related interactions with young men in wealthier “white areas” and were conscious that those young men were very different to them, their friends and their own areas. These other young men were seen to experience less pressure to behave a certain way and both Andrew and Emmanuel explained how they made efforts to behave in an adult manner to counter the negative misconceptions people in these areas may have about young black men.

Adapting to these different areas included making changes such as speaking differently and being conscious of different sexual behavioural norms.

I don’t think they (in Oxford) have the same pressure as we do in London. In the major city, you know... round in the North West there’s a lot more you’ve got to do this, and why you’ve got to do it.

IV  Do what, like…?

IE  Have sex with girls and what relationships to keep. In those areas it’s more of a whiter area. Everyone more gets along. It’s like you have your girl, everyone knows and then it’s just like that.

IV  Right. And do you feel you fit in all right in that, do you?

Yes, I fit in all right there... but I’m not the same character as I am around here, where I feel more comfortable. And that’s more white dominated so I’ll always be thinking how do they see me? So I try to be most adult as possible, so they don’t see me as immature or little or a pushover or anything like that. (Andrew, age 17)
Within their discussions about the two worlds they moved between, Emmanuel and Andrew discussed the restrictions resulting from North West norms. They suggested that those who do not get out of the area may not even be aware of how confined they are. The constraints they identified as impositions on how to be young black men were highlighted through descriptions of the less limiting ways to be men they had been exposed to.

To me, the reason why I say that [North West is a box], with having an experience of working in Hertfordshire, it’s like a lot of boys tend to just think inside of the box ... Even when we had a boat party for the people at work, we all went as a netball team with skirts on, but if I was to tell people in North West, which I did, they didn't understand it. They're like, “You lot are gay”, you're this and that. But it's about breaking out of that box, and just thinking about everything that happens in North West, that's not the world... I would say the boys that I know around my area are just uneducated, and just don’t know anything apart from what they see around them. And I just think it’s about for them to get out there, and just even if it’s to get jobs out of there working with white people, and or different types of people, then they see life is just not about North West London, and what North West London says is right or wrong.  
(Emmanuel, age 18)

In providing his example of being able to wear skirts to a party with his colleagues and the reaction of his neighbourhood friends, Emmanuel points to his environment within which masculinity is more constrained and the accepted expressions of it leave little room for alternative behaviours or sexual orientations.

While there was an awareness of the local deprivation among young men, local views tended to be ascribed to the mainly black population. Less thought was given to the behavioural restrictions created by deprivation outside of crime and direct economic effects. Again it was young men with experience outside their areas who were aware that deprivation played a part in creating and enforcing the narrow “hard man” heterosexual norms. Gabriel gave the example of how the influence of friends and family helped maintain restrictions suggesting that a young man would decide to avoid
dancing and eyebrow waxing as activities associated with homosexuality and considered unacceptable for local men for fear of disapproval from friends. The restrictions on how to behave as a man also had an impact on relationships since the need to avoid vulnerability required emotional distance giving partners little importance.

4.3.3 The proximity of failure in shaping identity
Young men’s accounts of their surroundings highlighted how they lived in the proximity of failure. In addition to people they knew in their area, they spoke of friends, brothers and cousins who had made bad choices. These choices included leaving school, getting into drug dealing, being in and out of prison, having little future prospects and multiple concurrent unplanned pregnancies with different partners.

Several young men suggested they would have benefited from more positive people around them growing up. Jason was not unique in his inability to think of anyone in his family whom he could look up to or aspire to be like. Similarly to others in his position, he said he was more comfortable relying on himself rather than looking to mentors or role models. This was because he feared they may not share his background and therefore may not understand his realities and experiences.

_I shouldn't think about being him [a potential role model] because at the end of the day he came, he probably came from a nice neighbourhood, a nice place or whatever, or two parents and all that. But me I had one parent, came from a different neighbourhood where I have to look behind my back in my own neighbourhood and everything, just in case if I get stabbed, shot..._(Jason, age 18)

A similar distinction was made by other young men about the particular importance of the success of people from their own backgrounds. This was because they would then share similar experiences in contrast to the people often touted as role models who would not understand their decisions and actions.

Some respondents were influenced by the proximity of failure more than others and for different lengths of time. The level of impact was based less on closeness to the
influential individuals and more on the availability of alternative influences and options perceived as viable and realistic. Young men who made alternative choices were keen to emphasise their decisions to be different from others around them who were not fulfilling their potential. Finding support among family or friends was acknowledged but they attributed their successes more to their self-perceptions as ambitious and hardworking, and to having found other realistic options. Emmanuel differentiated himself from others around him including his twin brother in this way.

*Where I live, a lot of people are not like me, even my own family members like my twin, I've got a twin brother who's totally opposite. (...) whereas I've got my head down and I'm doing what I'm doing, so I can just be successful, he's a bit different. He's just got this lackadaisical attitude to things, he's not too bothered like just not serious, if you can call it that.* (Emmanuel, age 18)

This contrasted with the stronger focus on home life or culture related attributes discussed by some key informants as a central issue that was detrimental to young black men. They spoke about how some of their negative behaviours must have been picked up at home and about the detrimental effects of single parent households in which usually the mum may feel stuck in a dead end job and disempowered, may fail to show much motivation or have difficulty supervising the school and social lives of her children.

Some structural barriers were discussed by key informants but a focus on individual level problems remained. This implied that solutions also lay at individual levels. It was not surprising that many would focus on individual level elements considering their individual levels of contact and depth of involvement. Furthermore, key informants were also likely to work with particularly challenging young men and within their roles, to have limited opportunities to explore different aspects of the young men’s lives. This individual focus however put undue pressure on parents and risked perpetuating ideas about dysfunctional cultures. This is not to say home life and family composition had no impact, but nuances and external factors which facilitate these circumstances were lost to negative cultural and parenting attributes while structural problems were ignored.

For example, the secondary school teacher speculated that the aggression he identified
among a group of black pupils using their physical presence to intimidate other pupils and teachers was the influence of home life and negative media portrayals of young black men.

*I don’t believe children behave in a way without seeing it, so all I can presume is, sort of, like, home life perpetrates, sort of, like, violent behaviour, whatever, intimidating behaviour. Because they’re not taught that at school and they’re not taught to be intimidating; they’ve learnt it from somewhere. So these boys have learnt how to use their physique in a certain way to intimidate people. So I think that... yes, I don’t know. Certainly the school does an awful lot to try and counter it... (…) I don’t think it’s just parents as well. I think the media is hugely irresponsible in how it portrays a lot of things.* (KI01)

The experiences of the young men’s home life and single parenthood however, were more nuanced than some key informants’ generalisations. Key informants voiced concerns about wanting to avoid stereotyping young black men and to avoid laying blame but it was difficult to ignore the ease with which the young men’s problems were assumed to be a product of problematic home life, culture, single parenthood, lack of proper parenting or proper supervision and the absence of fathers. These views aligned with public stereotypes and created barriers for young men who were seeking to change their circumstances, for example by dismissing them as likely to follow the failures of their fathers.

*A lot of the boys that I worked with came from single parent homes and there was an assumption that they would fail because their fathers were in prison or their fathers had left them or had been really bad men and therefore they’d become the same.*

**IV Who was assuming that?**

*IE Well, not just the teachers in the schools but their peers, their communities.* (KI06)

Among young men who disregarded boundaries set by adults, little concern about disappointing parents and the absence of fathers were proposed as contributing to the
problem. Young men gave accounts of parents and family members trying to advise them, to set boundaries and to be attentive, but higher levels of engagement and parenting styles did not simply correlate to better outcomes.

Jason raised the possibility of having a feared male in the house making a difference in young black men’s lives. He was uncertain whether he would have listened to anyone when he was younger; however, after admitting to ignoring his aunts who tried to help him, he suggested having a man to put him in place may have made a difference.

In contrast other young men and key informants who spoke of mothers in black families being the main parent in charge of discipline, contested the association of discipline and boundary problems with absent fathers by suggesting that the detrimental impact of absent fathers on discipline was overstated. Furthermore, there were young men who identified respect for their mothers as key to helping them stay out of trouble. Mothers were also described as disciplinarians and seen to take great lengths to keep their sons out of trouble.

*I don’t know how much is, and I’m taking from my experience, but in most black families, as far as I’m aware, dads have never done that much disciplining. If you was going to get beat at home, it’s your mom that’s going to beat you, so, to me, I'm not saying it was maybe wrong or right, but most black families I know, dads never, ever got involved in discipline. (KI07)*

Instead of simply implicating family life, culture and the media, young men blamed their fighting and aggression on their feelings of anger and frustration as well as school atmospheres that required aggression in order to avoid being seen as weak.

From an institutional point of view, the teacher interpreted the aggression as a problem of black pupils reacting badly to authority and attributed this to excessively strict home discipline or violence at home but did not consider the possibility of reactions to frustrations in different aspects of their lives or possible institutional problems. Secondary school exclusion figures among black pupils were referenced as evidence for his interpretation focusing on problems with authority without questioning the figures.
Your stereotypical black child will, may want to achieve but won’t necessarily want to be told what to do or will have some sort of issue with authority and will react to instructions or react quite negatively. (...) I’m sure there are loads of statistics that show it, but the highest number of exclusions would be the black children, certainly. (KI01)

As a child, Daniel was aware he was angry but considered it part of his “rude and outspoken” personality. It was only as a young man that he was able to look back and attribute his feelings to the conflict in his family life combined with the conflict in his surroundings including the deprivation and frustration of the people he saw on his estate.

‘Cause I think if my parents were together properly and whatever, I don’t think there would be… and I didn’t see any conflict, I don’t think, even if outside was more conflict, in my house it would be (...) probably see my parents getting on so I wouldn’t be as angry, if you know what I mean?(...) And obviously because I was like maybe six or seven, I don’t think – I knew what was going on but I didn’t have a mind to control it (...) So, I used to get like suspended from school a lot. I used to start fights in the classroom. But obviously at that time I don’t know why I’m doing that, that’s just my personality (...) He [my dad] always used to well blame me for … If he says something about my mum, he’ll always bring me into it and say, you and your mum did this, when really and truly it’s just my mum that did it. (...) I was very angry when I was young. (Daniel, age 23)

4.3.4 School identities
Problematic identities extended into school and experiences of school were varied. While some young men were proud of being good students, others described being troublemakers or angry and getting into fights. Despite the different experiences and levels of attainment, all the young men initially said they fit in at school and that it was all right. Among those reporting negative experiences of school, there were accounts of suspensions and expulsions from several schools, low expectations from teachers, and fighting. Fighting was explained to be the result of being angry or needing to maintain a reputation of being strong in school.
A range of qualifications were achieved by respondents ranging from Nathan who was permanently excluded at 15 before doing his GCSEs and had no further training over 5 years, to Andrew who at 17 was in his second year of college with four university offers. Among those who had started college to gain NVQ, BTEC or City and Guilds qualifications, respondents had passed exams, failed exams, or left their course half way through. Only one of the respondents was 16 years old and still in school with plans to attend university.

Being seen to work hard was not perceived as particularly desirable by the respondents’ peers. This led even academically successful and ambitious young men to adapt their behaviour in school in order to fit in and to avoid being seen as too bright. Andrew admitted he worked hard at home but would “joke around” at school.

*In front of friends, I wouldn’t do anything. I’d just joke around as always, but at home (...) I’ll be told to do certain things [by parents] (...) So then I’ll be doing work at home. A lot of things that people didn’t realise.*

**IV Why did you feel you had to mess around?**

*IE I didn’t feel that I had to do... fitting in, in a way. And how I am, as a person. There would always be one person, one class clown, and then I would be the other. To draw attention, so attention seeking in a way, making a name for yourself in school.* (Andrew, age 17)

Darren also described altering his behaviour so that he was not always the smart one in class. Young men were not immediately forthcoming in admitting to modifying their behaviour in school in order to fit in. Furthermore, those who did admit to it had also claimed to be able to resist peer pressure and to be different from their peers.

*“Clown” and “troublemaker” were common self-descriptions used by young men in relation to their school identities. These were explained by some as the outcome of liking attention or being angry while others had no explanation for their behaviour. There were also descriptions given by young men who perceived themselves in a different manner to the behaviour they reported. For example, Marcus who said he was not a “troublemaker” and that he did his work, went on to relate how he got into fights, was disruptive in class and was suspended many times. This links to the reparation*
officer noting how the combination of discrimination and deprivation led to anger in some young black men that impacted negatively on many aspects of their lives but they were not necessarily able to identify the problem.

_You know, they might know that they're angry at this [experiences of discrimination and negative environments], but they won't see that it'll impact other aspects of their lives, and make them react in certain other ways to certain other things..._ (KI03)

### 4.4 Experiences of discrimination

Opinions about and experiences of the difficulties young black men face in day-to-day life were varied. Young men made references to their parents having a harder time and fewer opportunities than they had due to racism and the marginalised position of black people in the UK and there was general acknowledgement of the difficulties of the past. However, while some young men described continuing challenges through their experiences of discrimination in school, at work, in their interactions with the police and in public places, others said they had never experienced racism. Among the latter were also suggestions that racism was a problem of the past.

_Well, probably 20, 30 years back when there was racism, but I don’t think...I’ve never experienced racism in my life, so I don’t think [being a black man affects my life]._ (Adrian, age 20)

The local schools the young men attended were described as predominantly black or quite mixed and they expressed conflicting views and experiences about how being black influenced their interactions with teachers. Some young men described being disadvantaged by it, some felt they were not treated any differently to other pupils in school and others felt uncertain about whether it made any difference.

The group that felt disadvantaged included young men who reported doing well in school, for example Andrew who already had four university acceptances.

_Well, first of all, being in England being black, I feel like that’s a struggle. You’re already set back from what’s expected by people. I have been in_
situations where for, like, in school, for certain teachers, they wouldn’t teach me or they’ll teach me one lesson, but they’d assume that in other lessons I’m not doing good. (Andrew, age 17)

Young men described black pupils being ignored by teachers, being more likely than other students to be punished for the same actions and teachers having low expectations of them.

When I was back at school like you’d get a lot of clever black children but like some of the teachers would not really focus that much on them compared to the other like Caucasian students. (Moses, age 22)

This led to frustration and had constraining and discouraging effects but also elicited a desire in some young men to disprove the low expectations. Aaron described feelings of resignation along with motivation to make sure he got his qualifications in light of his experience of black pupils being ignored and given fewer opportunities by some of the teachers.

Those who had work experiences described how negative assumptions had been made of them based on the fact they were young black men. The stereotypes included being assumed to be “a street hoodlum” or perceived as scary for being big and black with a deep voice. In addition to specific incidents of discrimination, some young men suggested that discrimination permeated daily life generally making different aspects of their lives, such as education and employment, more difficult.

In contrast to young men who experienced restrictions resulting from the negative stereotypes associated with black men, there were those who acknowledged them but did not feel restricted by them.

You don't have to be what people describe you as. You can be whatever you want to be. That's how it is. You don't have to join a gang just because you're black. You don't have to be a poet because you're white. You know what I'm saying? You don't have to be KKK because you're white... It's whatever you want to be. That's how life is. (Jason, age 18)
The optimism about racism being a problem of the past and the freedom of overcoming the restrictions of stereotypes was further supported by young men through their observations about how people from different ethnic backgrounds were getting along better now than they had in the past and through reflections about economic disadvantages making life difficult for all people irrespective of ethnicity.

4.5 Navigating their environment: the young men’s strategies for overcoming adversity
This last section of the chapter presents the coping strategies used by the young men to navigate their surroundings and overcome challenges. These focused on increased awareness of consequences, finding the strength and support to be different and disassociating from friends perceived as negative influences.

Young men said they tried to be on good terms with everyone, kept to themselves and stayed away from areas with rivalries. This was not easily achieved by everyone though, even with good intentions. The importance for young men to know how to handle themselves was emphasised as key to avoiding troublemakers who were just trying to boost their reputation. This was a problem that some of the older young men (over 20 years old) felt subsided with age.

4.5.1 Reflecting on negative consequences, maturity and respect
A desire to stay out of trouble was reported by some young men resulting mainly from an awareness of consequences. This developed with age or was accepted and reinforced through parental advice and feelings of responsibility towards family members. They spoke of minimising or avoiding trouble. Confronting the problems of lack of opportunities, criminal activities, violence and the threat of prison were more pressing and real problems to both the young men and their families compared to the negative outcomes of sexual behaviour and relationships; however they were tied together in terms of lifetime choices and consequences.

Among young men who described parents trying to help them, not all listened to the advice. It was the impact of seeing the negative consequences of bad choices at school and among friends and family members that was given particular importance for avoiding any, or further involvement in trouble.
I went to Acton High School that really has a bad reputation of gangs and that, so I’m aware of what the consequences are of being in that crowd. So I think being aware of that and growing up around that for the majority of my life, made me aware of what I don’t want to be, and it helped…separate what I do want and what I don’t want. (Andrew, age 17)

There were young men who felt they had always given consideration to the repercussions of their actions, while others described maturing into that behaviour as they got older. Those who spoke of the positive influence of parental advice said they had listened to it and that it had helped them to become aware of consequences as well.

The deterrent of jail was cited by both young men who had been involved in illegal activities and those who had not. The former group spoke about having to make changes because of the likelihood they would have ended up in jail if they had continued with their lifestyle. As they got older and their responsibilities increased, the cost of going to jail became too high.

Just getting older…at one point you’ve got to think like you’ve got to have your head on straight. (…) I used to get in a lot of trouble like even with police (…) if I was still doing the same things I’d probably end up in jail and obviously that’s not what I want. I’ve now got two children so I can’t afford to really do those things anymore. I have to like get on the straight and narrow. (Moses, Age 22)

Dean described how having a child and going to college helped him to make alternative choices but he was aware that he and the few friends who followed him were the exception locally. Feelings of responsibility towards children and other younger family members played a role in helping young men make positive changes. The desire to avoid bringing trouble home and disappointing parents or other important adults in their lives, also contributed to the success of those who stayed away from the wrong crowds and did well in school. Adrian felt unable to justify the short lived benefits of selling drugs against the costs.
She [mother] just said, she’ll be very…she would be disappointed with me if I went to prison, and I just literally listened to that. (…)If I wanted a new pair of shoes, I’d get it, if I wanted whatever… So I never had the…the need to sell drugs. (Adrian, age 20)

Those who reported working particularly hard at school and being concerned about their results also spoke of parents who had encouraged them and helped them understand the importance of getting an education in order to improve their lives.

Education was important! It always has been important to me, I’ve always thought that in the back of my head; I didn’t need anyone to tell me that because my parents always stirred it down in my neck - education is important, education is important. (Alex, age 20)

Doing well in school was also valued by those who were aware of the negative outcomes of making alternative choices and those who were concerned about not disappointing their parents’ high expectations.

My family [helped me succeed in school], because my mum she talks to me about how my life would change if I didn’t go to school or stuff like that so when she said she wouldn’t be proud of me…if I got kicked out of school or left school early…and obviously I want my mum to be proud of me. (Michael, age 16)

Supportive parents and family members who believed in the value of education played an important role in helping motivate young men. However, this alone was not sufficient. The young men also needed to believe in the benefits and to see them as realistic achievements for themselves. Having a clear career path and believing in the benefits of studying provided important motivation. Andrew described making a conscious effort to start revising and stop partying when his plans to go to university were threatened by falling marks. He also believed hard work would help him succeed in law despite the shortage of black lawyers and barristers for him to emulate.

Marcus in contrast decided to leave college after a year in order to start working. This was in spite of the importance his father had always given to studying and going to university, and his persistent push for it. He felt his father’s focus on education
stemmed from a lack of understanding about life in the UK. He contrasted his father’s experience of living in Nigeria and using education as a way to move abroad, with his experience in the UK. Marcus felt that in the UK, education did not offer the same means of escape to something better for him. Finding employment and a career path had helped him move away from his involvement in criminal activities.

Because my dad’s always thinking, you have to go to university, (…) study, study, go university. (…) I stopped [college]. I had the next year to go, and then I just decided to just get a job, get work. (…) I did like it, but I couldn’t see myself going to uni and carrying it on, because I thought I wasn’t interested in studying that long. It never kept me motivated. I was just doing it for the sake of doing it. (…) So he [father] doesn’t know what it’s like living in England. Like, he lived in Nigeria where everyone has to work, and trying their hardest to make it out, and to move over to England or Belgium. (Marcus, age21)

Other young men who had managed to get back on track after expulsions or dropping out of college, described how their desire to avoid disappointing family members contributed to their motivation and determination to make changes.

Influential teachers did not feature in young men’s accounts of their school experiences with the exception of Emmanuel who was inspired by his drama and physical education teachers and found mentors in the leaders of a forum for pupils considered to have potential but who displayed disruptive behaviour in class. He joined the Black Male Forum at his school in year 7 (age 11/12) and it involved attending workshops on sexual health, drug awareness, being streetwise and public speaking. It helped him channel his energy into different things and provided him with mentors. The desire not to disappoint them helped him to achieve more and to stay focused.

Well definitely I looked up to them two guys, Jason and David [facilitators from Black Male Forum]. And they were the two guys that if you did wrong you… if you did something wrong, you'd be scared to have to deal with them because you know you'd get a bollocking, that they wouldn't be impressed… if I had any problems with lessons, my behaviour, they'd be informed straight away. So that
made me even want to work harder, and do better in what I was doing.
(Emmanuel, age 18)

4.5.2 Strength to be different/ Resilience
Young men who were able to be different from their friends while remaining part of the
group were keen to emphasise this achievement. It was described as strength of
character and independence. They admitted that their ability to resist peer norms had
developed over time as they matured and that on occasion they needed to justify
themselves to friends as a result of their choices. They saw themselves as being
different from the group in a variety of ways including having academic or
entrepreneurial ambitions, avoiding criminal activities and being faithful boyfriends.
There were also accounts suggesting that decisions to avoid illegal activities or to be
studious could be offset by an interest and pursuit of young women which allowed for
common ground among friends.

My friends, we all like to party, as I said, we're all different. Like I'm into my
books, a lot of my friends are into drugs, or a lot of my friends are not even
doing anything with their life which could be constructive. But we all have a
passion for music, and we have a passion for girls to be honest. So that's how
we unite with each other... (Emmanuel, age 18)

Those who succeeded in resisting peer pressure stressed the importance of being able to
stand up to friends and to know when it was necessary to leave friends. Many young
men credited supportive people in their lives with helping them make positive changes
including friends who were different or willing to join them, partners and parents.
However, there were also concerned parents and other family members whom they
admitted to having ignored despite their many attempts to help them.

Marcus attributed his mother’s failed attempts to help him, to their strained relationship
and described her method as “nagging”. In contrast, he related a slow but successful
process of change which had involved substantial encouragement and help from his
girlfriend as well as distancing himself from his friends. He credited his success in
turning his life around to her patience and support.
Andrew acknowledged the support and guidance he received from his parents, particularly his mother in giving him the strength to stand up for himself and to be independent. Her encouragement and interest in his social and school life was in stark contrast to others who spoke of mothers who had little time for them or were not particularly attentive or involved in their lives. For example, Dean discussed receiving little guidance from his mother, but instead found strength in entrepreneurial endeavours and bringing like-minded friends to help him while distancing himself from other friends. As part of the success of being different, he valued the experience of being a positive influence on friends and helping them into employment and to change their lifestyles.

4.5.3 Gaining distance and relocation
Gaining distance from friends perceived as negative influences was an important strategy in the process of making life changes. This involved rethinking time spent with certain individuals as well as relocating. Marcus admitted he had led friends into trouble as well as them getting him into trouble and described it as, “it’s just the blind leading the blind”. Having made changes in his life and moved away from robberies, he realised his new focus on working required giving up friendships with those who had not changed.

Well, only about three of my friends are [still] doing it [robberies]. But most of us have all disconnected from him, because we can't live... we can't do what he wants to do. He's gone in prison, (...) and none of us want to go down that cycle. Now I'm too old to go down that cycle. We work, and everyone’s working. A few of my friends ain't working, but they're doing something [legitimate] to make money. (Marcus, age 21)

Some young men actively sought greater positive influences and motivation from more like-minded working friends. Those who described distancing themselves from certain friends, held beliefs that becoming adults involved making an effort to work and be more serious as well as growing up out of certain behaviours such as selling drugs, “acting like kids” and “slacking”. They were also particularly aware of how influential friends could be in their lives. Hence they felt the need to create distance from some in
order to pursue the alternative options they had chosen and took pride in their decisions. It was also important to find alternative strategies to feel good, and maintain pride and respect from friends which some young men had previously achieved though involvement in crime.

Marcus suggested that feeling good had helped reduce the pressures he had experienced to prove himself in order to avoid being disrespected. Through mixed martial arts and going to the gym he found an alternative way to feel empowered.

Yes. Keeping myself busy, and obviously because I know I've done something good, I don’t feel like I need to replace that good by doing something else, because, you know, because I've done this. I'm working, and getting my money, so why do I need to rob somebody to show my friend that I'm willing to do stuff? (Marcus, age 21)

In some instances, a complete change of environment had been necessary in order to break ties with previous lifestyles. This involved both temporary relocations outside London and moving to different neighbourhoods.

Dean explained how moving away from London, his usual environment in which he smoked cannabis, had helped him make changes to his life after his son was born.

Well, it was kind of hard, but I had help because I wasn’t in London at the time my son was born. My son doesn’t live in London, so when my son was born I had to distance myself from London and got my head straight. (Dean, age 21)

Tion described relocating within North West London and despite being reunited with some old friends, being in a different area that he perceived as a more positive environment had made a difference. He suggested that the new area had produced a different “good boy vibe” that the young men had altered towards and he followed it and also became less angry.
Well, when I moved to Wembley, I found that the people that I used to play out with in Harlesden lived in Wembley as well. They were kind of on a good boy vibe, so I diverted to that route. (Tion, age 21)

4.6 Conclusion
In this chapter, I have presented the wider environment in which the young men lived in terms of their experiences of their geographic areas and the associated social environments, including limited opportunities, crime and violence, peer pressure and the restricted identities compounded by discrimination. The balance was of more negative influences than positive ones with implications on sexual behaviour and attitudes towards sex and relationships.

The narratives of both the young men and the key informants gave importance to the experiences of growing up in mainly deprived urban neighbourhoods. Peer groups become particularly influential and the large age gaps in friendship groups facilitated early access and exposure to alcohol, cannabis, drug dealing, violence and sex. The lack of opportunities also facilitated involvement in these activities and the young men had very limited examples of success to aspire to, both from a professional, academic and family life perspective. The environments within which the young men were navigating did not provide settings which were particularly conducive to the family structures they aspired to create.

School was not always valued as an opportunity to improve life despite the importance some family members gave to it. Young men who saw their education as a realistic achievement were able to focus on their trajectories but there were also those who despite family support, described troublemaker identities in school, involving fights and expulsions. Some young men also spoke about being angry but were not necessarily able to identify the cause. Among those who did so retrospectively, their aggression was the result of frustration attributed to a combination of difficult parental separations and disruptive neighbourhood environments and the need to assert their masculinity in school.

Poor socioeconomic circumstances were seen to trap people in areas which offered limited possibilities to make progress and made crime an easy option while also having
an impact on family life and relationships. The absence of positive opportunities and abundance of negative ones was further compounded by the experience of the negative attitudes of teachers and society more generally towards young black men, increasing the opportunities for social exclusion and making the cost of sexual risk-taking a minor concern.

Those able to focus on their goals and avoid negative influences benefited from having the strength to be different, alternative options that they perceived as realistic and support from family members or other close individuals. The decision to gain distance from friends who were considered negative influences was also important. This included those involved in crime and drug dealing or perceived to show little interest in growing up to focus on work and being responsible. Friends striving to be mature adults, work and better themselves were valued. Young men’s avoidance strategies offered insight into the ways others struggling to make changes might be able to succeed.

Some key informants discussed structural problems faced by young men including deprivation and discrimination which led to frustrations, aggression and a whole criminalised section of these young men’s communities. Others focused on individual level problems including disapproval of parenting styles and on their perceptions of young men having problems with authority without making associations with underlying structural problems. This emphasis on individuals contributed to ideas of dysfunctional families and cultures. Despite references to culture and family life, these were not the differentiating elements that helped or hindered young men. While disruptive family life for example created challenges and supportive family members were helpful, realistic aspirations, the young men believed in, finding support from like-minded peers, and alternative ways of establishing masculinity were important in young men’s accounts of their success in making choices to counter the negative stereotypes about and low expectations of young black men from their areas. In the next data chapter I will discuss the different elements of the young men’s identities. These play a key part in positioning the young men within wider society and their environments. In turn the positions they hold influence their experiences, opportunities and choices in sexual behaviour.
Chapter 5 Identities
In this chapter I will examine the young men’s perceptions of their identities in terms of being male, young and black. This includes the meanings they gave to these aspects of their identities and how they evolved with age. While the last chapter presented the young men’s environment, this one provides an understanding of the parameters within which they felt able to make decisions about relationships and sex and the restrictions and freedoms they perceive themselves to have resulting from their identities. The chapter ends with a section about the young men’s perceptions about young women and what they want. They spoke about young women generally and as products of their local areas providing also a reflection on themselves as men in opposition to young women. Within the intersectionality framework an understanding of the different identities of individuals is key to their location in society and their environment. This chapter focuses on the young men’s identity characteristics, being black, male and young and the associated more general and sexual stereotypes, all of which have an impact on relationships and sexual behaviour.

5.1 The meaning and significance of ethnicity
Young men described themselves as black British, black Caribbean, black African, Jamaican English and mixed other, in addition to the two young men who described themselves as white British.

The young men were aware of the countries their parents or grandparents had come from and were first, second and third generation British. Family backgrounds included parents or grandparents from the same country, from different Caribbean islands as well as from combinations of African and Caribbean countries. References were made to cultural links to the places their parents or grandparents came from through language, food or music, but links to family abroad or visits to African or Caribbean countries were minimal.

There were accounts of clashes in secondary school between Caribbean and African groups and the animosity was expressed through generalised taunting. This was not reported to continue past school years and even during those years, respondents who spoke about these experiences had moved between the two groups. The greater
distinction in background was made between black people born and raised in London and recent immigrants. This was noted in relation to stricter parenting among more recent immigrants and restrictions in going out at night and being able to socialise.

The differences between Caribbean and African backgrounds were spoken of in terms of food, music, accents and language by young men. Gabriel made this distinction while he was explaining that a Caribbean person would make a point to say “I’m not African. I’m Caribbean” but this would not be in a confrontational context.

Well a black Caribbean person would most probably perceive a black African to be totally different from him. Just for the simple fact of their accent or maybe the food they eat, just little things like that. (Gabriel, age 23)

Alex whose parents were from Nigeria had experienced animosity during his school days and attributed the improved relations since his school days to greater affinity between the two groups. This included more integration, greater mainstream respect for Nigerian music, more cultural exchanges of music, and more intermarrying. Music, food and social gatherings were identified as uniting British Caribbean people from different islands in the UK as well. Growing up on the council estate was seen as bringing people together through shared experiences. In defining himself as a black man, Gabriel spoke of going to a black barber, of the food he ate and the music he listened to.

Other young men focused more on similarities among young black men of Caribbean and African descent, in relation to cultural pride, ideas about discipline and strong mothers.

The cultures to discipline too are usually the same. I mean, like mums, you know, mums don’t usually take rubbish. You know what I mean? And stuff like that. And how much they … they’re very proud of their heritage and their culture and stuff like that and pass it on down to the younger generation. (Alex, age 20)
Young men described mixed black friendship groups and focused on the fact that they had similar views rather than on differences. The prevention/early intervention youth worker also spoke about “a street mentality” and “a street identity” that young men of different backgrounds including Somalians, Indians and Afghans gravitated towards and it entailed a stereotyped idea of black Caribbean lifestyles and culture. Based on his work in inner city estates he referred to an overarching street influence taken up by black and white working class young men in particular, leading to male identities expressed in the same way in terms of appearance and behaviour.

To break the myth of the black and white thing if I go to Bermondsey or let's say I go to, anywhere with a predominantly white culture you’ll find that these white guys act exactly as the black guys. (...) when I say no difference is, no difference. The white guy living in inner cities acts the exact same as the black guys. They’re just the same baggy jeans, hooded tops. The street language is the same. (KI02)

The interviews with the two young white men in this study supported this view in that their beliefs and behaviours were no different to those of the young black men. Similar ways of thinking and behaving in relation to young women, sex and relationships within friendship groups were also emphasised across the interviews with young men.

Although the similarities in the way young men behaved and portrayed themselves were discussed by key informants, there were also generalisations that differentiated young black Caribbean and black African men. For example, the prevalence of step siblings in Caribbean families was discussed, as well as a view about African parents pushing their children to achieve in school and about a greater need to maintain secrecy about sex in African families. Clinic staff noted similarities in the “swagger and nonsense” among young men of different backgrounds but also noted “a poverty of ambition” among some Caribbean young men. This was in contrast both to young Caribbean women, and Asian and African young men.

Young Asian, young black African men, or men of black African background, will tend to have a much, a sort of a, I suppose a more academic or potentially more aspirant ambitions...So they’ll be commenting on things, where the
intention is to go to university, the intention is to gain a degree, to gain a professional qualification, whatever, which is indistinguishable sometimes from their demeanour in the clinic where it’s all sort of swagger and nonsense - the sort of teenage guff that’s going on. Where I think the thing that strikes me about some Afro-Caribbean men... not all, is sort of a poverty of ambition at times, just sort of - you ask what they want to do, and actually you don’t get any formed idea whatsoever. (KI10)

5.1.1 Impact of discrimination
Some young men were particularly aware of the negative effect of discrimination which was further exacerbated by deprivation. Emmanuel for example, spoke about how he felt the need to achieve as a young black man to counteract the stereotypes and low expectations of him as well as the negative impact of the area.

Because you see the negativity that goes on every single day, negative experience for black males especially. And it's just like I don't want to be another statistic or be classed (...) or be put on that vicious cycle where I drop out of school...then go to jail, or end up getting a girl pregnant. (...) I think as a black young man, it's just about... It's just getting out of the vicious box, which is North West London. Just trying to become something of yourself, just prove to other people that you can do something with your life. And as I said a lot of stereotypes against black boys that they're not going to come out of school...with more than five GCSEs or whatever it is. It's like for me, it's just breaking these barriers ... And then moving onto the next barrier, which is finishing the six form, which I've done, and now getting to Uni, and being able to complete Uni. (Emmanuel, age 18)

He was particularly driven and had given some thought to his identity as a young black man with the help of the Black Male Forum. None of the other respondents spoke of opportunities to discuss these important aspects of their lives in facilitated discussions. This had enabled him to identify negative perceptions of what being black means and opportunities to fight the stereotypes which would have been valuable to other young men.
Even though young men who spoke of difficulties across different life domains, did not relate these in defeat, the negativity and the power of discrimination encroached on different aspects of their lives. This resulted in some negative generalised opinions being voiced about black people. For example, Gabriel described a lack of cohesion and support among black people while sharing his disappointment at how when he was younger, estate residents had seen it as a joke and laughed when families on his predominantly black estate were evicted. As a result he came to the conclusion that there were deficiencies within black communities. He saw it as a lack of cohesion and support for one another as well as a problem of envy. He contrasted this with what he saw as collaborative efforts among Asian and white communities.

_I don’t know if you’re aware but like I’ve grown up to know that black people don’t really get anywhere because they don’t help each other. They always want to, you know, bring down someone, or not support them because they don’t want them to be ahead of one another… with the Asians and say, the Caucasians, they will, the families will work together, build up a business, build up a house, build another house, build up another business. Where black people must be run down because they haven’t got that support._ (Gabriel, age 24)

The professional roles of the key informants tended to be focused at the individual level which influenced some to focus more on individual problems and home life but there were also occasions when they attributed some of the difficulties faced by young black men to wider structural problems such as discrimination and deprivation. For example, discrimination by police tied to the reputation of poor areas, and discrimination in school were seen to contribute to the higher exclusion rates for young black men. The male development worker spoke generally about discrimination in deprived and predominantly black areas of London.

_I find that that’s an issue across London with black boys. This is your institutional racism… the police being tougher. I know that once again, and this goes back to my point, because of the reputation Brent has, the high crime levels or areas like Stonebridge and Harlesden, the police are probably come down harder on young people there but you will find the same thing in Brixton… But_
once again, going back to my point, it’s a very diverse community with a lot of issues and that poverty issue, and poverty obviously, you know, is related to crime so yes, because of that there’s a lot of that going on, hard police, the school teachers are, you know, very, very strong with the young people but there is also a very high exclusion rate in Brent because of that. (KI06)

The youth offending team coordinator spoke more specifically about her experience with the judicial system and felt that the young men, who came through in greater numbers than women, were predominantly of Caribbean descent and tended to get harsher sentencing.

*I mean, they're the ones being stopped more often on the street. They're the ones going to court. They can be given a worse sentence than, you know, the young white lad. (…)You can have a young white lad and a young black lad, doing exactly the same thing, and, you know, they’ll come down heavily, more heavily, quite often, on the young black lad. (KI03)*

She went on to suggest that having to contend with the additional burden of discrimination in different aspects of their lives contributed to young black men’s feelings of frustration leading to its expression as anger without a clear self-awareness about it. This then got them into further trouble.

**IV Are there any particular issues that might affect them more [young black men]?**

**IE I think apart from, you know, the general sort of race issues that you get within school, within their communities, and from police.**

**IV Yes. Do they talk about it? Do they…?**

**IE Yes. They will. I know often they're very angry, you know. That's another thing, you know, with young men, there’ll be the anger, and it's unpicking that anger as to why they're angry, to find out, you know, what it is that's going on. (…) They’ll not necessarily join the dots. (KI03)**

While some of the key informants were particularly attuned to the implications and impact of the discrimination and stereotypes faced by young black men, others
expressed attitudes and explanations which seemed based on negative assumptions and stereotypes highlighting how even those people in professional roles meant to support these young men could contribute to negative outcomes and misunderstandings between the young men and adults around them.

5.2 How does a black identity affect sex and relationships?
I asked the young men about the influence of being young black men on their sexual behaviours and relationships. Some respondents felt men generally behaved in similar ways and that being black made little difference. Others reported experiencing particular pressures and expectations, as a result of being black, which had an impact on their choices and options.

Young men’s interest in sex was considered universal but there were suggestions that young black men possibly wanted a greater number of sexual partners and were most likely to be interested in pursuing young women. The two young white men did not feel their ethnicity had any influence on their sexual behaviour but some of the young black men suggested they experienced some additional pressure. For the most part distinctions were not made between Caribbean and African backgrounds.

*But most of the time we hung out together [black African and black Caribbean friends]. Most of the time because we are all black generally, our perception on the whole thing...Why have one girl? Or whatever, we’re the same. So they were definitely more influence cause they were having sex and saying “Common man, stop being frigid, whatever, come on man stop being a wasteman, common take [have sex with] this girl.”*(Alex, age 20)

Those who discussed the experience of being black as a challenge, spoke of expectations driven by stereotypes which led mainly to negative consequences. Even among those who said sexual behaviour and views about relationships and young women were down to the individual, there were suggestions that concerns about reputation and a desire to compete on sexual conquests were of particular relevance to young black men. Respondents gave examples of competing with friends about having first sex and about the number and quality of sexual partners.
The influences and norms of their predominantly black neighbourhoods were mentioned, be it what they saw among friends or family, or what appeared to be common circumstances around them. So the pressure to live up to a stereotype was felt mainly from friends and their surroundings which included predominantly black people.

Other cultures don’t really say much, but a lot of black people, black friends always say ‘You’ve got your girl, but what about this one?’ or they will know that you have a girl [but still say], ‘Go draw her[chat her up]’, whatever. (...) they’ll tell you to get other girls because you’re expected to have as much as possible. (...) It’s like a challenge. Like in the small groups, of like who can have sex with more different girls in this certain period of time. (...) Ego. I think that’s what it is, who’s the biggest man out of the bunch? (Andrew, age 17)

There were also experiences of detrimental sexual stereotypes and pressures from wider society experienced for example, through banter at work or through the media.

