

**GAY ASIAN AND CAUCASIAN MEN IN SYDNEY:
Cultural, social and cognitive factors
associated with sex practices**

Limin Mao

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Abstract

Using the perspectives of individualism-collectivism, Social Cognitive Theory and other concepts such as gay community attachment, this study focused on issues of homosexual identification, disclosure and sexual risk practices in relation to cross-cultural differences among gay Asian and Caucasian men in Sydney. Mostly recruited from gay social venues, 19 gay Asian men participated in exploratory focus groups discussions, another 201 gay Caucasian and 199 gay Asian men completed an anonymous questionnaire, and a further 10 gay Caucasian and 9 gay Asian men took part in in-depth one-to-one interviews. The major findings were: gay Asian men tended to experience conflict, in being both gay and Asian, related to individualism and collectivism; the gay Asian and Caucasian men differed in various aspects of homosexual practice, but shared certain sexual traits and practices; self-efficacy in safe sex and gay community attachment were key factors associated with gay men's sexual risk practices ('risk' being defined as unprotected anal intercourse with any casual partners or with a regular partner whose HIV status was not concordant with the participant's). This study provides evidence that the inclusion of individualism-collectivism, social cognitive variables and gay community factors in the examination of homosexual identity and practice among men of different cultural backgrounds holds promise. It further suggests that educational programs to encourage safe sex will continue to yield benefits from increasing individual awareness,

confidence and ability to effectively deal with situations that could pose risks of HIV transmission.

Chapter 1

Introduction

The problem

As the overall Australian society has been increasingly heterogeneous and multicultural, in recent years, more and more HIV/AIDS services, agencies and organisations in Australia have begun to recognise and acknowledge the need to develop diversified strategies to promote the sexual health of people from minority ethnic backgrounds (AIDS Council of New South Wales [ACON], 1998; Australian Federations of AIDS Organisation [AFAO], 1997; McMahon, 1995; Pallotta-Chiarolli, 1998; Voukelatos & Boswell, 1997). It has been explicitly stated that the Australian health system should provide equal access to people from different cultural or linguistic backgrounds (Department of Health, 1987).

However, issues related to homosexuality among men of minority ethnic background are complicated. Gay men or men who have sex with men (MSM) of minority ethnic background usually have to deal with their families, corresponding ethnic communities, various sections within gay communities and the wider Australian society (Pallotta-Chiarolli, 1998). It is acknowledged that their ethnic values and norms—cultural, religious and familial—affect their sexual attitudes and practices in relation to homosexuality (McMahon, 1996; Prestage, Van de Ven, Wong, Mahat & McMahon, 2000; Sanitioso, 1999; Tarantola, 1995).

Some studies have suggested that gay men or MSM of minority ethnic background are often placed in marginal positions (Pallotta-Chiarolli, 1998; Pallotta-Chiarolli, Van de Ven, Prestage & Kippax, 1999; Voukelatos, 1996). These men have often been pushed aside within their own ethnic communities due to some hostility towards homosexuality. Their minority ethnic status has also been associated with discrimination against them within some sections of gay communities (Pallotta-Chiarolli, 1998; Pallotta-Chiarolli et al., 1999; Voukelatos, 1996). Moreover, to some extent, their relatively disadvantaged socio-economic status has placed them on the periphery of the wider Australian society (Pallotta-Chiarolli, 1998; Pallotta-Chiarolli et al., 1999; Voukelatos, 1996). Consequently, these forms of marginalisation may set barriers for these men to gain access to services provided by agencies and organisations in Australia (McMahon, 1995; Pallotta-Chiarolli, 1998; Pallotta-Chiarolli et al., 1999). More importantly, they may increase internal as well as external pressures on these men (Pallotta-Chiarolli, 1998; Pallotta-Chiarolli et al., 1999). For example, it is reported that gay men and MSM of minority ethnic background have often struggled in order to maintain their original ethnic values and to adapt to the host Western mainstream culture and its gay subculture (Pallotta-Chiarolli, 1998; Pallotta-Chiarolli et al., 1999; Sanitioso, 1999).

In the field of HIV/AIDS education, there is a general consensus that universal or omnibus health promotion strategies do not necessarily cater for

the specific needs of gay men and MSM from various ethnic backgrounds (AFAO, 1997; McMahon, 1995; Pallotta-Chiarolli, 1998; Pallotta-Chiarolli et al., 1999). The clear need for different and specific strategies to respond to cultural diversity creates an important space for research into culture and safe sex.

Objectives of the study

The objectives of this study were as follows:

1) to explore possible conflicts and difficulties experienced by self-identified gay men of East and South East Asian background in Sydney, Australia;

2) to investigate the socio-cultural and psychological factors associated with sexual risk practices among gay Asian and Caucasian men, especially variables related to perspectives of individualism-collectivism, Social Cognitive Theory and gay community attachment;

3) to identify essential themes and critical issues among gay Caucasian and Asian men in relation to homosexuality and sexual risk-taking; and

4) to recommend educational and preventive strategies promoting sexual health among gay Caucasian and Asian men in Sydney, Australia.

Terms not defined elsewhere

'Gay' men are those who self-identify as gay or homosexual, whose main sexual practice is with other men. They are distinguished from Men Who Have Sex With Men (MSM) who may be bisexually or heterosexually identified and whose main sexual practices may be with women but they occasionally have sex with men (Peatfield, 1997). In this study, we use the term 'gay' to refer to all the participants, for convenience, even though a small proportion of the men did not use this term themselves.

With reference to gay communities in Australia, most research reports have used the term 'gay community' as a collective concept to represent a wide range of gay groups and spaces. Here, 'gay community' is used accordingly.

A participant with a non-English-speaking background (NESB) is someone who self-identifies as such, was born in a non-English-speaking country, or speaks a language other than English when he or she was growing up (Ethnic Communities Council of New South Wales, 1994).

East Asian countries include Japan, China, Taiwan, Korea; South East Asian countries include Burma, Thailand, Malaysia, Singapore, Indonesia, the Philippines, Vietnam, Cambodia, and Laos; and South Asian countries include India, Pakistan, Bangladesh, Sri Lanka and Nepal (similar typology to that used by Prestage et al., 2000, among others).

Chapter 2

Literature review

Introduction

This chapter reviews the pertinent literature on individualism-collectivism, Social Cognitive Theory (SCT) and gay community attachment in relation to gay Asian and Caucasian men and their safe sex practices. An hypothesis and a number of research questions are then proposed.

Individualism-collectivism (IC)

Introduction

Western, industrialised countries, such as Australia, are regarded as having an 'individualistic' culture and countries such as those in East and South East Asia, a 'collectivist' culture (Bond & Smith, 1996; Hofstede, 1980, 1991; Markus & Kitayama, 1991, 1998; Schwartz, 1992, 1994; Singelis, 1994; Smith & Bond, 1993; Triandis, 1989, 1995). Individualism-collectivism is a 'cultural syndrome' (Triandis, 1993). It acknowledges that groups of people who live in a certain geographical area during a certain period of time are likely to share certain beliefs, norms and values (Markus & Kitayama, 1991, 1998; Triandis, Leung, Villareal & Clack, 1985). In general, individuals in a collectivist culture, termed as allocentrics, are more willing to cooperate with others and usually perceive that teamwork can facilitate the attainment of group goals. On the other hand, individuals in an individualist culture, termed

as idiocentrics, are more willing to perform independently and often consider that self-development contributes to individual growth (Chen, Chen & Meindl, 1998; Earley, 1993, 1994).

It has been argued that each individual has both 'individualist' and 'collectivist' cultural components (Church, 2000; Kim, Triandis, Kagitcibas, Choi and Yoon, 1994; Trafimow, Triandis & Goto, 1991; Triandis, 1989, 1990). Some have proposed that each self has three parts—private, public and collective (Baumeister, 1986; Bochner, 1994; Greenwald & Pratkanis, 1984; Triandis, 1989, 1990). The 'private' part mostly contains the 'individualist' ingredients, whereas the 'public' and 'collective' parts house the 'collectivist' ones. Triandis (1989, 1990) further argued that the exhibition of different parts of the individual self depends on context. More importantly, it depends on how an individual perceives and defines a particular situation. The objective situation an individual faces as well as his or her cognitive assessment of that particular situation largely influences the dynamic process through which she or he chooses to exhibit a certain part of 'self' (Markus & Wurf, 1987; Triandis, 1989, 1990). A collectivist culture often allows allocentrics to display their 'public' and 'collective' parts and an individualist culture, in comparison, often encourages idiocentrics to display the parts of themselves that are 'private' (Triandis, 1989, 1990).

Hofstede (2001) concluded that idiocentrics, compared with allocentrics, are more likely to be encouraged to cultivate an autonomous self

and take care of their self-interests. They are likely to lead a self-supportive lifestyle independent of other family members, voice their own opinions and confront others without feeling too embarrassed, and initiate actions themselves rather than being pressured by others (Hofstede, 2001). Individualists are often encouraged to seek promotion on the basis of individual achievements rather than seniority or group membership, and they often perform better as individuals than in groups (Hofstede, 2001). In general, Hofstede (2001) observed that individualist cultures have greater social mobility across socio-economic strata and sometimes provide better opportunities of equity in terms of social rights and welfare than collectivist cultures.

Hence, an individualist culture, characterised by four key features—self-reliance, competition, emotional distance from in-groups, and hedonism—may be considered to reflect a ‘healthy conflict’ between individuals and the environment, where individuals value personal attributes and pursue their uniqueness even to the extent of changing their surroundings (Kitayama, 2000; Triandis & Gelfand, 1998). On the other hand, a collectivist culture, characterised by three key features—interdependence, family integrity and sociability—reflects a ‘healthy dependence’, where individuals value their social identities and interpersonal relationships and adjust their behaviours accordingly to fit into their

surroundings (Rothbaum, Pott, Azuma, Miyake, & Weisz, 2000; Tajfel 1978; Triandis & Gelfand, 1998).

The conceptualisation of individualism-collectivism has been influenced by a number of major studies (Chen et al., 1998). Markus and Kitayama (1991, 1998) proposed two self-constructs, 'independent self' and 'interdependent self'. Triandis (1990) and Yamaguchi (1994) argued that in terms of the relationship between self and group, some cultures emphasise self-identity and personal goals, whereas, in other cultures, group identity and group goals take precedence. Kim, Triandis et al. (1994) contended that when it comes to interpersonal relationships, individuals in some cultures favour the principles of exchange, accountability and equity, and in other cultures, individuals prefer the rules of communality, cooperation and relational harmony. Davidson, Jaccard, Triandis, Morales and Diaz-Guerrero (1976) maintained that while some cultures emphasise individual compliance with group norms, other cultures cultivate individuality. Details of these major aspects of individualism-collectivism are discussed in subsequent sections.

Self-construal

Tajfel (1978) maintained that in any type of society, the recognition of self as different from others and the development of a self-identity are subject to an individual's relationship with his or her referent groups. He argued that

to recognise the link between self and others is an essential part of the self-identification process (Tajfel, 1978).

Bochner (1994) further proposed that, theoretically, each component of the self is a complex which contains several sub-elements. He suggested that under certain circumstances, the activation of one element could initiate other elements in the same component or even elements of adjacent components (Bochner, 1994). For example, in line with the 'private, public and collective self' proposition, individuals who identify themselves as unique (an element of the 'private self') tend to act out internal qualities (another element of the 'private self') and, also, they are likely to show interest in how others think of them (an adjacent element of the 'public self') (Bochner, 1994).

From another angle, the 'dependent and interdependent self' proposition holds that being independent requires individuals to act consistently with their own repertoires, such as individual needs, rights and capacities, with the belief that the 'self' is clearly differentiated from 'others' (Markus & Kitayama, 1991, 1998). Conversely, being interdependent requires individuals to constantly adjust to the external environment, which includes both immediate interpersonal surroundings and the cultural 'atmosphere', where the 'self' is greatly embedded with 'others' (Markus & Kitayama, 1991, 1998). Being interdependent, in general, means interacting more with others, whereas, being independent means relying more on oneself (Kim, Sharkey & Singelis, 1994).

Self and in-groups

Individualist cultures often encourage an independent entity and foster achievements of individual goals, whereas collectivist cultures usually emphasise groups and encourage individuals to cooperate in order to achieve common group goals (Fijneman et al., 1996; Leung & Bond, 1984).

According to Triandis (1995), a group is defined as consisting of members who share common interests and are attached to each other. He argued that as an individual could belong to several groups simultaneously, there is often an hierarchical order of importance, and that the formation of this hierarchy is subject to individualist and collectivist differences (Triandis, 1995). In-groups refer to and often emphasise group membership, shared beliefs or values, and a sense of belonging. In most societies, families or kin (i.e., parents, children and relatives) are usually the most important social in-groups (Rhee, Uleman & Lee, 1996; Sinha & Verma, 1987; Triandis, 1989; Triandis et al., 1986; Triandis et al., 1988). For other groups, the hierarchy is likely to depend on the similarities shared by in-group members and the value of group membership perceived by individuals (Triandis, 1989). Other often-cited in-groups include friends and colleagues (Rhee et al., 1996).

In general, idiocentrics are more likely to perceive themselves as autonomous and feel emotionally detached from others (Rhee et al., 1996; Triandis, 1994; Triandis, McCusker & Hui, 1990). Allocentrics, on the other hand, often incorporate group identities into self-identification (Tajfel, 1978).

They are more likely to feel part of a group, follow its norms and attach themselves to other group members (Rhee et al., 1996; Triandis, 1994; Triandis et al., 1990).

Allocentrics often place group goals above personal goals, attune personal goals to common interests for in-group members and, if necessary, sacrifice personal interest to the benefit of in-groups (Triandis et al., 1988). In collectivist cultures, the achievement of common group goals is likely to ultimately satisfy one's own interest (Markus & Kitayama, 1991). Some studies further suggest that allocentrics are willing to share personal possessions with in-group members (Hui & Triandis, 1986, Triandis et al., 1986). A collectivist culture often encourages individual commitment to in-groups by providing members with a sense of belonging (Triandis, 1995). Idiocentrics, on the other hand, focus on personal goals and if the group goals are not consistent with their personal goals, they tend to leave the group (Triandis et al., 1988). Besides subordinating personal goals to group goals, allocentrics also tend to comply with group norms (Bond & Smith, 1996; Davidson et al., 1976; Triandis et al., 1988).

Collectivist cultures generally value group cohesion or integrity more than individualist cultures (Hui & Triandis, 1986, Triandis et al., 1986; Triandis et al., 1968). Allocentrics usually view interpersonal relationships as 'communal' and emphasise sharing, closeness and harmony with in-group members (Chen et al., 1998; Ho, 1993; Kwan, Bond & Singelis, 1997; Leung,

1987; Triandis, 1989). Idiocentrics, on the other hand, often view interpersonal relationships as 'exchanges' and emphasise equity and accountability (Chen et al., 1998; Mills & Clark, 1982; Triandis, 1989). As a result, while idiocentrics feel able to join or leave groups at ease, allocentrics prefer to stay with the same group (Triandis, 1995).

In sum, an individualist culture is likely to place "...great emphasis on one's own views, needs, and goals rather than those of others; pleasure, fun, personal enjoyment rather than social norms and duties as defined by others; one's beliefs that are unique; and maximising one's own outcomes" (Leung & Bond, 1984, p. 794). A collectivist culture, on the other hand, is likely to lay "...great emphasis on the views, needs and goals of the in-group rather than of oneself; social norms and duties rather than on pleasure; beliefs shared with in-group rather than beliefs which distinguish oneself from the in-group; and great readiness to cooperate with the members of the in-group" (Leung & Bond, 1984, p. 794).