Well, I know with the white people always think that black guys get all the girls, take all their girls. (...) I always hear it everywhere. (...) I just think that’s actually funny. They always make jokes on my workplace, everybody they always make jokes about the black guys always take all the good looking white girls, blah, blah, blah. (...) It kind of pressurises you in a way (...) if you don’t get any girls, you know, you’re going to feel like you’re not the black guy that everyone expects you to be. Do you know what I mean? Because that’s what a lot of white people that I know, that I talk to, you know, always talk about how a lot of black guys get a lot of girls. Not just white, because they [black guys] get every... all the girls. They're taking all the girls, but as a joke. (Marcus, age 21)

Stereotypes about young black men’s high sexual performance were experienced as pressure to live up to as well as the need to give sex high importance. Some young men suggested that the stereotype of multiple partners and having lots of sex had become part of many young black men’s frames of reference. Gabriel discussed expectations not to be a virgin entangled with being black and living on an estate.
I think that as a black man, there would be a stereotype that I’m not a virgin. You know like most young people who might be streetwise or maybe be from an estate or black ethnicity. (...) They might be stereotyped not to be a virgin because of where they live, who they hang with or like maybe the way they operate. (Gabriel, age 24)

There was some recognition that sexual attitudes and behaviours are location specific and related to more than just ethnicity but that age and the availability of opportunities were also important in shaping them. Some respondents said they only knew about being black men, having only lived in a predominantly black area with predominantly black friends. So they felt unable to comment on being black separately from being men in terms of differences and similarities to other men. They could speak about their own experience but had not given much thought to alternative ways to live or behave because they had no experience of another area to compare to.

The idea about black men being prone to have multiple partners was referred to as a cultural trait by some of the young black men directly. Some black key informants made similar cultural references during discussions about the possibility that some young women had resigned themselves to men having multiple partners. When asked about the impact of being young black men, some suggested that black men have a greater sexual drive compared to men from other ethnic groups indicating a level of possible internalisation of the stereotypes about oversexualised black cultures. However, caveats were also included about how they knew best about black people because those were the people they had grown up around.

Aaron proposed that the accusations from young black women were aggravated by their lack of awareness that cheating occurred among all ethnic groups and the incorrect assumption that it was only black men who cheated.

I don't think colour has anything to do with it really, because a lot of people say that, if you get with this black guy, black guys cheat a lot, and all that kind of stuff. (...) Some black girls, you know, they’re like “all black men are dogs, they cheat, you might as well get a white man” all that kind of stuff. (...) colour is not really the issue, men do it generally. Also women do it as well. (...) There’s a
lot of white people that cheat out there, and Indian people, but it's just that we don't grow up in their community. So it's like we don't see, we just know that that's happening in our own community. (Aaron, age 20)

Among those who made general observations about different groups of men, Asian and Muslim young men were seen to be more conservative than white and black young men. Black young men were further seen as the least sexually constrained. Young men spoke of the stricter rules for Muslim and Asian young people but also made references to Muslim and Asian friends who behaved similarly to themselves and did not follow these rules. Opinions differed between respondents and at different times within the same interview. For example, Darren’s initial generalisations about men or certain cultures or ethnic groups progressed to conclusions that behaviours most likely depended on the individual or on their environment.

One girl said to me, “Oh I don’t like going out with black boys; they’re too protective [jealous], isn’t it?” Then the girls will be like, “I like going out with white guys because they’re more lenient, isn’t it?” They let her do whatever she wants. Then Asian guys are kind of just mixed, isn’t it? But they’re really strict with religion and stuff. But like obviously it depends really. It depends on the person like, because not every person is like that. Not every black person’s like that or every Asian and white person. (...) There is that about blacks. If someone’s a virgin, like people take the piss out of them.

IV But is it to do with ethnicity or is it just...?
IE No it’s anyone you know. It’s not even... It depends really where you live and stuff, how the people are and what you see in your day to day life. (Darren, age 19)

Assumptions about early sexual awareness among young black men being a problem of culture and home life were voiced by some key informants. The secondary school teacher identified problems arising from early sexual awareness and difficulties processing and expressing these feelings among 16 year old young black men. He described making an effort to talk to the young men about their feelings; however, he also spoke about his school’s response that focused on teaching young men about
treating young women with respect without acknowledging the mismatch between the problem he identified and the school’s solution.

Different priorities were described to be important among black men. For example, Andrew spoke of the different aspects of partnerships valued by different ethnic groups. He felt the longest lasting relationships occurred among his Asian friends as a result of their focus on holding on to a partner rather than accumulating the greatest number. Like others, he suggested that white men were more similar to black men, but still thought the latter experienced a greater pressure to broadcast sexual exploits, so sex was placed in the public domain.

IV...Do you think there are different pressures on, I don’t know... for example, young white men compared to Asian, compared to black?

IE Yes, there’s a little difference, like ... (...) Out of all my friends I’ve met, noticed all the longest lasting relationships are Asians. They go for the longest time... I believe in their community it’s not more who can get who. It’s more about who can hold onto who. Black is just about who can get the most, who can do the most. The white, there’s not many, but I don’t know of many white relationships, but a lot of white people... they’re similar to black. They have a lot of sex, but ... they’re not as outgoing. They don’t portray it the same way. A white person would have sex with one girl and then have sex with another girl, but you wouldn’t know about it. Or you know about it but it won’t be a big thing. A black guy has sex with one girl and then everyone knows about it. And then he has sex with another girl and everyone knows about it. So they come out about it more. (Andrew, age 17)

The more public aspect of sex among young black men was seen to contribute to the accusation of being players and having many concurrent partners. Key informants also commented on the public nature of information being particularly noticeable among the young black men and women they interacted with. This perception about all information potentially ending up in the public sphere also had the negative effect of making young people feel they could not trust anyone.
They will often, will assume that actually information is not personal…(...) if you’re a lousy lover, then actually that information will go around. (...) The sort of idea that actually information goes everywhere. There’s an assumption (...) that everybody speaks to everybody, (...) that information does not stay in one place. (KI10)

While men of all ethnic backgrounds attending the GUM clinic reported having additional partners to a wife or to the mother of their children, different patterns were noted about the way men reported their additional partners and presented themselves. The narratives reflected different perceptions of how they wanted to be viewed. The GUM clinic doctor (KI10) found that while black Caribbean men tended to acknowledge it was not right but also discuss their circumstances as the reality of many people, the African men expressed a need to keep their multiple partners separate from their public persona. This was explained to be because it was not considered acceptable in the public sphere.

“I have a long-term partner and have two girlfriends” and that is delivered in a manner that suggests “Well, actually, as far as I’m concerned that’s perfectly standard behaviour”. (...) the manner in which it’s presented is usually a sort of, you can sense a sense of: I know it’s not right, but this is what I’m doing because actually this is what everybody does. There’s a bit of a difference... I mean, for many of the African or Asian, well, less so Asian, the men from the African backgrounds, there will be a very clear idea that: actually, this is not something that I would talk about in public, because it doesn’t fit with my public persona; however, I’m saying this to you because I’m sort of talking man-to-man as if, you know, sort of, well, this is what I’m doing, and this is in, sort of, it’s not unacceptable, it’s just not acceptable at the public sphere. (KI10)

5.2.1 Sexual stereotypes
The ‘bad boy’ or ‘player’ stereotype was acknowledged by young men as associated with young black men but their personal experience of it varied. The stereotype included an expectation of multiple partners and many children from different partners. This offered a source of reputation but also pressure to live up to high expectations.
Portrayals of young black men on TV, in films and in music videos were seen to exacerbate the negative stereotypes. Young men and key informants referred to black men being seen as sexually well endowed, hypersexual and aggressive men. The valued traits associated with young black men in the media were also linked to physical prowess and sexual conquests.

*People expect that black people, big dick or whatever. See, there’s that pressure that you’ll think when it comes to a girl, what is she going to think? So that can make you...not frightened, but you think, are you going to be to her expectations and that? (...) It does put some pressure on me. And then there’s going on for a long... yes, the biggest pressure is how long can you go on for. That’s the biggest thing.*

**IV**  
*Okay. And who do you feel this pressure from? Is it from the media? Is it from school? From friends? Teachers?*  
**IE**  
*Everywhere, all together, really, because like, the media portrays certain things, saying like, well, on TV there’s certain things they say, they assume black people are bigger. Friends... or say, girls mainly, will say, yes, black people are bigger, they’re better, whatever. (Andrew, age 17)*

Key informants suggested that the media played a role in sexualising black men proposing that the image went back to slavery and the image of “*that young, muscular black slave.*” The media was also accused of propagating inaccurate ideas about black people having boundless sexual drives and little moral values.

*I don’t think young black people have any less values when it comes down to sex and relationships than anyone else, but it’s kind of sometimes perceived that way in the media. (KI07)*

Based on his experience working with mainly working class young people from different ethnic groups across London, he felt there were similarities across the groups in relation to views on sex and relationships. This view contrasted with the secondary school teacher’s observation about black young men in particular becoming aware of their sexuality early. He compared them to the white 16 year old male pupils who he found to be mainly unaware of it. He also described how black young women ignored
the male attention and white working class female pupils reacted to and wanted the male attention. Although he acknowledged his observations and comments as “a real stereotype,” he also assumed the sexual awareness to be the result of cultural and home life influences.

The focus on sexual skills within the stereotype of black men was also described as a possible self-fulfilling prophecy. The independent programme trainer suggested that as black men become unable to compete with black women in employment and economic circumstances, their role in women’s lives may be increasingly focused on sex. While none of the young men spoke of feeling they were just needed for sex, he feared that if sex is what black men feel needed for, it became easy to live up to that expectation alone.

_There’s a growing thing around black women that black men are rubbish. And therefore because black women, let’s face it, in the workplace are doing far better on the whole than black men are, right, they’re the ones who usually have their own house, have a nice car, have a decent job. And they might meet a guy who looks nice but can’t really compete on a level of wage and status so what he becomes good for is sex and I don’t really want any of your intellectuality other than that. (...) And I think the essence of men, people put it down to ego and it’s not about ego. The essence of a man is that he needs to be needed. When you need a man for something and he knows that you have a need that he can fulfil, that guy steps up to the plate (...) And if the only thing that you’re needed for is for sex, cool. I’ll do that with you. (KI08)_

None of the young men described negative experiences at GUM clinics; however, a health advisor raised potential concerns about the negative stereotype affecting the interactions of GUM clinic staff with young black men if they held assumptions about the norm of multiple partners among them.

_I guess [the stereotype manifests itself in] the idea that they’re bound to have more than one partner (...) We see a lot of Caribbean young people, it is predominantly Jamaican origin so yes, (...) there is this idea that oh, they have many partners, like that’s a given.(...) But then speaking of colleagues now, it_
seems to be, it’s like Caribbean colleagues would say that’s a given about Caribbean men and African colleagues would say that’s a given amongst African men. So it’s like, yes, people stereotyping their own background. (...) Maybe unconsciously it affects your interaction with them. (KI05)

5.2.2 Family structures and behavioural markers
The youth development worker made the observation that many of the young white parents his organisation worked with stayed together longer, in comparison to the black African and Caribbean young men who would come in on their own and would not be with their partners from one visit to another. He thought the young black men were influenced by growing up seeing their mothers with multiple partners and having many step children and suggested it might become an expected circumstance. Some key informants spoke of families with step siblings as a common black Caribbean family structure both from a personal and professional perspective.

The additional pressure among black Caribbean young men to have more than one partner, combined with relationship breakdowns was seen by some key informants to lead to a cycle of households with multiple siblings from step-parents and more varied family structures than siblings living with both parents together. These were the realities of several young men. Over half lived in single female households and many spoke of step siblings living with them or elsewhere, but they all made references to a different aspiration. Their ideal was described as “one of those families” or a “more closed family” in which parents lived together with their children from that relationship. These assertions did not support key informant fears about young men coming to view their own household circumstances as a norm to be followed or about a desire to repeat them.

Every woman that he’s [father] been with, every child that he’s had is almost with a different woman, so I think, I don’t really want that. (Lawrence, age 24)

The abundance of single female headed households in the area was discussed by the young men and key informants as a situation that was not ideal. Circumstances and levels of contact with fathers varied widely among the young men and included fathers
who had died, remained highly involved despite starting a new family, lived abroad, were not known to the young men or were in contact a couple of times a year.

The experience of having many step siblings was not described as bad by young men, but it was not a family structure they wanted to reproduce. The circumstances of fathers who are absent from their children’s lives, single mothers, and both men and women with children from multiple partners who experienced difficulties in relationships were perceived as problematic among Caribbean and more generally black people.

Among those who described their own parents within this context, there were two strong opposed views. Young men either expressed a feeling of inevitability and a resignation that this happened among black and Caribbean people, or a determination that they could and would be different. These family circumstances were discussed as associated particularly with black people based on their personal experiences. Even among respondents who suggested that there were similar circumstances also in white families, for example in contrast to Asian and Muslim families, there was still a view that it was to a greater extent within black families.

*In this country there’s not like white people, I don’t see them having that many kids. They might have like three, four, but they don’t go crazy like that. And it’s not like they have a babymother here, a babymother there, a babymother over there. It’s just like it’s one, two maybe three maximum.* (Daniel, age 23)

This association young men made was further highlighted when in response to general questions about their experience of being young black men, they discussed personal family structures as well as fathers and some mothers with several children from different partners.

*Just being young and black, your family is a lot different, the way you’ve grown up. I reckon, if I was in a white family, I wouldn’t have so many half-brothers, half-sisters, so I wouldn’t have witnessed those type of stuff.* (Andrew, age 17)

Although young men did not want to repeat their own family structure, they were also reluctant to condemn the circumstances they had grown up in and around. Jordan tried
to be understanding of his mother having children with three partners but also discussed “trying to break the chain” of behaviour he considered as having continued for decades among black people.

_I don’t think it’s a wrong thing because basically I’ve seen it all around, like it’s in my culture. Like you see black girls, black families, they don’t tend to keep one partner. They go from one to three, four or five partners, different baby fathers [fathers of their children], but I’m trying to break that chain to now say okay, my mum had three partners or whatever, she couldn’t settle down or she didn’t settle down, so I’m going to keep it with one, because it’s not good to really... (...) It’s nice to try and say okay, one parent, one family and that’s it, do you know what I mean? (...) It doesn’t happen a lot [among other ethnic groups]. (Jordan, age 23)_

Although he expressed strong feelings about this, it did not prevent him from having four “minor relationships” during his 8 year long-term relationship in which unprotected sex could have contributing to him perpetuating the chain he spoke of wanting to break.

Among young men who made cultural associations between black people and having many step siblings there was a suggestion that it was due to an absence of cultural restrictions on sex. Comparisons were made particularly with Asian and Muslim cultures which were sometimes essentialised but seen to give sex greater importance and to enforce the expectation that people should stay together.

_One day I hope to find just one person. But being black, I think that’s how it’s affected me, because, I don’t know, like I see...Asian people, they seem... like arranged marriages and stuff. So, it’s like they have to... once that person has slept with them they have to be with that person for the rest of their life. So, there’s no coming out of it. So, that’s why it’s set like that, that’s just their culture. With black people’s culture it seems like there’s no control, it’s just whatever. (Daniel, age 23)_
The determination not to repeat their parents’ choices came across strongly in some men’s discussions. Andrew expressed objections to having children from many women but also tried to justify his father’s actions as legitimate choices he made for his own reasons.

*I grew up like... I have seven half-brothers and a half-sister and I think my dad has three or four baby mothers, different baby mothers. (...) but I was always with my mum, so although I saw them, I was like, fine. I respected it. He did what he had to do. (...) Growing up in this made me... helps to show what I don’t want to be like, in a sense. I'm not saying it’s bad that I have brothers and sisters that aren’t full, but I prefer to have a more closed family.* (Andrew, age 17)

Others with similar family structures expressed uncertainty about their ability to maintain relationships, have children with one woman and stay with her. Young men also wavered between condemning their parents for having children from several partners and accepting it as ideas of normal behaviour, despite feeling that it was not ideal, or was something inevitable they had little control over. This included ideas about the inevitability of reproduction, the desire to have children and a resignation that they might have children and be unable to sustain the relationship leading to the repetition of their own circumstances.

*When I was growing up I had brothers and sisters. I haven’t... my mum’s got like five children; my dad’s got like nine. And I’m the only child from my mum and dad... So, growing up, this might sound bad, but seeing like my dad have so much kids and my mum have kids with other people, it just makes me think that if my parents done it like that, then that must... not that’s how it should be, but then that’s how I sort of think that could happen, or that should happen, if you know what I mean.* (Daniel, age 23)

In spite of descriptions of less than ideal family circumstances, many of the respondents identified family as a high priority. Responses to questions about important aspects of their lives revolved around family and friends. Mothers were identified in particular but also close siblings, children, uncles, aunties and grandmothers. The emotions expressed
by young men when they spoke about absent fathers involved loss, anger and indifference, often accompanied by claims about their determination to be different from them.

Surprisingly only Andre` mentioned the financial implication of living with one parent and this was not in relation to himself but while speaking about his cousin and how the absence of his father meant economic sacrifice in terms of having to wait for things or not getting them at all.

*If he [cousin] had two parents then he might have more things like he could go out and buy more stuff that he would want.*

**IV Is that the same for you? Is that a problem for you or not really?**

*IE (...) I have to wait but not as long as he would have to wait. Like the latest phones or the latest computer games or something like that. (Andre`, age 19)*

5.2.3 Escaping the sexual stereotypes/ Managing the stereotype

The young men who did not feel confined by the hypersexual and “player” stereotypes spoke about the option of mitigating these expectations through the way they presented themselves. They felt they had opportunities and choices available to adopt different behaviours in order to portray themselves in opposition to these negative labels.

*I only think you get that expectation of you if you act in a certain way or if you talk... just if you talk about, “Yes there’s girls there, there’s a girl there, I should try and chat her up,” and you’re constantly talking about girls. Then obviously someone’s going to get that view of you that you probably sleep around and you have a lot of kids or whatever. (Daniel, age 23)*

Some young men explained that the stereotype could be used to entice young women who were attracted by the “player” image associated with black men. Assumptions about multiple partners were also interpreted as a reflection of personal behaviour resulting from choice rather than due to pressure. It involved sexual desire, loving women and having the necessary skills. Social pressure was not necessarily recognised
even when claims of personal desire were tied to social acceptance and perceptions of norms.

But I think that it’s not true that it’s like, black guys, they have to... I don’t think there’s a pressure there, I just think, guys, if they love women and they feel confident seeing and they’re able to juggle more than one woman, they’ll do it because they think it is cool. But I don’t think there’s a pressure to do it, they do it because they want to do it... (Gabriel, age 24)

An adverse outcome of the stereotype included accusations and assumptions that black men are cheaters. This encouraged some young men to make an effort to distance themselves from it. While a key informant acknowledged that there may be advantages to the stereotype for young black men during the years when they just want to have fun, he suggested that the resulting lack of trust it instilled in women led to additional longer term challenges. Black men then needed to make an effort to build trust in relationships even later in life.

I think being a black Caribbean man how it influences is... I suppose you’ve got to gain trust a lot more. (...) [as a] black Caribbean man you’ve got that stereotype so some people love the stereotype and it’s a bit of fun but if you’re going into a more serious relationship it’s... (...) To begin with you’ve got to be... you’ve basically got to sell yourself as being an honest person... (...) The men who have the gift of the gab and they’ll basically manipulate any situation and then you’ve got the rest of us who’ve then got to put up with the pieces that they have left behind so it can be difficult with reference to trust but once you’ve got that, like any relationship, once the trust is there it’s then up to you to keep it. (K12)

5.3 Male identity
The influence of North West London was a presence in many of the young men’s accounts of what it meant to be a man. Their views were intertwined with the local beliefs or what they described as “how things work around here”.
[Being a man is] what everyone sees out there – young guys want to look fly, want to get money, want to get girls and drive nice cars and stuff like that. (Alex, age 20)

Male identity was not a straightforward area to explore because it was not something many of the young men had given much thought to. Elements of youth and ethnicity were integral parts of their male identity as well, so it was not always possible to disentangle the different components. Being a young man was generally associated with wanting to have a good time, but there were also pressures to be confronted. The influence of their surroundings was evident in their discussions about being men, but an awareness of these was not necessarily voiced.

Among those who were conscious of environmental influences on how to be men, these were generally viewed as negative and restrictive, promoting behaviours linked to being young and immature. For example, the pressure for men to portray themselves as fearless and to hide their fears was described as problematic. This was seen as a heightened pressure experienced by young black men and linked to local norms. The desire to prove fearlessness was one of the triggers for being influenced by peers to get involved in criminal activities and violence as well as having multiple partners.

**IV What has been your experience of being a young black man?**

IE I'd say just no fear. Not having the fear to do anything. You know, that's the biggest thing. Once you have no fear, that's... and people see that, that's why you get pressurised. You get pressured to do a lot of things because you're trying to be that person who has no fear, but you actually do have fear, but you... some people are just better at hiding that fear away, you know. (Marcus, age 21)

Another local expectation particular to males was for them to have had sex by the age of 16.

Like some people would be shocked that I lost my virginity at 14 but some people would be shocked in different ways like, why so late? (...) But some people lost their virginity when they were about 16... before that they got bullied not bullied but they get ridiculed because around here like you're not supposed
to lose your virginity so old. That’s how they see it. (...) Like because I was 14 at the time I didn’t feel pressure at all. (...) But the people that are 16 if I was 16 and I was still a virgin I would feel pressure... because everyone I know now is not a virgin. (Michael, age 16)

While the young men did not present themselves directly in opposition to females when discussing male identity, comparisons were made during interviews, in describing men as being strong, protecting their partner or family and being less emotional and sensitive than females. Alongside the image of the stoic man, there were also suggestions that it was harder for men to fall in love which was seen to destine men to be more heartbroken than women when serious relationships ended. This had implications on young men’s preference for casual partnerships and efforts to avoid getting too attached to partners. These views also made concurrent partnerships more likely because they were not considered emotionally threatening and helped establish them as justified choices in reaction to heartbreak.

The strong influence of sexual desire on men’s behaviour was a recurring theme during discussions of overlapping sexual partners, unprotected sex and STIs. Both young men and key informants spoke about young men as being driven by their hormones and having difficulty controlling their sex drives.

*Just like, you know, [young men] they’re just like this walking hormone. You know, any woman is fair game, kind of thing, you know, so, and it’s all part and parcel of their whole identity, so even if they were with their mates and they came across a woman or a young girl, you know, they’re going to put on that, like, sort of persona that they have, when they deal with women and young girls.* (KI03)

Some young men shared reflections on experiences and social perceptions of expectations that men are meant to be the dominant heads of the household and superior to woman but were eager to clarify that they did not embrace these views or have aspirations in alignment with them. Others related behaviour and explanations that suggested they expected to be in control. There was agreement however about the importance of being a great sexual performer as a man. These ideas came from peers
and popular culture and were attributed to young people as part of both British and Caribbean culture. The importance given to sexual performance was perceived as a general male concern which also added pressure on young men both in their interactions with sexual partners and male peers.

There’s always pressure to perform during sex. (...) Like because I think it affects every male if a girl says that she didn’t like the sex that you gave her that’s... every man will feel bad about. They won’t feel as masculine as they felt before. (Michael, age 16)

Feeling masculine involved success with women as well as acceptance and respect from peers. The importance of peers’ opinions was related to the process of forming an identity and the need to get a sense of recognition for being a man. This was sometimes expressed through exaggerated performances of masculinity. Key informants shared experiences of young men behaving very differently during individual interactions compared to when they were among peers. They were perceived to act up to be “the big man” in front of friends or during interactions with females.

With all our young people, you know, you can work with a young person one-to-one, and they can be amazing, absolutely amazing, and, you know, we can have a really good session. (...) Then you put them together with another young person, or with a few other young people, and it's... they're all different. You know, because they all want to show off to each other, they want to show off to the girl, if there's a girl there (...) and show that they're the big man, you know, they know it all. They can look after themselves. (...) They're top dog. It's the whole alpha male syndrome played out in small children that think they're men. (...) Because it's all wound up together, and that's the thing. You can't just take sort of sexual identity and pretend it's not part and parcel of your finding your way forward as a person. (KI03)

Young men were also seen to want to emulate a negative stereotype which portrayed men as dispassionate and the ones in control of relationships and sex. This seemed to involve attempts to distance themselves from any characteristics associated with females and to fit in with the idea of the strong stoic man who is rarely emotionally
involved. It also ties in with their perceptions that it takes more for men to fall in love compared to women, making men more vulnerable to heartbreak when relationships fall apart.

Clinic staff also associated young men’s excessive public protests about being seen by male clinic staff, as misguided attempts to prove their masculinity by emphasising their heterosexuality. This behaviour was witnessed primarily among young black Caribbean men in the teenage clinics but also some men in their 20s and 30s. It did not continue in more private spaces and with increasing familiarity with the male clinic staff.

We fairly frequently will get requests to see female staff (...) it’ll be spoken out in the public areas: but-I ain’t-seeing-no-man (...) the sort of overacting-type stuff which sort of just signals: (...) I couldn’t even countenance the idea of anything that would question my masculinity. (...) We don’t see that very widely at all... it’s primarily in our young Afro-Caribbean men. (...) Often, usually the boys are men who (...) I suppose they’re feeling less self-confident about who they are because they sort of tend to be slightly more aggressive in the public space, or they’re more noisy in the public space, or not controlled (...) and they tend to be the ones who are just smoking cannabis and are sort of having lots of partners. (K110)

The importance of strength and heterosexuality in defining masculinity also made it challenging to uncover relationship and sexual health needs young men might have. The health advisor observed the detrimental effects of the pressure on young Caribbean men in particular to portray themselves as men in a prescriptive way. This required them to avoid showing any vulnerability or caring. She contrasted the behaviour of young black men in the waiting room and during individual sessions with her and noted the restrictions in the presence of peers in their ability to express uncertainties or concerns, and in the ways they interacted with young women. Showing caring for a partner was considered exposing weakness.

There is really this strong thing of the way I’m supposed to be, the role I’m supposed to play, so whether it’s coming over with this excessive bravado and, even in the waiting room, the way they’ll be behaving. And then if you get a
chance to talk to them by themselves (...) if you’re able to make them feel comfortable, the things that might come out, showing a certain vulnerability and, you know, uncertainties about regular things, about relationships and the future. (...) You get this impression they feel obligated to act a certain way in front of a crowd. (...)There are like little signs of how much of a man you are. You’re heterosexual to be a man; you have many girls to be a man. And I guess it also comes with not, trying not to look soft. By that I mean (...) being caring, being vulnerable, being emotional about your sexual partners and your sex life, what’s happened to you. It’s all about being a hard man. That’s where I see it mostly, yes [among the Caribbean boys]. (KI05)

Unfortunately being a man involved showing little emotion and avoiding vulnerability by not caring. This was added to the importance given by the young men to being fearless, having money and success with young women. It all contributed to the significance of their reputations which involved obtaining acceptance and respect from their peers and was perceived to be crucial to their male identity.

5.3.1 Reputation as a detrimental incentive
The importance given to reputation differed between individuals as well as at different times within individual lives. Respect was described as something that young men gained based on their behaviour and it also needed to be protected. This meant standing up to possible external disrespect from others, be it strangers or friends, because ignoring disrespect was feared to signal weakness which would encourage further confrontations. This behavioural imperative was also linked to the importance of not being a victim or showing weakness. This was the reason some young men gave for fighting in school when they were younger and it was also described as a current preoccupation.

If you let a random stranger take the mick, then you’ll let your friends. (...) And then if you let certain things slide, then a couple of weeks or months or years down the line, you’ve just accepted how they treat you. But if you was nipping it in the bud from before, you would have thought to yourself, hold on, let me just pull them up on certain things. But that’s where the respect goes down the drain
because you haven’t spoken up about it. It all starts from one person, really...
(Tion, age 21)

Specific examples of disrespect from strangers mentioned by young men included someone spitting next to them and stepping on their trainers which were seen to be confrontational acts.

For example, you’re outside walking on the street. If somebody spits right next to you, you thinking, hold on, you just blatantly disrespected me. If you haven’t got that respect, then you’re basically no one. If you’re the type of person that lets that happen, then you don’t respect yourself. Therefore, no one will respect you. I reckon that is a major part of who you are and being a man, basically.
(Tion, age 21)

The importance of respect was linked to self-preservation in different aspects of their lives. However, some young men also acknowledged the excessive sensitivities among young black men in particular about acts of perceived disrespect being misguided. Emmanuel suggested he wanted his reputation to be about being a proud black empowered man but did not believe in demanding respect just for being a man nor believe in interpreting someone stepping on his trainers as an act of disrespect.

Having success with young women was believed to be of particular importance to young black men in gaining and maintaining the respect of peers. This offered an additional motivation for overlapping sexual partnerships and for fuelling a desire for many different sexual partners. Young men were aware that their environment had a part to play in determining this.

Saying they’ve had sex with many girls and stuff like that. You kind of, like, I think within the neighbourhood, them kind of things, kind of, get your ratings up, if you know what I’m saying. Like, people think that’s cool. (Jay, age 22)

Young men acknowledged a problem with the double standards that enabled young men to have lots of partners and be looked up to for this by their peers, while young women were called pejorative names if they did the same. However they also suggested that
young women’s attraction to the popular young man who is “a player” or “a gallus” created additional incentive for them to have multiple partners and to pursue many young women.

Alex was not alone in describing how his experiences of being nice, honest and attentive to young women had led to little success. Instead, the adoption of behaviours similar to peers who lied and had multiple partners had been rewarded by success in his quest for sexual partners.

IE I was trying to be the nice guy and it wasn’t working for me and then I’ve seen that everybody in and around me, getting girls that way, I kind of got caught up in it as well. (...) just being able to say yeah yeah I’ve got six different links coming re te te. You know, I’m a gallus, I’d be hitting [having sex with] girls every different, every other day of the week and stuff like that. Because it sounded good...

IE Gallus means you have a lot of girls?

IV Gallus means you’re a player, yes, that’s the Caribbean term for it. (...) All girls want to be around it, you’re a popular guy. (Alex, age 20)

Adopting this “gallus” image however, did not come without consequences for young men. They reported the risk of getting a bad reputation from young women including friends and potential partners. Alex was among the respondents who reported being called derogatory names (“whore”, “slag”, “man-whore” and “dog”) for flirting with lots of young women or having many sexual partners.

While some young men said they found these labels of little consequence, others had experienced young women being reluctant to trust them or refusing further interaction when approached, as a result of their reputation of multiple partners. This could limit their options in terms of finding partners, or attract partners who are more willing to take risks.

The youth offending team coordinator commented on the difficulty of advising young men to give up perceived power, and to give up “hard man” reputations related to conquests given their environments and their positions within them. It involved several
difficulties including confronting unequal power dynamics within relationships which favoured young men, challenging their desire for instant gratification to promote more long term pleasures and diminishing the importance of peer recognition in order to affirm male identity.

*How do you tell somebody to give up their position of power? And how do you get them to understand that, like, do you know what? If you find this sort of relationship not very fulfilling, why don’t you just pursue something that is more fulfilling? But you know, there’s also that aspect of instant gratification that this is what I want and I want it now. And, you know, it goes right across, from, like, having money in their pocket to having the girl, and, you know, on top of that you’ve got like the whole idea of sort of masculine conquests, so, you know, he, yes, he’s a real hard man, he’s had, like loads of women, you know, and until you can sort of change that attitude to, like, actually, you’re just a tart. Put it away.*

(KI03)

The negative impact on sexual attitudes, sexual behaviour and relationships resulting from young men’s need to gain peer recognition and the behaviour they gained it for, were shaped by a combination of black, male and local stereotypes and expectations. Stereotypes of women were also detrimental and I will discuss these next.

**5.4 Stereotypes of women**

Within young men’s discussions about their partnership history and views about sex and relationships, many opinions about young women, their behaviour and desires were shared. Male identities seemed to develop in response to ideas about what it means to be a woman. Young men saw themselves as a more homogenous group in terms of “raging hormones” and wanting sex in their early teenage years. In contrast clear distinctions were made about different types of young women. Despite this, there was variation in the opinions expressed about women, their behaviour and what they wanted.

Young women were labelled, blamed and categorised quite easily. On one hand they were described as naïve and uncertain about how they should expect to be treated by young men which led them to accept “whatever comes their way”. On the other hand, they were described as temptresses, maturing faster than young men and wanting sex as
much as young men.

In contrast to young men, increased interest and desire for sex among young women was referenced mainly in negative terms. Problematic family circumstances and upbringing including absent fathers, and a lack of self-respect were proposed as explanations for these women who were seen to be deviating from expected female behaviour. Young women were also accused of creating greater temptation and opportunity for men to have casual partners and cheat on girlfriends. They were stripped of their femininity in being described as behaving like men if they were happy with casual sexual partners instead of relationships, if they had many sexual partners or were undeterred in pursuing young men who had girlfriends.

The vulnerability of young women to young men who purposely choose younger partners was also raised. This was framed in the context of young men taking advantage of younger partners in order to find those with few previous partners who they could manipulate.

_The reason why guys go for younger girls, like you'll see 26 year olds going out with 18, 16 year olds... That’s because the girls are virgins. Like trust me like, most of these guys like girls that are virgins. Because when you get like to a certain age, like say like girls of 18, 21... she’s had sex with like 30 people, 50 people. That guy’s just going to look and like think; ah, she’s been used, like before, isn’t it? (...)They’re going to be kind of put off. Obviously that’s not for everyone, but obviously that’s why guys like their younger girls, they’re virgins or they can kind of keep control of them._

**IV So it’s about control as well?**

IE  Yes, some guys just want to control their girl. Oh yes, and the girl is just like dumb, she doesn’t know, she’s thinking, I want to please my man, he’s an older man, he’s got a car, you know. (Darren, age 19)

Judgements about young women were made based on the way they dressed, number of past sexual partners, how easily they gave in to sex and how they interacted with men. References were made to “bad” and “good” girls and behaviours associated with these labels. Young women who were reserved and were not overfamiliar with young men
were valued. They were described as “keeping to themselves” and “not hanging off every boy”.

Young men were critical about young women exposing their bodies and attracting sexual attention. They were blamed for distracting young men and making it difficult for them to be faithful. This was despite acknowledgements that young men preyed on young women, that the sexual attention they attracted was sometimes unintentional and that young women were sexualised by the media. The latter was elaborated on as social pressures from soap operas and music videos leading young women to misguided beliefs about the need to “show flesh” to get male attention. This was then inevitably interpreted as “showing sex” by men.

Generational changes were cited to explain observations that contrasted with the past, Young women were now wearing more revealing clothes and were more like young men in their desire for sex without commitment. This was not discussed as a positive change but some young men were keen to emphasise their lack of judgement and their acceptance of the changing times and greater sexual freedom of young women.

*Girls aren’t the same as they used to be back in the days. Back in the days, girls used to be…what’s the word? Very good…As in all they wanted was a relationship. All they wanted to do was find that special person and you know be with them. But now, they’re just more open, open to new things (…) And I’ve grown to accept it. (Tion, age 21)*

Young men supported their claims about accepting the changing times with explanations about how they refrained from attaching negative labels to young women who were interested in sex and less interested in finding a special long-term partner. However, this did not eliminate the tendency to use terms that implied judgement including references to women of past generations as “very good”, or a tendency to excuse greater female sexual freedoms as stemming from bad past experiences. This suggests that in reality, rather than being accepted, female sexuality was being framed as deviant behaviour resulting from past trauma. This new freedom of young women was also seen to create problems for young men when it came to finding a girlfriend because one with many past partners was still considered undesirable.
Even among young men who felt they were not judgemental, there were clearly different expectations of females compared to males including an inherent belief that it was more natural and acceptable for young men than women to pursue sex, and to have casual sex and several or overlapping partners.

Women were seen to be disrespecting themselves or displaying low self-esteem by having sex with many partners. Young men on the other hand were not expected to respect their bodies by avoiding many female sexual partners. So young men brought disrespect to young women while sex even with young women who were not to be respected and even described as “used” had no negative impact on men.

The ease of categorising young women and the limited nuances within the two categories they were placed into made it simple to treat those who were less valued with little respect or empathy. Key informants also inadvertently perpetuated this idea of negative labels for young women who were interested in casual sex instead of relationships. The school mentor did so for example within a scenario in her sexual health sessions.

_There was another girl on the, in the scenario who was a girl that I said to the boys, “We all know girls like this, a good time girl, you know? She’s up for anything”; there was a few smiles, I said, “We all know them, don’t we? Yes.” And I said, “Well, she came along and she kind of knows that he is in this relationship; she doesn’t want a relationship, she just wants to have fun with him.”_ (KI09)

Young men spoke about young women generally but about those in their area too. They judged local young women for having too many partners at a young age, for being too image conscious and materialistic and for being too independent. Some of these negative attributes were seen as resulting from deprivation.

_In the local area, say, in Harlesden, the North West, 70 percent of the girls have had sex with more than three boys… like there’s a lot of girls I know that was like, 14, and they’ve had sex with two people already (...) And it’s all because of_
a little money. (...) They’re not sexing boys that are 14. They’re sexing men that are like, 18, 19, that have money, that have a car. (Andrew, age 17)

Unlike men who were considered able to change their images from fun loving and sexually adventurous young men to respectable ones in serious relationships, young women were described as putting their futures at risk based on their sexual behaviour during their youth.

In opposition to the opportunist and materialistic ones, local young women were also judged to be too independent to maintain relationships. Their independence and their ability to stand up for themselves was labelled as “hood mentality” and young women were viewed as having too much attitude. Local young women were further accused of wanting to grow up too fast and of behaving like the boys, particularly on the estates, selling drugs and having sex with many partners.

Just having that hood mentality, the ghetto mentality, they’re strong but they can cause a lot of trouble around, they’re very, they always have an attitude to them. (...) to me that means they’re strong, they don’t necessarily need a man to be like protective or anything, they can take care of themselves. (...) I think it’s just the attitude, [I don’t like] the attitude that comes with it. (...) Some women can be a bit abusive, talk too much, give you too much of the talk. (Lawrence, age 24)

Key informants were focused on the vulnerability of young women. Low self-esteem was a key concern because it made it easier for them to be manipulated by young men and to tolerate bad behaviour. Deprivation was seen to exacerbate the situation as the benefits of school to move them out of their circumstances was more difficult to consider compared to the benefits of young men with money as a way out or as temporary gain. This again created an incentive for young women to accept exploitative relationships increasing their vulnerability to older partners.

Young women were not always respected but were acknowledged as key drivers of male behaviour. Young men spoke about the lengths they went to, to learn how to entice them, how to be in a relationship and how to keep them as sexual partners at a distance.
5.5 The young stage

Being young was seen as a time to enjoy life. Young men talked about it as a time to experiment and to pursue different sexual experiences.

_I was just trying to take over the world, when I was younger I had a different mentality. I was trying to have sex with everyone._ (Dean, age 21)

This perception of youth did not coincide with ideas of serious relationships and monogamy. Instead it was a time considered to provide the opportunity to learn about sex and to understand females better through different experiences and practice.

_It’s not even terrifying [the idea of commitment], I’m not ready. I’m just too young, I’m just living life, I wanted to live life, and if I tie myself down to one girl I’m not going to have different experiences, and I’m a person for experiences...Being with different people, and having different sexual experience with different people._ (Emmanuel, age 18)

The idea that commitment was boring and limiting was also a view some of the older respondents described holding when they were younger.

_Yes while I was 17, 18 majority of them [sexual partnerships] generally then it was just links... I was like, I was in that zone of, you know, commitment’s long [boring], you know, I’m not doing it. Oh man! I could get what I want without having to commit._ (Gabriel, age 24)

Commitment was not seen as something to aspire to. Instead, being faithful was a possible cause of ridicule by friends. Young men spoke about being teased when they were younger in school but it also continued past school age.

_We always have arguments, me and my friends always have arguments and they laugh because of the fact that I’m being faithful and everything so they laugh._ (Jason, age 18)
Some young men justified having relationships with additional partners by suggesting that having fun now would prevent them cheating on future wives. They discussed a sense of temporality in relation to this behaviour. It involved a view that cheating was justified in their youth because the relationship was likely to be temporary.

*Mostly I want to make sure that when I’m older I don’t wish I want to start messing around. Or I think, I see married men cheating on their wives, I think to myself, why was it when they were young, when they were free and they were detached ... They weren’t going on and gallivanting and sowing their royal oats or whatever they were doing? Why is it now when they’re now supposed to be faithful and married and ... stick with one partner that they struggle to deal with it? (...) I think if you want to mess around you should do it when you were younger! (...) You’re not supposed to mess around [when you are married] but when you’re younger, your relationship, you don’t see it as a long term commitment. (Emmanuel, age 20)*

Key informants also made associations between multiple partners and the enthusiasm of being young. It was described as “youthful exuberance” and “just exploring.” Other contributing factors to the abundance of casual multiple sexual partnerships in the young men’s surroundings included the availability and visibility of sex from a young age and the dismissive attitude older peers held towards young women with a focus on getting sex rather than developing a relationship.

*At 15, 16, I wasn’t really interested [in relationships] because that wasn’t the thing. I wasn’t told that yeah, you should stay with one woman, do you know what I mean? Keep everything good. (...) I grew up in an estate where everything is just in front of you, drugs, everything, come out on your doorstep, do you know what I mean? It’s there. What you up to tonight? Do you want to get some girl? It’s there in front of you... (Jordan, age 23)*

Respondents with younger brothers who were 16 and 17 years old spoke about them going through a stage of following their friends, being carefree and having many sexual partners recognising it as if it was a rite of passage and part of the process of growing up.
Like, I think it is the college life and, like, the last years of high school, like, the last year going to the first college, like, it gasses people up and, like, yes, when you’re with your friends to see how many girls you can sleep with, this and that, who you can link, and that. But after you do it for a while you get bored with it; it’s not really a big thing for everyone. (Moses, age 22)

Young men spoke of more physical than emotional needs when they first started having sex, and the availability of girls simply for sex fulfilled their needs without requiring much effort. Ideas about the burden of being tied down in a relationship were a concern for those who claimed they did not believe in relationships while young. However, there was also an expectation that this would change and that they would value relationships when they were older and more mature, in their 20s and 30s. The age they described as the time to start a serious relationship increased with their increasing current age, suggesting relaxed ideas about life stages.

Cynicism about relationships also contributed to decisions to opt for casual partnerships instead of relationships. This was the result of seeing relationships last short periods as well as the abundance of peers deceiving partners and failing to commit to their relationships. Cynical opinions about relationships were not voiced by all young men. However, those who had relationships mainly described short lived ones ranging from a few weeks to a few months or alternatively long term ones during which they had additional casual partners. Tion explained his cynicism as resulting from the inability of young people around him to live up to his definition of relationships which involved monogamy.

IE I define a relationship as two people that are committed to just that one person. In this day and age, there aren’t a lot of people that have that kind of feeling towards another person. They may pretend like they are, but really and truly it’s that one person they like or that one person they love, but they’re still doing their thing with another person. So, it’s just not the way forward right about now. (...) Obviously, as you get older it’s less likely to be that way, but just right about now for my age group... it’s more common. (Tion, age 21)
Other young men spoke about male and female friends cheating and being cheated on as part of their justifications for believing relationships were best avoided while young. This suggested that a fear of betrayal was an important contributing concern.

Young men also associated youth as a time when young men were controlled by the pressure and power of testosterone, lust and temptation. The strong influence of testosterone featured in many explanations about young men’s desire for sex and the importance given to chasing young women and sex.

Young men provided many justifications for concurrent partnerships however they also described deterrents. For some, having one partner at a time had always been their approach to relationships, others had changed to that as they got older and started thinking it was wrong to deceive partners. The shifts in behaviour were described to be the result of experiences and changes in attitudes and circumstances. They included feelings of increased empathy towards young women, negative consequences of cheating in the past, personal experiences of betrayal, valuing commitment more and having less time and opportunity.

It also tended to be older respondents who mentioned the reduced opportunities to meet and have sex with young women compared to when they were younger. This helped as a deterrent along with the changes in their views about relationships.

> I’ve had my fun. I had a lot of fun, and getting older like, things change like, ... I find it’s not as easy just to go out and pick up girls and... although sometimes I do find it easy, but it’s just like, I think I’ve just totally got my mindset like, I’m alright. I’ll just stick to the one girl. If it works out, it works out. If it don’t, all right, I’ve got another chance. (Jay, age 22)

Employment in particular was seen to reduce time spent with friends and time available to meet new partners and maintain concurrent partnerships.

> I think the job as well changed my lifestyle – obviously you’re growing up as well – but me not being around the estate or around the colleges stopped me
from seeing and meeting a lot of new girls, and stopped me from having to maybe go out of my way to want more. (Gabriel, age 23)

These observations among older participants provide some support for the concerns voiced by key informants about excess free time facilitating opportunities for concurrent partnerships among young people. They suggested work provided structure and less idle time to be bored.

I sort of think for most people work is an enormous distraction, sort of, and it forces a regularity into their time. (…) So I think an awful lot of very young men have far too much time, and quite a lot of very young women have far too much time on their hands. (KI10)

5.5.1 Changes in sexual behaviours and attitudes

It was particularly young men in their 20s who described being conscious of having been too easily influenced by their friends and by ideas about reputation when they were younger. They described growing out of this need to prove themselves in order to avoid being called weak and becoming a target of derision. Growing up and having work and physical activities were considered crucial to this process of change. Becoming mature was considered the natural progression from the carefree phase associated with being young. Changes were discussed both in terms of what young men were expecting would occur as they got older and changes they had already experienced. A turning point in sexual behaviour described as an important retrospective realisation by young men was the recognition they had acted with little regard for young women’s feelings in the past. This self-awareness was linked to becoming more considerate and concerned about the effect of their behaviour as they got older.

It's kind of when you get older, I think now I've kind of cut down [on sexual partners] because I started to develop a conscience. So I think back then myself, I didn't really have a conscience, I didn't really care how these girls felt. I had sex, I felt good, I've gone home, I will go to sleep. That was my day, that was my fun. As I'm growing older... I've developed a conscience, sometimes you have to take feelings into consideration... (Aaron, age 20)
Concern about pleasing partners, the desire to do so and reflection on the reciprocity of sex developed with age and experiences of having several partners. Young men described a transition from selfish sex when sex was entirely about their own pleasure, to sex in which their partner’s experience mattered. Some young men also mentioned that this lead to more and better sex as partners made an effort to please them too. Maturity was also linked with being able to maintain longer lasting relationships and to avoid cheating. It was considered a precursor to having proper relationships which did not involve additional partners and keeping alternative options available.

_I think when you’re a boy, you seem to care less for, I’d say, female’s feelings. But I think as you turn into a man, you learn and realise a lot of stuff (...) Before, I used to like, not be horrible, but I used to like, say, play around with girls, play around with their feelings and how they feel, and now I’ve kind of, I can’t do that, because I…I feel guilty and stuff like that, and I wouldn’t want to feel like that._ (Jay, age 22)

Young men spoke of newly gained principles resulting from past experiences as deterrents to concurrent partnerships including views on correct behaviour and fear of retribution. For example, some young men referred to their desire to behave as they wanted to be treated in a relationship.

_IE_ No, when I was in the relationship I didn’t cheat.

_IV_ Why not? Do you believe in being faithful?

_IE_ Actually, yes. I think karma. If you cheat in a relationship then it will come back on you eventually, so I don’t like that. (Andrew, age 17)

Among those who said they had come to value being faithful, pragmatic views were also expressed about the possibility that a girlfriend might be attracted to other people. However, personal decisions to have one partner were not contingent on a partner’s behaviour but rather maintained as personal views or principles.

_I know what I’m saying? All I know is that I stuck in and I was faithful, I did what I was supposed to do, there’s_
nothing more than I can do. So if she want to cheat then she can cheat, but for me I don’t want to cheat, I truly do not want to cheat. (Jason, age 18)

Young men also mentioned that they had slowed down with the outings and sex as they got older. The changes were attributed to the novelty of sex wearing off in addition to feelings of responsibility towards young women.

When I was, like, 14 or 15, it was just my pleasure that I only cared [about]. (…) Because that was, like, the beginning, so everything was feeling good to me at the beginning and everything, just getting used to it. But then 16, 17, I just realised that, well, is the girl getting pleasure out of it? So I'm going to make sure she's getting pleasure out of it. (…) She's giving up time to give me something that I want, so therefore I have to give her back what she wants as well. So it has to work both ways. (Jason, age 18)

Within his justification for fidelity Jason made a point to clarify that his decision was not for a lack of opportunity to cheat. In this manner he still established his masculinity, through his desirability to women and his skills to attract them. In a similar manner, Adrian acknowledged the risk of boredom as a result of his decision to be with one partner but suggested it was a greater challenge to keep the relationship “sparkle” than to chase many young women.

Being in a relationship, it’s just one person, you might get bored, but you just have to do everything to try and keep the sparkle, that’s all it is. That’s more of a challenge than linking different, different girls. (…) You have to identify what you want out of life. If it’s stressful, is it worth it? And you have to just make a decision, and stand by a decision. (Adrian, age 20)

Here again there is an element of asserting masculinity in taking the greater challenge and also in showing his determination to stand by his decision. Additional advantages given by young men for valuing commitment included avoiding STIs and the stress and hassle of maintaining secret multiple partners.

The possibility of easy access to sex while keeping life simple also limited the pursuit of
multiple partners by young men who felt they only needed one easily accessible sexual partner and had that.

*The one person I did have it [sex with] each time, I could do it whenever I wanted to, so I didn’t really need to go out and get more and more and more.*

*(Andrew, age 17)*

Living through difficult parental relationship break ups and the abundance of short-lived relationships around them seemed to reduce some young men’s confidence in their own abilities to sustain relationships. Hope was pinned on changes that would occur with age associated with expectations of increasing maturity.

*From basically what I’ve seen around me. You can be in a relationship one month and the next, it’s just a thing of the past. So I’ve just sat back and watched all the different kinds of relationships and how it’s ended and I thought to myself, what’s going to be different in my case? The only thing that would really stop that is age, really. (…) Most of the situations will come from basically maturity. Right about now, me and my boys for example, we are mature. But with age, we’ll become more mature in the sense that we’ll know it’s time to stop playing around and just find that one girl to settle with. But for now, it ain’t going to happen.*

*(Tion, age 21)*

Growing up and being an adult was associated with choosing to commit to a relationship and succeeding. This also involved having to use actions instead of just words to show affection and taking pride in relationships, instead of keeping them ambiguous in order to accumulate partners.

*I’d say there’s a sexual issue in the black community…a lot of black boys now won’t say who their girlfriend is. Everyone knows they have a girl, but they won’t say who it is, because they want to have more and more and more. Becoming a man you’ll be like let everyone know who it is so everyone’s aware, so that you’re proud of it. You feel a bit proud or something. Pride [in relationships] is a big development.*

*(Andrew, age 17)*
Changes were also described in what young men looked for in a partner and this was a point of pride. It was discussed in terms of having higher standards for partners and moving from a focus purely on young women’s physical attributes to additional expectations of intelligence and ambition. Emotional elements were added to the physical ones that had guided young men’s preferences when they were younger.

Mostly young men were optimistic about their ability to be faithful in the future, including those who found it difficult in their current or last relationships. It was the former group in particular who pinned their optimism about their expected new abilities on external factors. These factors included having a baby with a woman they loved, choosing long-term gains such as family respect over temporary short lived fun and believing the experience of being cheated on had changed them. The young men who had succeeded in avoiding additional partners during their current relationships were those who spoke of their beliefs in being with one girlfriend or focused on their principles irrespective of her behaviour. They included young men who had cheated on girlfriends in the past.

Some young men described clear ideas about the changes that had or would occur with increased maturity, in terms of their interactions with young women and their views about relationships, while others did not report changes into their mid-twenties. Also, some of the young men who claimed they were more considerate of women and wanting to take relationships seriously did not describe behaviour that matched their claims. Clinic staff noted a reduction in the reported frequency of partner change with increasing age among black Caribbean men but also found that multiple partnerships were maintained by some men into middle age. This has implications on partners being exposed to unknown risk of concurrency and on continuing risk of STI transmission during a life stage when there are greater expectations of monogamy.

5.5.2 Reduced significance of reputation

Young men made an effort to present themselves as individuals. Being independent was perceived as a strength and associated with masculinity. Young men took pride in reporting their independence and their roles as leaders rather than followers. This shaped responses to direct questions about important people in their lives and people who influenced them in their ideas about relationships, sex and views about women.
However this contradicted the various influences on their interactions with young women that came through when they shared their experiences of sex and relationships. These included family circumstances, the relationships they grew up around as well as local expectations and norms. They described being swayed by friends, concern about their reputations, and the pressures and restrictions imposed by their environments.

Some young men did not acknowledge being influenced by peers in the past, others justified their behaviour as following their own desires, or excused pressure as just joking among friends. There was agreement among respondents that chasing many young women became less exciting as they got older compared to when they were 16 and 17 years old; however, the pressure to choose certain more desirable partners or to seek additional partners while in a relationship continued for some into their twenties. At times this seemed to fit in with personal preference but in other instances it became the negative consequence of wanting to fit in and to maintain reputations.

The expectations for young black men to have lots of partners was seen to be driven mainly by peers. These expectations were imparted through jokes among friends, and boasts about seduction skills also involved humour. Young men denied or did not recognise that even humour became pressure, but the impact on relationships and interactions with young women tended to be detrimental to building honest relationships and avoiding concurrent partnerships.

On the occasions that respondents admitted to being influenced by others they tempered their admissions with explanations about how with age, the importance of reputation had subsided, along with the need to seek approval from friends and concern about other people’s opinions. This was considered part of the process of growing up and becoming a man.

You get props [recognition] for being a player, getting girls… (...) You’re getting respect. And that’s also another thing important to guys, looking big in the presence of your friends that, “Ah, he gets girls.”(...) I mean, maybe when I was a little bit younger it [the masculinity, the bravado] meant a lot to me, but now it’s not, now it’s not so much. (...) [transition from boy to man] means like
being... it meant that all that stuff about being popular was not necessarily all that important. (Alex, age 20)

5.6 Becoming a man
I asked the young men what it meant to become a man and their perceptions of the differences between being a boy and a man. They spoke about how being a man meant being independent, having a stable job and being able to take care of themselves and their family. These ideas were further expanded on with respondents focusing on different aspects of life such as the importance of financial independence, of being able to resolve personal problems without help, knowing right from wrong, being able to handle situations and avoiding local behaviours such as “standing on corners and drinking and smoking and socialising.” There was an emphasis on being responsible, mature and a provider but also references to strength, respect and pride.

Normally it’s [a man is] someone big, strong, a lot of money, and well respected. Well respected, and someone that looks after everybody. Someone to look up to. That's respect on its own. Yes, so that's the main three things.
(Marcus, age 21)

Men were seen to command more respect than boys but were also expected to have respect for others, to take care of others instead of just themselves, to be responsible and sensible. The respect linked to men seemed to be tied to taking responsibility rather than the respect gained by boys through youthful bravado. There were also expectations of changes in behaviour and self-portrayal.

Even though some young men spoke about how at the time of first sex they wanted to be “big boys”, or more grown up, none of them suggested having sex defined manhood for them now. Being able to maintain responsibilities, having a job and stability were uncontested associations made with being and becoming a man. This included emotional, physical and financial stability. Based on their definitions and expectations of men, there were also burdens associated with being men. Young men raised worries about succeeding in fulfilling emotional and financial responsibilities which tied into concerns about relationship difficulties and being able to support a family. There were aspirations to be successful men, to be rich men and good fathers. As part of being a
good father, they wanted to make their children proud of them and to be positive influences.

Men were also expected to take responsibility and be conscious of the consequences of their actions instead of hiding mistakes behind excuses of being young. This was described as an important realisation which had a greater impact on their behaviour than advice from family members or other people. As a man it was also important to become aware of more long term goals and to value long term benefits over instant gratification. Andrew associated the choice of gang life and the associated expectation of sex with many partners, as a “career” which focused on quick gains at the expense of a better future. The lack of patience and the focus on short term gains were linked to being young and immature.

5.6.1 Failed men: Wastemen and absent fathers
The internal struggle experienced by young men who wanted to take a different path to the majority of people around them was highlighted by Emmanuel. He explained how despite his success in school and the opportunities he had embraced, the pull of “North West” was always there. He had been told by his mentor and others that he needed to make a choice and a clean cut.

"It's a thing for me where I can't keep from switching. Because I will be doing the North West London thing and then when I'm doing my work I want to be doing my proper professional thing which sometimes they can't interlink. Because obviously I teach kids in a school, and then I probably go to a party and I see them in the same party, which is so unprofessional. And it's a thing I keep being told that I need to choose where I want to be. (...) He [mentor] knows what my future aspirations are, and he knows that I'll be getting into silly trouble because of me going between the two (...) I know where I have to go, but at the same time me living in North West London sometimes draws me into bad things. (Emmanuel, age 18)"

This speaks to the absence perceived by the young men, of a legitimate North West professional male identity. At the same time, being “a wasteman” (a worthless person or a waste of space), making no money, doing nothing with your life was seen as
failure. All the young men who drank alcohol and smoked cannabis were keen to point out that they were not addicted. They made distinctions between smoking once in a while with friends or at parties, and being a smoker who does nothing else with his life. They emphasised that they were in control of their drinking and smoking in order to distance themselves from men with daily addictions who were controlled by them. This was another way to be considered a wasteman. Young men spoke of wastemen as an identity present in their areas and also suggested that some involvement in crime could be attributed to the pressure to make money and the importance this had in defining a man.

The absent father identity was another reoccurring negative one present both in young men’s accounts of their personal experiences and key informants’ discussions about local circumstances. In order to avoid this identity young men spoke of having to make changes in their lives to be responsible, to avoid jail and to be good fathers and provide for their children. The young men were able to speak generally about the kind of man they wanted to be. They described qualities they admired such as being hardworking and striving to improve oneself. Some identified a few men they admired including fathers, uncles, older brothers and other male family members. They tended to be exceptions as it was a challenge for many to think about men they wanted to emulate. In contrast, they had less trouble discussing men they did not want to be like. Such as men in prison, drug dealers, some of their mothers’ boyfriends and some of their own fathers. It was fathers who had taken little or no interest in their lives and/ or had children from many different women who young men were particularly keen not to emulate.

This was an emotive issue for many of the young men. Irrespective of their experiences with their own fathers, they were eager to emphasise their desire to disassociate themselves from assumptions about black men as absent fathers.

Like even when we see like black guys on TV that are not there for their children, or stuff like that. (Emmanuel, age 18)

They spoke of expectations for black men to have children with different partners both in general terms and as the result of personal experiences. They also acknowledged the
reality of many young men who had children they were unable to support. Financial stability was identified as an important requirement before having children, reinforcing some of the strong desires expressed to support their children. Lawrence described his determination to be different from all the other young men around him in this matter.

*I always thought about having kids since I was like about 17, but I don’t want to have a kid until my financial stability is where it’s meant to be, so I’m giving myself the other option of what every other guy ain’t doing. (...) Which is, being able to look after your kid and support them, the way they need to be.*

(Lawrence, age 24)

Young men proposed various explanations for the circumstances of black people having children from many partners and experiencing difficulties settling down. Suggestions included problems attributed to culture, and to their parents’ generation failing to pick the right partners, to getting pregnant too quickly, to a greater desire for sex and to black men evading their parental responsibilities.

The young men recognised the problem of fathers who were absent from their children’s lives, as a common circumstance around them. For many this was also a personal reality but the perceived effect on their lives varied from none to extremely detrimental. Irrespective of their own experiences, young men held strong views about the importance of being involved in their children’s lives.

Absent fathers were condemned as men who are immature, cowards and uncaring for abandoning their children. However when young men spoke about themselves, fatherhood was described in some instances as a responsibility for offspring without conditions and in others as an elective duty.

*I know I’m just going to be there 100% for my child, even if say me and my wife, or baby's mother, would split up, I would be there. (...) I think certain men are just cowards, I don’t know. I don't know how they do it, because I know to be honest with myself, I couldn't do that, I couldn't have a child on this planet, and then not know where they are, not know what they're doing with their lives.*

(Emmanuel, age 18)
Fatherhood discussed as an elective duty was not seen to contradict emphatic statements about taking the responsibilities of fatherhood seriously. It was justified instead as a reasonable opinion about personal involvement in their child’s life depending on who the mother was, the circumstances of conception and her sexual behaviour.

_There have been mishaps in the past which I don’t want to know about, like one night stands with no condoms. That’s the worst because you never know. (Dean, age 21)_

Young men were conscious of the possibility they may not stay with the mother of their child and this was already a reality among respondents who were fathers. There was less awareness about the possible difficulties and the effort that would be required to be involved in a child’s life if the relationship with the mother ended. This was evidenced by nonchalant suggestions about the option of ignoring the mother while maintaining a relationship with the child if necessary. These discussions demonstrated a lack of real understanding of some of the reasons for absent fatherhood.

Some level of internal conflict was expressed among those who placed conditions on their paternal responsibilities. Dean waivered in his beliefs about this but also claimed the mum’s decision to have sex with different partners would be an acceptable reason for withdrawing from his parental responsibilities. He seemed to associate the sexual behaviour of the mother with her not wanting the father around. More widely, sexual restrictions were placed on good motherhood while limiting sexual partners was not discussed as a condition for acceptable fatherhood and overall sexual behaviour did not play a role in assessing fatherhood.

_If the mum’s not acting the way she should be, like, the way you want your child, your child’s mum to act, you’re not going to put effort into it. Like, if my child’s mum was having sex with this, that and that person, I wouldn’t want to look after the child, because obviously, because... you know, basically, it’s how the mum acts. (Dean, age21)_
Even though young men had described their own fathers as a “wasteman”, as not caring about them or knowing them, they did not seem to make a connection between their sexual behaviour, their attitudes about conditional involvement in a child’s life and the possibility of recreating their personal circumstances. Some young men had hope and faith in their ability to be different from what they had experienced and seen around them. Having a father to look up to and a relationship to compare to was considered helpful, but in his absence it was still felt possible to know how to behave well in a relationship and how to be a good father.

*If I think about my dad that he's never been there for me. It's like, if I have a child I know I would be there for my kids, I just know I want to be there.*

_(Emmanuel, age 18)_

Among the young men who did not have contact with their fathers, some were ambivalent about them and uncertain about what difference their presence would have made. Others felt anger or disappointment suggesting their father’s absence had been detrimental to their education about and experiences of sex and relationships. The latter group suggested it was the absence of reassurance and advice that was particularly problematic. However, those who lived with, or were in contact with their fathers did not necessarily get this reassurance and advice from them. Some of the frustrations about absent fathers stemmed from a belief that their presence could have improved their lives.

Key informants had mixed views about the impact of absent fathers. Although female led single parent households were spoken about as a cause of concern and a common structure among black families, particularly black Caribbean ones, there were key informants who also suggested too many problems were attributed to absent fathers. For example, the male development worker conceded that an absent father may leave a young man with fewer sources of information and discussion about sex, but felt it was unreasonable to suggest young men needed a father to know how to treat young women. The abandonment and rejection were seen as problematic making the reason for the absence of fathers more important than just the absence itself.

Mothers, as the more consistently present parent, played more central roles in the lives
of the young men. It was respondents who had strained relationships with their mothers or who described their mothers struggling with their own relationships, who seemed to attach more importance to the absence of their fathers or to suggest his presence would have made a difference to them.

5.7 Conclusion
In this chapter I have presented the young men’s opinions about what it means to be male, to be young and to be black. I have discussed their male identity, how it is entwined with their black and youth identities, how these identities affected sexual behaviour and how young men were able to escape some of the constraining expectations. The young men’s identities created restrictions but also provided freedoms which structured their attitudes towards relationships and their sexual behaviours. Young men spoke of the development of these identities over the years and the influences their deprived urban environment had on the processes. Peer norms were particularly powerful and were acknowledged as being detrimental during early adolescence. The realisation about the possibility of reinterpreting male identities was particularly valued by young men who had experienced the support and opportunity to do so. Others acknowledged the possibility but also faced greater challenges in terms of finding alternative options and the strength to give less importance to peer norms and peer recognition. Stereotypes of black hypersexuality were also experienced as pressure and something to battle by some young men while others felt able to portray themselves in opposition to them. The peer norms that were particularly detrimental included the need to hide vulnerability, whether emotionally or physically, to put on facades of fearlessness and the need to disassociate emotion from sex and relationships with young women.

The negative views young men held about materialistic young women, ideas about the need to be suspicious and the ease with which they were categorised at extremes of naïve or manipulative were detrimental to building healthy relationships. Many young men showed little insight into some of their contradicting views and seemed also unaware of the detrimental consequences of some of their behaviours and attitudes towards young women and ultimately themselves. Accumulating sexual conquests was considered a rite of passage and overlapping sexual partnerships were valued over committed ones. There were also particular pressures experienced by young black men
including sexual expectations to be skilful at seducing young women, and in their sexual performance. As part of the experience of growing up, a change of attitude towards young women was key to young men changing their perceptions about sex and relationships, this included thinking more about the consequences of their behaviour and being more attentive to their partners’ emotional and sexual needs. To begin the more focused exploration of sexual attitudes and behaviours, I will present the young men’s journeys into sexual awareness and learning about sex and relationships in the next chapter.
Chapter 6 Sexual trajectories

This chapter on the young men’s sexual trajectories explores their journeys as they became aware of girls, learned about sex and became sexually active, including the various push and pull factors leading to first sex. This is followed by a more detailed overview of the young men’s different sources of information including peers, family members, school sex education sessions and media influences exploring the most proximal influences. The chapter ends with information about the support young men felt was available to them in relation to sex and relationships, and the gaps in support they identified along with the unmet needs key informants identified.

6.1 Sexual awareness

I asked the young men how and when they became aware of girls. They spoke about first kisses happening when they were between 6 and 12 years old, noticing “girls looking nice” and “playing kiss and chase” in primary school. There were also accounts of sharing food, holding hands with girlfriends and awareness of sexual arousal.

An early awareness and curiosity about sex involved mainly physical but also emotional attachments. Most learning about sex occurred by speaking with friends but sex was also felt to be a presence around them. They described hearing about it from older boys, seeing adult movies on TV when they were 5 to 8 years old, seeing nudity in print media aged 7 and 8, as well as coming across porn on TV or on the internet through pop ups.

Despite early exposure to nudity and discussions about sex with friends, more concrete awareness of sex occurred mainly between ages 11 and 13. The period of vague awareness preceding concrete knowledge about sex was characterized by unknown elements which related mainly to genital anatomy and the mechanics of sex.

I didn’t even know about like girls had... what’s the word; vaginas, all that stuff. I never knew like where to put it and all that stuff [until age 11]. (Darren, age 19)
Exposure to sex alone did not necessarily lead to curiosity or increased desire to have sex. After knowing a little about it, some young men did not seek further information for a few years. They described being interested in having a good time with their friends instead, along with a delayed interest in girls.

_We [me and my friends] didn’t focus that much on females. We were just trying to be just young, play about really as I think... I’d say like the whole female thing, like getting to know girls more, probably started in college._ (Moses, age 22)

### 6.2 Sexual environment
Young men described losing motivation to work as hard as they used to in primary school when they started going out in secondary school and getting distracted by young women. This coincided with puberty, and school created an opportunity to meet young women, talk to them and spend time with them. Schools were also a source of girlfriends and sexual partners, and an environment in which young men reported seeing pupils having sex and being involved in and exposed to widespread discussions about sex.

These discussion were not private or discrete as noted by young men and key informants. The secondary school teacher pointed out that sex permeated both the playground and classroom as a topic of conversation and in the different ways sexual frustrations and desires were expressed.

_Sex is something that’s talked about a lot and in a quite vulgar way. (...)... when I was at school it’s a, kind of, a giggly conversation if had at all, you know._

_Whereas [now] it’s something that’s always palpable, do you know what I mean? And it comes in from the playground into classrooms and stuff, and it’s quite a big issue, sort of, the sexualising of things._ (KI01)

Although awareness of girls and interactions with them started at a very early age, many young men made references to starting college as an important milestone in their sexual life trajectories. This was due to the sudden abundance of females and the opportunities for interactions which increased opportunities and temptation for sex.
6.3 Experiences of first sex

Some young men reported first sex occurring when they were between 11 and 13 years old. Others described 11 as the age when they started wanting to have sex. This coincided with their experiences of puberty as a combination of changes in themselves and those observed in girls. All males were expected to want sex at puberty, while females were not seen to share this desire due to worries about reputation and fear that sex would hurt. The onset of puberty was considered a distinct trigger in the sexual trajectory of young men and significant within young men’s discussions about becoming aware of girls and wanting to have sex. They made reference to raging hormones as well, and the emphasis was on having sex, with less concern reported about who it would be with.

When I was like seven and six [I first heard about sex] ...This was primary school... because people around me already knew, so I was exposed to it [sex] very early...At that age [7-11 years old]... I didn’t feel any like testosterone running through my body and I didn’t feel any urge...But as I got older it felt more physical...Between nine and 14 it was more... it was more of understanding more. People around me [older and same age boys] used to talk about it and talk about their experiences. [age 11 to 14] I kind of looked to see if [there were] any girls that I could [have sex with]... but I didn’t until I was 14.

(Michael, age 16)

For some young men, insufficient interest in finding out more about sex and having alternative priorities were the reasons why the combination of early exposure to sex and puberty did not lead directly to actively seeking sex. Other circumstances that delayed first sex were the need for some young men to overcome shyness, a lack of confidence in order to approach young women, as well as initial feelings about sex being “nasty”.

The expectation of early sexual debut around them however pushed even those who described being initially uninterested in sex, to reports of first sex occurring as the result of taking opportunities that arose. This was acknowledged to occur in order to fit in, in the absence of romantic feelings.

Young men reported mixed feelings about whether their first sexual experiences met their expectations or not. It was considered a challenge overcome by some, a desire
fulfilled by others and also spoken of as a victory in which the partner was of little relevance.

The day when I actually did it, I came back in the house and I was just like so happy, no one knew what I was so happy about. I was like “I done it, I done it, I done it!” (Jordan, age 23)

This feeling of achievement was present irrespective of whether young men described their sexual debut as disappointing or exceeding expectations. For example, Emmanuel described his first sexual experience as overrated.

It didn’t last very long, and plus it was outside in the bloody bushes, so I thought “Hell no! We need to stop.” (Emmanuel, age 18)

In contrast, for Jason the first experience exceeded his expectations and was followed by frequent sex.

The way I seen it and the way people explained it to me and the way the magazines and the porn and everything, everybody was just saying, yes, it’s going to be nice, this and that. And then when I first had it [aged 12 years old], it felt better than nice. (...) It was like, once I had it, it was just like... it just went crazy. I was just doing it, like, three times a week. (Jason, age 18)

First sex occurred with young women who were the same age or older and already sexually active, or were girlfriends who were also virgins. Unless the young men were already in a relationship or working towards developing one, first sexual partners would become short or long term casual partners or partners with whom they had sex one or two times only. Some of the young men’s first sexual partners reappeared as casual partners later on in their lives.

Emmanuel recognised the influence of his peers on his eagerness to have sex. He explained that having his first relationship when he was 14 years old made him quite old and that he had not had sex with his girlfriend at that time because he felt still young and was not interested in sex. A year later aged 15, he had sex with a girl whom he had
been talking to for a while and would meet at the pub, as a one-time encounter.

*I think it was this thing where I just couldn't wait to lose my virginity at that time anyway, because my friends had done it as well. So that was definitely a peer pressure thing. Because I hear all my friends were doing it, or they had just started it like. It was one after the other, one friend lost it, and then my [twin] brother lost it, and then someone else lost it, and I was like, “no, it must be my time soon.”* (Emmanuel, age 18)

Curiosity about sex was a key influence in accounts of first sex, as was the pressure to follow local norms and rid themselves of “the stigma of being a virgin”. Some young men were able to voice this with a clear understanding and acceptance of the role their environment and friends played in their desire and active attempts to have sex.

*The hormones were raging, as a teenager having just reached puberty. But I think it was more so to do with the peer pressure of everyone saying, look, look, being looked at as you were a virgin. (...) You feel ostracised or left out – you’re not really a big, you’re not a big boy, as such, if you’re a virgin.* (Alex, age 20)

Other young men spoke about the pressure from peers as an aside or denied it, focusing on their own desire for sex. Despite the denials, their narratives included a sense of needing to catch up with friends, to become or join the “big boys” or feeling left out. Andrew contradicted himself in describing first sex as an opportunity with “just a girl” and wanting to fit in but also claiming he did not feel pressured and had sex just because he wanted to do it. He further demonstrated the level of personal confidence provided by sexual debut by explaining how although he did not tell friends about his first sexual experience for a year, it was enough for him to know that he could respond if challenged.

While few young men spoke of first sex occurring with a young woman they liked or as the natural progression of a relationship, the idea of virginity as a challenge to be overcome was demonstrated by the recurring references to first sexual experiences as opportunities taken when they arose with young women outside relationships who they were not necessarily interested in.
Female friends were reported to have introduced young men to other young women who became girlfriends or sexual partners but were not reported to contribute to the pressure to have sex. Instead the influences discussed as coming from them was advice not to cheat or to have so many partners. The experience of feeling pressured into sex by a partner was unusual among young men. The two reported experiences contrasted to the many references made by young men about young women being deceived or pressurised into sex by other young men.

### 6.4 Sex education in school

The main learning experiences that were attributed to sex education sessions in school were seeing what STIs look like, learning the names of the STIs and in some instances learning the correct way to put a condom on. Overall however, the experiences described and feelings about sex education in school were not very positive.

**IE**  
*I just thought that in school, the way they portrayed sex education was rubbish.*

**IV**  
*In what way?*

**IE**  
*Just like they had like a picture of the woman and the woman’s womb and stuff. (...)... it’s not like they were like if you’re having sex make sure you use protection, dah, dah, dah.... it’s like they don’t want to talk about sex, they’ll just get on straight to, oh this woman had a baby and she got pregnant. ...When I think about it now they need to do a lot more sex education in school, because [it was] in science. (Daniel, age 23)*

Circumstances of pupils giggling, being distracted and paying little attention during the sessions were reported by those who had been taught in school but didn’t gain much out of it. Immaturity was also a reason one school gave for refusing to offer sex education. Other young men who did not recall receiving any sex education in school did not remember why.

*Oh yeah, there was [sex education], but we weren’t really focused on sex education. We were too busy giggling...The first time was primary school...Yeah, you’re 12 years old. You was giggling. (Tion, age 21)*
For the young men who were already sexually active, sex education sessions given in year 11 [age 15/16] were found to occur too late. Key informants shared the disappointment in the sex education available to young people. They reported big discrepancies in the knowledge levels among young people and surprise at the abundance of misconceptions about STIs.

*I had to change my whole lesson plan because as I was talking to them initially, I was talking to them about relationships and then I realised actually they didn't understand how the reproductive system worked, so I assumed that Year 11 [age 15/16] they would know this; so I took back the assumption and I went back to basics. So we just looked at the whole female reproductive system, how their bodies worked, and that was an eye-opener for them because they said they'd never been told this.* (KI09)

Clinic staff also described how lack of knowledge could have implications on their attempts to discuss STI prevention.

*You’d have instances where you’re talking about the fact that STIs can be passed through sexual fluids and them not realising that there is such a thing as vaginal sexual fluids.* (KI05)

Young men found it challenging to articulate the additional information they would have liked before having sex and starting relationships when I asked directly. However, they described poor and absent sex education in school and insufficient knowledge as they spoke about their sex and relationship histories. Even among young men who dismissed the need for additional information with claims they learned fast through practice, there were accounts about uncertainty at sexual debut both about sex and relationships and what they entailed.

*IE*  
She was my girlfriend but we didn’t really do nothing, I was still young [13 years old], you know. I didn’t really know nothing about girlfriend/boyfriend stuff. I never got taught about that or how to be in a relationship so I just thought okay, girlfriend means a lot of sex.

*IV*  
Would you have liked someone to tell you about things?
Yes, most probably. I know now so it’s all right. (...)

So all your friends also just thought relationships were just sex as well?

We didn’t really talk about relationships with anybody.

You didn’t? How was that? Was that difficult, easy?

It wasn’t that difficult because I had a lot of sex so I didn’t really think much of it. I just thought I’m doing what I’ve got to do and everything else is irrelevant. (Dean, age 21)

None of the young men reported discussing relationships in school sex education sessions which was identified as a detrimental omission. For some like Dean, this meant encountering no other opportunities to discuss relationships before or after sexual debut.

Key informants suggested that the need for experiential learning about sex in the absence of proper education or sources of information encouraged some young men to find casual partners and gain experiences before having a girlfriend. There were also young men who spoke of their early relationships as preparation for when they found long term partners.

6.5 Media influences
TV and movies were media sources of information providing first glances of sex and ideas about relationships. In some instances TV provided positive influences where young men felt they could observe relationships developing step by step or observe examples of what “good” relationships involved.

I think I could still figure it out [without examples in my life]. I think, because, I see like, black actors on TV, Will Smith, you can see the way he’s grown up, he’s in a good relationship, he’s taking care of his kids and the whole family.

(Lawrence, age 24)

Young men also referenced TV and movies in opposition to their lives. Movies tended to be seen as unrealistic in their portrayals of young men behaving nicely and winning over young women as well as in their portrayals of unrealistic and idealised
relationships, for example devoid of arguments. This was described as problematic because it left people unprepared for reality. Relationships on TV were also described as boring.

*Like movies like when you have happily ever, happy endings, you see they get married and then no arguments or nothing, that's a bunch of crap to me.* (Jason, age 18)

TV shows, movies, actors and singers were discussed in relation to providing young people with information about sex, how to establish a relationship, how to develop them and ways to overcome hurdles within relationships. Both positive and negative descriptions of men and their behaviour within relationships were observed, in addition to the idealised and unrealistic relationships.

*You see the nice guy getting the girl and that’s not always how it plays out in real life. You see in the movies and think, well, I’ll do what that guy did and that didn’t quite work.* (Alex, age 20)

Young men described turning to TV and movies to find advice and learning about how to attract young women or how to overcome relationships breakdowns. The negative elements raised by both young men and key informants included references to plotlines in soap operas that did not support a reality of monogamous relationships but included many instances of dishonesty and cheating and particularly ideas about how women are good at hiding infidelity.

Jamaican music and rap were also identified as key influences in establishing the taboos of cunnilingus and anal sex, both perceived as emasculating men. Anal sex was associated with homosexuality while cunnilingus was considered “nasty” and “wrong” on the young men’s estates and in the wider local area. Disapproval about men performing cunnilingus was reported as a unanimous norm while there were no concerns about men receiving oral sex. It was expected that casual partners might engage in oral sex on young men but the acceptability of having a girlfriend do it was more controversial.
Emmanuel discussed the taboos of cunnilingus and anal sex in terms of the rules of his generation. He referred to them also as rules held by “black boys or black people” and contrasted them with his experience of conversations with young white male colleagues outside London.

*I don't know if it's because of music… Jamaican music just tells you don't, like don't do oral sex, and don't have…anal sex and stuff like that, it's just something that as young people growing up listening to music says never to do. So when I got to areas like Herefordshire, we have conversations about sex, and they'd be saying, yes, this and that, it's a bit different to what I would normally do. But obviously I can't say, “You're disgusting for doing that,” because… I know for myself that it's not wrong, or bad to do it, but I just don't do it. (Emmanuel, age 18)*

In the process of justifying their objections to cunnilingus, young men made references to hygiene concerns about vaginas not being clean but did not see the contradiction in reporting vaginal sex without a condom. Similarly the young women who performed oral sex on men were labelled as “dirty,” and kissing girls who gave oral sex was considered undesirable but no concerns were expressed about receiving oral sex without a condom.

While Emmanuel suggested an ethnic link to the taboos, other young men who described them, including the two white young men interviewed, attributed them to local rules of sexual engagement rather than to a specific ethnic group. Some young men were adamant that they did not and would never perform oral sex on a woman, others were more flexible in suggesting they might change their minds as they got older or for a special partner.

Key informants expressed mainly negative views about the media influence on young men. The portrayal of young black men in music and film was seen to encourage bravado and the sexualisation of women. This was in line with media concerns raised by young men about music videos leading young women to misguided beliefs about the need to “show flesh” to get male attention which men then interpreted as “showing sex”. They also attributed ideas among young men about the glamour of having many partners and the need for expensive designer clothes to attract young women, to music, music videos and TV. References to social media such as Facebook, Bebo and B2B,
were made during discussions about how young men had met young women, the many sources of temptation and the different options available to deceive partners and maintain contact with several partners simultaneously.

6.5.1 Pornography
Young men spoke of different combinations of media information sources about sex. Pornography featured in some of their paths to sexual awareness and learning while it was absent in others. Among those who included pornography, there were mixed opinions about whether it had positive or negative effects. Some young men came across pornography accidentally through pop ups while online, others were introduced to it by older brothers and other older boys.

It was mainly a source of information about positions, about the mechanics of sex and a supplement to sex scenes on TV. This was information which they did not find available elsewhere and was described as satisfying a curiosity. Young men for whom pornography was not a source of sex information, described learning through practice having sex and having a variety of partners.