Self and out-groups

Allocentrics and idiocentrics are considered to differ in their attitudes towards out-groups (Hofstede, 1980; Hui, 1988; Smith & Bond, 1993; Triandis, 1989, 1990; Triandis et al., 1986). Some studies have indicated that while idiocentrics often tend not to draw a clear line between out-groups and in-groups, allocentrics clearly distinguish in-groups from out-groups (Triandis

et al., 1968). Some have argued that in stark contrast to their willingness to develop harmonious and intimate relationships with in-groups, allocentrics tend to discriminate against and even exploit out-groups or in-groups placed low in the hierarchy (Triandis, 1972, 1995; Triandis et al., 1968). For example, in a collectivist culture, some studies suggested that within close in-groups, rewards are more likely to be allocated according to the principles of 'equality' and relational harmony, whereas with out-groups, such as strangers, 'equity' rules apply instead (Chen et al., 1998; Chen et al., 1997). Allocentrics' discrimination against out-groups may become more apparent when group membership changes, for example, during the reconstruction of existing groups or the emergence of new groups (Triandis, 1995).

The continuum of allocentrism-idiocentrism in a cross-cultural setting

Each individual may be conceptually positioned along a continuum of allocentrism-idiocentrism at the individual level, correspondent with that of individualism-collectivism at the cultural level, and a change of external environment can alter the mixture of cultural components displayed by individuals (Triandis, 1995). For example, after migration to an individualist culture, allocentrics may exhibit more individualist components than if they remained in their collectivist culture of origin (Rhee et al., 1996; Triandis, 1995; Triandis et al., 1990). Nevertheless, compared to idiocentrics with an individualist upbringing, these allocentric immigrants tend to preserve

collectivist components (Rhee et al., 1996; Triandis, 1995; Triandis et al., 1990).

Social Cognitive Theory

Introduction

Social Cognitive Theory (SCT) proposes a triadic reciprocal relationship between individual behaviour, internal qualities and the external environment (Bandura, 1986, 1997). The term 'reciprocal determinism' emphasises interactions between these three (Bandura, 1986). In line with individualism-collectivism, SCT also acknowledges that individual behaviour is linked to the external environment, including to immediate situations and the cultural environment (Bandura, 1997; Triandis, 1995).

Self-efficacy plays a pivotal role in determining individual behaviour in SCT (Bandura, 1986, 1997). Individual perceived self-efficacy is defined as "beliefs in one's capabilities to organise and execute the course of action required to produce given attainment" (Bandura, 1997, p. 3). Self-efficacy can be developed from four types of experiences: direct experience, vicarious experiences verbal persuasion by others and physiological states (Bandura, 1977, 1986; Zimmerman, 2000). Among these four, direct experience is usually the most influential (Zimmerman, 2000).

Vicarious experience is indirect. Through observation of others' behaviours and the corresponding consequences, individuals imitate these

models' behaviours, or they increase or decrease their own behaviours accordingly (Bandura, 1986; Bandura, 1997; Masia & Chase, 1997). For example, Gist (1989) found that observing models' behaviours could increase individuals' self-efficacy in performing similar behaviours, and that it could eventually lead them to perform similar behaviours effectively in a later stage, or gain related cognitive knowledge.

Besides direct and vicarious experiences, verbal persuasion and physiological states are also important in the formation of individual self-efficacy. Verbal persuasion may not provide visible outcomes (Bandura, 1986, 1997; Zimmerman, 2000). However, verbal messages, depending on the persuaders' credibility, can encourage individuals to perform or discourage individuals from performing certain behaviours (Bandura, 1986, 1997; Zimmerman, 2000). Physiological states, such as emotional arousal, may influence individuals' judgements about how capable they are in the performance of a certain task (Bandura, 1986, 1997). Excessive physiological reaction (i.e., depression and fatigue) may lead to decreased self-efficacy and, consequently, poor performance (Bandura, 1977; Zimmerman, 2000).

Self-efficacy

Self-efficacy is the 'expectation of mastery' (Bandura, 1977). Formed through a cognitive process of self-judgement and self-evaluation on the

basis of direct and indirect experiences, enhanced self-efficacy usually leads to increased behavioural capacity (Bandura, 1977, 1986, 1997). Bandura (1977, 1986) also proposed that a high level of self-efficacy in one specific domain may sometimes transfer to other domains and help to formulate a general sense of personal self-efficacy, and vice versa. He further pointed out that past failure in performing one task might not necessarily have detrimental effects on an individual's self-efficacy in performing the task in future. Moreover, if an individual has succeeded in performing a task by overcoming difficulties, his or her self-efficacy in performing the task is likely to be enhanced greatly (Bandura, 1977, 1986; Oettingen, 1995).

As a primary means of behavioural intervention, self-efficacy theory has been applied to health promotion, and a number of studies have suggested the importance of condom use self-efficacy in relation to HIV risk reduction (Crowell & Emmers-Sommer 2000; Fisher & Fisher, 1992; Forsyth & Carey, 1998; Kalichman, Kelly & St. Lawrence, 1990; O'Leary, Goodhart, Jemmott & Boccher-Lattimore, 1992). In particular, in the gay population, lower self-efficacy in regards to safe sex has been found to be associated with riskier sexual behaviour (Aspinwall, Kemeny, Talyor, Schneider & Dudley, 1991; Bengel et al., 1996; Crepaz & Marks, 2002; de Wit, van Griensven, Kok & Sandfort, 1993; Dilley et al., 1998; Ekstrand, Stall, Paul, Osmond & Coates, 1999; Kelly et al., 1995; Herek & Glunt, 1995; Stall et al., 2000).

In the face of the HIV/AIDS epidemic, SCT suggests that apart from adequate knowledge, conducive attitudes and sufficient skills, enhanced self-efficacy in safe sex is likely to enable individuals to integrate knowledge, attitudes and skills, so that they can make appropriate judgements about their behavioural capacities according to specific situations (Bandura, 1990, Wulfert & Wan, 1993). As Bandura (1988) put it:

Managing sexuality involves managing interpersonal relationships. Problems arise in following safer sex practices because self-presentation often conflicts with interpersonal situations, the sway of coercive power, allurements, desire for social acceptance, fear of rejection and personal embarrassment can override the influence of the best informed consent. The weaker the perceived self-efficacy, the more such social and affective factors can increase the likelihood of risky sexual behavior. (p. 2)

Outcome expectancies

In SCT, outcome expectancies refer to an individual's anticipation of certain behavioural consequences and the values attached to these outcomes (Bandura, 1986). As individuals often act in anticipation of expected outcomes, given that basic conditions are similar, they usually expect that certain outcomes recur if they repeat the behaviour (Bandura, 1977). Studies have suggested that anticipated instant and positive feedback are more powerful in reinforcing behaviour than anticipated long-range or negative feedback (Perry, Baranowski & Parcel, 1990).

In terms of gay men's safe sex practices in particular, some studies have found that if a man expects his partner to react positively about his

suggestion of condom use, he is more likely to propose it and use condoms with the partner (Gaies, Sacco & Becker, 1995; Sacco & Rickman, 1996; St. Lawrence, 1993). On the other hand, the positive experiences of affection, intimacy, heightened sensation and pleasure during unprotected anal intercourse, as perceived by some gay men, may encourage them to continue to take risks (Kelly & Kalichman, 1998). However, outcome expectancies in safe sex have not been found to have a strong link with gay men's safe sex practices in most studies (Crepaz & Marks, 2002).

Vicarious learning

Vicarious learning is an indirect learning process, during which individuals can acquire certain skills through observing others' behaviours and their consequences without directly experiencing them (Bandura, 1965, 1977, 1986; Masia & Chase, 1997). Vicarious learning (role modelling) takes three forms: verbal, behavioural and symbolic (Bandura, 1977). While symbolic modelling is often strongly influenced by the media, verbal and behavioural modelling are more subject to immediate surroundings such as the influence of families, friends and peers (Bandura, 1977).

Bandura (1965) proposed that vicarious learning has two phases: acquisition and performance, and that between these two phases there is a period of cognitive mediation. Bandura (1977) contended that it is cognitive mediation that facilitates or inhibits observers' imitation at a later stage. He

suggested that observers' cognitive mediation is influenced by observation of models' behaviours and their consequences, as well as the observers' own cognitive assessments (Bandura, 1977). For example, rewards or punishments accrued by a model can often provide cues for observers to form certain outcome expectancies in relation to the model's behaviour (Bandura, 1971). Moreover, the more the observer evaluates the model's internal qualities or external situations to be similar to his or her own, the more he or she is likely to imitate the behaviour (Bandura, 1965, 1977). Observers' previous experiences and their physiological states can also affect whether and how they would, at a later stage, perform what they have learned vicariously (Bandura, 1965, 1971, 1977; Masia & Chase, 1997).