Michael explained how seeing “a bit of porn” between the ages of 12 and 14 had clarified some female anatomy for him. Pornography filled some information gaps and was seen by some young men as overall positive. Some respondents were uncertain about the balance of influence on them and others expressed strong feelings about the negative influence.

The concerns raised about pornography focused on the consequences it may have on the behaviour or views of impressionable young minds. This was in relation to feeling inadequate, objectifying women, exacerbating sexual urges and reinforcing male dominance within sexual encounters. Some young men used the effect it had on themselves to voice their concerns about the negative influences, others spoke more generally.

There were suggestions that pornography could make people feel inadequate, for example in relation to expecting the exaggerated levels of moaning observed, in order to ascertain they were satisfying their partner. Marcus explained how pornography had
influenced him to see girls just as opportunities for sex and contributed to his having little regard for the idea of relationships even when his partners were interested in one. The message he got from pornography was “just, have sex” after which developing relationships was of little interest.

Pornography had also provided visual stimulation and increased curiosity to experience sex among young men who reported their discovery of it coinciding with puberty. Further concern was discussed by key informants and young men about the impact of the portrayal of the dominant male and the submissive female on young impressionable minds in terms of influencing expectations and normalising skewed power structures. This was seen to be further exacerbated by the availability of pornography at increasingly young ages, noted by both young men and key informants, and the tendency of pornography to focus on the physical aspect of sex while ignoring the emotional side as noted by key informants.

The proliferation of pornography amongst young people has grown exponentially and because it seems that the sensational value of it, there’s been a tendency for that to very much be probably more hardcore and more intense imagery than previous. (…) I was a teenager heavily into porn, heavily, and the reality was getting hold of it was a nightmare because you had to find someone who would buy it in a shop for you or something. There was no internet. (…) the access is open [online now]. And you’re not just open to some bearded German guy coming to fix the sink... You’re open to snippet, YouTube length 30 second edits of the most hardcore stuff available. (KI08)

6.6 Advice from parents and family members
Young men reported very limited discussion about sex or information sharing about relationships with parents. The little advice given to the young men by parents and other close family members varied. They described getting hints about sex such as “wrap-up” or “don’t do it with everyone” instead of being sat down for a discussion.

Further advice from fathers and uncles included warnings to avoid being fully committed to partners due to the inevitable pain the breakup would cause, and warnings about certain women who might poke holes in condoms or make false accusations of rape.
IV  So what kind of things did he [father] tell you?

IE  More stuff like experiences that he had with my mum. Just stuff like, you know, you can obviously have your girlfriend...but don’t put everything into it, because when she's gone, you know, you're going to really feel down... (…) Commit yourself, but don’t fully commit your whole self to her... because when it does go, everything splits up, and you would be hurting more than she would… (Marcus, age 21)

There were also opinions shared by men and women, that young men should be having fun rather than settling down while young. This advice was given both indirectly and directly. Indirect messages included accounts of mothers and partners showing little surprise when young men were found to have additional partners outside their relationships and expectations for teenage sons not to settle down with one partner.

*The kind of comments I got is that, you're too young to be in a relationship. Because when boys are teenagers, it's like they're out, they're at their prime, if a guy doesn't have as much fun as he can while he's young, he's going do it when he's older. So…*

IV  So who gave you that message?

IE  My ex-partner and my mum, like when she found out I cheated, she was like, “You're still young anyway, it was bound to happen because you are young.” (Aaron, age 20)

Direct messages included Michael’s account of his uncle encouraging him to “*have fun*” while his mum wanted him to “*just explore but not to a heavy extent. So not a lot of people.*”

Many of the young men grew up in single parent households with their mothers, and even among those who described close relationships with them, their influence on sex and relationships tended to be minor. Some young men said that they were just not comfortable talking to their mothers and explained it was because they would prefer a male perspective; others were unable to be specific about their discomfort. Among young men who were living with both parents or were in contact with their father,
however, it was not necessarily him they were most comfortable with. A few preferred conversations with their mother and others reported being able to speak to a mother or sister but preferring a man’s point of view.

Some young men spoke of advice about having only one girlfriend which came mainly but not exclusively from mothers and sisters with a focus on the correct way to behave, along with disapproval about being unfaithful to girlfriends. The father who was reported to have advised his son “to stick with one girlfriend” framed it in terms of the benefits of reducing hassle and stress.

*I think the message of having a girlfriend did stick in my mind, yes, my dad said to just like stick with one girlfriend, it’s less hassle, that kind of stuff. (Aaron, age 20)*

Mothers were also reported to advocate for stable relationships with one girlfriend instead of many changing partners and to focus on messages about using condoms.

*I never really spoke to my dad about anything, but my mum would always give me advice. Like to be honest my mum used to see a lot of girls coming in and out of the house, and she used to get upset with me. (...) She’s [saying] why is there so much girls coming in, dah, dah, dah. You need to stick to one girl because I’m getting tired of this. (...) She doesn’t want me to just sleep around, she wants me to settle down and find the right person, just find one person and be happy. (Daniel, age 23)*

Across the contradicting advice from parents and other family members, advice to use condoms was the most consistent guidance given but it ranged from a few words to accounts from a mother who was a nurse, about the consequences of not using them. While some parents and other family adults offered advice about young women and relationships, siblings were less involved in direct conversations. Older brothers were mainly identified as sources of advice and support in terms of someone they could approach if necessary or from whom they had heard stories about sex. Older sisters were mostly absent from conversations about sex or relationships.
6.7 Religious and cultural views about sex
I asked young men about religious affiliations before the interview while collecting basic demographic data. They reported mainly Christian faiths along with some young men who said they did not belong to any religion.

Young men were aware of religious expectations to wait for sex until marriage but none of the respondents were virgins. It was not seen as a realistic teaching people followed anymore. Among those who reported some religious affiliation, it was mainly reported to have little or no influence on their sexual behaviour and their opinions about relationships and sex. Instead they spoke of following the principles of respect embedded in religion and suggested that religion helped them to restrain their sexual behaviour, to follow certain moral values, to take relationships more seriously or to think about attempting future abstinence before marriage.

Daniel felt his upbringing by his mother, “a very proper Christian woman” had given him some principles about choosing sexual partners and had helped him to be more in control of his sexual behaviour.

*I feel like there’s principles though, ‘cause a lot of guys they’ll do anything for a girl or sex or whatever. (…) I feel like if I weren’t a Christian or I didn’t hear stuff from my mum it would be – I’d be a lot worse.*

IV Okay, worse in like...?
IE I wouldn’t like... not have as much control, just be like maybe more aggressive when it comes to sex and stuff. (Daniel, age 23)

Andrew spoke of the strongest religious influence. Religion had become important to him since he had become a practicing Christian and he justified having sex with his new girlfriend through his belief in fidelity and his plan to treat the relationship like marriage. Alex was conflicted about being told to abstain by people who were not succeeding to do so themselves and it made him question his ability to succeed.

IE Well, now more so than ever – because of my religion I’m trying to abstain. I’m trying to abstain because I’m told it’s wrong, because I’ve been
told that my body is a temple and I should treat my body with respect and whatnot.

**IV Right. But before?**

IE It was less hard to do so because I tried, I had an urge, the hormones were pumping and... And the main thing was that everybody who had told me not to do it, was not able to manage it. (...) makes me wonder why should I do it? or why, how can I do it if you couldn’t do it? (Alex, age 20)

He was the only respondent to speak of treating his body with respect in relation to sex. References to male bodies made by the other young men focused mainly on fitness, strength and strong sexual desire.

Outside the realm of religion, Alex spoke of a UK youth culture that did not value sex as particularly serious, especially for men who were expected to have many casual partners. The focus of this youth culture existed in contrast to the religious teachings he described in terms of treating his body with respect.

*I’ve always believed it’s just the culture here. Naturally your culture in this country is just have as many links as you [can] have. (Alex, age 20)*

Key informants conceded that religion could have an impact on sexual behaviour but they were also aware that it did not necessarily stop young people from having sex even if they reported a strong faith.

Among young people in particular, it was the combination of strict cultural views about sex and religious teachings that were hypothesised to make sex something to be taken very seriously. This was discussed by key informants as well in explaining the more liberal views among some Caribbean families compared to African ones despite the strong Christian influences observed in young men from both backgrounds.

Strict cultural views about sex were associated with greater disincentives for young people to have sex but also with a greater need to hide any sexual activity that was happening. This could then make condom use more difficult because sex had to happen secretly making it more likely to happen in unsafe spaces.
6.8 Sources of and gaps in support and advice

Young men discussed the influence of local norms, family relationships and religion both directly and indirectly to different degrees. However, when asked directly about sources of support and advice for sex and relationship related issues, self-reliance was considered key as an extension to its importance in their daily lives as men. Young men said they relied on themselves, either out of necessity or as an additional choice to the options of approaching older brothers, uncles, friends and older men on the estate.

Discussions about sex and relationships were mainly to be shared with friendship groups rather than parents. Young men spoke of taking example about how to interact with young women from the older boys around them particularly when they were younger. This helped to instil ideas about gaining peer admiration for being able to seduce young women and to juggle more than one at a time while also relieving any feelings of guilt about such behaviour.

*I think you see how other people operate, and especially if they’re older than you, and if you see how they operate, you know, I want to be like that... I want to have that, because if they’re getting the respect, if you can see they’re getting the respect from the way they’re acting, you’re going to copy, whether it’s right or wrong. So I think I was influenced, but I wasn’t the only one influenced, I think there was a lot of us influenced.* (Jay, age 22)

Few expectations were reported by young men from parents in terms of relationships or sexual behaviour and among them were particularly unhelpful ones; for example, Jamiel mentioned his father simply expecting him “not to be gay”. Other young men described mothers telling them not to have sex in the house, warning them not to bring babies home or about opportunistic girlfriends. As described previously, advice to be suspicious of women was also passed on by various family members, mainly fathers and uncles but also mothers.

Friends were an important source of information and a source of experiences to learn from. While they were valued as options for support, young men were also aware they could exaggerate or lie and create pressure particularly around the time of first sex.
Young men reported sex without condoms and sex with multiple partners into their mid-20s and described taking different paths to gain their knowledge about correct condom use, the reality that anyone can have an STI, the increased risk of STIs with multiple partners and the possibility of getting an STI through oral sex. These paths involved advice, personal and friends’ experiences of STIs as well as internet searches and sex education TV programmes.

6.8.1 Unmet needs to support young men at early stages of sexual trajectories
The idea of learning through experiences was proposed by young men in response to questions about what could have helped them when they were younger. Some young men who had not received helpful advice about safer sex and relationships felt they would have listened to it had they received it. Others suggested that it was sometimes necessary to go through experiences in order to learn. Such claims were made with the acknowledgement of the possible high costs including STI diagnoses and unplanned children. It was a view expressed mainly by young men who admitted to ignoring the advice they had been given.

Some of the young men who identified excessive peer influence among young black men, particularly in terms of pressure to have sex at a very young age, suggested that the ability to be less influenced by friends and care less about their opinions would have helped them in terms of advice and support when they were younger. However, among them uncertainty was also expressed about whether that they would have listened to advice about it, had it been given to them.

In response to being asked about what could have helped him when he was younger in terms of sex and relationships, Andrew proposed that living in another area would have probably meant having sex at a later age and having fewer partners.

*Because that [living in this area] makes you go out and want... it’s like pressure in that sense that you have to go and you have to have a lot of girls and you have to do this and you have to do that. And I reckon if I lived in a more... an area where sex wasn’t such a big issue, like in a more white-dominated area where it wasn’t a big thing maybe one person [was enough] and done, then (...)... I don’t think I would have had sex yet. (Andrew, age 17)*
In his explanation, he associated the excessive importance given to sex in his area to it being predominantly black. This was also linked to deprivation in the way that white areas were associated with being affluent and black ones with being poor. It also speaks to ideas about sexual risk environments.

Young men who described relying on themselves out of necessity believed that having someone to talk to and being given advice would have been helpful. It was particularly some of the respondents with absent fathers who felt strongly that their presence could have helped them.

Where do you think some input would have been good?... Either from school or from somebody or having somebody to talk to?

IE  Probably my dad.

IV  That would have been a good? And what would you have wanted to know from him?

IE  Something. Anything. I don’t know. He could have told me how to put on a condom. I don’t really care just as long as he gave some sort of input.

(Tion, age 21)

Jordan also felt let down by an absent father, his mother and her partners. He described them attending solely to his very basic survival needs and was of the opinion that some caring, guidance and advice about wearing condoms would have helped him to avoid acquiring STIs. He seemed to overestimate the difference his father or a father figure may have made by suggesting he would have achieved more in school and avoided STIs. However he described simple information he felt would have helped him such as reassurance about wet dreams.

At least when you start [puberty],....the parents, with girls they obviously have to have that talk with their mum because they will start bleeding and they won’t know, where is this blood coming from, why is there blood? or whatever. So, obviously that would get told, but what about the men telling their kids look, it’s all right to have dreams, whatever, do you know what I mean? (Jordan, age 23)
Even key informants who suggested the importance of fathers were overstated in modelling how to treat young women, conceded that absent fathers might result in reduced sources of information and support.

The focus on gaps in support fell mainly on fathers who had not been available but also on the absence of other positive influences around the young men. This was considered particularly necessary given the visibility of and early exposure to sex experienced by many of the young men as well as the pressure within peer groups in the area. This influence was considered important to counterbalance the young men’s environments that devalued girlfriends and relationships.

*When I was growing up and stuff, I didn’t really have a father – my dad wasn’t really around. So I was really just like growing up on the roads where it’s like everyone’s just thinking like, okay, yes, you don’t really need a girlfriend, and you just need your money and stuff, and girls just come and go.* (Dean, age 21)

Opinions about missing support were not targeted at sexual health services in particular. However, the availability of health advisors at the GUM clinic was not known to all clinic attenders. Jordan who had been treated for multiple STI diagnoses suggested that there should be someone in clinic he could “come in and speak to” about sex and relationship questions but was not aware of the availability of health advisors. He also suggested there should be someone in his local area available for young people to talk to and get advice from considering he had experienced teasing about being a virgin at the age of 12.

The missing support some key informants discussed related more to improving communication and understanding between young men and women as well as support for greater aspirations and feelings of purpose in the UK. The need to improve communication between young men and women was discussed as an aspect of relationships and sex across the different fields of the key informants’ work. This was not just in terms of safer sex but also in order to improve their ability to relate to each other and their expectations from relationships. Another big gap identified by key informants was the need to find ways to increase the self-esteem of women which was considered to have an indirect impact also on young men.
The male development service mentor (KI06) described the transformation he saw among some of the boys who joined his organisation aged 13 being respectful of girls, priding themselves about being gentlemen but then ended up thinking of girlfriends just as a means for sex as they got older. He advocated for the importance of teaching young people about relationships as well as sex since the relationships aspect and emotional aspect of sex tended to be neglected.

Teaching boys and girls separately was not seen to facilitate shared understanding about relationships or to provide opportunities to think about each other’s perspectives. Instead, it was seen to lead to solidarity about one’s own gender perspective in opposition to the other and to heightening suspicion of the other gender.

*I think we need to teach boys and girls together relationship education. (...) I think they need to share views and in fact share experiences and say, look, this is how I am being treated and I don’t like it and it’s not going to get me anywhere. There was this notion that girls trick boys into having children all the time. (...) I think we often teach them separately and leave them to rely on the separate teaching. (...). It is so important for us to help them hear what either side is saying or in fact share it, say “listen”. (KI06)*

**6.8.2 Unmet needs to support young men established in their sexual behaviour**

From the clinic perspective, the importance of making support and information relevant, easily available and accessible was noted. Clinic staff members discussed experiences of reading difficulties among some of the young men they saw which hindered their comprehension of written information. This had implications on the clinic consultations and health promotion materials available.

Key informants discussed a poverty of ambition as a hindrance to young men’s sense of purpose along with uncertainty about their place in society. Some clinic staff members described how despite the presence of both men and women repeat attenders, they noted the recurrence of black Caribbean young men who were not in education, employment or training.
An uncertain sense of belonging was also seen to be a problem for some young Caribbean men in particular if they did not feel British or Caribbean.

There’s almost like, kind of, two sets of young Caribbean men that I’ve come across... There was a set of young Caribbean men, as in born here, parents from there. They, some of them I used to come across had a greater feeling of being British – I am British, you know, I belong here – and you know, a kind of, yes, a greater sense of self... But there’s also a set that seem more, well lost is the word that I’m coming up with. I suppose maybe the practical things, like looking around and if you’re a black African young man that has their parent’s language... and, you know, a greater sense of what it means to be... African background; I don’t know if the Caribbean young men have a sense of what that means for them. What does it mean to be a young Caribbean man? (…) What comes across from them is yes, not having quite a strong sense of self really, what it means to be me ... wherever I am, in London, in the UK now. (…)

There’s a set of them that do, I guess they more identify with what it means to be British so they’re solidly British and that’s, they have that, but there are others, maybe it’s through not quite feeling British but then what are you then? Because you’re not really Caribbean so you’re there, yes. (…) It all ties up together with... the sense of who you are, where you’re going, your attitude to life, your aspirations. It is all tied up. If you don’t really have a strong sense of self, yes, maybe you’re more wavering. (KI05)

Based on beliefs that low ambitions and weak feelings of belonging are detrimental to their sense of self and have harmful repercussions on young black men’s attitudes to life, their aspirations and resilience, these were proposed as areas in which they would benefit from additional support. Those who raised these concerns suggested that a greater sense of self and greater feelings of purpose and ambition could prevent these young men from ending up on a path to exclusion which was considered to have negative impacts on sexual behaviour. These views were based on observations from clinic staff but young men did not express problematic cultural traditionalism or recent migration as negative influences on sexual behaviour. Rather, it was belonging to a particular local area suffering with frustrated people and few opportunities for different
forms of achievement, and a desire to follow local norms that were considered problematic. Internalised stereotypes of hypersexual black men were also evident.

6.9 Conclusion
In this chapter I began the move from the more distal social and environmental context of the young men’s lives in the first two data chapters, to the more commonly examined sexual behavioural risk factors in exploring poor sexual health outcomes. This allows for the partnership formation and sexual behaviour of the young men to be understood within a wider context. This chapter about the young men’s sexual trajectories has presented the development of their views about sex and relationships starting with their awareness of girls and moving on to information seeking, advice from parents and family members, learning from school and media influences. I have outlined their journeys into sexual awareness and first sexual experiences including the influences and pressures experienced during the process.

Puberty was considered a strong trigger for sexual desire and sex along with perceived local norms about the expectation for young men to experience sex between 14 and 16 years of age. Relationships did not feature within these expectations which further reinforced the view of first sex as an achievement and virginity as a challenge to be overcome. Although many young men described a personal desire to pursue sexual experiences, it was also clear that a desire to fit in with peers also played an important part in fuelling this desire. Young men did not report seeking advice from parents but some described getting direct and indirect suggestions to explore different relationships, to be suspicious of young women but also to limit the number of partners and to be faithful to girlfriends. Encouragement for condoms and avoiding pregnancy were given across contradicting advice pushing for fun and restraint.

Sex education in school was not particularly helpful as a result of its absence, late timing and the lack of information about relationships in favour of anatomy. Curiosity about the mechanics of sex was resolved by watching pornography and this source of information about sex was seen as positive for filling a gap but negative in its likelihood to create unrealistic expectations, eliminate emotion and focus on sex as purely a physical act while perpetuating male dominance and female submission. Other media influences such as TV and music, provided mixed messages ranging from idealised
relationships that were seen to be irrelevant to their lives to enforcing the taboos of cunnilingus and anal sex.

Some young men were better able than others to feel in control of their choices. There were also variable levels of alternative options in terms of sexual exposure, opportunities to avoid feeling stigmatised for being a virgin and giving in to pressure. Within the intersectionality framework, this fits into the restrictions these young men experienced as a result of limited options for masculinity, the early expectations of sex in the absence of relationships, and the perpetuation of the idea that girlfriends are a source of sex and a transient element of their lives.

Young men described different levels of support in relations to sex and relationships. Being able to ignore peer pressure was considered an important skill. Some young men were forthcoming in describing how they ignored the advice they were given from parents and family members suggesting instead that learning form experience was necessary. While aware that it was through friends that the pressures of the local norms were experienced, young men still valued them as a source of information and support. Some combined advice and the experiences of friends to help them. Others found the absence of fathers and of alternative support to counteract the local pressures, to be detrimental. Key informants suggested that improving communication and empathy between young men and women was an important but often overlooked aspect of helping them develop healthier interactions and relationships. They also linked the negative repercussions of having limited ambitions and feelings of exclusion as influencing sexual behaviour.

In the next chapter I will present the sexual behaviours and partnerships reported by the young men which explore the relations between young men and women in greater detail as well as the detrimental consequences for the young man resulting from the interactions of their local social and structural environments and identity circumstances described in the first two data chapters.
Chapter 7 Sexual partnerships and sexual behaviour

This final data chapter describes the young men’s attitudes towards sex, their definitions and experiences of different types of partnerships and their explanations and personal motivations for these. Partnership histories included casual partners and girlfriends and were discussed using a timeline. Relationship trajectories were described from the enthusiasm to have sex, to learning about interacting with sexual partners, living through different partnerships and ending them. This provided an opportunity to examine the sexual risk-taking behaviour within different partnership contexts. The chapter includes a discussion about young men’s reasons for using condoms and visiting GUM clinics which comprised their safer sex practices influenced by a desire to avoid STIs and unplanned pregnancies. The chapter ends with details about the perceptions of the young men and key informants about the wider influences on local sexual risk taking within which possible causes and possible solutions for the poor local sexual health outcomes are incorporated.

7.1 Relationship dynamics and the myth of monogamy

Discussions about the types of relationships young men saw around them were mainly negative as they involved seeing people in relationships cheating, bored or arguing rather than seeing relationships that they found appealing. Money problems, boredom and environments which were not seen to present opportunities to have fun were considered to be some causes of the problematic relationships. Young men either spoke generally about relationships or mentioned specific ones involving neighbours or family members.

IV I mean what kind of relationships have you seen around you, growing up?

IE Relationships that don’t really work. (...) Bills, stress, kids, all that kind of stuff just makes them not like each other as much as they liked each other from when they first met. (Nathan, age 20)

Relationships being boring or becoming boring was a problem that concerned young men and many of their proximal relationships offered them examples of masculinity to which they did not wish to conform. They spoke of their mum’s past boyfriends in the context of negative relationships, abusive relationships and men they did not want to be like.
Obviously if you’re in a house where there are loads of arguments, loads of fights and stuff like that, you’re going to take that on board as well. (Jordan, age 23)

Key informants voiced concerns about the negative effect on young men of seeing power dynamics in their families that ended up advantaging men, making them dominant and enabling then to shun responsibilities. They feared it could become an attractive way to operate overriding any feelings of guilt about it.

I think if you’re a child and you see your parent with different partners or being treated badly by different partners or the guy gets to see, “Hey, you know what? I can deal with this girl and just leave because it seems to be acceptable. Because obviously a lot of people do it so even though I may feel bad about it, hey, people do it.” All of that comes into the whole mindset of there being a lack of responsibility. (KI08)

The abundance of skewed power dynamics was also presented as a possible incentive for young men to follow behaviours that ensured they maintained positions of power and control and avoided being victims.

If you look in, back to some of the family relationships that’s how they see, you know, their mum’s partner or their dad being, you know, there’s a power discrepancy at home, and so they just go with that, you know, it’s like, okay, because I've got the better hand in anyway. You know, I'm coming from the powerful position. I'm OK with that, because I don’t want to be where mum is, you know. (...) Because that's all down to like that whole socialisation thing then... And if you haven’t got a positive role model of sort of a couple to see, and if lots of your friends don’t either, you know, it, you're just making it up as you go along. (KI03)

Domestic violence was raised as a problem by key informants. The YOT reparation and early intervention coordinators in particular discussed the negative impact on young
men and women in terms of their understanding of power relations and expectations within relationships, their identity, and general socialisation.

Some of young men’s reflections on the relationships around them and their family experiences, mirrored these observations and fears about the possibility they would recreate the abusive or deceitful circumstances. Jordan described his experience of initially following the behaviour of his mother’s abusive boyfriend before deciding to make a change.

*She was fighting with her partner...Everything is all right now, but back then there were loads of fights and stuff like that, and there was loads of abusive behaviour. (...) I took a lot from that and it was wrong, taking it, growing up and seeing those things, so it tended to have an impact on me as well. But I thought no, this can’t be right do you know what I mean? I can’t be doing this stuff, cheating on women. When I lose my temper, I mean hit her, whatever...So I saw that and I thought that’s wrong, stop, so I got out of it really.* (Jordan, age 23)

While some young men discussed the negative repercussions of the difficult relationships they grew up around, others expressed positive outcomes from them in that it inspired a strong desire not to repeat them.

*A lot of mothers grow up as single parents, that’s all I ever saw around my family and friends. (...) The only way it affected me, I wanted to be the total opposite from whatever I had seen.* (Lawrence, age 24)

There were few references to long term relationships or marriage in the young men’s lives. While some positive adult relationships were identified, it was parental relationship breakdowns that were particularly influential along with cynicism about people being committed to their partners.

Key informants also spoke of the pessimism young people expressed about relationships. It was conveyed to them by young men and women. This disillusionment with relationships resulted from a combination of their own experiences and what they
saw happening around them, among their peers and among adults including their parents and other family members.

*Everyone is brought up differently, so if I was brought up with like my parents together, obviously I’d think, oh yes my parents made it work, so I should be able to make it work. So, I believe in love, I believe in love, I believe in love. ‘Cause like I think my parents’ relationship broke down early, and I’ve gone through situations where the relationship is just breaking down. So, I just think – that just makes me think, ah, what’s the point of relationships?...Because, I don’t know, it’s just the environment that you’re probably brought up in.*

(Daniel, age 23)

With the exception of Michael, who spoke of an amicable separation, those who witnessed the breakdown of their parents’ relationships as children described growing up in a household with arguments or experiencing difficult separations that affected them emotionally. For some it also affected their confidence in their ability to maintain relationships leading to decisions to avoid them for fear of going through similar difficulties.

*I’ve seen bad relationships in my, like family…(...) Like my mum and my dad, that affected me bad because… like I didn’t want them to leave each other because I wanted like one of those families. But she seemed happier without him and he seemed happier without her, so therefore it worked both ways...In, oh I don’t know, it just affected me like I felt kind of mad, upset, and I was like sad at the same time, I felt all kinds of emotions. (...) That's what I'm afraid of, that arguing and separation and all of that, that's why I didn't really get into relationships [before] because I didn’t think I’d be able to bear that.* (Jason, age 18)

Michael described a more positive experience of his parents’ separation and more positive relationships around him. He lived with his mother, uncle and grandmother but still saw his father regularly even though he had started a new family; he was aware this was determined by the fact his parents had remained on good terms. Despite this he said he was unable to trust young women because he had succeeded in seducing some who
had boyfriends. He suggested that unlike his peers he was realistic about the possibility of being cheated on as well. As a result, he had girlfriends he did not have sex with and his sexual partners were young women who were more than friends.

_I tend to talk to a lot of girls more than settling down with one because... I think different from how other people think, because I think if like I see some girls that cheated on their boyfriends with me like... my girlfriend could be doing this as well. (...) So I think I can’t trust no girls at all._ (Michael, age 16)

### 7.2 Sex

The importance young men gave to sex varied despite their many descriptions of concerted efforts to engage in sex with young women. It was described to be very important, quite important and not important but this did not correlate with feelings about getting more or less out of sex because it was associated with feeling good, happiness, providing confidence and relieving stress.

_I feel happy that another girl’s willing to give herself to me, you know, so it makes me feel happy. If she wasn't willing to give it to me, then I'll feel... I wouldn't feel... my confidence would be low._ (Marcus, age 21)

Sex was also described both as a way to show feelings towards a partner and as a good physical feeling without emotional involvement. Positive physical aspects were cited by all respondents while opinions about emotional benefits and emotional involvement varied.

Despite being enjoyable, there were also admissions that sex was a fast thing and that it could be meaningless. Some young men gave greater importance to being cared for.

_I say you rather have a girl that, you know, that can make you happy by doing stuff with you or for you, or calling you all the time, caring for you, rather than sex. You know, sex is just that little bit of happiness, not happy... it's just a bit of something extra. You know._ (Marcus, age 21)
Responses to views about what makes a good lover included descriptions of someone caring, who liked them, was thoughtful, and reliable. Other important qualities related to being loyal, understanding and honest. Some respondents differentiated between sex with a casual partner and someone they cared for. Others referred to sex being better when both individuals want it or like each other making an effort to make each other feel good.

Several men spoke about what they considered the less than exemplary behaviour of young men who lied to young women for sex. They expressed mixed feelings about the deceit. Some said they had never actively deceived young women for sex, for some it was part of their current practices, and others described it as past behaviour. Among the latter group there were individuals who said they were now unable to continue due to feelings of guilt or a new found conscience. A reduced need to use deceit was also attributed by participants in their twenties to older women being more comfortable with purely sexual partnerships.

Bad reasons to have sex included having sex just because you like the look of someone, to get paid for it, cheating and sex through deceit. Concerns about partners enjoying sex were mostly focused on girlfriends although some young men made a case for caring also about casual partners in order to get further opportunities of sex with them and to avoid making them feel used.

Young men believed the responsibility of allowing sex and enforcing condom use fell on young women, effectively bestowing on them the role of gate keepers to sex. They spoke of respecting women’s wishes but also trying their best to convince them to have sex. This meant it was for young women to stand their ground and they were judged on their ability to do this.

There was a sense of acceptance or resignation even from key informants that "boys will be boys" and that it is girls who have to control their boundaries.

*I think it starts with the females, and I do believe yes, boys will be boys because boys have two heads, they have one up here, they have one down there. (...) The*
Key informants reported finding that while many young women spoke of giving importance to first sex occurring with a partner who cared about them, sex after that was not necessarily given similar emotional importance. So ensuring subsequent partners liked them, or that they were not being deceived for sex, became less essential after sexual debut.

Several anecdotes were shared by key informants describing young men treating young women differently according to what they surmised were the different boundaries the young women had established for themselves. The young men took advantage of the lack of boundaries among some young women while respecting those that were set up by others.

There were further observations they described as problematic about the combination of young men who treated young women as “girls that are just fair game, for anybody” and those positioned in opposition as “girls that are out of your league”. Key informants discussed with concern circumstances in which young women seemed not to know how to respond or had come to accept this entitled behaviour from young men in which they did not have control over their own bodies.

7.3 Sexual partnership options and ambiguities

Clear distinction were made by young men between two main types of sexual partners, girlfriends with whom they had relationships and “links” who were casual partners. Although some young men expressed strong views about not cheating on girlfriends, they all acknowledged the absence of exclusive sexual partnership expectations with links. Relationships with a girlfriend were described as exclusive in theory, but this was not always the case in reality. Links were defined as non-exclusive sexual partners and resulted in partnerships in which both individuals were free to have sex with other people. While some young men reported multiple overlapping partnerships, others had sequential links. One night stands were a third type of sexual encounter reported by some young men. They involved sex on one occasion, with a partner without exchange.
of contact details or future communication. These featured much less than links within partnership histories.

Young men met the young women who became sexual partners through friends and young family members (e.g. cousins), during their daily routines (in the local neighbourhood, at school, through work, on the bus, on the street, at parties and via the internet- on social network sites such as Facebook, Beebo and blackberry pins). One night stands involved primarily young women encountered at bars, clubs or on clubbing holidays.

Different ways of approaching young women were described based on expectations of the outcome. Links were associated with a focus on physical appearance and sex, while a girlfriend elicited a sense of pride and was someone whose company was enjoyed. The level of effort young men reported making, and the levels of passion and emotional involvement they devoted also depended on the partnership type.

In distinguishing between links and girlfriends, judgements were made about young women’s interest in sex, the “sexual vibes” they gave off and how willing they were to have sex. Ironically the trustworthiness of young women was sometimes judged by testing them. If they rejected the young men’s sexual advances, they were deemed girlfriend material. The ease with which a young woman agreed to sex was also considered a measure of her worth in terms of what kind of young woman she was and how she would be treated.

Because I choose girlfriends as how easy I can have sex with you. If I can’t... if it’s not easy for them to have sex with you, and I see you, and I like you, I’ll see you more as a girlfriend material. But if I can have sex with you without being... without you being my girlfriend then...[she becomes a casual partner]. (Michael, age 16)

There was also an assumption that how a girl carried herself or dressed could help them identify the characteristics that would influence their approach and expectations. Interactions started with talking - whether in person or over the phone - and this continued for different amounts of time based on the intended outcome.
It was straightforward for all the young men to communicate the differences between a girlfriend, a link and a one night stand. The labels were meant to help maintain distance and determine expectations. However, the experiences, they described suggested uncertainty about how young women perceived their positions. Partnerships also rarely existed clearly for both individuals under the tidy labels they defined. My questioning about the ease and reality of controlling emotions by labelling partnerships led to anecdotes about blurred lines.

Incidents of overstepped boundaries were reported by young men as problems with links getting too attached and making demands of them, as well as personal experiences of getting attached to links and feeling jealousy about other men’s attention towards them. There were also occasions when links became girlfriends or young men were unwilling to admit how important a partner had become to them. Marcus spoke about a friend who insisted his partner was just a link when she clearly was more important to him based on his actions.

_He believes that they’re not really going out, but he's gone beyond that boundary. He's taken it too far (...) they speak to each other on the phone, every day, for like an hour, and everything like that. And they go out weekends to do stuff. He's met her family; she's met his... For us, he's crossed the line now of the links... My other friends, we will just meet up with a girl, we don't meet the whole family._ (Marcus, age 21)

The confusion existed even when both individuals had been clear about the relationship status at the beginning. Young men seemed to believe they could compartmentalise their feelings but based on their accounts were not always successful.

7.3.1 Girlfriends
Girlfriends were held in higher esteem than links. While links were discussed in more physical terms in relation to attraction and satisfaction, girlfriends involved emotional investment and mutual support.

_The thing is, with a relationship it's much more emotionally attached, than physically... with links it's much more physical. And with the relationships you_
start to, and you tend to... start to love someone, and even at my age, I still don't know what love is, but you feel that you love someone. (Emmanuel, age 18)

Young men spoke of showing emotions, showing their true selves and sharing their concerns with girlfriends. This also involved exposing their vulnerabilities.

With a relationship or a girl that you put effort into, you’re being nice too, you show the nice side of you. You tell her a lot more about yourself, what you’ve been through. There’s a lot more passion there and a lot more feelings. (Andrew, age 17)

Treating women with respect was important to many young men in relation to girlfriends. It involved being truthful, portraying themselves honestly and not pretending to be in a relationship just for the sake of pursuing opportunities for sex.

You don’t lie as much [to a girlfriend], you don’t really have to create false pretences, you’re not pretending to be something you’re not. You’re not creating the illusion of a relationship; you are truthfully in a relationship with this person, you want to be with this person and not just physically. (Alex, age 20)

Girlfriends were expected to be faithful and to avoid too much male company. This was in the “hope that she’s just going to be all yours”. They were also expected to be the kind of young women who avoid giving in to sex easily. This seemed to be indirectly an effort to avoid being cheated on. There was a greater desire to take time to get to know a potential girlfriend and to spend time with her instead of just focusing on sex. The young women desired as girlfriends were those seen to expect more from their partners. This was explained by Andrew to give him greater confidence that as a result of higher expectations, they would refuse the advances of other men who just wanted casual sex. Here again, there is an element of attempts to minimise betrayal.

7.3.2 Links
While links featured in all the young men’s sexual histories, girlfriends did not. Generally, a link was seen as someone to call for sex. Most young men described
interactions which involved phone conversations in between sexual encounters. The level of respect given to links varied: from young men who said they did not care about them or about their sexual pleasure, to those describing them as someone to talk to or a friend with benefits. Those who described links as friends or saw them as an alternative to relationships spoke about them with greater respect than those who considered them just a means to satisfy their sexual desires.

*Links are someone that you don’t really care about. It will happen, you’ll beat it [have sex] or whatever(...) and then it will be done. On a dare or...(...) And then you’ll have sex again and again. And it’s just numbers.* (Andrew, age 17)

Despite claims that there was a mutual understanding about the casual status of “links”, young men admitted to certain levels of deceit or omissions of the truth. For example, they described being purposely ambiguous towards partners in order to maintain a casual partnership. It suited them because they gained sexual partners they considered casual who were not having sex with other men. It also meant the young women might assume it was, or hope it would develop into, something more.

*Sometimes she’d think that we’d be in a relationship obviously, but to me I’d know it was not. It was just a link so she wouldn’t be sleeping with anybody else.* (Moses, age 22)

Further doubt was cast on the claims about casual partnerships understood as such by both partners by young men’s descriptions of past experiences. Marcus for example, explained how he and his friends shared similar views about how to have relationships but also discussed feelings of unease about his behaviour along with accounts of retaliations experienced by some of his friends, suggesting that young women were being deceived.

*I've learned that from past relationships. I say, playing the fields is better if you're doing it at the 70% level, not when you're trying 20% one-night stands. That's just one night fun. That's it. But if you're doing it to a certain high level, going over, calling each other up, text each other. But the only problem is what you're doing for her you'll be doing it to another two other girls. That's the only problem.*
IV Yes, and how do you feel about that? Why do you say it’s a problem?
IE Because it’s not good to them. It’s not good to be playing the girl’s emotions, making her think something, because, but you just can’t help it.
IV Why can’t you help it?
IE Well, I can’t help it, and my friends, most of my friends, can’t help it.
IV Because…?
IE Because we just see that’s how it is. (Marcus, age 21)

Young men described using flattery, keeping the partnership undefined and manipulating the truth to leave room for misinterpretation in their favour in order to have sex without committing to a relationship.

IE Sometimes I say it straight, it’s all I want [sex]. Or sometimes I would say “I like you,” but I like them in the sense they're a nice person, or I like you, you have nice features. But relationships, I don't say anything along those lines.
IV So you don’t lie and say I want to be with you?
IE I’d say, “It might happen, it might not happen, there is a possibility.”
(Aaron, age 20)

Young men attributed their use of deceit in the past to being young and selfish, to the consequence of having little success with women by being truthful and nice, and to behavioural changes they made after getting hurt in order to avoid attachment.

Some young men were able to completely disassociate sex and emotion for their partner, so they spoke of having no feelings for links. Others felt they had some attachment to all sexual partners even if they were casual. There was agreement however that links were to be kept at a distance and were not to be fully invested in. Opinions about links varied both between respondents and at different ages within individual accounts. Links were spoken about and treated with little respect but could also be seen as the initial stages of a partnership that might then develop into something more.
Links were not restricted to short term partnerships but could take the form of ongoing relationships for over a year. Marcus and Dean had children with long term links but this had not changed the young women’s positions.

Again, young men drew blurry lines in terms of what they considered to be deceit and opinions about what behaviour was acceptable and unacceptable. Common disapproval was voiced about pretending to love someone. This was recognised as something both young men and women did but was also described as excessive dishonesty.

IE  Until I feel I actually love someone, I won’t use it. So I won’t use it like unnecessarily.
IV  Okay. So you don’t use it as a way to get the links?
IE  No, no. Like a lot of guys do, but I don’t. I don’t play with people. The one thing I don’t like to do is play with people's emotions to be honest. I don't like playing with people's emotions. It happens, but I try not to. (Emmanuel, age 18)

Lies of omission were deemed acceptable in pursuing different partners without telling them about each other. Pretending to like someone and lying about considering her a girlfriend was contentious. Circumstances in which casual partners were shared among friends were discussed by some young men as were direct requests to share links. These were both personal experiences and occurrences within friendship groups.

Many young men described scepticism about relationships and a loss of faith in them. They explained their views by referring to negative parental relationships as well as personal and friends’ experiences of failed relationships and betrayal. This made partnerships with links more attractive than having girlfriends. Links were discussed as an alternative to girlfriends which reduced young men’s vulnerability to emotional distress at the end of a relationship. Keeping a distance, having lower expectations and defining a partnership as casual were also believed to enable them to control their feelings and avoid getting too emotionally attached.

I think you can be hurt, but I think you... it’s easier to get over it because you know it’s not a relationship. So, knowing it’s not a relationship you sort of have
to hold back. So, it helps you telling yourself “We’re not in a relationship.” (...) So, you still get hurt but it’s not the same effect. (Daniel, age 23)

Decisions to avoid relationships and a preference for links seemed to be the outcome of conscious direct tactics as well as indirect ones to avoid vulnerability and loss.