Skill mastery

Skill mastery refers to one's capacities to learn and perform certain skills (Bandura, 1986). In the field of HIV/AIDS, the skills to communicate and negotiate with sexual partners have been regarded essential for gay men (Brien, Thombs, Mahoney & Wallnau, 1994; Cantania, Coates, Stall & Turner, 1992; Edgar, Freimuth, Hammond, McDonald & Fink, 1992). Edgar et al. (1992) asserted: "If communication about condom use is ineffective, safe sex may not be practiced" (p. 84). Recent studies of sexual negotiation between gay men further suggest that an individual's ability to negotiate safe sex with a regular partner, both within and outside of the relationship, is strongly

associated with risk reduction (Davies, Hickson, Weatherburn & Hunt 1993; Ekstrand et al. 1999; Fisher & Fisher, 1992; Kippax, Connell, Dowsett & Crawford, 1993; Van de Ven, French, Crawford & Kippax, 1999).

In terms of gay men's condom use skills, Thompson, Thomas and Martin (1993) found that previous experience of condom failure does not necessarily discourage subsequent use of condoms and that the condom failure rate drops considerably after a few uses of condoms. Some practitioners have recommended that to enhance condom use skills, a few episodes of condom use, accompanied by selecting an appropriate size of condom and applying water-based lubricant, should be sufficient to reduce condom breakage and slippage (Martin, 1992; Thompson et al., 1993).

The conjunction of Social Cognitive Theory and Individualism-Collectivism

Self-efficacy and cross-cultural differences

When considering the relationship of self-efficacy and cross-cultural differences with individual behaviour, it is necessary to be aware of the complexity and variety of relationships from the cultural level down to the individual level. First, within the same type of 'culture', values, norms and beliefs vary across countries (Kim, Triandis et al., 1994; Triandis & Gelfand, 1998). For example, Triandis and Gelfand (1998) proposed that there are horizontal and vertical patterns within individualist and collectivist cultures, and that horizontal cultural patterns emphasise equity while vertical patterns

emphasise hierarchies. Second, within the same country, people who live in different geographical regions may not hold identical cultural beliefs (Bandura, 1997). Third, individual differences often confound group differences (Kim, Sharkey et al., 1996). Finally, individuals may not behave consistently even under similar situations (Bandura, 1977).

More importantly, although cross-cultural differences are an important influence on individual behaviour, because of its profound effect, individual self-efficacy may have a more immediate impact on individual behaviour. Combining individualism-collectivism with self-efficacy at the individual level may increase explanatory power (Bandura, 1997; Franzblau & Moore, 2001).

Bandura (1997) maintains:

...cultural values and practices affect how efficacy beliefs are developed, the purposes to which they are put, and the way in which they are best exercised in particular cultural milieus....In cross-cultural analyses, efficacy beliefs contribute to the productivity of the members of both collectivistic and individualistic cultures. (pp. 31–32)

Consistent with the relationship between self and groups, as formulated under the rubric of individualism-collectivism, individuals' self-efficacy embraces capacity beliefs both when with groups and when alone (Bandura, 1986, 1997; Prussia & Kinicki, 1996). In a collectivist culture, allocentrics, who are more connected to groups, tend to have higher self-efficacy when with groups than when alone. In an individualist culture, the

more self-oriented idiocentrics tend to have higher self-efficacy when alone than with groups (Earley, 1993, 1994; Triandis, 1995).

In addition, when people transfer between different cultural types, such as when allocentrics relocate themselves to a Western individualist culture, they are encouraged to cultivate a 'bicultural efficacy' (LaFromboise, Coleman & Gerton, 1993). Specifically, in line with SCT, they are likely to "master intercultural social interactions, watch similar models' successful social performance, obtain encouragement and positive feedback for their own performance, and manage to focus on action instead of being frozen by emotional arousal in intercultural situations" (Mak & Tran, 2001, p. 182).

Communication and negotiation in cross-cultural settings

Allocentrics and idiocentrics tend to differ in ways of communication (Triandis, 1994, 1995). First, the collective term 'we' is frequently used by allocentrics while idiocentrics frequently use the term 'I'. Second, allocentrics are inclined to insinuate rather than express their ideas explicitly, whereas, idiocentrics often readily use direct expressions. Third, allocentrics tend to pay attention to contexts associated with conversations, such as tones of voices and body language, whereas, idiocentrics emphasise the content of conversations. Finally, when facing conflicts, allocentrics are more likely to compromise to maintain harmony, whereas idiocentrics defend their opinions

(Hofstede, 1980; Iwao, 1993; Gudykunst, 1994; Gudykunst & Ting-Toomey, 1988; Ting-Toomey, 1988; Ting-Toomey et al., 1991; Triandis et al., 1988).

In terms of dealing with interpersonal conflicts, Ting-Toomey et al. (1991) found that allocentrics tend to compromise so that they can 'save face' for themselves as well as for in-groups. On the other hand, when persuading others, allocentrics often point out individual responsibilities to groups. In contrast, idiocentrics usually mention undesirable behavioural consequences for individuals (Gudykunst, 1993).

In sum, the different ways of interpersonal communication, and on a more general level, the different ways of information processing, in different cultures, may give rise to situations in which allocentrics and idiocentrics develop different values and norms, and integrate them with their self-efficacy in communicating and negotiating with each other (Oettingen, 1995).

Gay identification, ethnic identification and the ethnic-gay identity divide

Culture influences attitudes towards homosexuality and, consequently homosexual practices. Some studies have suggested that compared to those who are less attached to ethnic groups, those who have stronger connections with their ethnic groups tend to have weaker attitudes towards safe sex (Boldero, Sanitioso & Brian 1998; Pallotta-Chiarolli, Van de Ven, Prestage & Kippax, 1999). Moreover, compared to those who are less attached to gay communities, those who have stronger connections with gay groups tend to

practise safe sex more diligently (Boldero et al., 1998; Pallotta-Chiarolli et al., 1999). Brian (1997), based on a sample of 108 gay-identified Asian men in Victoria, Australia, reported that those who had closer contact with Asian communities than gay communities were less likely to be aware of safe sex; more likely to hold negative views towards homosexuality; and more likely to have a lower level of self-acceptance, which might be largely influenced by their relatives and ethnic friends (Brian, 1997).

Pallotta-Chiarolli et al. (1999) conducted in-depth focus group discussions among homosexually active, male, international students in Australia. Their study revealed that this group of men had experienced difficulties in integrating ethnic identities and gay identities, and that these difficulties were largely caused by the hostile attitudes towards homosexuality in ethnic communities. They reported that the Western-oriented modern concept of homosexuality differed from traditional connotations in Asian cultures. Current Asian cultures often disapproved homosexuality in public, and that negative attitudes toward homosexuality were retained among Asian immigrant groups in Australia. On the other hand, this study also reported that gay communities in Australia could be culturally insensitive, inflexible, and unwilling to accommodate minority ethnic values. Their study suggested that the intolerance of cultural diversity in Western, gay communities consequently prevented people of minority ethnic background from feeling accepted by gay communities. Pallotta-Chiarolli (1999) concluded that, in

minority ethnic communities, the deeply-rooted ethnic and religious values emphasise traditional male roles, such as retaining family names, getting married and having progeny. She also pointed out that by promoting conformity to ethnic norms, individual sexual freedom was often oppressed in such cultures. On the other hand, in gay communities, she found that the stress on members' assimilation into Western values could result in a lack of supportive networks and services for people of minority ethnic background (Pallotta-Chiarolli, 1999).

Disturbances associated with identity conflict as experienced by some gay men of minority ethnic background in Australia, have also been identified in some American studies. Choi, Salazar, Lew and Coates (1995) conducted a series of studies involving gay Asian and Pacific Islanders in San Francisco. Their study suggested that to form an integrated self-identity, most of these men had to reconcile traditional ethnic and modern Western values. Similar findings about minority ethnic values in relation to male sexuality were reported in their studies. In most Asian cultures, male roles were associated with family responsibilities, which could serve to prevent gay men of minority ethnic background from coming out (disclosing one's gay identity or homosexuality to others), to curtail public discussion of sexuality, and to position any acceptance of homosexuality as equivalent to the rejection of traditional cultural values (Choi, Salazar et al., 1995).

Choi, Salazar et al. (1995) also asserted that gay communities' intolerance of cultural and ethnic diversity had created difficulties for some gay Asian and Pacific Islander men in developing an integrated identity. They reported that these men were often stereotyped as sexually unattractive and were less likely to be presented in gay media campaigns as role models. In order to assimilate into gay communities, as their study revealed, most gay Asian and Pacific Islanders devalued their self-worth, adopted the dominant White gay culture, disconnected from their own ethnic communities, and coupled with gay White men instead of fellow Asians. As a consequence, many gay Asian and Pacific Island men were reported to have experienced isolation and a lack of support from both ethnic and gay communities. Moreover, most of these men apparently had to choose one identity and abandon the other, and many felt that to make such a decision was often challenging and painful, especially for those who were new arrivals and those who were still 'in the closet' (Choi, Salazar et al., 1995).

Choi, Salazar et al. (1995) observed that most of those men who had not self-identified as gay often dissociated the risk of HIV transmission from their own homosexual practices, regarded HIV/AIDS information and services as not so relevant, and were reluctant to have HIV tests. In another study, Choi, Coates, Cantania, Lew and Chow (1995) further found that unprotected anal sex was negatively correlated with the level of confidence in gay self-identification. Based on their investigations of factors associated with safe

sex behaviours among this particular population, Choi et al. (1999) pointed out that being unable to disclose one's gay identity to others was likely to increase the practices of anonymous casual sex. They also suggested that for these men, being less assertive in negotiation and more willing to compromise were likely to decrease condom use, being influenced by negative attitudes towards homosexuality was associated with lower levels of self-esteem and greater difficulties in forming positive self-evaluation (Choi et al., 1999). More importantly, they pointed out that their lacking family support and guidance from others often led to isolation (Choi et al., 1999).

In order to promote safe sex among gay men of minority ethnic background, some have suggested placing an emphasis on complying with group rules, as it is promoted in some Asian cultures (Choi et al., 1999; Matteson, 1997). For example, it has been argued that gay Asian men should be encouraged to comply with safe sex norms in gay communities (Matteson, 1997). Others had suggested that the emphasis on family responsibilities in most Asian cultures could also provide risk reduction motives stemming from concerns about family members (Choi et al., 1999).

There are alternatives to forming an integrated ethnic-gay identity. Some studies found that some gay Asian men adopted a bisexual lifestyle (Chan, 1992). Based on a sample of Chinese, Filipino and Korean men in the United States, Matteson (1997) found that while Western cultures encouraged individuals to publicly express their sexual desires, Asian

cultures viewed individuals' sexual identities as private—in public, individuals are expected to follow norms of and take responsibilities for families and the broader society. Most Asian cultures, indeed, allowed individuals to satisfy their private homosexual desires without publicity, and there was a higher proportion of bisexual men among gay Asian men in the United States than among their gay Caucasian counterparts (Matteson, 1997). Based on Chan's (1992) evidence as well as his own observations, Matteson (1997) asserted that in most Asian cultures it was possible to separate one's homosexual practice from one's gay identification. That is, in those societies, an individual is able to privately have sex with men but not publicly identify as gay, given that he fulfils his traditionally assigned duties (Matteson, 1997). Matteson's findings (1997) were further supported by those of Khan (1994). The latter showed that in some South Asian cultures, sex for men was mainly perceived more as a husband's familial and societal obligations than a personal choice for pleasure (Khan, 1994). Khan (1994) further suggested that gay identification was usually not considered an important issue in such cultures, and that in South Asian societies men were allowed to have sex with other men in private, but heterosexual marriage was regarded as every man's obligation to family and society.

Self-efficacy in safe sex practices of gay Asian and Caucasian men

Sanitoso (1999) argued that compared to local Westerners, Asian immigrants in Western countries, in general, had low levels of self-worth, which was associated with their minority status in host countries. On the other hand, some have argued that ethnic identification could strengthen individuals' confidence in their self-identities (Addeo, Greene & Geisser, 1994; Phinney & Chavira, 1992). Luthanen and Crocker (1992) further recommended that individuals of minority ethnic background should be encouraged to recognise the importance of their ethnic cultures, be involved in local ethnic communities, and integrate ethnic group identities into self-identities.

Sanitoso (1999) maintained that gay Asian men in particular, are likely to experience difficulties in maintaining a high level of self-efficacy in homosexual practice. Some other studies have supported his view. It was reported that in some sections of gay communities in Australia, there was a prevalent stereotype of gay Asian men being submissive, easily manipulated, and sexually less desirable, which, in consequence, often placed them in an inferior position when it came to safe sex negotiation (Brian, 1997; Pallotta-Chiarolli et al., 1999). Pallotta-Chiarolli (1998) further pointed out that among culturally mixed gay couples, lacking adequate communication skills and being stereotyped as 'second class' often made gay men of non-English-speaking background (NESB) less resolute than their Caucasian partners.

Gay community attachment and gay men's safe sex practices

There have been contradictory findings regarding gay community influences on gay men's safe sex practices (Chng & Géliga-Vargas, 2000; Gold, Skinner & Rosenthal, 1994; Kippax et al., 1992; Seibt et al., 1995). Gay communities' influences are undoubtedly multifaceted. On the one hand, attachment to gay community provides opportunities to access information, role models, social networks, support and services; have direct contact with the HIV epidemic; and be exposed to safe sex norms, all of which may help to cultivate a positive gay identity and ultimately encourage safe sex practices (Connell et al., 1989; Gold et al., 1994; Kippax et al., 1992; Kippax, Connell et al., 1993; Seibt et al., 1995). On the other hand, there may be negative influences from gay communities. Gold and colleagues (Gold, 1995; Gold et al., 1994) reported that among those men who were strongly attached to gay community, contact with a considerable number of close gay friends and frequent exposure to the gay press could increase unsafe practices.

Seibt and colleagues (1995) reviewed the evidence and concluded that studies have provided mixed findings regarding the relationships between gay identification, gay community attachment and safe sex practices. Some studies have suggested that the length of time being gay community attached may make a difference (Joseph, Adib, Joseph & Tal, 1991). Other studies have presented controversial evidence regarding peer support or peer pressure in relation to safe sex practices (Connell et al., 1989; Seibt et al.,

1993). For example, Matteson (1997) examined a sample of bisexual Asian Americans and reported no evidence that could suggest that gay community attachment enhanced safe sex practices. He further argued that after being exposed to the AIDS epidemic for so long, most gay men probably no longer relied on gaining knowledge about HIV/AIDS from gay communities, and that safe sex norms were adopted universally as survival strategies (Matteson, 1997). Others, however, have found strong correlations between gay community attachment, individuals' reduced internalised homophobia and safe sex practices (Ratti, Bakeman & Peterson, 2000; Ross & Rosser, 1996).

In the context of Australian gay communities, Sanitioso (1999) insisted that even though attachment to gay community could increase opportunities for exposure to risky situations, gay community was more likely to enhance individuals' self-efficacy in safe sex practices and eventually encourage safe sex. He observed that gay community attached Asian men had a higher level of self-efficacy in safe sex and better sexual communication skills than those who were non-gay community attached. Moreover, he also proposed that some cultural influences within Asian groups, such as willingness to compromise and please others even to the extent of sacrificing one's own interest, might place gay Asian men at risk. He recommended that by encouraging them to adopt safety rules prevalent in gay communities, gay Asian men's potential vulnerabilities in terms of risk-taking could be reduced (Sanitioso, 1999). Pallotta-Chiarolli (1998) found that in Australia, gay

community attachment was generally associated with access to HIV/AIDS information and services, participation in gay activities and gay venues, contact with gay media campaigns, and establishment of gay networks.