IE If they [link] start liking me we just cut it off or I cut it off, stop catching feelings. Or if I start catching feelings with them I’ll do the same thing.

IV Why? Why not let it go further, if you like her obviously?

IE I don’t know. I’m a bit funny. It’s like all my emotions and stuff, it’s just a bit, even up to this day I’m still kind of funny about that kind of stuff.

IV What do you think it is?

IE I think it’s probably just afraid of getting hurt most probably. (Dean, age 21)

Andrew described reconsidering relationships after witnessing how deeply a friend was affected by a bad breakup. He did not want to end up in a similar position. The friend was betrayed, could not understand why and ended up being resentful of women whom he subsequently decided to just use for sex.

Seeing what happened to him after, opened my eyes...Because his break-up, like he changed. (...) His perception of girls changed, he wouldn’t leave his house, like...she destroyed him. (...) He treated her well and everything, and didn’t do nothing wrong, and then she must have found another boy and left him. He was crying for like three months. The whole summer he didn’t leave his house. (...) From then on his perception of girls were like, all girls are the same, they’re sluts, they’ll do this, do that. And then he just decided to do what he wants with any girl and he didn’t care. (Andrew, age 17)

Marcus explained that he currently opted for several casual relationships rather than one serious one, because he feared settling down could ruin a relationship and that getting too attached to one young woman would make him emotionally vulnerable. He was also honest about wanting to have fun without feeling guilty.
You're going about 70%, 80%. Anybody not going the full mile. Those ones are what you call links, and those are good, because, you know, you can speak to them, ring them, you can go over to their house, you can get hugs, you can do that, and then still not be in a relationship. (...) Sometimes you just want to play the field, you know, you just want to... Sometimes they know but you know, some girls obviously will get attached to you, and you do find yourself liking the girl, but you still keep her at arm’s length. (...) so you can see other girls without feeling bad. (...) Sometimes, you know, the girl can still be attached to you the same way as in a relationship but, you know, it’s on your conscious that that’s not what the situation is. (Marcus, age 21)

Finding girlfriends was challenging while links provided easy sex. Alex explained how he had moved from being a “sweet boy” who treated young women well and had little success, to one who lied and tricked young women and got sex. He was aware it was not right to be deceitful but he was more concerned about succeeding to have sex.

For some young men, these experiences with different women also provided training for when they met the one they wanted to settle with. Key informants made similar suggestions that links were used by young men to gain experiences in preparation for girlfriends they really cared for, or as a way to have sex while searching for the right girlfriend who fulfilled their expectations.

7.3.3 Concurrency
Overlapping sexual partners and the associated increased risk of acquiring an STI were a reality for many of the respondents but the types of concurrent partnerships young men described and their opinions about them varied both between individuals and at different times in their lives. Young men maintained concurrent partners when they were having sex only with links as well as when they had girlfriends.

Based on how links were defined as casual sexual partners, those partnership could not be assumed to be monogamous. However young men were not always aware of the opportunities this created for concurrent sexual partnerships and of the associated STI risks. They did not think too much about their links’ other possible partners or described
actively blocking it out, having sequential links as well as moving back and forth between links over certain time periods.

**IV And how do you feel about them [links] having other men?**

**IE** Nothing really. (…) I think when you’re linking…you ask “Are you seeing anyone?” and then see what they say. Most people say, “no”. So, once they say no you just block it out that they’re seeing anyone else and you just do what you do even though they may be seeing someone else. (Daniel, age 23)

Among those who were aware of the possibility of STI transmission, it was not necessarily a deterrent to sharing links. Some young men avoided multiple ongoing links and opted for sequential ones but were still exposed to the increased STI risk from these links’ concurrent sexual partnerships. The fluidity of casual partnerships, as young men moved between two or more links, increased opportunities for STI transmission along with the frequent partner changes involved. This was not necessarily seen as actively maintaining multiple sexual partnerships but taking up opportunities for sex with links when they arose.

Concurrent partners were kept secret from partners of ambiguous status and from girlfriends. Opinions varied about the need to be faithful to girlfriends and this was not based on the length of the relationships or having children. Seven of the young men had girlfriends and the length of the relationships ranged from three weeks to eight years. This included young men who had sex and “little relationships” with other women during their relationships and others who did not believe in having other partners on the side. The decision not to cheat was a long term view for some young men and for others a new development in their current relationship.

Key informants suggested there may be a greater tolerance of, or a resignation to concurrent partnerships among some young black women while discussing the high STI rates among young black Caribbeans.

*I see a differential tolerance of variance in fidelity [among young Caribbeans], which, I think, in the majority of instances it is either explicit or implicit. But I think that a small proportion [of young women] actually are truly
naïve; but I think that a lot of our young girls learn, or teach each other very quickly, that you just have to tolerate that, and they seem to tolerate it. A lot of the young boys seem to be of the opinion that that’s actually sort of what, how they must behave, whether they necessarily want to behave that way, or not. (...) I think there’s different attitudes to sexual behaviour. I can definitely see a differential tolerance of more than one partner in relationships, or the acceptance that actually sort of on, from both men and women, that you can’t absolutely be sure of the fidelity of your partner. (...) I think the balance is set differently. (KI10)

7.3.3.1 Internal pressures: Curiosity, temporality, temptation and lack of control
Curiosity, the temporary nature of relationships and beliefs about men’s sexual natures were personal internal influences that led to concurrent partnerships.

_IV_ So what age would you say that you had…you felt that pressure [to have multiple partners]?_

_IE_ Around 15, 16, or 17 …I never felt pressure, I just was curious, see what I’m saying? Just from curiosity. (...) Things were still all right [with girlfriend] (...) Seeing a girl, you like her, you want to know what she’s all about. That’s what it is, it’s a curiosity. (Adrian, age 20)

Multiple partners were also described as part of relationship pathways during the period when one partnership ended and another one started. Additional partners to a girlfriend were excused by the temporary nature of relationships among young people.

_But if you know yourself that you’re young and, you know, relationship has a sell-by date, an expiration date, then you think to yourself, I don’t really need to be that faithful because I know at some point this is going to end._ (Alex, age 20)

The idea of temporality, curiosity and temptation were often linked to being young, a desire to explore and the presence and availability of many young women, particularly during college years. The revealing way some young women dressed was also discussed by young men as exacerbating sexual urges and they considered it natural for men to pursue these urges leading to multiple partners.
It’s like a kid with sweets or toys or whatever. It’s just there in front of you. As I said, we go out, you see like half naked people in front of you and I don’t know. I just thought it was natural to me for a man to like really be there and that. But it’s not really, because if you are in a relationship, it doesn’t even make sense you doing that. (Jordan, age 23)

Jordan referred to his concurrent partners as “a bit of fun on the side.” This was the view held even among his “motivated friends” and played into a general belief that men need some fun outside their relationships.

Everyone likes a bit of fun now and then in their life, do you know what I mean? It’s not really having fun with the person that you’re supposed to have the fun with, because it’s different. (Jordan, age 23)

Although some young men did struggle with their justifications at times and suggested growing out of believing it was acceptable to use male urges and temptation as explanations for maintaining multiple partners, others continued to explain their behaviour in those terms into their twenties. Young men who described changing their views were not necessarily able to change their behaviour easily. In addition to general comments about the need to control male sexual desire, Aaron described his inability to control himself as a problem which led him to avoid relationships and maintain concurrent links instead. It was challenging to change what had become his way of operating, a habit which involved difficulty turning down sex. He was uncertain about how to change.

I still have to learn to control myself. So it kind of affects my relationships because I could be with a partner, but then I’ll have another sexual partner. So all my energy is going in to two different directions. Yes, I just don’t know how to control myself because I’ve been doing it for so long. (Aaron, age 20)

Strategies to reduce temptation were described by young men who wanted to make a change; however, they did not always succeed. These focused on staying away from places where they could meet many young women and places that provided
opportunities for sex. For example, by avoiding invitations from young women which involved being alone in a house, by avoiding going out or going to parties and by staying off internet sites where they met young women.

Some young men did not see having partners outside a relationship or the deceit involved, as indicating a lack of commitment to a girlfriend or as detracting from their ability to be “a good boyfriend”. The importance they gave to hiding these additional partners and maintaining trust however indicated their awareness that the girlfriends would not share these opinions. Emmanuel for example, did not find his betrayal problematic since his girlfriend did not know about it and had trusted him. He presented her trust as an indication of how nicely he had treated her.

So this girl dumped me, I was a good boyfriend to her, apart from the fact that I had links, but she never knew about that. I was actually a good boyfriend. (...) I treated her right and everything, I treated her like a queen, and all that. And she didn’t know [about the links], she trust me because I was so nice.

(Emmanuel, age 18)

In contrast, Gabriel described his behaviour as “bad” when he had a link during a relationship. He admitting he would not like it if it was done to him but also that he did not feel unhappy about his behaviour. Young men were aware that having other partners in addition to their girlfriend was not acceptable behaviour for most people but had focused at the time on the fact the girlfriends did not know, on their strong feelings for their girlfriends or on their efforts to avoid hurting them by keeping it a secret.

7.3.3.2 External pressures on sexual partnerships: Peer group influence on sexual behaviour
Over the years young men described friendship groups being very influential. There were groups in which the norm was sequential links and not cheating on girlfriends, and others in which the norm was having more than one partner irrespective of girlfriends. These norms did not necessarily coincide with the views and behaviours of the respondents. However, having friends for whom multiple partners were routine provided more opportunities to do the same as well as direct encouragement for it.
Those are the type of people that have been told [that I have a girlfriend]. They would know who the girl is and everything, but when she’s not there and you’re going to a party or whatever, they’d like, [say] yes, “She [some other girl] likes you”, or “Try and do something with her,” or whatnot. (Andrew, age 17)

The pressure from friends to have sex with lots of young women, influenced even young men who said they believed in being faithful to girlfriends. Respondents described being teased for their decision to be faithful, and friends insisting they go out with them to seek young women. Their ability to resist these pressures varied both between individuals and at different times in individual lives. School years were described as particularly problematic periods in terms of giving in to peer pressure and the additional unhelpful local norms in which exclusive relationships were not valued.

We’re in an area like, no one has a girlfriend. But that person, that one person who has got a girlfriend, they just get, like they just get told “You’re moist [weak]”...for having a girlfriend and for being faithful...not now because we’re a lot older now, but yes, when you’re still in school and stuff. (Dean, age 21)

Different groups of friends or even different friends within a group had distinct opinions about how to treat young women but there were also some overarching concerns. The latter revolved around ideas that young men should not get too attached to young women and that they should be having sex with different girls.

Well, they [different friends] always say different things. I've got one friend, who always says, “Don’t get attached to girls.” And I've got another one that always says, “You’ve got to show them the ghetto side,” and you know what I mean? He always says that. But not in a bad way. (...) You can't just be nice, nice. You can't just be like, “Are you all right?” Calling them every day. You’ve just got to be mean, you know what I mean? We’re not horrible, just mean with them. (...) Obviously the messages that we always really stick by is “try not to stick to one girl”. (Marcus, age 21)

In contrast to his college friends described above, Marcus’ two close friends advised him to “find one girl, but try and not be lovey-dovey”. Lastly, his estate friends did not
even talk about relationships but told stories about sexual encounters in their flats focusing more on one night stands. Shared attitudes towards sexual behaviour and relationships were reported as part of wider lifestyle circumstances or choice.

There were few accounts of friends helping the young men to be faithful but plenty of examples of them advising against getting too attached to young women, staying with one partner and being too nice. Young men claimed the teasing among friends about falling in love and having a girlfriend was done with no harm intended but then shared personal experiences into their late teens and early 20s which indicated that it did affect decisions within relationships into adulthood. For example, Marcus downplayed the effect of the teasing from friends, but went on to blame his long-term link during a relationship on being teased by friends that he was too scared to cheat.

IV  So did you have other extra partners while you were going out with her?
IE  Yes. Due to peer pressure, I'd say. Because, you know, it was more of like friends was like saying, “Oh, you only have one, you’ve got a girlfriend, and you’re too scared to cheat”. I’d say that’s the main thing. (Marcus, age 21)

Peer influence also took the form of behaviour influenced by a desire to receive recognition from peers for being able to attract girls. Young men enjoyed the praise while also expressing some reservations about it.

They’ll [friends] see loads of girls trying to move to me and chat to me and then they’re thinking; this guy’s... like a G, this guy’s getting all these girls... So obviously you’re thinking, yes, yes, that’s cool isn’t it? Look at me. But obviously I know it’s a problem... (Darren, age 19)

Some young men held young women partly responsible for hindering their attempts to resist temptation. These young women were described as behaving like men in their determination to get what they wanted and pursuing young men while disregarding their girlfriends even when they were told about them.
I’ve been approached at parties where my girlfriend’s been there, you know, and I’ll be like, “My girlfriend’s next door,” and you know, they’ll be like, “I don’t care.” But girls are as bad as guys nowadays. (Gabriel, age 24)

Although young men spoke about personal choice and behaviour resulting from enjoyment, they were not always able to acknowledge the external pressures that played a part in their choices.

You’d have your older friends saying, “Yes, I done this with this girl, and I’m seeing so and so tomorrow.” And, as I said, I weren’t really a follower, but when you see something just being common or normal, just like...

IV So it was normal?

IE It became normal for me because I would say that I used to have more than one female friend and then it’s something that, it becomes a hobby. It does become a hobby for young men and I guess they do brag about it but I don’t think it’s a pressure thing in the sense of, “Oh you haven’t got any girls, you better get a girl.” (Gabriel, age 24)

Gabriel failed to recognise the external influence in the normalisation of his behaviour and his desire to follow it and start thinking of it as a hobby.

7.3.4 Low expectations of relationships and partners
Communication and trust problems were reported within many personal accounts of sexual experiences and relationships as well as those they saw around them. The difficulties young men perceived with relationships included, being young and too immature for a long term commitment, difficulties resisting temptation exacerbated by friends who encouraged multiple partners, and trouble finding the type of partners they wanted. Complications also arose when they allowed friends and rumours to interfere in their relationships and were unable or too impatient to work through problems.

Relationships were seen to start well but sustaining them was challenging. Marcus suggested that after happy beginnings, young men would get too comfortable and stop making an effort. He explained how through his experiences with different young women, he had learned about compromise and being attentive to the different interests
and needs of partners, instead of just doing what he wanted. Young men who described that sustaining relationships and working through problems required effort also suggested that the many families with children from different partners were a testament to this.

Jordan spoke at length about the difficulties people experienced in working through arguments within relationships and he felt they were giving up too easily. In particular he blamed black men for evading their paternal responsibilities and just leaving when difficulties arose. This was seen to lead to a pattern of behaviour resulting in repeated failed relationships with partners and children left behind. Problems and arguments were discussed mainly as reasons to end relationships but were also described as possibly warranting sex with someone else.

Interactions between men and women seemed to be often framed in antagonistic terms in that there were winners and losers and secrets to be maintained. This was highlighted to some extent by Alex in his concern about having divulged secrets about young men’s behaviour during his interview. He feared these might be now used by young women to gain an advantage over young men.

‘Cause girls are now informed, they will take what I have said and they will now go out there informed and know ok I should be very careful and look very deeply into what he says. And know that ok if this guy, if I’ve said I’m not going to have sex with him I’ll wait and watch his reaction so I’ll know straight away if he’s just after sex or he really likes me. (Alex, age 20)

Young men had plans to settle and have a family in the future but conveyed different levels of confidence about their expectations to succeed. Although some spoke with assurance about their plans, there was little discussion about or experiences reported of working through problems within relationships.

Love and commitment were referred to as important for relationships and to be valued but instead of trying to start working through the friction and arguments which ended relationships, the young men put their hopes on the fact that they would gain maturity with age. They felt this would enable them to settle and maintain their future
relationships. This was described as a goal along with being able to have a family with children from one partner. There was little discussion about new skills to be gained, compromises to be made or anticipated behaviour changes in order to achieve this goal.

7.3.4.1 Fear of betrayal
Young men addressed their fears of betrayal within discussions about their inability to trust young women. For example, Tion believed in commitment within relationships but saw it was not a reality around him and did not see people living up to his ideal. He felt he could not trust anyone and had consequently never been in a relationship.

People... no matter if you’re a guy or a girl, they just play mind games. They make you believe a certain thing, but yet still they’re doing something else which contradicts what they’re telling you. That just leads me to believe that people can’t be trusted. So if you can’t trust somebody, there’s no point going into a relationship. (...) I just don’t put myself in a relationship. I’m not saying it will always be like that, but for now that’s how it is. (Tion, age 21)

Some young men said they did not believe in cheating on a girlfriend. Among the rest, there were a variety of justifications offered for multiple partners and overlapping relationships. These included fears that a girlfriend could be cheating, the possibility that their own cheating would make a girlfriends’ betrayal less painful and personal difficulties resisting sex. Young men who discussed problems controlling sexual urges were more suspicious of young women because difficulty trusting their own self-control also made it harder to trust others.

It affects my relationships the fact that I find it hard to turn down sex with someone, so it’s kind of a control issue for me. (...) I find it hard to trust people. The only person I can trust is myself, or sometimes in fact I can’t even trust myself. So if I can’t trust myself, I’ll find it hard to trust someone else. (...) IV And what don’t you trust about yourself? IE That I’m not able to control myself, so if I got that going through my mind I’ll be thinking, she could be doing the same thing as well. (Aaron, age 20)
The problems with trusting partners and self-control were heightened by young men’s perceptions about young women’s increasing willingness to ignore boyfriends, their opinions about the ease with which women could have sex whenever they wanted compared to men, and their observations that in contrast to past generations, young women now behaved more closely to men in terms of sexual desire and behaviour.

Young men gave accounts of different experiences with young women in the way they viewed them and related to them. The objectives of their interactions changed at different times in their lives as illustrated through their explanations of their views on relationships and their partnership choices. They described treating girls very well and very badly, being hurt and going to great lengths to avoid being hurt.

Some young men doubted their abilities to maintain relationships and discussed concerns about being accepted and liked for who they were. They worried about needing something more to be attractive to young women. These concerns provided further insight into their fears of rejection and vulnerability as well as suggesting possible feelings of inadequacy.

*Most important thing about a relationship is to be with somebody who likes you for who you are. That’s something I just want to make sure that one day if I could find someone who likes me for who I am, not for what I have or can have, but for who I am. (...) That’s the difficulty. I feel like I almost have to have something for someone to want to be attracted towards me.* (Alex, age 20)

Young women were perceived to feel less emotional distress based on the belief that it was easier for them to fall in love compared to men who had to overcome more obstacles to do so. These included enduring teasing from peers and exposing themselves to vulnerability. This created an imperative for young men to hold back.

*For a guy to fall in love with a girl, it takes, you know, double the strength to do that, rather than the girl. A girl normally easily falls in love with a guy, rather than the other way round, you know? So then obviously it took a lot of bridges for him to cross, to do that, you know? It depends, well, in my society [the people that I hang around with] ... it takes a lot of bridges to do that, so when*
that happens, and then she finally leaves you, or whatever the situation is, you're going to be, obviously devastated. (Marcus, age 21)

These views about young men’s heightened emotional vulnerability possibly contributed to their sensitivity to the actual and perceived betrayal of a girlfriend. While young men spoke of making efforts to avoid attachments in order to avoid being hurt, they rarely considered the pain they might be causing their partners. Dean reported cheating on his girlfriend but focused on his pain when she did the same in retaliation. He did not take responsibility for starting the chain of events but suggested that following from the experience of being hurt, he planned to be faithful when he decided to settle with a wife.

Alex explained that there was a limit to the number of times he could take being hurt and suggested that some of the bad behaviour of young men was out of revenge for rejections and for being hurt in the past and wanting to subsequently move to sex without emotional involvement. These observations included less consideration for the consequences of these choices on young women.

Daniel was an exception who despite believing that having links helped him keep emotional distance from partners, also said he did not believe in cheating on girlfriends. He suggested the pain of betrayal helped him form and maintain his beliefs.

*Being faithful is important ‘cause it’s just... I think being in love, just, I mean, it’s a dangerous thing because I think love is like a disease. Because you put all your energy and stuff into the relationship and then when you find out the person cheats or is unfaithful it’s like your world is ending.* (Daniel, age 23)

Unlike the other respondents, he expressed realistic expectations of girlfriends in discussing the possibility they may be attracted to other men but felt the best he could do was hope they would not cheat. He was also unique in suggesting that his experiences of being hurt had made him better able to work through the pain because he was learning through them.
When you’re in a relationship no one’s going to be perfect, like the girlfriend might flirt or whatever, she’s obviously going to fancy someone else. But you’ve just got to hope that she just doesn’t cheat on you. (...) I’ve been through so much like relationships, it’s not the first time, so I’m more wiser. So, if I think someone does cheat on me, I don’t think I’ll be, “Oh my gosh, you broke my heart, how can you do this?” And I don’t think I’ll be in pieces, but I do think it will hurt, but I will get over it a lot quicker. (Daniel, age 23)

Key informants were aware of how young men could be very sensitive but also how sometimes they felt the need to mask this in front of friends or young women in attempts to hide any vulnerability.

In a crowd it might come across that they don’t really care about some of their partners. “It’s just someone, oh, she’s just there,” but then it’s almost like being afraid to be seen as vulnerable or afraid to be seen as caring. So, like, they might express a caring attitude towards one in particular but... (...) I guess not for all of them. Some will still continue with the whole bravado thing but some, if you get to sit down and talk to them, that comes out. (KI05)

7.3.5 Ending relationships
Relationships broke down because of rumours about a cheating girlfriend or the discovery of it. None of the young men were able to forgive the infidelity of their partner even when they had been cheating themselves unbeknownst to her. They also described ending relationships on suspicions of infidelity while none of them reported a girlfriend doing the same to them. Instead, they spoke of being given second chances even when found to be cheating. The unreasonable expectations young men placed on girlfriends seemed to contribute to their sensitivity about being betrayed.

Discussions about the trajectories of relationships were not very positive. Young men spoke of exciting and happy beginnings but some then suggested that young women inevitably left young men and were unemotional about it. There were accounts of girlfriends breaking up with young men for reasons they were unclear about or they considered to be excuses. Relationships also ended as a result of drifting apart, getting bored, having too many arguments and finding new interests. Drifting apart however
was both a reason for ending a relationship and a process through which relationships ended. As an alternative to a clear break it created opportunities for concurrent sexual partnerships. Even when relationships ended, some ex-girlfriends became casual partners and sex could continue once new relationships had started. While young men were able to relate details about the combination of reasons relationships ended, there were few experiences related about trying to resolve problems to maintain relationships.

During discussions about young men’s relationships, it was difficult for key informants to avoid talking about young women and commenting on how some of them seemed to accept certain behaviours from young men that were detrimental to their own well-being. Clinic key informants in particular expressed frustration about how young women would return to unprotected sex with partners who were lying, having sex with other women and had put them at risk of an STI. The need to increase young women’s self-esteem was discussed by several key informants as central to helping them feel better about themselves and stop accepting this behaviour.

Key informants described how despite being angry and upset about an STI scare, young women would not necessarily end relationships but would stay with their partner and likely return for another STI check. Having a history together and familiarity seemed to be given more importance by women than betrayal and STI risk exposure. Unfortunately experiences of STIs did not always result in subsequent condom use, putting the young women at continuing risk.

7.4 Reasons for practicing safe sex
All the young men said they were concerned about avoiding STIs and many had experiences of STIs either in person or through a friend or sibling. These experiences however, were not necessarily taken very seriously. Some concern about infertility and irritation about acquiring an STI were discussed, but friends’ reactions to their infections and their own reactions to others getting STIs were described in terms of making jokes about it. The experience of an STI led to intentions to use condoms moving forward but consistent use was not necessarily achieved even after multiple STIs.
IV How did you feel about that when you found out [about close friends getting an STI]?

IE I just thought, they’re dirty. Once again, I’m not really judging them because things happen. I just laugh at them for a little bit... well, a long time. Then, I just get on with whatever. I’ll always advise them to wear it [a condom], but at the end of the day it’s down to them, really. (Tion, age 21)

Condom use and attendance at GUM clinics were the two safer sex strategies used by young men. They all reported some condom use and the reasons for not using them included decreased feeling and pleasure, moments of weakness, and low STI and pregnancy risk perceptions. Experiences of STIs ranged from having no personal experience (including no knowledge of a diagnosis amongst friends and family), to multiple personal diagnoses. Among those who had been diagnosed with an STI, were young men who thought they knew who they had acquired it from or felt certain about the mode of transmission (e.g. through oral sex because they did not engage in unprotected vaginal sex). Others said they had too many partners at the time to determine when it happened. None of the young men described feeling dirty about it even though some respondents described people who had STIs and young women who had many partners as “dirty”. Concern about forward transmission and efforts made, if any, about partner notification depended on the nature of the young men’s relationships with their different sexual partners.

IV Were you able to tell everyone, or let everyone know through the clinic to get checked?

IE Well, certain people who I don’t really talk to, they have gone their way because of their things and I have gone my way, so it’s just up to them. So, obviously some of them I have spoken to, they have found [out] because we are close and whatnot, and they have gone to check themselves out and that was it. (Jordan, age 23)

None of the young men diagnosed with an STI reported feeling any differently about themselves or feeling the diagnoses had much impact on them. However they described being cautious about telling other people. They waited until the infection had cleared to tell friends and explained that they did not want to broadcast having an STI. The
inconvenience of needing to attend a GUM clinic, of taking medication and avoiding sex for a couple of weeks were mentioned as the negative outcomes of their diagnoses, but they were considered minor irritations.

**IV** And how did that [your STI diagnosis] affect you?

**IE** It didn’t affect me. It just stopped me having sex for a couple of weeks but I just took antibiotics. It wasn’t anything serious. It was just like a NSU so like just had to flush it out. (Dean, age 21)

The main drawbacks of STI diagnoses discussed by young men involved the reactions of girlfriends who had needed to get tested. This had resulted in arguments and being shouted at. Jordan and Darren described upsetting experiences involving their long term girlfriends. There were other young men who reported no real impact on their relationships. This outcome was also noted with some concern by key informants.

**IV** How did that affect things, your relationship?

**IE** Nothing, it didn’t really affect it; it’s just that we... I had to take tablets, my partner had to take tablets and that was it. (Daniel, age 23)

In contrast, STIs were seen as a serious concern by young men who had never been diagnosed with one. Only one respondent reported never having been to a GUM clinic and said it was because he had never had unprotected sex for fear “of catching an STI”. Attending GUM clinics was not spoken about as a big problem but seemed rather to be accepted as a possible consequence of unprotected sex.

Young men reported visiting GUM clinics regularly for check-ups or when they had concerns. These concerns included individual high risk encounters (e.g. when they had sex without a condom with a link), high risk periods (e.g. when they had high partner turnover) or experiences of symptoms. Clinic visits were also made by those who identified their STI risk as low (e.g. during periods of consistent condom use) just for reassurance or as the result of a friend getting an STI diagnosis. Young men mainly attended alone or with friends and occasionally with a girlfriend. They also reported convincing partners to attend a GUM clinic as a proxy for themselves. They would then assume that if she was not diagnosed with an STI, they did not have one either.
Key informants noted that STI infections seemed not to have much of an impact on some of their patients and discussed this in particular referring to repeat attenders. They worried that in focusing on the fact that many STIs are treatable, clinic staff may be underplaying the potential severity of multiple STIs. This created the difficulty of instilling the urgency of avoiding STIs particularly in young men. Further, they suggested that the lack of symptoms for some men, the absence of serious consequences perceived for themselves or anyone they knew and simple treatments may be making STIs feel irrelevant to their lives and trivialising them.

Key informants acknowledged the fact that young women must be considering many factors in coming to the decision to stay in relationships with men who likely had other partners and had passed on an STI; however, they still noted the lack of consequences following on from STI diagnoses with some concern.

[Young women] clearly make decisions based on a whole host of factors, but actually your partner necessarily giving you chlamydia, and that being an indicator of, usually, of a concurrent or other relationship while your relationship is going on, doesn’t seem to lead to the termination of the relationship. (...) We’ll see frequent fliers, and that’s frequent fliers of both sexes, and clearly they’re overlapping and sustained and continued and tolerated relationships, however you want to describe them, that continue... I don’t know what all the motivators for the relationship are. You know, there may be shared children; there may a mixture of other connections that are maintaining the relationship, even when it’s at unreasonable risk. (KI10)

Key informants were also aware that there were young men for whom the pleasure of multiple partners and sex without condoms might be worth the inconvenience of a few visits to a GUM clinic for some treatment. Young men were described to be in positions of power in terms of making decisions about condom use and suffering little consequence within their partnerships as a result of an STI diagnosis.

Many of the young men who we see... their experience is they’re in here ten times a year, but, and they’re reporting multiple sexual partners who don’t seem
to confer any other penalty on them because it doesn’t seem to impact necessarily, and it’s...[if] women who acquired Chlamydia from you, sustained the bother of having to go to a clinic, get treatment for the Chlamydia, and then they’re still back agreeing to have unprotected sex with them. What was the penalty there? (KI10)

Clinic staff noted coming across people with different ideas about their ability to influence aspects of their lives. A sense of fatalism was noticed by a clinic staff member among some patients who did not seem to focus on their ability to influence STI acquisition and either felt it would never happen to them or that they would let fate decide. Such views however were not voiced by any of the young men in relations to STIs.

7.4.1 Avoiding STIs
While collecting demographic data at the start of the interview, I asked respondents to rate their perceived risk of STIs to have an idea about the extent to which self-perception and accounts of behaviour coincided. Based on the behaviours they reported within the interviews, their assessments were either well justified or underestimations of their risks. Having a girlfriends who was assumed to be monogamous was given as the explanation for reporting low personal STI risk perceptions despite having unprotected sex with her. The process of discussing their reasoning for their self-assigned risk perceptions led some young men to modify their initial risk assessment during the interview. Some of them seemed to incorporate their intentions to use condoms to determine risk instead of their actual behaviour. For example, Dean altered his risk perception during our discussion. While I was simply asking him to explain his reasoning for assessing STI risk based on attractiveness, he reassessed himself moving from his initial assessment of medium risk to high risk of acquiring an STI.

If a girl’s saying yes, come and see me, I make sure I’ve got the condom. (…) But at the time I will totally forget what I said and just do what I’m doing, so it’s medium because it’s not high because I would think about it even if I don’t follow through with it all the time. But most of the time, say 75% of the time I’ve got a condom with me.
Is it okay for you not to use a condom or...?

Well, it depends on the girl really because, okay, if the girl is very, very, very nice, you’ll like forget about the condom. I wouldn’t mind. But if the girl’s like not as attractive as you want her to be, you’ll use a condom.

Oh, based on attractiveness?

Yes.

And what does that tell you?

It tells me that I’m a loose cannon and a high risk. (Dean, age 21)

When I asked about the influence of alcohol or drugs on their sexual behaviour, some young men spoke of occasions when they were drunk or high and easier to seduce but no one expressed regrets about these sexual encounters. They were aware that alcohol could make a person less concerned about using a condom, and some described the experience of alcohol making young women look more attractive which led to sex; but the single occasion of sex without condoms reported in relation to drug and alcohol use occurred due to being drunk on a clubbing holiday. Alcohol and drugs did not seem to be particularly relevant risk factors. Some young men claimed to be in control even when drunk others said they made sure not to drink more than they could handle.

There were suggestions, partly in jest about assessing the risk of young women by finding out about their past and using their attractiveness to determine their level of STI risk or whether they were “clean”. These may have been instinctive responses based on past beliefs but all the respondents seemed aware when asked further about them that they were unreliable risk measures. Nevertheless, young men also acknowledged that it was easy for them to ignore their knowledge about STI risks within sexual encounters.

And you don’t think of the STI risk of having someone else?

I don’t think that comes into mind when you’re actually doing something [having sex]. I think it [STI risk] does when it comes to obviously if you think that girl’s clean or not.

You know the information, so ... can she not still have something, and look perfectly fine?

I know. But this is the thing where a lot of us even being educated, [that knowledge] would still fly out the window [during sex]. (Emmanuel, age18)
Emmanuel went on to describe the consequences of reporting unprotected sex to friends and receiving the joke title of “bareback Don” and a sense of status even though he was well aware it was a bad idea.

*So it's just... stupid it's another thing about status, not stereotype, but peer pressure as well. (Emmanuel, age 18)*

A risk reduction tactic described repeatedly by the young men was the intention to use condoms consistently with casual partners but not girlfriends. This provided some reassurance to them but only a few reported succeeding in their plans. Condoms were used with links both to avoid getting an STI and to avoid bringing back STIs from a link to a girlfriend. Condoms provided a sense of safety and a sense of taking some responsibility towards girlfriends.

*At the time, well, when I’ve got a girlfriend I wouldn’t have like links with no condoms, so I'd always use protection. (...) I just thought okay; just have some, that bit of respect. (Dean, age 21)*

Despite claims of concern about it and suggestions that it would be an unfair and undesirable situation, awareness of the possibility of STI transmission from a link to a girlfriend did not necessarily result in consistent condom use with links. While some young men had not considered the possibility of STI transmission between links, others expressed a lack of concern about transmitting an STIs between casual partners because they were expected to take care of themselves.

*You don’t really have feelings for girls and what they think. I mean they’re links or just one night stands so you don’t really care. Obviously if it’s someone like your child’s mum you ought to have some heart. (Dean, age 21)*

Overall the young men reported feeling confident about their ability to use condoms and about their STI risk knowledge at the time of the interviews. This confidence had been absent in the past among those who discussed how a lack of knowledge, for example
about the risks of multiple partners and unprotected oral sex, had contributed to them acquiring STIs.

Young men reporting consistent condom use were the exception despite claims from several young men about aiming for it, particularly after the experience of STI diagnoses. This indicated mixed levels of success in fulfilled intentions. Condoms were associated with vaginal sex and this had led to some respondents learning about the risks of acquiring STIs from oral sex only after a diagnosis. There was still some uncertainty among some young men about levels of STI risk from unprotected oral sex at the time of the interviews.

A desire to avoid STIs and pregnancy encouraged young men to use condoms. For Alex who had never had sex without one, his success lay in planning and being aware of times when sex was a possibility

IE  I always carry condoms with me, yes.
IV  Oh, okay.
IE  If I know I’m going to go to a place where I intend to have sex - I always plan it. If I’m going to have sex it’s always planned – never unplanned sex.
IV  Oh, really?
IE  Yes. It’s always planned.
IV  That’s quite a difficult thing to manage.
IE  No, it’s not actually.
IV  Why not?
IE  Well, it depends, really, because if you know where you’re going and so you can find out where you could have sex. Let’s say, for example, you’re going to a party where there’s going to be alcohol and you know there’s a chance girls are going to stay over, yeah. You’re going to carry condoms because you know, you’ve planned it in your mind that you want to have sex. Because even though you get drunk, most guys know before they leave their house what their intentions are for that party, to have a good time and to have sex or whatnot. So that, me, like for instance, I know that I’m going to this party, I’m going to have a chance to have sex, so I have condoms on me. (Alex, age 20)
Among the young men who reported consistent condom use at least with links, there seemed to be a belief and frame of mind about the need to use condoms. They had made condoms part of the process of sex and were prepared by ensuring they always had them available.

All the respondents reported wanting to avoid STIs but despite good levels of knowledge, they still justified inconsistent condom use through perceptions of feeling lucky for not getting one yet or until they were diagnosed. Not having condoms was given as a reason for unprotected sex despite intentions to use them and efforts to have them available. The efforts described ranged from very relaxed to diligent measures. Young men reported getting them from a brother, calling a friend at a time of need, keeping condoms to hand (in their car or wallet) and taking girls home to ensure condoms were available.

Having condoms in the house was not always enough to ensure they were used, so part of future plans to improve condom use included having them physically on their person or in the same room they were in. Young men reported not using condoms because they were in another room as well as experiences of having to go to another room and ruining the mood.

Having the will and restraint to avoid sex in the absence of a condom was a challenge. Tion spoke with pride about an occasion he abstained from sex when he found his condom did not fit properly even though his partner said she had the coil. In contrast Darren was unhappy about having unprotected sex with a partner he suspected had an STI.

*I let my body overtake my mind and then I got a bit too horny and then it happened. It’s a bad thing. [Then] I came to clinic. (Darren, age 19)*

Young men had a more relaxed attitude to wearing condoms with a girlfriend when they were in a relationship and they believed their girlfriend was monogamous. Those who reported consistent condom use within relationships described success due to mutual agreement with a girlfriend and her reinforcement, or suspicions about the possibility she may not be monogamous.
Although young men claimed they considered using condoms a shared responsibility, based on their accounts they seemed to be the principal decision-makers about them. They expected requests from partners but reported few experiences of being asked to use condoms. Alex was an exception in reporting consistent requests from partners. He was also among a minority of respondents who had never experienced sex without a condom.

Explanations about young men’s expectations to be asked for condoms were based on views that it was easier for young women to have sex if they wanted it and that they were “more fussy” than men about who they had sex with. Hence because young men wanted sex more and it was harder to obtain, they were likely to give in to demands for condoms. In essence, given the choice of sex with a condom or no sex, they felt young men would agree to use a condom.

*Boys, they’ll take it any way they can really. (Dean, age 21)*

This view that young men were controlled more by hormones and had greater desires for sex compared to young women positioned women as the sex and condom regulators. This was in spite of the fact that condom use requires men to wear them and that young men were keen to portray themselves as listening to young women’s wishes to use condoms when asked and to be doing the right thing.

*...if a girl tells me, go and get a condom, I’ll go straight and get one. (...) Because obviously I respect her wishes, and I know that’s the right thing. (Emmanuel, age 18)*

Young men mentioned the burden of pregnancy and were aware of the greater impact unprotected sex could have on young women. This was seen by some however as further justification for their expectation for young women to ask for condoms. Young men on their part were expected to wear condoms if asked and to take the responsibility of making them available. Although some of the young men were adamant about young women having the control in negotiating condoms, they also conceded that men still had the power to persuade and pressure women and that some men just did as they pleased.
Sometimes [girls] they can be pressured into it [sex without a condom] or sometimes a guy can be very persuasive and go, “Oh, don’t worry, nothing’s going to happen, you’re not going to catch anything. I’m clean, you’re clean…I’ll take it off halfway through and make sure I don’t come inside you.”

**IV** So what do you think about that? Because you just said the power is a woman’s.

**IE** The power is with the woman but you can persuade them. It doesn’t mean, because someone has power they can’t be persuaded. (Alex, age 20)

Despite young men’s suggestions that young women had the power to demand condoms and were expected to, negative stereotypes about them carrying condoms were still problematic. Adrian suggested that the responsibility for condoms lay mainly with men, but was judgemental about young women carrying condoms in his comment that, “it’s a good idea if a woman wants to protect herself but it’s not a good look.” He expected to be asked to use a condom but not to see a young woman carrying one.

**IE** If I see a girl walking around with a condom in her bag, I’d probably think she’s a whore, isn’t it?

**IV** Really? What if she’s just taking care of herself?

**IE** I know, and obviously now, looking at it, growing up... but back in the day I’d probably think, why would she have a condom on her? You know, it’s only boys that carries around a condom, because boys are meant to be whores, isn’t it?(...) they have a lot of girls, but if you see a girl with a condom, you’d probably think the same. You wouldn’t respect her that much. (Adrian age 20)

Young men did not discuss any concerns about sexual performance associated with using condoms. However clinic staff shared experiences of young men expressing performance anxiety about condoms to explain their reluctance to use them.

*We see a reasonable proportion of sort of sexual anxiety in young men about ... performance and whatnot, which is all part of this sort of peer pressure spectrum.*

**IV** How do they express that?
IE Well, like the need to perform, “I don’t want to use condoms in case I don’t perform, and then I would be mortified or embarrassed in front of the woman.” (KI10)

A few young men spoke of occasions when a partner asked them not to use a condom either because she was allergic or didn’t like them. These incidents raised suspicions from the young men and none of them had agreed to these demands for unprotected sex. This contrasted with reports from key informants and young men themselves about problems faced by young women as a result of experiencing and giving in to pressure from partners for unprotected sex. None of the young men justified unprotected sex with explanations about trust or their desire to show trust towards their partners while the association of unprotected sex with trust was a key reason young women were seen to agree to it.

7.4.2 Avoiding unplanned pregnancies
Avoiding pregnancy was a concern for the young men who said they were unprepared for the responsibility. It was also an important reason for using condoms. Young men were aware that having a baby would have a negative effect on their financial circumstances, on their social life and on their ambitions.