The debate that gay community attachment could increase opportunities for unsafe sex has raged for some time (Kippax et al., 1997; Ross and Rosser, 1996; Sanitioso, 1999). Kippax and colleagues (1997) found that in Sydney gay community attached men were, in general, more likely to practise unprotected anal intercourse, but at the same time, some had adopted the strategy of negotiated safety which had the potential to lower the risk of HIV transmission.

Negotiated safety, as defined by Kippax and colleagues (Kippax, Crawford, Davis, Rodden & Dowsett, 1993; Kippax et al., 1997), refers to the practice of anal intercourse without condoms between regular partners of known seroconcordant HIV status (that is, they both know that both their HIV statuses are negative or positive), and there are clearly spoken safety agreements between couples about sexual practice outside of the relationship (including no sex, no anal sex or always protected anal sex with casual partners). Kippax et al. (1997) provided empirical evidence that negotiated safety was practised more frequently among gay identified and gay community attached men in Sydney than otherwise. They found that those who lived in inner city areas, where there were large and visible gay

communities, practised more negotiated safety than those who lived in other areas.

Many researchers have adopted the view that in terms of sexual transmission of HIV through male homosexual practices, men who practise unprotected anal intercourse with a long-term, sero-concordant negative, regular partner and, at the same time, have no unprotected anal intercourse with any casual partners, should be regarded as taking little risk (Van de Ven et al., 1999). But to *safely* practise negotiated safety, good sexual negotiation skills are necessary. In particular, both parties should be informed of each other's HIV status to establish sero-concordance and, if any agreement about safe sex outside the relationship has been broken, re-negotiation and re-assessment of serostatus should be undertaken (Kippax et al., 1997; Van de Ven et al., 1999). Safety procedures apply specifically to couples of both HIV negative status (rather than couples of both HIV positive status).

Based on their survey data, Van de Ven et al. (1999) found that having clearly spoken safe sex agreements was strongly associated with safe sex practices. They reported that gay men in Sydney who had an agreement of 'no anal sex with casual partners' practised less unprotected casual anal intercourse than those who did not have any clearly spoken agreement (Van de Ven et al., 1999). Based on a sample of 1611 gay men in Sydney, with nearly half being in a regular relationship for more than six months, Van de Ven et al. (1999) reported that sexual agreements varied according to the HIV

status of regular partners. That is, first, among those whose HIV statuses were sero-concordant (positive-positive or negative-negative), unprotected anal intercourse with a regular partner was the most common agreement. Second, among those whose HIV statuses were sero-discordant (negative-positive) or sero-nonconcordant (positive-unknown, negative-unknown or unknown-unknown), protected anal intercourse with a regular partner was most common. Third, among sero-concordant and sero-discordant partners, protected casual anal intercourse was most common. Finally, sero-nonconcordant partners were less likely to have any agreement about casual sex (Van de Ven et al. 1999). Based on their analyses of the survey data, Van de Ven et al. (1999) concluded that unprotected anal intercourse with casual partners, a marker of 'high risk', was more likely to occur among those who had no agreement with regular partners (under any circumstance) than among those who had some kind of clearly spoken agreements.

Gay community input on safe sex has changed along with the HIV/AIDS epidemic. Findings from an earlier period in the epidemic suggested that gay community attachment was associated with safe sex (Kippax et al., 1992; Kippax, Connell et al., 1993).

However, recent evidence indicates that since the late 1990s unprotected sex practices in gay epicentres across the world have increased rapidly, accompanied by an increase in incidence of HIV infection in some cities (Van de Ven, Prestage, Crawford, Grulich & Kippax, 2000). For

example, for San Francisco, McFarland et al. (2000) reported a general decrease in consistent condom use, general increase in multiple sexual partners and unprotected anal intercourse, and increased incidence of male rectal gonorrhoea and HIV.

Within the HIV positive population, Denning, Nakashima and Wortley (2000) at the Centre for Disease Control and Prevention (CDC), United States, reported that HIV positive men in the United States were more likely to practise anal intercourse, both protected and unprotected, in 1997–1998 than in 1995–1996. They warned that, among HIV positive men in the United States, the increase in unprotected anal intercourse and the greater likelihood of having multiple sexual partners could lead to an outbreak of newly diagnosed sexually transmissible infections within this sub-population (Denning et al., 2000).

Following a cohort of homosexual men in Amsterdam, the Netherlands, Dukers, de Wit, Goudsmit and Coutinho (2000) found that, among HIV negative men, the practice of unprotected anal sex increased from below 60% during the period of 1992–1996 to around 65% after mid 1996. For HIV positive men, on the other hand, increased unprotected anal intercourse was more likely to occur among those who had a high HIV viral load—than those who had a low or undetectable viral load (Dukers et al., 2000).

Ekstrand and colleagues (1999) investigated behavioural factors associated with the recent increase in unprotected anal intercourse among

gay men in San Francisco. They examined a cohort of participants who were local residents, English-speaking, and aged between 19 and 29. They found that the practice of unprotected anal intercourse had increased in 1996–1997 compared with 1993–1994, which suggested that the increase in unprotected anal intercourse had occurred quite recently. More importantly, they reported that in 1996–1997, half of the reported unprotected anal intercourse was considered risky in terms of HIV transmission, that is, it occurred among sero-discordant (who have different HIV status) and sero-nonconcordant (one party's HIV status is unknown) couples (Ekstrand et al., 1999). They concluded that being HIV positive, a high frequency of sex, use of drugs in the previous 12 months and perceived low levels of self-efficacy in avoiding sexual risks were major high-risk characteristics (Ekstrand et al., 1999).

In Sydney, from 1996 to 2000, Van de Ven, Prestage, Crawford et al., (2000) conducted twice-yearly periodic surveys in selected gay social and sex venues as well as sexual health clinics. These surveys also were conducted at major gay events, such as the annual Sydney Gay and Lesbian Mardi Gras. The researchers reported increases in unprotected casual anal intercourse among both HIV positive and negative gay men. However, to date, there has been no increase in HIV incidence in Australia (Van de Ven, Prestage, Crawford et al., 2000).

Notably, studies conducted in cities with large gay population have indicated a recent rise of unprotected sex practices, coinciding with the

introduction of combination anti-retroviral therapy around 1996 (Dukers et al., 2000; Van de Ven, Prestage, Crawford et al., 2000). Some researchers, hence, have speculated that the success of the improved therapeutics could have induced 'optimism' that the HIV/AIDS epidemic was no longer a threat to gay communities, and this may partly explain the recent increase in unsafe practices in certain quarters of the gay population (Dukers et al., 2000; Van de Ven, Prestage, Crawford et al., 2000). However, other evidence suggests that increasing rates of unprotected anal intercourse among gay men are unrelated to HIV optimism—unprotected anal intercourse has been increasing among both 'optimistic' and 'sceptical' gay men (Elford, Bolding & Sherr, 2002).

Sexual profiles of gay Asian and Caucasian men in Sydney

Studies conducted among Sydney gay men suggest that, in general, gay Asian men share certain characteristics with gay Caucasian men in terms of homosexual practices (Prestage, Kippax, Van de Ven et al., 1996; Prestage et al., 2000). However, to some extent, each group also has unique features. First, gay Asian men, as a group, tended to have a relatively limited range of sexual practices. For example, one study found that the majority of the Chinese participants preferred mutual masturbation, kissing and cuddling (Hood, Prestage, Crawford, Sorrell & O'Reilly, 1994). Prestage and colleagues reported that regardless of partner types (regular or casual

partners), oral sex was more popular among gay Asians than Caucasians, and that anal intercourse was less popular among gay Asian men than their Caucasian counterparts (Prestage, Kippax, Van de Ven et al., 1996; Prestage et al., 2000). Second, gay Caucasian men usually used condoms more in casual encounters than within regular relationships. Gay Asian men had a higher frequency of consistent condom use with both regular and casual partners, compared to gay Caucasian men (Prestage, Kippax, Crawford et al., 1996; Prestage et al., 2000). Third, gay Asian men had a relatively low rate of HIV testing (Prestage, Kippax, Crawford et al., 1996; Prestage et al., 2000). Fourth, more gay Asian men were in a regular relationship than gay Caucasian men (Prestage, Kippax, Crawford et al., 1996; Prestage et al., 2000). Finally, in terms of negotiated safety, proportionately fewer gay Asian men had safety agreements within and outside of regular relationships than did gay Caucasian men (Prestage et al., 2000). Importantly, one of the major reasons for gay Asian men practising less negotiated safety than their Caucasian counterparts was their reluctance to have HIV tests and unwillingness to disclose HIV status (Prestage et al., 2000).

Theoretical framework

Individualism-collectivism constructs are important components of the theoretical framework for examining cross-cultural differences among gay men from either an Asian or a Caucasian background in Sydney. From a

macro cultural view, an individualist culture tends to be more self-oriented and a collectivist culture more group-oriented (Triandis, 1995; Triandis & Gelfand, 1998). Triandis and colleagues have proposed that while each individual possesses components of both individualism and collectivism—regardless of which type of culture one belongs to and taking individual differences into account—cultures do have unique impacts on individuals, and that such impacts lead to useful differentiation between ‘individualist’ and ‘collectivist’ cultural types (Triandis, 1995; Triandis & Gelfand, 1998). Salience of group goals and group identity, for example, vary from culture to culture (Yamaguchi, 1994).

Gay Asian men who have had a collectivist upbringing and migrated to Sydney, may absorb some individualist cultural components while still preserve some collectivist ones. Cross-cultural conflict may arise and even intensify when it comes to ethnic and gay identification, interpersonal communication and sexual negotiation between couples of different cultural backgrounds.

Bandura’s Social Cognitive Theory (1997) is also incorporated into the theoretical framework of this study. Research has shown that lower levels of self-efficacy in condom use and in sexual negotiations are associated with increased sexual risk-taking among gay men (Bengel, Belz-Merk & Farin, 1996; Dilley, McFarland, Sullivan & Discepola, 1998; Stall, Hays, Waldo, Ekstrand & McFarland, 2000). Other research involving gay men has

indicated that expecting a negative response from partners towards condom use was associated with the non-use of condoms (Gaies, Sacco & Becker, 1995; Sacco & Rickman, 1996). Moreover, positive experiences of affection, intimacy, heightened sensation and increased pleasure associated with unprotected anal intercourse could reinforce risk-taking (Kelly & Kalichman, 1998). Furthermore, practical skills including negotiating condom use with regular partners, preventing condom failure and avoiding risk situations, especially during casual encounters, are essential to reduce sexual risks of gay men (Kippax et al., 1997; Thompson, Thomas & Martin, 1993).

Aspects of gay community connectedness are also expected to play a part. Gay community may be expected to have an impact on individual safe sex practices, although previous research has provided mixed findings (Kippax et al., 1992; Seibt et al., 1995). Factors such as the degree and time duration of gay community attachment, peer pressure or peer support, and the extent of internalised homophobia may have different impacts on different individuals (Joseph, Adib, Joseph & Tal, 1991; Ross & Rosser, 1996; Seibt et al., 1995). In addition to gay community attachment, other factors such as age and partner types may also be related to gay men's sexual risk-taking (Bosga et al., 1995; Buchanan, Poppen & Reisen, 1996; Davidovich et al., 2001).

Individual cognitive variables such as self-efficacy and outcome expectancies in safe sex may be strongly influenced by cultural and social

factors (Bandura, 1997). Some have argued that gay men of minority ethnic background were usually in a disadvantaged position in both the wider society and within gay communities, which often resulted in negative outcomes for these men's self-confidence, and consequently, their competence in dealing with issues such as sexual identification and negotiation of safe sex (Pallotta-Chiarolli et al., 1999; Sanitoso, 1999).

Hypothesis and research questions

This study proposes that for gay Asian men in Sydney, those who are able to effectively deal with both their ethnic and their gay identity are more likely to have enhanced self-identity and better contact with local gay communities. From the individualism-collectivism perspective, gay Asian men who have been exposed to both a collectivist cultural background and the individualist Australian culture are likely to experience more difficulties in terms of homosexual orientation and self-identification than gay Caucasian men.

Different communication approaches between gay Asian and Caucasian men are expected to influence self-efficacy in negotiating safe sex and reaching safe sex agreements within and outside of regular relationships. Differences between gay Asian and Caucasian men in self-efficacy in risk avoidance and condom use with casual partners, outcome expectancies in regular partners' reactions to suggestions about condom use, self-efficacy in

sexual negotiations with regular partners, and corresponding behaviours will be explored in detail. Sexual risk practices will be examined in terms of extent of unprotected anal intercourse with regular and casual partners. Negotiated safety will be examined in terms of the existence of safety agreements regarding sexual practices (especially anal intercourse) within and outside of regular relationships.

This study will also investigate the impact of gay community on individual self-identification, especially among gay Asian men, and their sexual practices. How individuals deal with the wider individualist culture as well as the ethnic and gay subcultures will be examined. Possible links between gay community attachment and vicarious learning will be explored, and gay Asian and Caucasian men's own perspectives on homosexuality and risk-taking will be investigated.

Specifically, the hypothesis of this study is: Gay Asian men experience an identity conflict associated with being both gay and Asian in Sydney. The first research question is: How are aspects of individualism-collectivism, Social Cognitive Theory and gay community connectedness related to gay Asian and Caucasian men's sexual practices? The second research question is: Are there differences between gay Asian and Caucasian men in terms of safe or risky sexual practices? Specifically, in order to answer the second research question, the following aspects of sexual practices will be examined:

protected and unprotected anal intercourse with regular and casual partners,
and safe sex agreements within and outside regular relationships.

Chapter 3

Dealing with the Divide: Focus Group Discussions with Gay Asian Men in Sydney

Introduction

This chapter presents the results of three focus group discussions with gay Asian men in Sydney, addressing issues related to the theoretical framework—individualism-collectivism and key elements of Social Cognitive Theory. The data informed the subsequent design of the questionnaire.

Focus groups are useful for exploring culturally sensitive issues among ethnic groups (Hughes & Dumont, 1993; Naish, Brown & Denton, 1994). They enable researchers to investigate the ways people think and the underlying attitudes that influence behaviour, which gives them a particular advantage over alternative methods (Kitzinger, 1994a, 1996). Focus group discussions are a powerful exploratory tool, and, in contrast with surveys, their semi-structured nature is suited to the purpose of exploration. It is important that focus group results be interpreted with regard to situational specificities because both internal (individual) factors and external (situational) factors can have a bearing on interpretation.

In the field of HIV/AIDS research, sensitive issues such as those related to gay identification and homosexual behaviour are not generally the subject of public discourse. With focus group discussions, group dynamics can play an important role in encouraging participants to express themselves

freely and share common experiences (Kitzinger, 1994b; Robinson, 1999). Focus groups, therefore, can bring particular benefits to HIV/AIDS research (Kitzinger, 1994a).

In the current study, the focus group results were intended also to illuminate important aspects which would be the subject of the subsequent questionnaire, to improve its reliability and cultural sensitivity. In particular, the focus groups were expected to achieve a mutual understanding in the use of language among researchers and participants. Of equal importance, the major themes emerging from the focus groups could provide important cues for the questionnaire construction.

The focus group discussions aimed to investigate, in detail, possible conflicts between an Asian and a gay identity and whether cross-cultural differences could account for potential conflicts. They also aimed to explore dimensions of self-efficacy in relation to safe sex among gay Asian men.

Method

Procedure

Advertisements seeking volunteers to participate in the focus group discussions were published in the community news column of a local gay newspaper and, at the same time, disseminated through a gay Asian men's network of the AIDS Council of New South Wales (ACON) (Appendix A). The inclusion criteria were Asian men, now living in Sydney, and self-identified as

gay or having had sex with men. No restrictions were set in terms of age, length of residency in Sydney, residential area, resident status, or any other demographic factor including occupation, income or education. In all, three focus groups were conducted with 19 participants. The majority of the participants were recruited through the gay Asian men's network of ACON. The numbers in each group were 4, 9, and 6, respectively. To maintain anonymity, the 19 participants were given fictitious names in subsequent analyses. Those in Group A were Adam, Allan, Andrew and Aaron; Group B comprised Brian, Bob, Bing, Brad, Ben, Bart, Bruce, Brown and Blair; and Group C had Calvin, Chang, Chao, Chou, Clark and Carl. These participants ranged in age from early twenties to late forties. All were of South East or East Asian origin with the majority of Chinese background.