I feel that having a child is a great thing but it can hold you back in so many ways. Like if I wanted to do... go uni and stuff like that, to have a child you have to have money. That means I would have to go and get a job. It means I couldn’t go uni. It means my career hopes and what I aspire to be couldn’t happen or would be jeopardised for a little while. (Andrew, age 17)

Although none of the young men felt they were in a position to have a first or another child, there were reports of using withdrawal and inconsistent condom use for contraception. Those who felt sex without a condom was not an option, reported that they made sure they had them always available or that they were able to refuse sex if they did not.

Young men who reported consistent condom use for vaginal sex gave their desire to eliminate this risk of pregnancy as a key motivation. Among the others, having good knowledge about the risks of pregnancy and particularly being aware of the disruption a
child would have on their ambitions to go to university did not always result in consistent precautions against pregnancy. Instead some young men described having their partner visit the clinic after unprotected sex for emergency contraception in case of concerns about possible pregnancies. Past experiences of partners having terminations were also reported. It was those who made a firm commitment about their parental responsibilities to any child without qualifiers who were particularly adamant about avoiding pregnancies.

*If you’re man enough to have sex, then you’re man enough to suffer the repercussions after. (...) Where I’m concerned, my dad isn’t around. So I wouldn’t want it to be a situation where I got a girl pregnant and my son is feeling what I used to feel. ‘Cause that’s just not right. (...) I wouldn’t want to put my son or my daughter through the same thing that my dad put me through because it’s just like a vicious cycle. (Tion, age 21)*

Young men described little involvement in the long term contraceptive methods used by partners (pill, injection and coil). Having a girlfriend on one of these contraceptive methods was given as a reason for not using condoms and as options to be encouraged in relationships as an alternative to condom use.

During discussions about possible ways to support young people and help them understand the risks of unprotected sex better, key informants spoke again about the absence of repercussions of unplanned pregnancies on many young men. Clinic staff described seeing changes in young women as they got older and became mothers following unplanned pregnancies but did not observe similar changes in the majority of young fathers. One key informant suggested that the ability to pass the support of the child and partner to the government possibly contributed to the young men’s ability to evade responsibilities.

*They [young men] don’t have any issues of teenage pregnancy, and even if they impregnate a girl, they still carry on as normal because they don’t have any responsibilities whatsoever and more so, even if they are not working, the government is there to take care of mom and child so they still carry on as such. I have never seen any boy who, like, has been coming consistently for a period*
of years that I’ve been here, who has said, “Oh, I’m now a changed person, I’ve settled down,” but I’ve seen a few girls come across like that. (...) Some of them [boys] talk about having kids, but if you go into, Are you there for the children? Are you there for the mothers? They don’t have a clue. (...) You will see a few ones who try to do some... to portray themselves as being responsible (...) But about 90% or 95% of them are just not there. (KII1)

7.5 Wider influences on local sexual health risk-taking
Young men discussed their local norms and compared them to other areas. When I asked for their opinions and perceptions about STI rates, particularly among young black people, some young men were uncertain while others blamed the high rates on a tendency towards behaviour that increased risk. This was associated mainly with being young and with the area they lived in. Some young men suggested that being black also led to increased sexual risk taking while others focused on economic circumstances and believed it had little to do with ethnicity.

Michael suggested that the high STI rates were the result of where people lived, their surroundings and their reasons for taking risks. He proposed that locally it had to do with stress rather than being wild like in richer areas. Smoking cannabis and sex were ways to reduce stress rather than forms of uninhibited fun.

Young men felt that the STI levels around them were high and blamed this on people’s behaviour. They spoke of high levels of sexual desire, sexual enjoyment, a tendency to have multiple partners and unprotected sex. Lack of knowledge about condoms or STIs was not perceived as one of the key problems. However, some young men thinking back said they had not known much about STIs and condoms at first sex and were concerned that information was not available for young people when they first started having sex.

Key informants had mixed views about the extent to which the lack of information was crucial to the high STI rates among young black men. Those working in clinics focused less on lack of knowledge but suggested young people may be unable to contextualise their knowledge and may be unaware about how to put it into practice. Key informants
involved in sex education in contrast reported finding that basic knowledge was poor even after first sex for many young people.

Both young men and key informants suggested that young people seemed to be in a rush to grow up and gave in easily to their sexual desires with little thought about consequences and planning. A tendency to prioritise the pursuit of pleasure over planning or thinking about contraception was seen to contribute to the problem.

Young men’s explanations focused on the pursuit of pleasure in opposition to self-control and on the belief that young women enabled young men’s behaviour. Young women were blamed for behaving more like young men in their increased desire for sex and for not controlling young men better in terms of taking away access to sex and insisting on condoms. Young men in turn were blamed for being out of control and for a mentality that focused on pleasure and many partners.

Within their explanations, young men also acknowledged the pressures faced by young black men as contributing to the problem including negative media influences and stereotypes about their heightened sexual desire and performance. There were also suggestions that beliefs about having many girls and lots of sex had become part of many young black men’s frames of mind. They were seen to have come to believe in the stereotype, seeking peer respect for pursuing sex at all opportunities and creating further opportunities for sex.

IE Well, as I said, it’s a trend for black boys as in they just want to have a lot of sex so they can get street cred. I don’t know why black boys in particular, but I think we’ve just got a certain mentality that we just need to have a lot of sex which is not obviously the case.

IV Do you feel it?

IE At times I do, at times I did, and I still do. But as I said I feel I’m educated so I know to use the correct precautions before doing it. (Emmanuel, age 18)

Emmanuel felt educated because he had been involved in forums discussing sexual health, the importance of condoms as well as the stereotypes and pressures faced by young black
men in different aspects of their lives. Despite this, it was still difficult for him to escape feeling the pressure.

In the absence of being able to give other suggestions to explain the disproportionate risk of STI acquisition among young black men, Aaron proposed a possible genetic predisposition to STIs and greater levels of sexual activity or sexual drives among young black men. Comments about a problematic black culture that included bad influences from friends with similar negative mentalities about drugs and unprotected sex were also linked to suggestions about the power of the peer pressure experienced by young black men.

Some of the explanations provided suggested that young men had internalised and accepted cultural stereotypes about black people associated with unprotected sex, drugs and the power of peer pressure without thinking about the context of their lives.

Black people like to stick around their culture, so they hang around black people, and they’ve all got the same mentality, so it’s just like, with this drug thing, like everyone’s having drugs, and everyone’s having sex with no condoms. It’s like that. It’s influenced. And peer pressure. So they just grow up with that. (Dean, age 21)

It was not easy for young men to think of specific strategies to improve the sexual health of young black men but suggestions included a combination of better availability of information and ways to resist the peer pressure and stereotypes. Aaron spoke about the importance for young men to be able to distinguish between fiction and reality in the ways young black men are portrayed. Music stars on TV and the glamorised “player” image were identified as negative influences by several young men.

I saw these things on TV, these guys rapping or singing like they've got all these girls around them, and all that kind of stuff. It looks nice, it's glamorised, but what people need to understand is that when people singing, rapping, singing a pop song, or a rock song, most of the stuff they're rapping about is not fact, it's like fiction. And what they're doing is telling a story. (Aaron, age 20)
Dean suggested it was important for young men to see the benefits of changing their behaviour and the alternative options this provided.

*They need to see more relationships. I don’t know; I don’t know if there's a thing, they need to see, like the benefits of a relationship (...) Okay, let's stop having sex with all these other girls. There's benefits to having one girlfriend.*

**IV What do you think those benefits are? From your point of view?**

*IE Less STIs. Happy families. Less pregnancies; unplanned pregnancies. Less babies. And, like, the more leading on to money issues because of babies.*

(Dean, age 21)

Clinic staff focused on the absence of structure and work in young men’s lives as contributing to sexual health problems by contributing to young people and young men possibly feeling aimless and having too much spare time. This was particularly discussed in relation to their “frequent fliers” or patients who kept returning to clinic with infections. Other key informants also suggested there were problems resulting from a lack of ambition and purpose and possibly the absence of a sense of belonging and identity in the UK.

The high STI rates and the higher risk behaviour associated with black Caribbean men were acknowledged by key informants but there was also a feeling that young black people were sometimes stigmatised unduly. The SRE lead suggested a link between sexual risk-taking and socioeconomic circumstances based on his professional experiences. He found few differences between the black and white working class young men he worked with.

*There’s a couple...stigma type characteristics about young black men not using condoms, being very promiscuous... and taking lots of risk around their sexual health. ... they may not necessarily see it as being risks, but obviously from a professional point of view, there's lots of risk-taking behaviour that young black Caribbean men are associated with. (...)... Yes, condoms would be one of the reasons, but... Or is it the peer groups that they're having sex in? Or is it because one person doesn’ t get checked out, and it just passes around? (...) I know I said it’s about more risk taking, but as for, from the work I do, or maybe*
it's just the client groups I work with... (...). I'm looking at it from working class or so-called working class, young white and black people, which are probably quite similar. (KI07)

There were also suggestions about untreated infections contributing to the problem as they keep getting passed around within the local pool of young people.

Well it’s almost like a practical thing. It’s like there’s a pool of gonorrhoea or chlamydia and if you keep dipping into this pool, that’s what you’re coming out with in terms of... I guess it is the practicalities of not getting your partner treated so therefore at some point you’re going to end up with it again. (KI05)

This was particularly relevant considering the high partner turnover, young people going back to have unprotected sex with partners after acquiring STIs, and the communication problems between partners noted by clinic key informants. Communication barriers described included experiences of young people expressing reluctance to discuss condoms with partners and reluctance to notify partners about possible STIs.

They tell me in my face, “Listen, I am not going to contact him. I’m so angry about it. I’m not going to contact him, I’m not going to contact her because... I mean, yes, I’m sorted now. I’m not going to see him again. I am treated. He or she can carry it [STI] about.” And then I spend time to tell them, look here, it’s just a small network. You are treated, that’s fine. He or she is not treated, goes to have sex with another person. You don’t know how you are going to get into contact with that person, and then it comes back to you or it could go back to a relative of yours and then they would suffer the complications. So it is best for all of us to work together to break that chain. Some of them, when I explain like that, they get shocked and then they do accept. Some still stand their grounds, “No, I’m not going to contact”. (KI11)

The possibility of problems with partner notification raised by key informants was supported by reports from some young men that they were not concerned about notifying casual partners about STIs, and that they felt indifferent about transmitting STIs to links.
Key informants working in clinics offered solutions to high STI rates that focused on improving testing and treatment of STIs in order to improve sexual health. There was a sense of frustration with a minority of patients who were not interested in altering their behaviour to avoid STIs. However, they also reported that the majority of young people did make efforts not to return to the clinic.

Sometimes moral judgements crept into some key informant discussions. A key informant raised the danger of entering into moral judgements about some of the high risk behaviours because he felt it was a digression from the STI consequences which should be the main concern. He considered value judgements about people’s sexual decisions to be meaningless and was weary of getting involved in changing behaviour based on moral judgements. However, he also recognised that there was substantial emotional harm resulting from some of these behaviours and that the emotional cost to young people could have consequences.

Separate from ideas of pleasure and self-control, young men spoke of the difficulties of relationships and the need to relieve stress as problems they associated with their environment and economic circumstances which had less to do with ethnicity. While acknowledging their circumstances to have strong negative influences on their attitudes to sex and relationships and consequently behaviour, young men did not offer solutions that addressed them in relation to sexual health. Key informants spoke about them more directly. Key informants were also aware of the difficulty of addressing these wider social and structural problems.

_I think there’s a lot of poor self-esteem, and I think there’s a lot of young men and young women who... they’re... it’s not clear what the place in society for them is. I’m such a big believer in the importance of work, in terms of mental health and wellbeing and value. Now, many of the women will have that because they actually have their hands full with children, whatever, which is, it absolutely is more than full-time work. But I think a lot of the men don’t have something that is societally meaningful for them … that’s always sort of an external social issue. (...) Because I think if we could move people up the socio-economic ladder, that would move, sort of improve one aspect of the contributory factors ... it would give other meaning, other value. It’s not the be-
all and end-all, but actually, I think it would have an impact. (...) I think the health behaviour that we observe, namely the STIs in the endpoint ... most of the levers exist outside of health. I think they’re mostly societal and sort of structural, and finding them, finding a meaningful place for a lot of these young men. (KI10)

While expressing insight into the impact of social and economic positions on health, clinic staff were particularly interested in improving testing and treatment both in terms of access and reach as a more achievable goal. This required maximising patient access to GUM clinics and minimising patient and provider delays. Although it was encouraging that the preliminary secondary analysis I conducted on the PATSI study database did not identify disproportionate provider or patient delay experienced by black Caribbean men, there was room for increasing access, reducing delays and encouraging abstinence among symptomatic men. (Gerressu et al., 2012, See appendix A).

7.6 Conclusion
In this final data chapter I explored young men’s attitudes and behaviours relating to sex and partnerships. The chapter brings together the array of outcomes resulting from the young men’s social and environmental positions as we have moved through the first three data chapters along a narrowing pathway from their surroundings, identities and early sexual paths, to attitudes and behaviours relating to partnerships and sex.

Partnerships that were believed to be easily categorised were in reality fluid both in terms of the meanings attached to them, levels of involvement and in terms of beginnings and endings. There was added variation based on age, where the initial focus on sex seen as separate from emotion became something which was improved by emotional involvement and could even become secondary to it. Sex was also a constant while the means of attaining it changed based on age and experiences that led to success or emotional distress. Fear of betrayal and emotional distress influenced partnership choices.

Concurrency occurred in the pursuit of sex with external pressure to fit in with peers, get recognition from them or personal gain in the absence of disincentives. It became a part of relationship pathways and was justified through external pressures and personal
justifications but it was also a way to avoid emotional distress. Alternatively concurrency was avoided on principle. All the young men were well informed about STI risks, and reported attempts to avoid STIs and unplanned pregnancies. Consistent condom use was an exception but young men aimed for it with varying degrees of success at least with casual partners. The combination of unprotected sex, concurrency involving different levels of deceit and the fluidity of sexual partnerships created ongoing risks of infections and reinfections. Young men described personal choices, peer influence and local norms as key to their sexual behaviours. There was some acknowledgement about the influence of their environments but references to cultural traits were generalised as were suggestions about genetic predisposition suggesting internalised stereotypes that ignored the impact of their life circumstances and structural obstacles discussed in the previous data chapters.

Key informants framed their concerns, particularly about reinfections, in terms of young men who experienced no penalties for sex and STIs and young women who repeatedly returned to partners who were lying and cheating and putting them at risk of STIs. Key informants also discussed wider problems for young men who were missing structure in their lives, economic opportunities, purpose and feelings of belonging. This alluded to ideas of marginalisation in contrast to young men’s ideas of sexual behavioural imperatives specific to black UK culture in their areas.

While improving STI treatment access and coverage along with partner notification were obvious ways to reduce STI transmission and rates suggested by key informants, there were also aspects of young men’s wider social lives that were considered influential for their sexual behaviour. From a clinic perspective black Caribbean men were not identified as experiencing disproportionate patient or provider delay in attending GUM clinics. However, key informants were conscious in particular of the negative influences resulting from the young men’s positions in society.
Chapter 8 Discussion

8.1 Introduction

The aim of this thesis was to better understand the mechanisms that put young black Caribbean men at disproportionally higher risk of acquiring STIs in order to modify that pathway and to inform sexual health promotion, education, service provision and intervention development. The research was informed by the analysis of sexual health seeking behaviour survey data from GUM clinic attenders and involved the analysis of in-depth interviews conducted with young men recruited from clinic and community settings, and in-depth interviews conducted with key informants working with the target group in education, sexual health, male development programs and youth crime prevention.

Epidemiological research has repeatedly established black Caribbean young men as a high risk group for STIs but the contexts of their lives within which sexual attitudes and behaviours are formed and sex and relationships experienced is a less well researched area. This study has provided a unique opportunity to examine the partnerships and sexual behaviour of young black British Caribbean men within the wider social and environmental context of their lives. The inclusion of interviews with key informants enabled the perspective of individuals working with young black Caribbean men in professional roles to be examined alongside the accounts of the young men. This showed similarities and variations in opinions about different pressures and behaviours as well as what they were attributed to. Despite the origins of intersectionality theory within black feminist discourse, I found that the focus on the interactions of power structures was ideal for the exploration of the interlinked disadvantages faced by young black Caribbean men in relation to sexual behaviour as a result of deprivation and hypersexual masculinities associated with stereotypes about blackness. In acknowledging the disadvantages faced by the young men across these elements of their identities and circumstances as a way of thinking about influences, it was possible to bring together socioeconomic disadvantage, poverty of ambition, area based marginalisation and racial discrimination. What started out as a focus on ethnicity, masculinity and ideas about being young and pleasure seeking led to further important aspects including geography and risk environments as well as empowerment and disempowerment and the dissociation of emotions and sex.
In the following sections of this chapter I will discuss these findings in detail, providing an interpretative account and outlining the implications for policy and future research. For clarity, the key findings are divided into two sections. The first discusses the broader overarching issues of identity, ethnicity and masculinity and how these shape the young men’s sexuality and sexual behaviour. The second section focuses more specifically on the young men’s sexuality, relationship dynamics and sexual behaviour. I begin with a discussion of the study’s strengths and limitations to which I now turn.

8.2 Strengths and limitations
The strengths of this study lie in the opportunity to provide some insight into the increased risk of acquiring STIs among young black Caribbean men by exploring sexual attitudes and behaviours in relation to young women, within the context of their social, economic and geographic environment. The study covered both sexual debut and relationships histories providing the opportunity to examine the development of sexual attitudes and behaviour over time. This was guided by the intersectionality framework that acknowledges the key role of the young men’s particular positions in society based on their identities as young black men living in deprived urban settings. The opportunity to compare and contrast the young men’s experiences and understanding of their behaviour with the views of professionals working with them was also valuable. Finally it was helpful to explore sexual health seeking behaviour among black Caribbean male GUM clinic patients across England by conducting secondary analysis on data which had not been previously examined looking at ethnic variations. This also helped determine whether it was necessary or not to explore disproportionate delays among the target population in seeking care or gaining access to GUM clinic services.

There are limitations to this study that need to be considered in interpreting the findings. The secondary analyses I conducted were on survey data of a study focused on patient access to GUM clinics (Mercer et al., 2007). My analyses aimed to inform the qualitative work and were based on the largest available dataset about sexual healthcare access and pathways among clinic attenders; however, the sample sizes were not powered to detect difference between ethnic groups so it likely lacked the power to detect some differences as statistically significant. Despite this, given that to date the availability of data allowing even descriptive analysis are limited, it was still valuable to
conduct the analyses to guide the qualitative investigations. The relatively large number of black Caribbean and black African respondents also provided an opportunity to look at male patients across ethnic groups. There are rarely enough black participants in GUM clinic based studies to allow separate analysis by broad ethnic group and sex instead of using an aggregated black group.

Given the difficulties in interpreting the epidemiological data available on black Caribbean men and sexual health, including challenges raised by authors of epidemiological studies in identifying the risk factors hidden within the ethnicity variable, a broad focus for the qualitative research was necessary. Therefore, I opted to look at wider social influences and a breadth of topics to begin with instead of selecting one area of research to explore in depth, but this had implications in limiting the exploration of more targeted influences in greater detail.

During the interviews, many of the discussions exploring ethnic identity turned into ones about black identities in the UK and less about specifically Caribbean identities in the UK. I believe I had a part to play in this since I did not consistently bring back the conversation to black Caribbean identities. In many instances, references to black men occurred after participants had identified similarities across young men of African and Caribbean background but I did not question all references to black as opposed to black Caribbean. My use of the term black may have influenced some young men to frame their thoughts and accounts in terms of being black men instead of Caribbean or Nigerian men but I also feel that there was a strong sense of identification with being black. This also encompassed cultural aspects of being black in the UK. From the Caribbean men in particular this might have been due to their historic identity as black in the UK which was a political and ethnic identity but I did not actively investigate this. I believe that instead of a lost nuance however, I was capturing a broader black British identity because when discussing the influence of the estate, peer pressure, friendship group beliefs and sexual stereotypes, the young men spoke of a black identity.

There were indications during the interviews that young men’s discussions of their identity as black did not preclude discussions about Caribbean or Nigerian identities along with black ones suggesting black and Caribbean were not being used
 interchangeably. Further, similarities among UK raised Caribbean and African young men in relation to sexual attitudes and behaviours were explicitly spoken about within friendship groups so the shared use of black identities included a reflection of shared experiences.

Given all this and my aim to capture the relevance of identity in relation to relationships and sex rather than exploring the young men’s sense of identity in detail, I do not think this limitation detracts from or invalidates my findings. Given more time and resources to explore this further, it would have been useful to ascertain more directly the differences and similarities given to black, African and Caribbean identities by young men and to explore more specific cultural affiliations as influences on sexual attitudes and behaviours. This would enable the examination of the lesser or greater relevance of a distinct black British ethnic identity but was beyond the scope of this thesis. Furthermore it would have required a sampling frame that aimed to compare black British men of African and Caribbean backgrounds and possibly a larger sample to also maintain the breadth of topics.

Another study limitation relates to the relevance of the study findings across black Caribbean populations in the UK. The young men’s accounts were supported by the experiences of key informants, some of whom were currently working or had worked across London. So the overriding importance of specific geographic areas to the young men seemed to have a level of relevance across London. The key association related to deprivation and “a street mentality” often stereotyped as a black Caribbean lifestyle and culture, however it is difficult to assume this to be replicated across the UK. All the young men in this study reported living in areas with a high black population, but different ethnic concentrations might create contexts with different local norms and experiences of sex and relationships as suggested by the young men themselves. Further, there may be differences in the contexts and experiences for black Caribbean young men in non-urban areas, in more affluent areas or within different socioeconomic circumstances.

While it is important to understand contextual details in order to develop appropriate interventions, the broader influence of gender norms, peers, neighbourhood and school ethos, and sexual partners are well established as strong influences on young people’s
behaviours across cultures and continents (Marston and King, 2006). More specifically, based on findings of studies that focused on or included black Caribbean men in East London, across London and in cities in the Midlands and the North of England (Elam et al., 1999, French et al., 2005, Gillborn et al., 2012, Mohammad et al., 2006, Serrant-Green, 2004, Sinha et al., 2007) it is not a concern about the experience of the young men in this study being unique that warrants further research, because many of the aspects of their disadvantaged positions have been reported before. Rather, it is the need to have detailed local understanding in order to ensure interventions are relevant and address concerns about hypersexual stereotypes, about disadvantages in school irrespective of parental involvement or material and cultural capital, and about wider social disadvantage instead of embracing explanations associated incorrectly to cultural deficiencies.

The study participants were selected from a clinic serving a population with a wide range of economic and ethnic backgrounds and a variety of individuals and organisations were approached to recruit community based participants. Despite this, the majority of the study participants were living in social housing located mainly on council estates in deprived areas of North West London. Even though there were young men in the study with parents in managerial and nursing positions, they did not report particularly different circumstances to the others. This might be due to difficulties with the availability of housing alternatives and the economic implications of single income households, but considering the influence of peers on estates identified in the study, future research exploring sexual health among young black Caribbeans should explore the differences of living on and off deprived council estates separately from individual socioeconomic circumstances.

Adopting intersectionality as an analysis and interpretation framework enabled me to examine the social and health effects of several key characteristics of the young men’s identities and contexts in order to better understand how they interact and impact on their lived experiences. As I have already discussed in the methodology, it was invaluable in making sense of the data with a focus on exploring the intertwined identities of the young men instead of struggling to forcefully disentangle them. It is worth mentioning however that there are challenges to be considered in using the intersectionality framework in health research.
Firstly, the difficulty of operationalising intersectionality has been raised by other researchers who also used and value the framework (Bowleg 2008, and Griffith, 2012). Similarly, while acknowledging it was very useful for me to turn to intersectionality at the analytical stage of this study, I think using it without having the guiding structure of Brofenbrenner’s model at the data collection stage would have been challenging as a result of the very broad flexibility of the intersectionality framework. It provides a way of seeing without being prescriptive or providing much guidance about structuring the data collection. This can make the task seem unwieldy given that the social hierarchies of unequal power manifest themselves across most aspects of human interactions.

Secondly, while intersectionality is about the blending of identities, it has been criticised for overlooking some identities or rendering them invisible while highlighting others. It would be unmanageable to explore all elements of identity that are relevant to all study participants, so in choosing age, gender and ethnicity in this study for example, I overlooked other ones. This however does not preclude the flexibility to incorporate additional aspects of identity if they are found to have an important influence on the topic of interest in day-to-day life. In this study deprivation for example was an aspect of identity which became more important along the way.

Thirdly, as a tool to be used to explore health research, intersectionality clashes with epidemiology. The former examines identity as interdependent and mutually constitutive while epidemiology strives to consider characteristics separately, usually as uni-dimensional in order to identify their independent and additive influence (Griffith, 2012). The solution to this, proposed by Griffith (2012), encourages researchers to identify modifiable mechanisms and pathways connecting gender and men’s health instead of searching for social and cultural factors. This would help move the focus from identifying which social characteristics affect health to why they do so (Griffith, 2012).

Developing questions to measure intersectionality is challenging. Despite the need for questions that capture intersecting interdependent and mutually constitutive experiences, there is a risk, particularly in quantitative research of failing to move away from inherently additive questions conceptualising experiences as separate, independent
and summative as well as able to be ranked (Bowleg, 2008). Further, within health research, individual characteristics such as racialized and ethnic identities, gender, sexual orientation, class and disability continue to be inappropriately interpreted as explanatory constructs in and of themselves (Bowleg, 2008).

Statistical research provides a valuable function in identifying inequalities in health but there have been calls for the development of new analytic tools and strategies to overcome the reality that statistics is rooted in positivistic ideology and even when interactions are tested, they are unable to reflect the complexity of identity interactions (Bowleg, 2008). Care also needs to be taken even in qualitative research not to formulate questions that encourage ranking or thinking of identities as separate. While new methodologies are developed, it will be important to analyse data systematically and to ensure the macro socio-historical context is used to interpret the observed data. Bowleg (2008) also argues that it may be key to analyse each structural inequality separately as well as simultaneously as an analytic step within intersectionality research. Based on this study, I would agree that doing so was inadvertently helpful for me as the struggle to separate out different elements highlighted the need to look at them as simultaneous influences.

8.3 Identity, ethnicity and masculinity

Restrictions in the range of ways young black men were able to express their male identities were particularly detrimental to them. These restrictions were imposed and maintained by peers as well as their own perceptions and experiences of local norms. Assumptions about aggressive, physical and hypersexual men were reinforced by the necessity to navigate disruptive environments (both social and physical), stereotypical media portrayals, discrimination at school, poor employment opportunities and deprivation. While there were references to hard-working family men, professional black male identities were limited. Absent fathers, “hard” men, drug dealers and “wastemen” were examples of black masculinities more easily identified as local presences by the young men.

As a marginalised male group they faced challenges in many aspects of their lives as evidenced by historical and current circumstances. Both the black Caribbean young men and the key informants exposed the limited material resources available and the limited
confident to explore alternative ways to be men. Threatening social environments resulting from the combination of deprivation, unemployment and discrimination have been found to create a greater emphasis on the importance of toughness and respect as well as the need to display fearlessness in previous research about the social and political aspects of men’s health (White, 2002). The need to be “hard” men, without vulnerabilities, reinforced the need to be unemotional and to protect themselves from emotional distress.

Some of the estate effects young men recognised as problematic, such as involvement in illegal activities and the devaluing of relationships, seemed to be behaviours that provided them with resources and recognition that were more attainable than academic success, legitimate employment and the home life they aspired to. Their environments demanded that they show no weakness in school, among friends or in relationships. While the young men were optimistic considering the circumstances, a sense of struggle and vulnerability about their lives was also apparent. This had an impact on realistic expectations and contributed to sexual risk-taking behaviour. This was compounded by negative stereotypes of black masculinity and sexuality, and discrimination which follow a history of marginalisation experienced by black populations in the UK.

It was encouraging that young men were able to distance themselves from negative influences with the appropriate support in order to move from criminal activities to employment opportunities. This provided an alternative to the drug dealer identity and the wasteman identity. Neither was seen as ideal in conjunction with fatherhood and while young men were willing and able to alter their masculine identities in terms of work and aspirations, this did not happen in the same manner or to the same extent in terms of making changes in relationships and sexual behaviour. The cost of sexual risk-taking was not as clear or pressing to them as the threat of prison. Further, sexual behaviour that put them at risk of STIs and unwanted pregnancies was also not seen to reflect badly on being a good father or man.

8.3.1 Constraints of discrimination and deprivation: environment and identity
The goal of exploring the wider context of the young men’s lives in this study was to take into account how aspects of social difference and identity intersect and create
particular relations and experiences. At those intersections, it is something particular about the combination of categories that creates something more than the sum of the parts.

The combination of ethnicity and geographical/economic circumstances created specific parameters within which to operate and created particular ways to be men. Some young men were conscious of the restrictions posed on them in different aspects of their lives as a result of being young black men in terms of school, work, trust in relationships, and their geographic environment. Others did not describe ethnicity as part of their everyday life experiences. Karlsen and Nazroo (2002) found that while ethnicity as identity had little association with reporting poor health, ethnicity as structure explored in terms of racialisation and class experience was associated with health among ethnic minorities in the UK. This is significant for the young men in this study who experienced social disadvantage as a result of discrimination and structural consequences of their ethnicity, which are forms of social disadvantage that are not adequately measured in epidemiological studies or taken into account alongside the investigation of behavioural explanations.

All the young men were aware of local norms and expectations but not necessarily about the structural causes or the limitations these imposed on them. Those who had exposure to alternative environments through work or family members were more aware of their restrictions and the problems of their area. Young men were able to exert different levels of agency despite the peer norms and other restrictions which existed and persisted in their lives. They described growing out of a desire or need for approval from peers. This was assisted by finding alternative opportunities to enhance self-esteem, having supportive individuals in their lives whom they responded to and finding ways to gain distance from people and locations that were negative influences. This was also related to personal feelings about achievable alternatives and confidence in their abilities to attain their goals, for example in finding a serious partner, maintaining the relationship and having a nuclear family.

This relates somewhat to Bourdieu’s (1990) ideas about habitus. The values within different social groups become relevant not just as rules to be followed but as a game in which the accumulation of specific resources becomes the guiding force. This in turn
creates certain dispositions for action or internal sensibilities that allow individuals autonomy in their pursuit of status and accumulation of resources (Calhoun, 2000). The norms, expectations and daily practices are influenced by these aspects of their lives. It fits in well with the idea that social structures organise and support social action while social action simultaneously produces and shapes social structures within processes that are influenced by power and social inequality (Bourdieu, 1990). Villa (2011) proposes that given all actions do not reproduce the same structural effects, and not all structures influence actions to the same extent, the way different aspects of identity come together is important in understanding the complex entanglement of social structures and actions. This goes back to the possibility for young men of other ethnic backgrounds to embrace the stereotyped Caribbean street culture as young men while being afforded a new image as adults in contrast to the continued hypersexualised black male identity that can confine young black Caribbean men well into adulthood.

Cultural capital is another concept of Bourdieu’s which is useful in explaining the alternative norms and expectations within which the young men had to learn about and experience sex and relationships (Bourdieu, 1986). The marginalised positions of the young men made it challenging for them to acquire the cultural capital legitimised by wider society. So although they aspired to academic success, good employment and nuclear families, they were also aware of their limited opportunities which made alternative schemes with other forms of social capital attractive. These alternative hierarchies encouraged sexual risk taking and gave little importance to sexual responsibilities and empathy towards young women. This indicates challenges relating to social exclusion rather than problematic alternate minority cultures that need to be tackled.

Miller and Glassner (1998) refer to cultural stories which are partially based on stereotypes and are narratives that relate to social phenomena from the point of view of those in power and to collective stories which challenge them. The collective stories take the perspective of the participants and provide an alternative to the popular stereotypes by providing a voice to those who are marginalized or silenced by the cultural narratives. The young men were able to express both types of stories. They did so mainly by explaining their actions as logical within their circumstances and life experiences. These actions however, could be simplistically interpreted as fulfilling
some negative stereotypes about young black men. They also presented themselves as
distant from the negative stereotypes or even denied their relevance. The distancing was
mainly done within attempts to assert individuality and personal agency as signs of
successful manhood; however, the structural and social restrictions were evident in
some aspects of all the young men’s lives.

The young men did not all or always identify with social categories such as ethnicity,
class or gender when describing their everyday lives but based on their accounts, these
social positionings were relevant to how they experienced their surroundings and to
their perspectives and concerns. This highlights the importance of examining different
aspects of social environments and the need to interpret given accounts for better
understanding as suggested by Yuval Davis (2010). Lack of awareness about ethnicity
as an influential aspect of daily life has been hypothesised to indicate living in a stage of
unexamined ethnic identity for young people in particular in that they have not
questioned or explored it (Phinney, 1990). Phinney (1990) suggests this may be the
result of lack of interest in one’s own ethnic identity or of absorbing positive ethnic
attitudes from adults around them and hence being less aware of how other groups
might have negative perceptions of them. Based on the experiences of the young men in
this study, it might also stem from a lack of awareness of how ethnicity structures the
lives of people from ethnic minority backgrounds for lack of comparisons of alternative
experiences or difficulty understanding the particular nature of their experience
compared to others who are not victimised. There were reports both from young men
and key informants in this study about young men experiencing frustrations and
reacting without understanding the causes.

Aspects of ethnic identity can be internally defined and lifestyle choices may appear
unrestrained and solely the result of agency. However, the range of choices is
influenced and constrained by social structure. Within his theory of habitus Bourdieu
asserts that the only way to expand the sphere of reasonable behaviour is by increasing
the available lifestyle choices. This in turn requires greater social capital which is also
limited by the social positions individuals hold in society (Karlsen and Nazroo, 2002).

In this study setting, the high concentration of black people in the local area was rarely
questioned and might have masked problems of ethnic inequalities for some young men,
compared to those who identified the concentration of black people in the areas of deprivation as problematic. Holland et al. (1998) advocate for the importance of interpretation in research, particularly with young people to compensate for the possibility they may have little critical consciousness of the impact of structural inequalities on their sexual relations. It was interesting to note that while problems of individual discrimination and deprivation were noted by young men, they were less able to see the structural impacts of discrimination. Instead they unquestioningly associated deprived areas with black people and wealthy ones with predominantly white populations.

The young men’s narratives exposed problems of having little sense of being valued based on neighbourhoods with little to do, high concentrations of deprivation and violence and local feelings of being “stuck” geographically which led to social and economic restrictions. These problems though were not always understood by young men as influencing relationships. Several key informants in contrast, made the link with structural influences and acknowledged that they are difficult to change and detrimental to the young men’s sense of self and purpose. While some key informants were better able to identify the structural impact of inequalities and discrimination, there were also instances in which key informants veered into discussions about cultural dysfunction without interrogating statistics or examining the cause of markers of behaviour that they simplistically misinterpreted as cultural attributes.

The obstacle of residential segregation while alluded to by both participants and key informants, needs further investigation and should hold a more prominent position in attempts to explore influences on relationships and sexual behaviour. Cohen et al. (2000) give importance to the environment with the development of the broken window index; however, they also emphasise individual autonomy in their hypothesis explaining the association between their index and gonorrhoea rates with little mention of the important role of residential segregation. So the concentration of risk takers is seen as resulting in the purposeful deterioration of the environment which risks blaming vulnerable individuals for their disadvantaged positions. Williams and Mohammed (2009) describe residential segregation as the most widely studied institutional mechanism of discrimination for its health implications and as the most decisive way racism can influence health. Its influence in shaping socio-economic circumstances
results from restricted access to education and employment opportunities, discounting the economic value of a given level of socioeconomic status and concentrating health damaging conditions in residential environments. This includes a concentration of economic hardship and other chronic and acute stressors at individual, household and neighbourhood levels. Further, interpersonal relationships and trust among neighbours can be negatively influenced by the weakened community and neighbourhood infrastructure.

Although it was challenging to disentangle male, black and local youth identities, the influence of the limitation of their range of opportunities in school, work and in turn economic circumstances was evident. This played a part in creating a restricted psychosocial environment defined by Siegrist and Marmot (2004) as “the sociostructural range of opportunities that is available to an individual person to meet his or her needs of wellbeing, productivity and positive self-experience” (p1465). The constrained available forms of success, and potentially accessible professional identities for many young men made it difficult for some to envision realistic legitimate ways to sufficiently improve their socioeconomic positions and to feel valued which were considered important elements of being men.

In spite of their challenging environments the young men did not report fatalistic attitudes and feelings of powerlessness to make positive changes in life. They valued good friends and were able to find positive elements in their lives. Fatalistic attitudes were reported by Connell et al. (2001) and McDaid et al. (2012) in relation to features of marginalized masculinities and deprivation. In contrast the young men in the study reported optimism, sometimes unrealistically in that ambitious goals were discussed with little thought about how to achieve them. The fatalistic views were more related to relationships, mainly to the difficulty of maintaining monogamous relationships.

Physical disorder, social disorganization and social norms theories have been identified as explanatory models to make sense of the influence of environmental characteristics on sexual behaviour. While this study did not focus specifically on using any of these models, all three have relevance to the study findings. Elements of geography and physical environment as risk environment played a greater part than initially thought. Furthermore, increased sexual risk taking in areas with a lack of recreational services
for young people have also been identified in studies conducted across North America, Africa and Asia (Burns and Snow, 2012, Mmari et al., 2014).

8.3.2 Similarities and differences in interpretations of black masculinity and sexuality
Young men tended to focus on the power of local norms and the influence of peers in discussing sexual behaviour. Although some of these pressures on sexual behaviour and relationships were presented as aligned with personal preferences, their narratives pointed to restrictions in their options of expressing black masculinity rather than behaviour aligned with minority ethnic or cultural imperatives. There was some recognition of some of the negative effects of their estates for example, but the choices and behaviours resulting from the restrictions they experienced were sometimes misinterpreted as inherent behaviour indicating internalised stereotypes of hypersexual black men.

The distinction between ethnicity as identity and ethnicity as structure is particularly evident in research on the ethnic inequalities in health in the UK (Karlsen and Nazroo, 2002). However, among the study participants, there was less awareness about the social impact of ethnicity and deprivation as structural impediments. This was particularly problematic in relation to the restrictions imposed on how to be men and on the absence of stability and security it created which facilitated disruptive relationships around them and encouraged cynicism about relationships. It also led some young men to make mistaken assumptions that identified these problems as the result of ethnicity as identity. While young men of different ethnic backgrounds were described by both young men and key informants as behaving in ways stereotyped as black ethnic identity in the UK, the negative outcomes were not the same or were better mediated by other factors such as cultural and religious restrictions about sex and relationships or opportunities to adopt professional adult roles through education and employment.

Key informants were more aware of the detrimental effect of the social inequalities experienced by young black Caribbean men on relationships and sexual behaviours through work, the judicial system and school. They identified more general limited masculine norms but also attributed the young men’s negative outcomes to problematic homes, parenting and culture. It was particularly concerning that among the key
informants, all in professional roles supposed to be supporting these young men, there were some making assumptions about the young men’s behaviour which succumbed to over simplistic stereotypes without understanding the complexity of their circumstances and failing to understand the vulnerabilities and struggles of the young men. In contrast, the vulnerability of young women seemed to be more obvious as discussions about the young men’s sexual behaviour often led to the negative impact on their partners. Although this was understandable considering the increased costs of STIs and unwanted pregnancies to women, their common portrayal of young black Caribbean men as aggressors, and the challenges in seeing the damage also caused to young men fed into gender stereotypes.

8.4 The significance of gender identities

The relational element of ethnicity was experienced as stereotypes of black men irrespective of cultural background. While the young white men in these environments also experienced the threatening social environments, the limitations were related to their geographic environment and associated deprivation not with ethnicity. Redman (2001) for example, writes about the white middle class identity in college as a time accepted for young men to prepare for professional life. This provides a legitimate way to move from being one of “a bunch of sexist, chauvinist idiots” (p196) to being an individual male in a relationship in the process of moving towards middle class or professional forms of cultural and economic capital. Heterosexual masculinity based on romance could then be used to display sexual maturity and agency.

The young black Caribbean men felt able to actively dispute many of the stereotypes they encountered, in school, at work or within relationships. However, Stanfield II (1998) notes the problem of personal constructions of who they are being limited by the parameters of supposed objective realities created and cemented by the dominant culture. He highlights difficulties with ideas of voluntary action and the extent to which that can realistically modify negative perceptions. This is attributed to the restrictions placed on oppressed populations in their options to construct their own cultural realities. He suggests this is the case:

\begin{quote}
Whether they be Americanized people of colour, women, the differently abled, or the poor, \textit{[they]} have had little opportunity to construct realities of the meaningful and empowering in their lives. At worst, the socially constructed
\end{quote}
realities of the oppressed as official status categories and definitions are the intrusively imposed views of the dominant at least partially internalized by not a few of the oppressed” (Stanfield II 1998, p348).

This is particularly depicted in the recourse to cultural and possible genetic associations proposed by some young men to explain sexual risk-taking among young black men, and further in beliefs voiced about being inherently more sexual. This shows the ease with which stereotypes were internalised and interpreted as culture. The young men who recognised the relevance of their circumstances and environment in shaping expected and acceptable sexual behaviours, were aware they were not inherent and commented on the possibility of the same individuals adopting different behaviours in different environments.

In relation to sex and relationships, black male sexuality was strongly perceived to be associated with heterosexual norms and ideas about always wanting sex, cheating, being indiscriminate about sexual partners and having great sexual skills. This created pressures to perform and live up to these expectations that encouraged sexual risk-taking. The stereotype was transmitted from other black men, men of other ethnic backgrounds, the media and young women who admonished them and labelled them as untrustworthy or who were enticed by it. Key informants were also found to use some of these stereotypes in the clinic setting, at school and in personal experiences. Although young men were able to negotiate and show themselves to be different from these stereotypes, they were detrimental to the development and maintenance of trusting relationships, as well as to young men’s perceptions of self-efficacy.

The relevance of others in relation to self-recognition was of particular salience to the identity of the young men in relation to how their masculinities were perceived by other people in their lives. Perceptions of teachers and peers in school, neighbourhood identification, and class identification have been found to be highly influential during the years young people are forming a sexual identity (Courtenay, 2000). For the young men in this study it was mainly peers at school and in the neighbourhood who they identified as particularly important but these were in turn influenced by wider social influences including socioeconomic circumstances.
Male sexual identities were identified based on geographic location and ethnic/cultural identities. Black sexualities in particular were placed in opposition to Asian and Muslim ones while comparisons with white young men varied but they tended to be seen as more similar. Neighbourhood rules were considered to create expectations of men overall; however the abundance of black people in the area and the absence of alternative sexual identities promoted sexual risk taking. Muslim and Asian young men were afforded some alternatives as a result of an acceptance of their less sexually defined masculinities on the grounds of culture and religion. They had the option to view sex within the context of relationships and were admired by some of the participants for maintaining relationships. In contrast, young black Caribbean men experienced expectations and pressures to constantly portray male sexual desire, sexual skills and conquests with little recourse to other legitimate alternatives.

A level of disembodied masculinity was experienced by the young men. They were encouraged to remove emotions from sexual encounters, so sex became a physical act to satisfy the body that was controlled by hormones. In some ways this allowed them to distance themselves from taking responsibility for their sexual behaviour for example by focusing on temptation and the powerful influence of testosterone.

This idea of disembodied male sexuality identified in this study adds to the findings of Holland et al. (1998). In their study about young people, sexuality and power, they wrote about women who are disembodied and have to control their body and pleasure to fit into the expectations of men. In contrast embodied men are able to use their bodies in pursuit of sexual pleasure without contradictions with masculinity. This study supports these finding but reveals vulnerabilities present within male sexuality. While young men’s bodies were allowed to pursue sexual pleasure, unlike women they had to battle an imperative to dissociate emotion from the body and from sexual pleasure. The value of masculinity expressed in words and actions, was in terms of sexual conquest, the pursuit of pleasure and the need for male bodies to perform. This created the high cost for failure which contributed to the young men’s need to remove feelings from sexual encounters. The danger of STIs then becomes a problem for the body which might be secondary to the emotional danger of being rejected or experiencing emotional distress as a result of exposing vulnerabilities to women and showing their true selves.
This suggests the need to encourage discussions about masculinities and femininities as part of the process of socialisation in formal education, possibly within sexual education. Furthermore, these findings highlight the importance of imparting an understanding of sex and partnerships as involving the body as a whole including desires, pleasure and emotions which individuals are able to control. In line with this, White (2002) discusses suggestions for the inclusion of sexual and emotional intimacy to be addressed in formal education programmes. Along with the need to discuss the many possible masculinities in opposition to the hegemonic model, he proposes this as an opportunity to expose silences in school. This would provide necessary challenges to the problematic existing knowledge and skill associated with gender formation. He considers this a minimal starting point to enable social change. This shift would also allow advocacy for masculinity to entail health of body and mind rather than the male body as an instrument for sex.

The findings from this study do not support ideas about black masculinity being viewed simplistically as a gender construct resulting from the inability of black men to attain the hegemonic masculinity (Courtenay, 2000). The contested concept of hegemonic masculinity, as the socially dominant construct in Europe and America represented by well-educated, white, heterosexual upper middle class men holding the social power and access to resources, has been viewed mostly as rather static for two decades after the concept was formulated in the 1980s (Connell and Messerschmidt, 2005). While there was awareness among the young men in this study about their restricted social power and access to resources, they wanted to strive to attain both as respected strong black men.

Black masculinity was more than a reaction to the unattainable privileges associated with hegemonic masculinity and was fluid as supported by Wright (1998) and Alexander’s (1996) objections to static and prescriptive characterisations of black masculinity. While many of the young men aspired to economic control and autonomy they did not aspire to it as “the most honoured way to be a man” (Connell and Messerschmidt, 2005, p832). Some participants expressed uncertainty about whether their aspirations would be afforded to them as young black men from deprived backgrounds, but there was an awareness of the strong cultural control of a form of black masculinity that was affiliated to ideas of a “street culture”. This, it could be
argued was a masculinity aspired to by young men of different ethnic backgrounds and was desirable to them while they were young men.

A key challenge faced by the young black men in this study rested in the difficulty of moving on to gain the social power and resources when they transitioned to adulthood. They seemed to have less control of the transitions into employment and family life but nevertheless expressed their desire to be good fathers and family men and to have economic independence, distancing themselves from the absent father and wastemen identities they considered negative forms of black masculinity. The portrayal of different black masculinities associated with different environments and the acknowledgment of the possibility of fluidity and adaptation, of changes with age and of the influence on young male masculinity across ethnic groups reflects calls to rethink essentialised black masculinities that purposefully and inadvertently allude to cultural deficiencies. Connell and Messerschmidt’s (2005) propose ways to do this in terms of including the reality of fluidity at local, regional and global levels and over time as well as acknowledging the influence exerted by subordinate masculinities on dominant ones moving away from static male characteristics and expectations.

The findings of this study also contradict Sewell’s (2010) assertions that it is an over-feminised upbringing of black boys that holds them back academically and also leads to crime and failure suggesting that because young men do not have strong male models, they turn to dominant male figures who too often are involved in gangs. While absent fathers have been shown to have an impact on the young men in this study, they elicited both positive and negative responses from young men beyond anger and frustration. Furthermore, as this study has shown, it is not simply the absence of fathers or the abundance of female headed households and subsequent female influences that encourage young men to be overly influenced by peers and to adopt detrimental “hard man” male identities. Sewell (2010) makes damaging claims that deny discrimination and the negative social position of young black men as key factors influencing some of the major problems they face which limit their choices and behaviours in many aspects of their lives. Beyond the possible deliberate choice of controversy stirring article title: ‘Black boys are too feminised’, which aimed to grab readers’ attention and encourage discussion, by seemingly laying some blame on women for men abandoning their sons, he makes a telling choice of narrative construction. Placing an element of liability on
mothers for the detrimental effect of the absence of fathers, demonstrates the ease with which women are expected to take responsibility for men in relation to many aspects of their lives in addition to sex.

8.4.1 Lack of empathy and respect for women
Young men acknowledged the double standards of sexual reputation and sexual freedom based on gender, and expressed disapproval about it. In spite of this, they did not view their own behaviour within their accounts of deceit and manipulation, as taking advantage of and reinforcing the double standards.

Young women were easily categorised into sexual extremes with sexuality and childbearing being difficult to countenance in one body. This led to a lack of respect for female sexuality. Women who did not require relationships for sex, or carried condoms were dismissed. In some ways it was this lack of respect that also facilitated the ease with which young men were able to dismiss parental responsibility based on making judgement about their child’s mother’s sexual behaviour. However, they did not recognise this outlook as contributing to them repeating their own circumstances of absent fathers which they were very adamant about not replicating.

Young men’s narratives exposed problems accepting female sexual desire as equal to that of men. Instead it was easily relegated to problems of self-esteem, a difficult upbringing, or some past trauma. It was not perceived as natural in the way man’s sexual desires were. If young men were able to view women’s sexuality within less restricted boundaries of sexual behaviour, it might reduce the need for dishonesty and manipulation and enable both sexual partners to make decisions based on the true nature of their partnerships.

Schwalbe (1992) refers to male supremacy as the materially and ideologically enforced condition where males are more highly valued than females. He suggests that the greater rights to self-determination and institutional power afforded to men also systematically prevent them from being responsible towards women by trying to imagine how they are thinking and feeling. This hindrance results from the evaluation of masculinity based on three key criteria: being able to control, to compete successfully and to produce. These criteria have negative consequences for men and women. The two key sources of self-
esteem: controlling and outperforming others, contradict the need to interact with others and to consider their feelings and desires as equal to one’s own. They also contradict beliefs that women must be negotiated with rather than tricked or forced to do something. Within this concept of masculinity then, women are interacted with and become a technical problem and object of resistance instead of a moral problem that requires feelings to be received. Denying dependence on women and remaining immune to their pain becomes a way of avoiding identification with women which enables the masculinist self to survive. Schwalbe (1992) calls for the need for men to expand the moral self and be willing to experience the feelings and positions of others. This means feeling with women and giving equal weight to their feelings in the face of a moral problem as well as responding to them as people whose subjectivity must be understood and who must be negotiated with as equals.

The problem of men’s diminished empathy towards women is also discussed by Connell and Messerschmidt (2005) as a way to maintain power. In this study reduced emotional relatedness contributed to the ease with which certain women could be legitimately treated with little regard. While young men were aware of the pain felt by men as a result of interactions with women, many showed a lack of understanding about the consequences of their own behaviour on women. This improved with age for those who described “gaining a conscience”. However, there were also admissions about past feelings of guilt towards women that were ignored successfully because peer acceptance and recognition had been considered more important.

The attitudes and expectations that young men in this study held supported the findings of Holland et al. (1998) about the masculinity of heterosexuality. This contrasted with common expectations about heterosexuality encompassing the collision of femininity and masculinity. The authors found that heterosexuality instead is experienced and viewed in terms of male sexual needs, male desires and male satisfaction with little regard for the acknowledgement or involvement of female sexuality and emotional needs. This form of heterosexuality is then maintained by both men and women.

Feelings of guilt were also found by Giordano et al. (2009), to contribute to young men moving from the “player” label and behaviour, toward honest relationships which were considered more fulfilling. They examined the “player” identity in the Midwest US and
found that the label, equivalent to the Caribbean “gallus”, existed across ethnic groups and was considered to involve youth appropriate behaviour by young men who were expected to have fun and to have many partners.

Among African American adults, suggestions have been made about oppressed and marginalised men lacking empathy towards women as a point of power and how their positions make it more challenging to develop a consciousness and options to alter power balances and interactions (Collins, 2005). Disempowered young women also have a role to play in the maintenance of these circumstances that ultimately benefit no one.

8.5 Influences on sexual risk taking

The dissociation of emotion and sex started for many young men at sexual debut but was also a response to relationship associated emotional distress. It facilitated casual sexual partnerships that tended to be fluid over the years, and was a way to control emotional attachment to partners. However, there were many instances of casual partnerships formed or maintained through deceit that did not take into consideration the impact on the young women.

8.5.1 Sexual debut

Young men were reporting first sex and the beginning of sexual experiences at very young ages and these experiences included partners they felt little emotional attachment to, as well as circumstances in which the opportunity to have sex was taken with limited intention and planning. None of these experiences were regretted despite mixed feeling about the sex fulfilling expectations and their occurrence resulting from unexpected opportunities. However, these first experiences did start some young men on paths of sexual pursuit with little awareness of sexual responsibility towards themselves or partners. Sexual debut under circumstances that encouraged sex purely as personal physical pleasure seemed to reduce young men’s willingness to commit to relationships which required effort and created vulnerability. This generated ways of operating that became habits. The delayed realisations about what relationships entailed or the need for compromise resulted in the development of a sense of responsibility for being sexually active occurring late for some young men.
The young men’s early awareness and exposure to sex in particular gives greater importance to the need for formal relationships and sexual education before age 16 that reflects the young men’s sexual and relationship realities as an alternative to peers, and to the importance of conveying the role of self-efficacy in relation to sexual desire and control, relationships and sexual responsibility. Elam et al. (1999) noted an ease and comfort with discussing sexual health among the Jamaican young people in their study compared to other ethnic minority groups as an advantage for planning interventions.

I decided to explore sexual debut in the qualitative research due to the disproportionately high percentage of young black Caribbean men reporting first sex before age 16 in Natsal-2 data, particularly among respondents aged under 25 (60% among young black Caribbean men compared to 33.2% among black African young men (p=0.048) and 27.2% among white young men (p<0.001) (unpublished secondary analysis I conducted that are not presented here). Early sexual debut among black Caribbean men has been identified across many sexual health studies as outlined in chapter 2 but it is problematic that there has been a lack of concern in terms of focused research and interventions to tackle and further investigate the consequences. This contrasts with the great concern about young women’s sexual debut in sexual health research (Holland et al., 1998, Smith et al., 2005). It suggests an assumption that young men do not need guidance and protection, further enforcing ideas of masculinity as naturally sexual. In the case of young black Caribbean men, assumptions about hypersexualised masculinities might also be contributing to the lack of concern about it.

While direct associations between age at first sex and reporting STIs have not been identified in population surveys (Sonnenberg et al., 2013, Wellings et al., 2001) this needs to be explored in more detail in samples which allow similar analysis within black Caribbean populations. The impact of the dissociation between physical and emotional maturity identified in many of the young men’s accounts of early sexual debut also require further examination.

8.5.2 Encouragement for sexual risk-taking provided by peers and youth culture

While peer pressure is frequently discussed within sexual health research, it is not necessarily contextualized and examined with a view to understand how it interacts with other factors (Maxwell and Chase, 2008). Peer pressure was very influential in terms of
the impact on behaviours and beliefs from first sexual awareness into adulthood. Pressure from peers was experienced by the young men in several forms and was both external and internal. Externally, it involved teasing and the creation of friendship groups within which “the stigma of being a virgin” was felt and could lead to feelings of inclusion or exclusion even at 11 and 12 years of age. This was further reinforced by intergenerational age mixing from very young ages. Internally, the pressure resulted from expected norms, and the need for confidence to be drawn on in the case of challenges from other young men, or feeling the need to live up to expectations.

There was consensus about the expected sexual debut of young black men before age 16 even though the young men also acknowledged that there was often exaggeration in relation to discussions about sexual conquests among their peers. However, unlike the older age at first sex reported in the general population (Wellings et al., 2001), the young black Caribbean men’s assumptions about early sexual debut were not found to be overestimations. They are supported by the epidemiological studies discussed in chapter 2 and the Natsal-2 secondary analysis I conducted.

The significant influence of peers continued past sexual debut in the form of both encouragement to seek partners and ridicule, mainly from friends, for fidelity or for not having many partners. Expectations perceived from their local norms and from wider society were also experienced as pressures to live up to the hypersexual stereotype of black men. Sexual partners were not discussed in terms of putting direct pressure for or against condom use but the desire to fulfil high sexual expectations created performance concerns which could discourage condom use. Young men failed however to recognise their own involvement, through their interactions with peers, in perpetuating the peer pressure they described as detrimental.

Both young men and key informants described expectations and experiences of young men in friendship groups to behave in a very similar manner irrespective of ethnic backgrounds. Exceptions to this were discussed mainly in relation to the greater importance given to sex and relationships among Asian cultures and Muslim religions or strict more recent African immigrants. However, young men were also found to have greater freedom than women across these groups and to report less sexual conservative norms. Similar observations were made in London based research of young people from
different ethnic minority backgrounds (Elam et al., 1999, French et al., 2005, Sinha et al., 2007). This idea of an urban youth culture particularly influential on men, was further reinforced by the additional pressures to conform that arose from living in close proximity to other young people in social housing with communal outside space. Both key informants and young men identified peers as the biggest influence with ethnic background being secondary to being young men.

The urban youth culture key informants spoke of was expressed by young men of different ethnic backgrounds across London, and noted to involve a certain style of dressing and behaviour towards women on different estates. This included some Asian and Muslim young men who did not conform to their stricter religious and cultural rules. While there were young men in the study who felt their Christian upbringing or current faith had mediated some of the pressures of youth culture, religion was not discussed as a strong influence or relevant to their daily lives in terms of sexual behaviour. Young black men whether of African or Caribbean background, were often seen as similar and discussed interchangeably by young men, and some key informants suggesting an overlapping young black British identity.

As part of the discussion about youth culture and risk taking, young people’s vulnerability needs to be considered. This includes a tendency to assess risks differently to adults, being in a life stage characterised by experimentation and risk taking as well as a heightened desire to search for pleasure (France, 2000, Mitchell et al., 2012). Further, risks to their reputation and social standing is given more importance than health risks and risk taking also plays a part in the process of distancing themselves from parents and forming their own identity (France, 2000).

Although the popularity of ideas about ‘risk society’ have been attributed to giving young people the impression that their own stories and routes are unique and therefore risks are viewed as being experiences at the individual rather than collective level, this has been criticised for promoting the idea that risk taking is the result of the lack of information or of cognitive breakdown (France, 2000). This facilitates discussions of individual deficiencies and can be used as means to control groups by blaming them. France (2000) argues instead that youth risk taking can only be understood by recognising the social, political and cultural context within which it is experienced. He
proposes three area of interest in recognising risk within its context which are supported by the findings of this study:

1. The construction and influence of lay beliefs which are shaped by socioeconomic circumstances, gender and ethnicity involving attempts to make sense of contradicting and confusing experiences as portrayed by the young men in this study

2. The impact of social interaction and power relations which are heavily influenced by peer groups, social etiquette and social and community norm and involve a negotiated process resulting from social interactions.

3. The habituation of risk taking which results in differing balances of decisions made as a result of considered alternatives and the world of routine activities in which interpretations and considerations of risk and information can become secondary to routine and familiar behaviour.

8.5.2.1 Failed proximate relationships
Young men witnessed difficult parental breakdowns growing up and limited successful relationships they valued or wanted to emulate. There were also strong opinions about the temporary nature of relationships among young people and the inability of most young people to have honest monogamous relationships. This was based on personal experiences of betrayal, success seducing young women with boyfriends and the experiences of friends. The combination created cynicism about the reality of monogamous relationships as well as providing justification for seeking casual sexual partnerships to avoid failure and disappointment. This cynicism however also allowed young men to relinquish responsibility for trying and learning to maintain relationships. Instead maturity, which was expected to come with age, was anticipated to bestow new behaviours that at the right time would enable them to have long term serious relationships. Their expected sex and relationship trajectories involved fun and experimentation while young through temporary relationships and did not necessitate monogamy. Yet, there was an expectation of ending in a serious monogamous relationship with children from that partner. Self-efficacy was surrendered in these trajectories to maturity which were expected to lead to serious relationships regarded as signs of being serious men.

Young men made references to monogamous relationship ideals and ideals of families composed of a couple living with their children. This however, did not reflect the reality
of many of their own relationships and family structures nor those around them. The
difficulty parents experienced in maintaining relationships and the abundance of step
siblings in their families created a desire to be different but also doubt in their own
abilities to succeed.

8.5.3 Limited disincentives to unprotected sex and concurrency
The increased pleasure of sex without a condom was a strong incentive for it among
young men who had experienced it. In contrast the negative outcomes of STIs and
pregnancy were considered problems to varying degrees. Experiences of STIs had
created arguments in relationships and irritation at having to visit clinics, take
medication and avoid sex temporarily but these were not considered substantial
disincentives. The young men who had never experienced STIs expressed more
concerns about them in comparison. The measures young men took to protect
themselves from emotional vulnerability were in stark contrast to the minimal efforts to
protect their bodies from infections. Key informants expressed some concern about the
possible trivialising of STIs due to the negligible consequences perceived by some
young men and the easy process of clinic visits, examinations and treatments.

The outcomes of concurrent partnerships maintained dishonestly were also not
considered very problematic. Temporary feelings of guilt and the arguments that
resulted when the deceit was discovered were considered disadvantages, but many
concurrent partnerships were maintained unknown to one or more of the young women
involved. Furthermore even when other partners were discovered, relationships did not
necessarily end. The consequence of cheating for young women was greater since
young men reported being unable to forgive the betrayal and ending relationships.

Pregnancy was not always a concern with all partners since while being an undesirable
outcome of sex, pregnancy prevention and raising a subsequent child were considered
conditional responsibilities by some young men depending on who their partner was
and the nature of their partnership. Further, encouraging partners to visit GUM clinics
after unprotected sex was also used as a method to prevent pregnancies. Neither solution
put the burden on the young men. The young men who felt an unconditional
responsibility towards any pregnancy expressed more concern about avoiding any
pregnancy.
8.6 Possible solutions

Young men who were able to behave in a way that did not conform with their friends, spoke about the ability to make decisions about sequential partners or being faithful to a girlfriend and being able to live by their decision. For these young men it involved making a conscious decision but also some defending of their positions in front of friends and enduring some teasing. It was less challenging when friends held similar views but also achieved among friends who did not.

Even though reporting unprotected sex was joked about, no teasing about consistent condom use was reported. Condom use was less problematic than being faithful or overly attached to a partner. For the young men who started using condoms from first sex and continued, distrust of young women and the insistence of partners to use them had helped. They also demonstrated self-efficacy in their belief that having condoms always available was easy and possible to do and in their ability to refuse sex in the absence of condoms. This success was accompanied by an outlook about condoms and avoiding STIs and pregnancy in which they were perceived as personal responsibilities that were not conditional on partners.

A positive finding was that unprotected sex was not associated with trust among young men, even though they suggested young women still agreed to it as a sign of trusting their partner. Circumstances within relationships and with casual sexual partnerships were considered different but while women who insisted on sex without condoms were viewed with suspicion, those who insisted on using them were seen as caring for their bodies and being ambitious. Condom use was not considered socially problematic for the young men. They did not report unprotected sex as a result of pressures from partners or expectations that they should not carry condoms or know too much about them in the way these deterrents have all been identified as barriers to condom use experienced by young women in other studies (Holland et al., 1998, Marston and King, 2006).

Multiple partners were avoided by some young men despite the status they provided, because they were considered too much effort or unnecessary if an easily accessible sexual partner was available. While some young men started off on relationship paths that did not involve multiple partners, others made changes towards serial monogamy.
after experiencing STIs or betrayal. This also helped some young men improve condom use and become more aware of risk transmission between concurrent partners.

Those who had always taken precautions such as using condoms and maintaining sequential sexual partners, spoke about these behaviours as their approach to sex and relationships. Young men who had adopted monogamy framed their decisions as taking the more challenging route by making an effort to work through relationships and to resist temptation. They also saw their decisions as a sign of maturity in taking responsibility for their actions and being more considerate of partners. Young men who decided to make their choices irrespective of the expected outcome or the behaviour of partners, were better able to maintain the monogamous relationships they strived for. They also accepted the possibility of emotional distress and were willing to take the risk.

Young men were able to be different from their peers as a result of having a different focus from early on in their lives or changing their behaviour as they got older through experiences or realisations that changed them. Learning through experience was valued more than advice given by adults which young men admitted to ignoring. In fact, good advice and parental involvement alone were not always enough given the different outcomes among young men who described similar advice and family input. This attitude of learning through experience, reflected ideas of male stoicism and young men admitted it had resulted in STIs, unwanted pregnancies and children with partners they did not want a relationship with.

8.6.1 Access to and experiences of GUM clinics
Based on the encouraging findings of my preliminary PATSI study data analyses, I did not explore GUM clinic service use or access in much detail with the young men within the interviews. It is worth noting nonetheless that young men reported little hesitation about visiting GUM clinics. Rather, clinic visits were referred to as post sex strategies to prevent pregnancy and check for STIs. This echoes findings about the importance for men of seeking help for symptoms that interfere with sexual performance (O’Brien et al., 2005). Exceptions were made to the unhelpful expectations for men to be stoic about health problems and avoid healthcare seeking when it came to sexual health.
These positive findings about good access and experiences of GUM are encouraging but do not preclude the possibility of an unmet need among black Caribbean young men in the general population. Young men reported assuming they were STI free by sending partners as proxies for STI check-ups. Furthermore, the fluid nature of concurrent partnerships combined with the reluctance to notifying partners who were not considered important, still left the possibility of an unmet need for GUM clinic services in the general population.

The PATSI study data analyses also suggest that while black Caribbean men attending GUM clinics are not experiencing disproportionate sexual health care seeking patient or provider delay, there is still work to be done to improve service provision. Provider and patient delay need to be reduced further and health promotion needs to focus on conveying the importance of abstinence when symptomatic.

The necessity of continuing work to attracting more men to GUM clinic has also been raised by Hancock (2004) who pointed out the under-representation of men in GUM clinics, particularly young and black Caribbean men. He suggested that sexual health services are sometimes considered to be for females while seeking help is considered unmanly. Visits to GUM clinic and STI acquisition were not seen as threats to masculinity by the young men in this study but key informants did note experiences of discomfort among some young black Caribbean men who put on acts of masculine bravado in the clinic public spaces. Connell et al (2001) also reported concerns among young black people about clinic staff making assumptions or stereotyping them. These concerns were somewhat validated by key informant references to some clinic staff members’ expectations for young black men to have multiple partners. Although these anecdotes were not accompanied by concerns about unprofessional behaviour towards patients, the possibility that such assumptions might influence interactions during consultations was acknowledged.

8.6.2 Unmet need identified by young men and key informants
Young men and key informants noted the absence of discussions about relationships in sex education as contributing to the view of sex as separate from intimacy and emotion. Early sexual debut with partners young men had little emotional involvement with, likely contributed to this too. The influence of negative sexual stereotypes, early
exposure to sex, intergenerational age mixing and the devaluing of relationships highlight the importance of education sessions to be developed with the context of the young men’s lives in mind. This could help provide alternative approaches to sex and relationships which were found to be limited or absent. It may be unrealistic to aim to remove peer pressure or change stereotypes, but as demonstrated by Emmanuel’s experience of the black men forum, having a counterbalancing influence and an opportunity to become aware and discuss negative stereotypes can help to challenge negative influences.

Relationships and sexual partnerships need to be incorporated in sessions, along with the detrimental impact of dishonesty on STI prevention. Sexual responsibility needs to be discussed both within and outside relationships, and for both young men’s and their partners’ benefits in terms of pleasure and protection from STIs and pregnancy. The need for young men to take responsibility for their peers is also relevant given the detrimental effects of peer pressure on their sexual behaviour. Further, interventions targeting friendship groups might be more appropriate than ones with a focus on the individual given the importance of peer influence and local norms. Young men recognised the influence of peers and their environments on them, but were less able to recognise their own roles in perpetuating limited masculinities and femininities, and in putting pressure on friends to have sex, have concurrent partners and avoid emotional involvement with young women.

More emphasis also needs to be placed in education and health promotion about the detrimental impact of the existing gender norms on both men and women, looking beyond the double standards to the acceptance of female sexuality. Both young men and young women would benefit from facilitated discussions in which male and female perspectives are presented. This would help improve understanding between them, to explore the different anxieties experienced and to present realistic expectations of relationships while also portraying men and women as equally sexual beings. The benefits of emotional relationships need to be promoted as well as the benefits of sex within them. Sexual health professionals need to be mindful of inadvertently perpetuating stereotypes and polarized identities, and encouraging or legitimising the labels of “player”, “sweet boy”, “good girl”, “bad girl” and “fun time girl” within education sessions. Their unintentional reinforcement of gender stereotypes and the ease
with which some key informants had engaged with negative stereotypes suggested a need for further training among professionals supporting black Caribbean young men in order to ensure a more universal understanding about the complexity of the young men’s lives and the vulnerabilities they experience.

Given that young men were aware of GUM clinics and used them, there were no direct study implications about medical service delivery. However as an important point of contact for young men about their sexual health, recommendations for GUM clinic service delivery from this study relate to using clinic visits as opportunities to allow discussions about relationships, trust and emotional support as well as to provide further resources such as relationship mediation or encouragement for patients to bring partners or increase casual partner notification. Given the fluidity of sexual partnerships and the influence of friendship norms, it might be useful for clinic staff and health advisors to discuss STIs and sexual risk reduction within the context of ongoing sexual risk-taking. The PATSI analysis also suggested that GUM clinics need to emphasise the importance of abstinence while symptomatic to patients with STI symptoms.

Two key points of intervention were identified in the study. The first was early in secondary school (Year 9 or 10, ages 13-15) as a time to begin discussions about emotional intimacy and begin ongoing work on gender norms and the multiple forms of masculinity and femininity. It would also be an opportunity to acknowledge and address local expectations, including “virginity stigma”. The second point of intervention was the beginning of college (ages 16-17) when young men and women would benefit from hearing each other’s perspectives and from learning about coping with betrayal and the end of relationships. This would also be an ideal time to discuss young men’s observations about dishonesty leading to more success with young women than being caring and kind.

Outreach work is also recommended in order to provide alternative possibilities for young men whose circumstances put them at greatest disadvantage in terms of geography, deprivation and difficult proximate relationships. This would allow for more targeted work on estates for example to address friendship groups together and expand on legitimate ways to be men and develop partnerships. Related to this, working with friendship groups could facilitate the examination of individual contributions to
maintaining stereotypes and double standards. It would also be important to increase awareness about the costs to both men and women of the limited masculine and feminine identities in terms of increased STI risk, relationship difficulties and the perpetuation of family circumstances they did not want to reproduce. This echoes the findings of McDaid et al. (2012) about men living in deprived areas having limited resources to construct masculine identities which narrows their perceptions of masculinity and can result in negative sexual health outcomes.

The strategies of involving positive role models the young men can relate to and new opportunities of fulfilment could help mitigate some of the negative local influences. However, matching by ethnicity is not enough. As noted by several young men, the role models would have to come from similar backgrounds economically and geographically as well in order to be taken seriously. Alternative opportunities to enhance self-esteem were essential in helping young men avoid illegal activities and reduce the importance of peer pressure but they had a lesser impact on sexual risk-taking and changing attitudes towards sex and relationships.

8.7 Overview of findings

In this thesis I argue that the convergence of the young black Caribbean men’s young, black and male identities creates strong influences that come together, placing them in vulnerable positions in terms of STI acquisition. These influences include discrimination and deprivation leading to disadvantages in school, access to employment and options in housing facilitating the likelihood of overall disruptive environments. Within these environments, an exaggerated importance was given to fitting in with peers and getting recognition from them as well as following perceived local norms that promote narrow masculine identities. Living on estates in particular facilitated intergenerational age mixing which led to very early exposure to sex, alcohol and cannabis.

The young men experienced pressure to lose their virginity, messages devaluing relationships and encouraging the dissociation of sex from emotions as well as opportunities for sex while positive guidance and opportunities for sex education from school or parents were limited or absent. This left young men to rely on inappropriate sources for information and advice including porn, peers and older men which were
described by young men as providing generally detrimental examples and influences but remained mostly unchallenged. Furthermore, the hypersexualised stereotypes that exist about black men created additional pressure and encouraged sexual risk-taking. The lack of guidance extended to other life domains which might have otherwise offered alternative positive black male identities. There was also a limited availability of positive role models in the young men’s lives in terms of men they wanted to emulate for economic, academic or relationship success.

The limited ways to express black masculinity combined with urban male youth culture and further constrained by deprived geographical locations, did not place value on sexual responsibility and caring sexual partnerships. This hindered the development of empathy towards young women and encouraged a strong aversion to emotional distress that made multiple casual sexual partnerships attractive. Early sexual debut was encouraged and started young men on sexual trajectories that began with a dissociation of sex into a physical act devoid of emotion. This created further disincentives for caring partnerships and monogamy. Casual partnerships or “links”, described as mainly physical partnerships involving little emotion and no expectation of monogamy, featured more than girlfriends within the young men’s partnership histories. Although young men claimed these were understood as such by both parties, in reality the lines between “links” and relationships with girlfriends were blurred, varying levels of emotional involvement and dishonesty were described within their accounts. The latter increased opportunities for STI acquisition.

Relationships were viewed as antagonistic process in which young men risked greater emotional pain than women because it was perceived to be harder for them to expose their vulnerabilities compared to women who fell in love more easily. The need for dishonesty to make young women believe they were in a relationship was seen as necessary because honesty and being a “sweet boy” was not experienced or seen to lead to success but rather ended in rejection and distress. Casual partnerships became attractive for maintaining seduction skills, for peer recognition and for ensuring that when a relationship ended, there would still be someone to go to without the commitment and complications of relationships.
While all the young men said they would wear a condom if asked, some passed responsibility for asking onto women. Women were expected to protect their bodies and to take responsibility for pregnancy. The admission from young men about deceiving young women into casual partnerships resulted in increased opportunities for STI risks to be underestimated. Unknown concurrency was identified as particularly problematic for young women in the Young Brent Project that preceded this study (Gerressu et al., 2009). This limited young women’s ability to make informed decisions about risk reduction, which would then also inevitably have a negative impact on young men.

Expressions of male sexuality among these young men did not often include empathy for women or respect for female sexuality which was seen as unfeminine outside very narrow boundaries. Young men also expected to move from stages of youth and testosterone driven sexual fun to monogamous relationships naturally as a result of growing up into mature men. Sexual and relationship maturity was discussed as something that would happen with age rather than as a result of active choices, compromise and sacrifices.

The young men who showed resilience and chose serial monogamy over concurrency were able to make different choices. They did so at a cost they accepted risking ridicule from friends and emotional distress but also deciding to make decisions irrespective of their partner’s behaviour. They were also able to frame their choices as masculine strengths. This included living by their principles and choosing the more challenging option of making the effort to maintain relationships. Young men reported good access to and experiences of GUM clinics but the limited consequences of cheating and acquiring STIs created minimal disincentives to sexual risk-taking.

8.8 Conclusions and recommendations for policy and practice

The findings from this study fill a gap in sexual health research by presenting the wider social and environmental context in which sex and relationship behaviours are learned and experienced by young black Caribbean men in North West London. This contributes to the research which is trying to explain the disproportionate risk of STI acquisition among young black Caribbean men to provide more contextual information
and to explore the social forces and other risk factors hidden within the ethnicity variable of epidemiological studies.

The challenging position the young men in this study hold, is not a novel discovery, nor is it unique to their location in an outer London borough. There will be elements that are relevant to young black men across the UK but the combination and concentration of challenges may vary. Despite these possible variations, the possibility to explore broader elements of the young men’s lives has provided a valuable opportunity to show how wider social challenges and disadvantages can be detrimental to sexual relationships and behaviour.

The study findings reveal the need to work towards the development of wider social interventions at whole system and community levels given the breadth of social challenges explored and found to be negative influences that are detrimental to sexual health. This will require collaborations beyond the fields of health. For example, as a starting point, the need for discussions across health, urban planning, sports and leisure, employment, education and media sectors. The importance of moving next to address system level interventions is a logical conclusion; however, in reality such broad community or system level interventions are complex to get interest and commitment towards, challenging to develop, deliver and evaluate, and we do not know how to do them yet.

Thinking without obstacles outside the confines of practicality, an ideal intervention should aim to change the young men’s disadvantaged positions in society so enabling them to live in areas that do not have concentrations of deprivation which limit structured community activities. The young men would benefit from the opportunity to build confidence and gain peer admiration through skills in different activities. This requires the opportunity to try different things both in school and outside of school so an ideal intervention needs to provide more than youth recreation centres to keep young men off the streets. Despite the fact they were developed with good intentions, they can end up just providing low structure activities (e.g. watching TV, hanging out with peers) and have been associated with high levels of antisocial behaviour compared to highly structured leisure activities such as sport and school clubs (Mahoney and Statin, 2000). Structured activities are defined as ones that occur with others of the same age group,
involve an adult leader and meet at least once a week at a regular time. Structured activities such as involvement in athletics were identified by Fredericks and Eccles (2006) to also tend to have rules and norms guiding behaviour which were found to be particularly helpful to boys in helping channel aggression and reducing alcohol and drug use.

Participation in structured activities improved externalising behaviour (including aggression, poor impulse control, delinquency and general behaviours that might be considered antisocial or conduct problems) among African American boys in particular (Fredricks and Eccles, 2006). The authors hypothesise these positive effects result from a combination of factors including the opportunity to develop interests and build skills, to gain greater self-esteem, to build relationships with supportive adults, to be exposed to different experiences and people, to gain a sense of belonging and to have less time to associate with negative peer influences (Fredricks and Eccles, 2006).

Schools interventions should ensure pupils feel valued and included instead of feeling discriminated against by being ignored or unduly punished. This might require further training in unconscious biases for staff and students as well as increasing pastoral care to make internal or external referrals to counsellors possible for young men who display challenging behaviour. Family breakdowns were particularly detrimental for some of the study participants and the opportunity to speak to a professional about the effects on them may have helped them; for example to manage their anger differently preventing the difficult behaviour exhibited in school that in retrospect they attributed to their feelings of frustration and anger.

Another area of influence linked to the education system relates to supporting young men to get through their two years in college since several participants reported starting college but dropping out and subsequently limiting their qualifications for employment. There were discussions about regretting not working harder in school, as well as about the difficulties of returning into once past school age so it would be helpful to have greater provision for young people to complete their two years in college and to return to education as young adults.
Undesired and involuntary life transitions are considered serious stressors and tend to capture hardships that are life changing such as teenage pregnancy and dropping out of school. They are concentrated among low socioeconomic groups and lead to consequences that are difficult to reverse. In addition to having negative emotional impacts, they are key to the transmission of social disadvantage from one generation to the next by placing people on paths leading to low education, low job prospects and income, and the proliferation of other stressors (Pearlin et al., 2005).

In terms of physical environment, elements of what was described by some participants as residential segregation were problematic. An increase in affordable housing and a change in the way social housing is built needs to be considered to avoid pockets of deprivation and frustration as described by the young men. This would help reduce exposure to risk environments including inappropriate intergenerational mixing and spaces to be idle without opportunities for constructive leisure activities. At the community level, providing opportunities for people to improve their economic positions could involve improving employment skills, providing affordable childcare and providing opportunities for young people who have left school, to return and complete their education when they are ready. Improving employment opportunities by providing practical skills training and qualifications, and by reducing discrimination in employment practices would also help in practical terms to provide a broader range of housing options and to reduce the pull of ‘the street mentality’.

Lastly, it will be important to develop interventions to shift media portrayals. The portrayals of young black men need to move away from the stereotyped hypersexualised ones. Further, representations of female sexuality need to be expanded beyond the options of vixen or virginal stereotypes to a range of sexual femininities.

High risk-taking behaviours have been identified among black Caribbean men, including concurrent partnerships, but epidemiological studies have been unable to explain the disproportionate STI rates. This supports the need for future sexual health studies to include both clinic and population level behavioural surveys powered to examine ethnic variations by gender and within black Caribbean populations instead of having to rely on secondary analysis of studies which were not powered for such comparisons. This will make it possible to determine patterns of associations with STI
acquisition within the black Caribbean population, and how this is similar or different to
the associations established in the general population.

The findings from this study will be of value in the development of questions within
sexual health surveys and in the development of more refined measures that take into
account the social and economic circumstances of black Caribbeans. For example,
measures of inequalities other than deprivation alone, measures of marginalisation, of
experiences of pressure form hypersexual stereotypes, more detailed measures of
concurrent partnerships including partner awareness of it, and attitudinal questions
about expectations, gender norms, sexual responsibilities and acceptable forms of
masculinity. The dearth of research and interventions in this group identified as high
risk repeatedly over the last decade, is particularly noticeable when compared to work
with MSM and black Africans in the UK. However, this may be related to the additional
HIV infection risks in both these populations while HIV rates are lower among black
Caribbeans (Gerver et al., 2011, Health Protection Agency, 2008, National Aids Trust,
2010).

With the exception of the LIVITY study (Gerver et al., 2011) conducted from 2005 to
2007, which focused on HIV within the black Caribbean community in the UK and
involved epidemiological and behavioural research, the absence of more recent sexual
health studies provides strong support for the need for further research and funding to
be allocated to large scale epidemiological studies in this population group. This work
will need to take into account the problems identified with past research exploring
health inequalities. These have included concerns regarding the quality of the research,
and its potential to benefit and not stereotype and stigmatise ethnic minority groups
(Salway et al., 2011).

The upstream focus of this study on social and environmental factors will be helpful for
the development of targeted sexual health programming and interventions. The findings
can be used as a broad base on which to build local profiles of social influences on
sexual behaviour, which will be key to developing targeted interventions as suggested in
Marston and King’s (2006) review. The influences on the sexual attitudes and
behaviours of young black Caribbean men can be compared and contrasted to the
circumstance of the young black Caribbean men in other geographical, social and
economic settings including different ethnic concentrations. The findings can also be used as a starting point to delve into specific areas of influences that would benefit from being examined in greater depth, for example: how the successes and failures of parental and peer relationships influence attitudes and choices in sexual partnerships and sexual behaviour, the development of emotional intimacy given the frequency of early sexual debut, and the more long term effect on sexual partnerships and behaviour.

Considering the changing nature of relationships with age, it would be ideal to conduct qualitative research with participants over time at different stages in their lives. This would help capture the influences as they are experienced rather than relying on memory and inevitably including reinterpretation based on hindsight. It would improve the tracking of the changes in attitudes, peer influence, self-efficacy, confidence and partnership expectations. The possibility of longitudinal qualitative research might be facilitated by making the research an addition to the longitudinal cohort studies running in the UK at the moment following children into adulthood, for example the Millennium Cohort Study (Centre for longitudinal studies, 2014).

Sexual health education needs to occur before sexual debut and provide a believable and reliable source of information for young black Caribbean men. Findings from Natsal-2 analyses that school was a valued and desired source of sexual education in the general population (Macdowall et al., 2006), was not reflected in this study. This is likely because provision was inconsistent, information about relationships was absent and sessions about STIs and condoms occurred mainly after sexual debut.

From a policy perspective, the problem of early sexual debut among young black Caribbean men needs to be addressed. More broadly, the increased risk of STI acquisition was one of many negative outcomes including stress in proximal relationships, which was experienced as a consequence of the disparities that existed in economic circumstances, opportunities for housing, experiences within the education system, opportunities within the labour market and experiences of hypersexual stereotypes. In relation to structural problems of concentrated deprivation, physical disorder and the shortage of recreational services, this speaks to the need to for the geography of estates to be examined as urban spaces that may be altered in future
planning given their impact as risk environments identified by both young men and key informants.

It has been important in this study to acknowledge the role of the young men’s social and economic environment as well as their position within a wider political structure. Their agency however should not be ignored and the successes among the young men who minimised their sexual risk should also be recognised. In spite of this, the focus of this study has been on the limiting factors and those that encouraged choices and behaviours that were detrimental to the young men and their partners. In doing so, I did not want to present stereotypes of these young men as unable to help their behaviour nor did I want to stigmatise them. They admitted selfish behaviour, treating women badly and making bad decisions but also spoke about moral codes, frustrations, love, hopes and struggles in different aspects of their daily life. It has been essential to explore their sexual behaviour within the realities of their lives.
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Appendices

Appendix A: Secondary analysis of (PATSI) study data
Appendix B: Topic guide for interviews with young men
Appendix C: Topic guide for interviews with key informants
Appendix D: Sampling frame for interviews with young men
Appendix E: Demographic characteristics of young male participants
Appendix F: Helpline sheet for young men
Appendix G: Visual timelines of relationships
Appendix H: Conceptual index/ Initial thematic framework
Appendix I: Visual display of themes
Appendix A: Secondary analysis of Patient Access and Transmission of Sexually Transmitted Infections (PATSI) study data

This preliminary phase of the study involved the secondary data analyses of a multi clinic-based survey, namely the Patient access and transmission of sexually transmitted infections (PATSI) study dataset (Mercer et al. 2007). The purpose was to examine the variations (by ethnicity) in patterns of sexual health care seeking behaviour for STIs. I did this by conducting analysis of the PATSI study dataset to identify whether disproportionate delays in deciding to attend GUM clinic or gaining access to clinics might contribute to the higher risk of STI diagnoses among black Caribbean men. Sexual health seeking behaviour could then be examined in more detail through the interviews if it was identified as a concern. This provided an opportunity to compare black Caribbean, black African and white male patients within the largest survey to date of GUM clinics in England and these analyses informed the qualitative second phase of this study.

In brief, the PATSI study involved a self-completion 22 item written questionnaire in English administered in seven GUM clinics across England. All new patients attending the clinics between October 2004 and March 2005 were asked to complete it. Information was collected about socio-demographic characteristics, reasons for attending the GUM clinic, health seeking behaviour and STI prevalence. Five of the seven clinics collected data on self-identified ethnicity as part of the clinics’ routine database. The two that did not reflected the nearly all white local population and were excluded from the analyses. This left 2,824 questionnaires to be analysed, including 345 black Caribbean, 193 black African and 2286 white respondents. I compared black Caribbean male respondents to black African and white respondents. The Chi-square statistic for categorical variables (considered as P< 0.05 for all analyses) was used to determine statistical significance. Analyses were carried out using survey commands in STATA 10.0 to take clustering by clinic into account (StataCorp 2007).

The influence of the secondary PATSI analyses on Phase 2

The results of the secondary analysis I conducted on the PATSI study database have been written up in a paper published in Sexually Transmitted Infections (Gerressu et al. 2012). Comparisons of healthcare seeking behaviour were made between black Caribbean, black African and white men attending five GUM clinics in England. Table
1 presents sociodemographic characteristics. Men aged under 25 made up almost half of the black Caribbean patient population compared to the older age composition of black African and Caribbean men (black Caribbean 46% versus 35.8% white versus 32% black African men were under 25 years old). Black Caribbean men also reported the least qualification, were less likely to have college or work commitments when the clinic was open but more likely to have childcare responsibilities than black African and white men.

<table>
<thead>
<tr>
<th>Table 1: Socio-demographic characteristics, by self-reported ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black Caribbean</td>
</tr>
<tr>
<td>------------------</td>
</tr>
<tr>
<td>Age, grouped (3 groups)</td>
</tr>
<tr>
<td>&lt;25</td>
</tr>
<tr>
<td>25-34</td>
</tr>
<tr>
<td>35+</td>
</tr>
<tr>
<td>Median (lower and upper quartiles)</td>
</tr>
<tr>
<td>Denominator</td>
</tr>
<tr>
<td>Highest educational qualification so far</td>
</tr>
<tr>
<td>Degree/ higher degree</td>
</tr>
<tr>
<td>A levels</td>
</tr>
<tr>
<td>GCSE</td>
</tr>
<tr>
<td>NVQ / Other qualifications</td>
</tr>
<tr>
<td>No qualifications</td>
</tr>
<tr>
<td>Denominator</td>
</tr>
<tr>
<td>Childcare responsibilities</td>
</tr>
<tr>
<td>15.5%</td>
</tr>
<tr>
<td>Denominator</td>
</tr>
<tr>
<td>Work/ attend college when clinic is open</td>
</tr>
<tr>
<td>47.7%</td>
</tr>
<tr>
<td>Yes, some days</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Denominator</td>
</tr>
<tr>
<td>Registered with a GP</td>
</tr>
<tr>
<td>77.4%</td>
</tr>
<tr>
<td>Denominator</td>
</tr>
</tbody>
</table>

a Denominator excludes those under 21
b Yes includes: all day every day or after school and holidays or weekends only or other

How respondents found out about the clinic and reasons for attending are reported in Table 2. The two most common ways of finding out about the clinic were through their general practice (GP) surgery and through friends. Black Caribbean men were most likely to report friends being their source of information (32.5% versus 19.8% white versus 27.7% black African) and least likely to report finding out through their GP surgery. The three most common reasons for attending the GUM clinic were having symptoms, followed by having no symptoms but wanting a check-up and third wanting an HIV test.
Table 2: How respondents found out about the clinic and reasons for attending, by gender and self-reported ethnicity

<table>
<thead>
<tr>
<th>How respondents found out about the clinic</th>
<th>Black Caribbean</th>
<th>White</th>
<th>Black African</th>
<th>Black Caribbean vs White p-value</th>
<th>Black Caribbean vs Black African p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>I found it in the phone book</td>
<td>4.3%</td>
<td>11.1%</td>
<td>2.1%</td>
<td>p=0.0084</td>
<td>p=0.1774</td>
</tr>
<tr>
<td>I found it on the internet</td>
<td>4.3%</td>
<td>12.17%</td>
<td>5.1%</td>
<td>p=0.0170</td>
<td>p=0.7290</td>
</tr>
<tr>
<td>My GP or the nurse at the GP surgery told me about it</td>
<td>20.9%</td>
<td>29.5%</td>
<td>37.1%</td>
<td>p=0.0008</td>
<td>p=0.0075</td>
</tr>
<tr>
<td>I heard about it at the Family Planning Clinic</td>
<td>2.4%</td>
<td>1.4%</td>
<td>2.1%</td>
<td>p=0.4100</td>
<td>p=0.8099</td>
</tr>
<tr>
<td>I saw an advert in a newspaper or magazine</td>
<td>0%</td>
<td>1.189%</td>
<td>3.093%</td>
<td>p=0.5727</td>
<td>p=0.0578</td>
</tr>
<tr>
<td>I picked up a leaflet</td>
<td>2.4%</td>
<td>1.6%</td>
<td>4.1%</td>
<td>p=0.2249</td>
<td>p=0.3495</td>
</tr>
<tr>
<td>My partner told me about it</td>
<td>16.6%</td>
<td>11.8%</td>
<td>18.6%</td>
<td>p=0.5300</td>
<td>p=0.8052</td>
</tr>
<tr>
<td>A friend told me about it</td>
<td>32.5%</td>
<td>19.8%</td>
<td>24.7%</td>
<td>p=0.0536</td>
<td>p=0.2009</td>
</tr>
<tr>
<td>A family member told me about it</td>
<td>2.4%</td>
<td>1.8%</td>
<td>1.0%</td>
<td>p=0.4860</td>
<td>p=0.4888</td>
</tr>
<tr>
<td>Someone else</td>
<td>10.4%</td>
<td>10.7%</td>
<td>11.3%</td>
<td>p=0.8552</td>
<td>p=0.7503</td>
</tr>
<tr>
<td>Denominator</td>
<td>163</td>
<td>1093</td>
<td>97</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Reasons for attending GUM clinic *        | 41.7%          | 49.5% | 46.7%         | p=0.1681                          | p=0.5160                                 |
| Have (had) symptoms                       | 12.1%          | 10.1% | 5.5%          | p=0.5292                          | p=0.1440                                 |
| Partner has/ had symptoms                 | 12.1%          | 11.2% | 14.4%         | p=0.6729                          | p=0.4064                                 |
| Partner diagnosed with an infection       | 15.1%          | 15.3% | 20%           | p=0.9425                          | p=0.5471                                 |
| Contacted by clinic/ health advisor        | 5.5%           | 14.4% | 36.7%         | p=0.4854                          | p=0.1108                                 |
| No symptoms but wanted check-up           | 15.1%          | 15.3% | 20%           | p=0.9425                          | p=0.5471                                 |
| Wanted HIV test                           | 15.1%          | 15.3% | 20%           | p=0.9425                          | p=0.5471                                 |
| For contraception/ pregnancy test/ EC b   | N/A            | N/A   | N/A           |                                  |                                          |
| Other                                     | 12.1%          | 10.53%| 12.22%        | p=0.4569                          | p=0.9723                                 |
| Denominator                               | 132            | 1016  | 90            |                                  |                                          |

a Percentages may add up to more than 100 because the question “Why did you come to the clinic?” asked respondents to ‘tick all that apply’
b Free text description within ‘other’ option

Symptoms and health seeking behaviour are presented in Table 3. Black Caribbean men were least likely to delay attending the GUM clinic by trying to or attending their General Practice (GP) surgery before then attending the GUM clinic (16.6%) compared to about a quarter of white and black African men. Half of the men across ethnic groups reported being asymptomatic when they attended the clinic while uncertainty about having symptoms was highest among black Caribbean men (22.5% versus 14.8% white versus 16.9% black African). Over half of symptomatic black Caribbean and African
men sought care within 7 days of their symptoms starting compared to a third of white men. Black African and black Caribbean men were least likely (73.7% and 69.2% respectively versus 54.9% white men) to wait more than 7 days since the start of their symptoms to seek care from any healthcare provider (from here on labelled ‘patient delay’). Over half of the black Caribbean and black African men also reported attending the study clinic within 7 days since their symptoms had started compared to a third of white men. Almost half of all men experienced a delay of more than 4 days in accessing care -at the study clinic- from first contact with a health service (from here on labelled ‘provider delay’). The exception were symptomatic black Caribbean men of whom only 27.3% faced provider delay.

### Table 3: Symptoms, patient and provider delay in accessing care, by self-reported ethnicity

<table>
<thead>
<tr>
<th></th>
<th>Black Caribbean</th>
<th>White</th>
<th>Black African</th>
<th>Black Caribbean vs White p-value</th>
<th>Black Caribbean vs Black African p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence that tried/used GP before GUM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>16.6%</td>
<td>23.5%</td>
<td>27.8%</td>
<td>p=0.0053</td>
<td>p=0.0057</td>
</tr>
<tr>
<td>No</td>
<td>61.3%</td>
<td>68.5%</td>
<td>63.9%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unclear</td>
<td>22.1%</td>
<td>78.0%</td>
<td>8.2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Denominator</td>
<td>163</td>
<td>1093</td>
<td>97</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have symptoms now</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>50%</td>
<td>51.6%</td>
<td>51.8%</td>
<td>p=0.4263</td>
<td>p=0.5581</td>
</tr>
<tr>
<td>Not sure</td>
<td>22.5%</td>
<td>14.8%</td>
<td>16.9%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>27.5%</td>
<td>33.5%</td>
<td>31.3%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Denominator</td>
<td>120</td>
<td>997</td>
<td>83</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Days since symptoms started*</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-7 days</td>
<td>56.7%</td>
<td>33.3%</td>
<td>54.2%</td>
<td>p=0.0600</td>
<td>p=0.7406</td>
</tr>
<tr>
<td>7+ days</td>
<td>43.3%</td>
<td>66.7%</td>
<td>45.8%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Denominator</td>
<td>30</td>
<td>303</td>
<td>24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delayed access to care from first contact with health services (&gt;4 days)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Among all respondents</td>
<td>45.4%</td>
<td>52.5%</td>
<td>45.3%</td>
<td>p=0.4883</td>
<td>p=0.9878</td>
</tr>
<tr>
<td>Denominator</td>
<td>130</td>
<td>1023</td>
<td>86</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Among symptomatic respondents*</td>
<td>27.3%</td>
<td>52.1%</td>
<td>48%</td>
<td>p=0.0391</td>
<td>p=0.0876</td>
</tr>
<tr>
<td>Denominator</td>
<td>33</td>
<td>332</td>
<td>25</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Denominator only includes respondents who answered yes to the question about having symptoms now (no & unsure responses excluded)

Information about sex since symptoms started and STI diagnoses are reported in Table 4. Black Caribbean men were more likely to report being previously diagnosed with an STI as well as uncertainty about a previous diagnosis. They were also the most likely, while black Africans were the least likely, to be diagnosed with an acute STI on the day of their clinic attendance (49.7% black Caribbean versus 33.8% white versus 26.8% black African). Black African men were most likely and white men least likely to abstain from sex while black Caribbean men were more likely to report multiple sexual partners since their symptoms had started (18.2% versus 9.3% white men versus 3.8%
black African men). Black Caribbean men were almost twice as likely as white black and black African men to be diagnosed with a bacterial STI (45.4% versus 24.4% versus 26.8% respectively. In contrast although viral STI were less common (absent among black African men) white men were twice as likely as black Caribbean men to report a viral STI (11.4% versus 6.1% respectively).

Table 4: Sex since symptoms started and STI diagnoses, by self-reported ethnicity

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Previously diagnosed with an STI</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>70.3%</td>
<td>79.3%</td>
<td>82.8%</td>
<td></td>
<td></td>
<td>0.2425</td>
</tr>
<tr>
<td>Not sure</td>
<td>10.2%</td>
<td>4.1%</td>
<td>5.7%</td>
<td></td>
<td></td>
<td>0.2773</td>
</tr>
<tr>
<td>Yes</td>
<td>19.5%</td>
<td>16.6%</td>
<td>11.5%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Denominator</td>
<td>118</td>
<td>1005</td>
<td>87</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Had sex since symptoms started *</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>60.6%</td>
<td>52.5%</td>
<td>73.1%</td>
<td></td>
<td></td>
<td>0.2783</td>
</tr>
<tr>
<td>Yes, with 1 partner</td>
<td>21.2%</td>
<td>38.1%</td>
<td>23.1%</td>
<td></td>
<td></td>
<td>0.5373</td>
</tr>
<tr>
<td>Yes, with more than 1 partner</td>
<td>18.2%</td>
<td>9.3%</td>
<td>3.8%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Denominator</td>
<td>33</td>
<td>333</td>
<td>26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diagnosed with 1 or more acute STI(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>49.7%</td>
<td>33.8%</td>
<td>26.8%</td>
<td></td>
<td></td>
<td>0.0032</td>
</tr>
<tr>
<td>Denominator</td>
<td>163</td>
<td>1093</td>
<td>97</td>
<td></td>
<td></td>
<td>0.0055</td>
</tr>
<tr>
<td>Diagnosed with 1 or more bacterial STI(s)*</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>45.4%</td>
<td>24.4%</td>
<td>26.8%</td>
<td></td>
<td></td>
<td>0.0033</td>
</tr>
<tr>
<td>Denominator</td>
<td>163</td>
<td>1093</td>
<td>97</td>
<td></td>
<td></td>
<td>0.0160</td>
</tr>
<tr>
<td>Diagnosed with 1 or more viral STI(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>6.1%</td>
<td>11.4%</td>
<td>0%</td>
<td></td>
<td></td>
<td>0.0422</td>
</tr>
<tr>
<td>Denominator</td>
<td>163</td>
<td>1093</td>
<td>97</td>
<td></td>
<td></td>
<td>0.0359</td>
</tr>
</tbody>
</table>

a Denominator only includes respondents who answered yes to the question about having symptoms now (no & unsure excluded)

b respondents without a KC60 code were included under 'no'

Acute STIs are defined as infectious syphilis (KC60 codes: A1, A2), uncomplicated gonorrhoea (KC60 codes: B1, B2), complicated gonorrhoea (KC60 code: B5), chancroid/lymphogranuloma venereum (LGV)/donovanosis (KC60 codes: C1, C2 & C3); chlamydial infection (uncomplicated/complicated) (KC60 codes: C4a, C4b, C4c); uncomplicated non-gonococcal/non-specific urethritis in males (KC60 code: C4h); complicated non-gonococcal/non-specific infection (KC60 code: C5); herpes simplex (first attack) (KC60 code: C10a); genital warts (first attack) (KC60 code: C11a); trichomoniasis (KC60 code: C6a).

As a result of these analyses which do not identify black Caribbean men experiencing disproportionate patient or provider delay, I decided not to directly investigate health seeking behaviour and care pathways in the qualitative interviews.
Appendix B: Topic guide for interviews with young men

In-depth Interview Topic Guide-Young people

**Young Men & Sexual Health**

*Improving the sexual health of young people*

I. Introductions

a. Introduce self; aims of project / interview
b. Confidentiality; what will happen to the results
c. Consent and permission to record; ground rules
d. Any questions before beginning

<table>
<thead>
<tr>
<th>II. Background</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethnicity:</td>
</tr>
<tr>
<td>Household:</td>
</tr>
<tr>
<td>Housing type:</td>
</tr>
<tr>
<td>Education:</td>
</tr>
<tr>
<td>(Year left school/ qualifications)</td>
</tr>
<tr>
<td>Religion:</td>
</tr>
</tbody>
</table>

III. General information

1. **Can you tell me a bit about your life?**
   a. Age
   b. Current studies / employment/ training/ qualifications
   c. Where you live
   d. Who you live with

2. **How would you describe your neighbourhood?**
   a. Safety
   b. Experience of living there as a young person/ young man?
   c. Proximity of friends/ family
   d. Impressions of people
   e. How you fit in?
IV. Friends and leisure time

3. Who are your friends?
   a. Age, sex, ethnicity, culture,
   b. Where did you meet them? School/Outside school (where?)/family/work/youth group
   c. What do you have in common?
   d. How well do you fit in?

4. Outside of work/school what takes up most of your time?
   a. Where?
   b. With whom

5. How important are your friends?
   a. What kind of things have they helped you with?
   b. What have they been less helpful about?
   c. Ever got into trouble because of them?

V. Being a young man

6. What is important to your life?

7. What pressures or worries do you face?
   a. Exam results/job/money
   b. Family/friends
   c. Crime/drugs

8. How do you cope with these pressures/worries?
   a. Plans to resolve them
   b. Obstacles

9. How able do you feel to control your life choice?
   a. Future-education/work/other goals

VI. Identity

10. What do you think other people think of you? How do they see you?
    agree/disagree
    a. Parents
    b. Siblings
    c. Friends
    d. School/Work
    e. Other young people e.g. neighbourhood etc.

11. How would you describe/define yourself? –groups you belong to?
    a. Scene/Music
    b. City
    c. Youth
    d. School
    e. Neighbourhood/estate
    f. Ethnic group/Colour
    g. Nationality
12. What does being a young man/man mean to you?
   a. Who are the important men in your life? Why?

13. What has it been like to move from being a boy to a young man/man?
   a. What are the changes? – responsibilities/ expectations/ behaviours

14. What does being X ethnicity mean to you?
   a. School/ work
   b. Friendships
   c. Relationships
   d. Employment opportunities
   e. Stereotypes

15. How is your experience of being a young man of X ethnicity similar/different from being a young man of other cultures/ethnic groups
   a. In school
   b. In friend groups/leisure activities
   c. In future plans
   d. In choices- work, partners
   e. Sexual stereotypes- negative/positive consequences?
   f. Internalising stereotype, effect on confidence?

16. What social class would you put yourself/family in?
   a. Why?
   b. How has this influenced your life?
   c. How do you think it will influence your future? Opportunities? Family life?

VII. Sex and Relationships

17. Have you ever had sex?

18. What is expected of you?
   a. How is this similar/different to siblings, friends, other boys?

19. Draw timeline- start by inserting YEAR IN SCHOOL or AGE. Add
   REFERENCE POINTS, TRANSITIONAL PERIODS (primary to secondary,
   secondary to college, college to uni, school to work/apprenticeship).

20. Can you tell me about the first time you had sex?
   a. How old were you
   b. How did it happen
   c. Why did you decide to have sex
   d. Who initiated it
   e. Who with- age, relationship with person
   f. Where?
   g. Was it what you wanted/expected
   h. How did you feel about the experience? Did you feel ready/happy at
      the time
   i. In retrospect were you ready-alcohol/drugs involved
j. Had you talked about it with your partner? When? How?

21. **Can you describe the different sexual experiences you have had since you first had sex?**
   a. Casual, regular, one off
   b. Steady/only one, shared
      i. Do you share sexual partners? Have more than one partner?
   c. What types of sex have you had?
      i. Types and frequencies of behaviours? Vaginal; oral; anal; group

22. **Do you have a girlfriend now?**
   Can you tell me a bit about her or your last partner?
   a. Age
   b. Ethnicity
   c. Type of person
   d. How and where met
   e. How long together
   f. Where hang out/where go together
   g. Was it planned
   h. Where do you see this relationship going
   i. What do you expect from her
   j. What does she expect from you

23. **Who knows about your relationship?**
   a. What do they think about it?

24. **Do your friends have girlfriends/boyfriends?**
   a. What kind of girls/boys do they go out with?
   b. How do you and your friends meet/ find boy/girlfriends/partners?

25. **Have you had sex with anyone else while with current girlfriend/partner?**
   a. How many other people?
   b. Why?
   c. Can you tell me a bit about the last other person?

26. **Who knows about the casual partner(s)?**
   a. What do they think about it?

27. **Have you had two or more overlapping sexual partner? (having sex with more than one person in a period of time)**
   a. Why?
   b. What do your friends think about having sex with more than one person
   c. Opinions of family about sex with more than one person
   d. When is more than one partner at a time acceptable/ unacceptable?
28. How important is sex in your life?
   a. What do you get out of it?
   b. What are the negative aspects?
   c. Pressures as a man
   d. Do you go out looking for sex - How do you find someone?
   e. How do you judge sex? Own pleasure/partner & own/other ways

29. Have you done or said things to convince someone to have sex?
   a. Compared to friends
   b. What is/is not acceptable pressure?

30. Have you ever felt pressured to have sex/done it to prove something/reputation?
   a. Pressure from whom?

31. What are the rules of engagement with women?
   a. Similarities with ‘other’ boys – for respondent to define other
   b. Differences with ‘other’ boys

VII. STI Awareness & Susceptibility

32. How knowledgeable do you feel about sexually transmitted infection?

33. Have you ever been to a GUM clinic?
   a. Why?
   b. When?
   c. Can you tell me about your experience?
   d. Impressions/how you perceived?
   If no:
   e. What puts you off from going for a check-up?

34. Do you know anyone who has had an STI?
   a. What did you think about him/her?

35. Have you ever had an STI? If yes:
   a. Which one(s) and what did it feel like?
   b. What symptoms did it have?
   c. How did you get it?
   d. When did you first realise you might have a problem?
   e. How did you find out about the clinic?
   f. How did it affect you/your life?
   g. Did you change your sexual behaviour? How easy/difficult was it?
   h. What were the reactions of clinic, partner, friends, family?
   If no:
   a. How have you avoided STIs?
   b. Do you know what some symptoms are?
   c. How would it affect you if you got an STI? What would you do?
36. How confident do you feel in your ability to avoid STIs with current/future partner?
   a. How easy/difficult is it? (*probe* condoms, partners, type of sex)

IX. Condom use

37. Tell me about your experience of using condoms?
   a. When used?
   b. What type?
   c. With whom?
   d. What was it like?
   e. Always use or based on occasion/person?
   f. What stops you from using condoms?

38. Have you had sex without a condom when you knew or suspected that you or your partner had an STI? One of you was seeing someone else?
   a. Why?

39. What makes it hard/easy to ask a sexual partner to use condom before sex?

X. Pregnancy

40. Do you have children?
   a. How many?
   b. Involvement
   c. Difficulties/joys

41. Are any of your friends fathers?
   a. What is it like?

42. How do you feel about having children?

43. What are you doing to avoid pregnancy?
   a. What kind of contraception?
   b. Frequency of use
   c. If not always why?

44. What would happen if you got a girl pregnant? What did happen?
   a. Your feelings- (value of education)
   b. Family
   c. Friends

45. How easy/difficult is it to avoid getting pregnant/getting someone else pregnant?

46. What does it take to be a good father?

47. What do you think about teenage fatherhood?
XI. Alcohol and drugs

48. What is your experience of beer/other alcoholic drinks?
   a. How often? Importance? Circumstances?
   b. Impact on getting and keeping partners; on having sex / type of sex

49. What is your experience of drugs?
   a. Which ones?
   b. How often?
   c. Circumstances?
   d. Importance
   e. Impact on getting and keeping partners
   f. Impact on having sex / type of sex

XII. Sexual Experiences

50. Number of people you’ve had sex with in your life (same and opposite sex)?

51. Tell me about your sexual experiences in the last 3 months/ 12 months?
   a. Have these been what you wanted?

52. How and where did you meet these partners (casual and relationship)?

53. Do you think any of your partners are having sex with anyone else?
   a. How do you know?

54. How important is it to please your partner?
   a. How do you do this?
   b. Why do you feel this way?

55. When / why have you ended relationships?
   a. What makes this harder / easier

56. How important is your reputation to you?
   a. What makes it better?
   b. What makes it worse?
   c. Whose opinion is important to you?
   d. What is the difference for men/ women?

57. How does your ethnicity make a difference to your sexual behaviour?
   a. How does this compare to friends?

58. How does your religion make a difference to your sexual behaviour?
   a. How does this compare to friends?
XIII. Sexual awareness and attitudes

59. When/where did you first find out about sex?
   a. Age
   b. School/parents/siblings/friends/media/internet

60. Where did you go to find out more information? What did you think about it?
   a. School/parents/siblings/friends/media/internet/porn

61. What did you learn about?
   a. What was missing that you wanted to know more about?

62. What makes a good lover?
   a. Male/female?
   b. Comparison standard

63. What are good reasons to have sex?

64. What are bad reasons to have sex?

65. What are you views on relationships between two men/two women?
   a. Similarities/differences to young people
   b. Similarity/difference to your friends

XIV. Help and support

66. Is there anyone you can talk to or somewhere you can go for support in relationships and sex?

67. What would have helped you in your interactions with sexual partners/relationships?

XV. Future plans

68. Can you tell me what your plans for the next couple of years are?
   a. Where do you see yourself in 5 years/in your 20s – what doing, where living?

XVI. Experience of interview

69. How did you initially feel about taking part in the interview?

70. How did you find the interview?
   a. gender of interviewer
   b. ethnicity of interviewer – assumption
   c. length of interview
   d. questions and topic
71. What do you think about this kind of study being done?

72. Is there anything that you would change about the interview?
   a. Different questions
   b. Anything else you would like to add
   c. Language—any words or terms that you use among your friends that I haven't used?

73. How easy was it to be honest? Was there anything that you found too embarrassing/difficult?

74. Experience of having a female interviewer

   Thank you for your time!

End: Remind about confidentiality; what will happen to the research and how to find out the results; vouchers; helpline sheets; sexual health booklets

Helpful follow up questions that arose during interviews:

V  Being a young man
   How are the pressures you face different from those of other young men/women?
   What things have helped you achieve what you want in your life?
   What things have held you back/made life hard?
   What do you do when you feel down?
   What makes you feel good about yourself?
   What makes you feel bad about yourself?

VII Sex and relationships
   What is it like when you have a girlfriend?
   What do you want or expect from a relationship?
   What should the role of men and women be in a relationship?
   What kind of relationships did you grow up around?
   How are the sex lives of boys and girls similar/different?
   How has living on an estate/road OR financial situation influenced your relationships?

VIII STI awareness and susceptibility
   What do you look for to know if someone is safe/clean (no STIs)?
   What do you need to know about a person before you have sex?
   How do you find out/speak to partner about past partners/STIs?
   What makes discussing sexual history with a man/woman difficult?

XIV Help and support
   If you were going to create a program to help young men in your community avoid getting sick with STIs, what would you do?
Appendix C: Topic guide for interviews with key informants

In depth Interview topic guide for sexual health professionals & educators

Young Men & Sexual Health

Improving the sexual health of young men

I. Information about the participants and their work

1. Can you tell me a bit about your work, your role as a GUM consultant/health advisor/SRE teacher/Youth worker (MSD) etc?
   a. Who you work for
   b. How long
   c. Aims of job/priorities
   d. Roles, responsibilities and activities
   e. Local situation in Brent – issues specific to Brent

II. Information about the young people they work with

1. Can you tell me a bit about the young people you work with?
   a. Type of young people, gender, age groups, ethnicity

2. What type of social issues do you encounter among the young people you work with?

3. What kinds of concerns do they come to you with?

4. Can you tell me a bit about any of the issues for young people in Brent?
   a. Economic-housing, family, education, employment opportunities, drugs, crime etc.
   b. What are the priorities?
   c. What is Brent like for young men and those of Caribbean origin in particular?

III. General socio-cultural and health issues for young Caribbeans

1. From your experience what would you say are some of the issues faced by young Caribbean men living in Brent?
   a. School/education, job opportunities, drugs, crime, family circumstances, pressures, religious/cultural issues, identity, relationships, sexual health, fatherhood, discrimination
   b. Explore pressures, difficulties, coping strategies
   c. Differences between boys and girls
d. What do the Caribbean young men tend to do after leaving school education?
e. How are the issues different from those faced by young men from other ethnic groups?

IV. Peer groups and leisure activities

1. Who do the young Caribbean men you see generally hang out with/form friendship groups with?
   a. Mixed ethnicity friendship groups vs. more homogenous groups
   b. Mixed gender groups
   c. Age ranges
   d. Differences between boys and girls
   e. What’s the general kind of ‘scene’?

2. Where do young Caribbeans hang out / spend their free time?
   a. Youth groups, streets, clubs, pubs, home
   b. What do they do?

V. Relationships

1. What kind of relationships do the young men form?
   a. Who with? Ethnicity and age
   b. How are they conducted?
   c. Different for boys/girls?

2. What are their expectations of relationships/ sex?
   a. Views about girls
   b. Behaviour towards girls

3. What is expected of them in relationships/ sex?
   a. From peers
   b. From partners
   c. From family members –parents/ siblings

4. What personal factors influence their behaviour?
   a. General youth peer pressure vs. as result of being young black men
   b. Relationships in their lives
   c. What role do their ideas about their masculinity/ ethnicity play in relationships/ sexual behaviour?

VI. Sexual health

1. Why are young Caribbean men at risk of poor sexual health?
   a. Knowledge
   b. Stereotypes – what are they? Impact of living up to them/ not? Who does/ doesn’t
      Impact on perceptions of staff
2. How do these issues compare with those of young men of other ethnicities?

3. How do these issues compare with those of young Caribbean women?

VII. Support needs for young people

1. What kind of relationship and sexual health support do you think young Caribbean men in Brent need to reduce STI rates?
   a. From whom
   b. What is available in Brent? Where? How can these services be improved?

2. What services do young Caribbean men use to get sexual health help (if at all)?
   a. Local services and type
   b. Travel outside borough

3. What other kind of support do you think young Caribbean men need?

VIII. Support needs for people working with young men

1. What do you think your organisation is doing well in terms of helping young men of Caribbean origin?

2. What do you think could be improved in your work with young men?

3. How do you think this could be done?

Experience of interview & Thank you!
Appendix D: Sampling frame for interviews with young men

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<td>7-8</td>
<td>13-15</td>
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<td>6-7</td>
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<td>3-4</td>
<td>6-7</td>
<td>~ 10</td>
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<td>Road</td>
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<td>~ 5</td>
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<td>Contact with father</td>
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<tr>
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<td></td>
<td></td>
</tr>
<tr>
<td>Up to GCSE</td>
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<td></td>
<td></td>
<td>~ 5</td>
</tr>
<tr>
<td>Up to A level / BTEC</td>
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<td></td>
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<td>~ 5</td>
</tr>
<tr>
<td>Graduate / trainee</td>
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<td>~ 5</td>
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<tr>
<td>Relationship</td>
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<tr>
<td>Single</td>
<td></td>
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<td>~ 5</td>
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<tr>
<td>Partner</td>
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<tr>
<td>Cohabits</td>
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## Appendix E: Demographic characteristics of young male participants

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<th>STI</th>
<th>Household members</th>
<th>Education</th>
<th>Partnership/ marital status</th>
<th>Child</th>
<th>Religion</th>
<th>Occupation</th>
<th>Risk-self assessed</th>
<th>Risk-described</th>
<th>Age at first sex (age of partner)</th>
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<td>Andre`</td>
<td>M</td>
<td>19</td>
<td>Youth group</td>
<td>black British (Jamaican descent)</td>
<td>Y</td>
<td>N</td>
<td>mum</td>
<td>GCSE, in training</td>
<td>Single</td>
<td>No</td>
<td>Christian</td>
<td>Unemployed</td>
<td>low</td>
<td>low</td>
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<td>YMASHIYP02</td>
<td>Jay</td>
<td>M</td>
<td>22</td>
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<td>Y</td>
<td>Y</td>
<td>mum</td>
<td>GCSE, left college</td>
<td>In relationship- 4 months</td>
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<td>Don't follow</td>
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<td>low</td>
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<td>20</td>
<td>Clinic</td>
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<td>Y</td>
<td>N</td>
<td>mum and dad</td>
<td>Excluded before GCSE</td>
<td>Single</td>
<td>No</td>
<td>Muslim</td>
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<td>low</td>
<td>medium/high</td>
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<td>N</td>
<td>aunt, uncle, cousin</td>
<td>GCSE, failed BTEC</td>
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<td>Clinic</td>
<td>Guyanese and Irish</td>
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<td>Y</td>
<td>mum, dad, 2 brothers</td>
<td>Finished college (IT )</td>
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<td>No</td>
<td>Christian-Catholic</td>
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<td>22</td>
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<td>Y</td>
<td>N</td>
<td>dad, step mother, 1 younger brother</td>
<td>College City and Guilds certificate in electrical engineering</td>
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<td>Y♂</td>
<td>dad and younger brother</td>
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Appendix F: Helpline sheet for young men

Where can I go for help or advice?

First, thank you for helping us with the Young Men & Sexual Health Project. Some of the things we’ve talked about might have raised issues that you’d like to find out more about or discuss further. On this page are some numbers and web sites, if you want more facts, advice or someone to talk to.

Patrick Clements Clinic  www.pcch.demon.co.uk  appointments: 020 8453 2221
The clinic provides free and confidential advice, testing and treatment of sexually transmitted infections, counselling and contraception. Central Middlesex Hospital, 2nd floor, Acton Lane, London NW10 7NS

Sexual Health Line  www.condomessentialwear.co.uk  0800 567 123
Run by the Department of Health. Confidential information and advice on HIV/AIDS and other sexually transmitted infections. Can put people in touch with local face-to-face services and send out free literature. Free calls. Open 24-hours.

Sexual Health Direct (FPA)  www.fpa.org.uk  0845 122 8690
Run by the fpa. Confidential information and advice on contraception, planning pregnancies, sexually transmitted infections (STIs), unplanned pregnancies and other sexual and reproductive health concerns. Details of family planning clinics, STI clinics and other sexual health services anywhere in the UK. Local rates. 9am-6pm Mon-Fri.

Avert  www.avert.org
An international HIV and AIDS charity based in the UK. The website includes information, news, FAQs, sex education and personal stories.

THT Direct  www.tht.org.uk  0845 1221 200
Run by Terrence Higgins Trust. A gateway to HIV services, support and information. Local rates. Monday to Friday 10am to 10pm; 12pm to 6pm Saturday and Sunday. Menu with recorded messages about services offered also available. E-mail contact info@tht.org.uk

Brook Advisory Centres:  www.brook.org.uk  0800 0185 023
Run by Brook. Especially for under 25s. You can get the address of a centre near you to go to for advice and information on contraception STIs, pregnancy, abortion. Freephone number. Mon-Fri 9am-5pm.

Sexwise  www.ruthinking.co.uk  0800 28 29 30
Run by the Department of Health. Confidential advice on sex, relationships, and contraception for young people aged 12-18. Freephone number. Mon-Sun 7am to midnight.

London Lesbian and Gay Switchboard  www.queery.org.uk  0207 837 7324
Run as a voluntary organization, it offers confidential advice on diverse subjects such as sexual health, ‘coming out’ and employment rights as well as counselling and support. Mon-Sun 10am-11pm.

National child protection helpline  0800 022 3222
Confidential counselling, information and advice for anyone concerned about a child at risk of ill treatment or abuse. Freephone number. 24 hours.

NHS  www.nhsdirect.nhs.uk  0845 4647
Nurse-led advice and health information inc. self help and support groups. Local rates. 24 hours. Searchable directory of dental practices, GP surgeries, opticians, pharmacies and NHS services.

Helplines and websites sheet 07 Oct 2009- version 1
Appendix G: Visual timelines of relationships

Andre' (age 19)

- Year 6: 1st girlfriend (2-3wks) 1-3 months
- First aware of girls
- Played kiss and chase
- Kissed friends in year
- SRE on pregnancy & birth
- 4 sexual partners (friends) consecutive
- 2nd girlfriend at college

Jay (age 22)

- Year 6: Kissed a girl
- Year 7-8: Little relationships
- Year 14/15: Little relationship then floated off with other girls
- 2 year relationship
- Chlamydia from link (oral sex)
- Immature friend/relationship/links (2) & one night stands (6)

Age

5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25
### Appendix H: Conceptual index/ Initial thematic framework

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Appendix I: Visual display of data
Sexual trajectories of men
that are different from those of
women & those of public health concerns

Social exclusion

Black
Ethnicity → Poor sexual health

Othering

Early exposure followed by multiple partners and STIs