The focus group discussions took place in a small, private meeting room at ACON. This venue was close to the local gay scene and was convenient to public transport. The three discussions were conducted on April 19, 2000; May 5, 2000 and May 8, 2000, respectively. In line with the ethics approval for the study from the University of New South Wales (UNSW) and ACON (see Appendices B, C, D and E), each participant was asked to sign a consent form (see Appendix F) before the discussion. The consent form contained information on the purposes of the study, the inclusion criteria, and a brief introduction to the focus group discussion process. Most importantly, it guaranteed confidentiality about any information discussed in

the focus groups and gave assurance that any records would be made anonymous and used only for research purposes.

Each group discussion was conducted over approximately two hours and the researcher acted as the moderator. The end-point of each discussion was when the researcher perceived that the ten major topics, as listed in the topic guideline (see Appendix G), were exhausted; no new information on the major topics had emerged for a while; or themes were being repeated. The discussions were audio taped using a small, unobtrusive audiocassette recorder with a built-in microphone.

The topic guideline (see Appendix G) listed ten key discussion points. The first three major topics contained items about ethnic identity, gay identity, and any possible disjunction between these two. These topics covered information about the importance (or otherwise) of being Asian, issues of family responsibility and compliance with group norms, the importance (or otherwise) of being gay, gay community attachment, and challenges and pressures associated with being a gay Asian man.

The fourth discussion point investigated gay Asian men's preference in terms of partners. The topics included the kind of partners sought, whether or not they would inquire about others' HIV status and disclose their own HIV status, and what kind of venues they frequented to find sexual partners.

The fifth and sixth discussion topics referred to communication skills, English language fluency and the ability to negotiate and reach agreements

about safe sex. The issues discussed related to whether language would pose a problem in communication, whether and how participants would talk about condom use with a partner, whether there would be any difference in terms of sexual negotiation with an Asian partner compared with a Caucasian partner, and condom use for anal intercourse.

The seventh discussion point explored vicarious learning through the influence of friends and partners as well as exposure to HIV/AIDS information. The last three categories related to self-efficacy in the following domains: condom use, negotiation with partners, and integration of gay and ethnic identities. These topics ranged from confidence in one's abilities to use condoms in different situations, to negotiate and persuade sexual partners, and to effectively deal with any identity conflicts.

Analysis and results

Tape recordings were transcribed (by the researcher) soon after each session by the researcher. The transcripts were verified by checking repeatedly against the original tapes until it was clear that the record was a verbatim one. A list of core themes and sub-themes was extracted by reading through the transcripts in reference to the original topic guideline. The group discussions were categorised according to the list of themes and sub-themes presented in Table 3.1.

Table 3.1

Themes and Sub-Themes Identified in the Focus Group Discussions

Major themes	Sub-themes
Asian identity and collectivism	Importance of culture to individuals Choice of an Asian or a Caucasian partner Sense of belonging to a group Sense of belonging to one's family Need to find a partner Need to have a circle of friends Self-acknowledgement of an Asian identity Minority status as an Asian Alienation from Asian connections
Gay identity and individualism	Living as a normal human being Gay community attachment Discrimination against Asians Caucasian 'superiority' Gay mentality Alienation from sections of gay community

table continues

Major themes	Sub-themes
Dual identity conflict and integration	Family pressures Self-identification as a gay Asian man Self-hatred Identity conflict Self-esteem, self-acceptance and self-confidence Asian gay community Tension among gay Asian men Sense of belonging to Asian gay community Fitting into gay community stereotypes Self-empowerment Involvement in broader gay community Gay Asian models Control under the influence of environment Control under the influence of friends

table continues

Major themes	Sub-themes
Sexual exploration and unsafe sex	Being sexually adventurous Being sexually conservative Practice of unsafe sex and desire to be accepted by others
Communication with partners and friends	Communication with Asian or Caucasian partners Communication with friends
HIV status and negotiation around condom use	Inquiry about and disclosure of HIV status Negotiation of condom use with regular partners Negotiation of condom use with casual partners
Safe sex practice	Consistent condom use regardless of partner types Condom use within regular relationships Condom use for casual sex
Information seeking	Seeking accurate HIV/AIDS information English language fluency

Asian identity and collectivism

The majority of the participants in the focus groups agreed that their Asian cultural background was the most influential in their decision-making in relation to major life issues. Bob described the following:

I think the culture is the most important. I am Chinese and Chinese culture to me is one of the most important aspects that I always consider when I make decisions in my life.

Cultural impacts on individual decision-making were particularly reflected through these participants' personal preferences of Asian or Caucasian partners. Some preferred Asian partners because they could share common cultural beliefs with each other. For example,

I think culture is important on this issue. I am a Malaysian Chinese. I don't think race is the issue here. You seek someone who is more similar to you. Somehow it fits in because you are both Chinese. You share more cultural similarities than with Caucasians. [Brian]

As Asians and Caucasians have different sets of cultural norms, this may cause difficulties for mutual understandings. Brad said:

You always pick up the cultural norms with which you've been brought up. My experience is that Caucasians are more disorganised. I don't know what they want. They seem to float around with no direction. That might be a cultural thing with Caucasians.

Having difficulties in understanding each other, sometimes due to cultural differences, may contribute to the fact that some gay Asian men in the group, liked to couple with other Asian men. Chao expressed his preference for Asian men as follows:

It's up to you whether you want a Caucasian or an Asian partner. When I was younger, I think it didn't matter. But then I found a lot of difficulties in relationships with Caucasian guys. I found Caucasian guys think differently. It's a lot easier with Asian partners.

Following this comment, Carl tried to clarify if Chao was suggesting that cultural differences made him feel that Asian partners were easier to go out with than Caucasian partners.

When you say it's easier with Asians, do you mean it is because we have the same Asian mentality? I mean it is a collective mentality or maybe it relates to Confucianism. [Carl]

Carl elaborated further:

You know it is easy to say love is love. Sure, it is very catchy. But it is very difficult to deny cultural heritage....I'm Chinese. It is very difficult to ignore cultural heritage....The most important thing for me and my partner, I found, is that we are both Chinese who were brought up overseas. Our backgrounds are very similar. I think family responsibility is paramount and so does he.

Some appeared to think that the Asian collective mentality was a valuable aspect of heritage. For example, it played an important role in Carl's decision to have an Asian partner. This view was echoed by Chou:

Asians are easier to live together [with] and to [reach a] compromise. I'm looking for a partner who is similar to me—someone who either was born in Australia or was influenced by Australian culture but still has the Asian heritage. It is more likely that I could find such a partner among Asians than among Caucasians.

Some participants considered that having an Asian partner was more likely to guarantee a stable relationship. For example, Chou remarked:

I've been with both Asian and Caucasian partners. I think Asian partners would be more likely to have a long-term relationship because the main thing for Asians is to maintain a stable relationship.

Similarly, Chao drew attention to cultural differences:

Probably at the early stage, young Caucasian guys like to play around. Whereas, young Asian guys would like to settle down.

On the other hand, Bob's views were somewhat different:

I don't think to share the same culture is important. It is important that the person should appreciate your culture....It is not necessary that you and your partners share cultural values. But you do need to respect each other's cultural values and differences. It is a more important thing in a relationship.

Chang thought it necessary to put effort into any gay relationship in order to maintain it. He told of his success in several long-term relationships with Caucasian partners.

I have been with my partner for eight years. I find Caucasians very attractive. I had Caucasian partners before this relationship as well. There have been no problems....It is important to deal with each other and make things work regardless of different cultural backgrounds.

Calvin agreed with him in this regard:

In any relationship, to maintain a long-term one, you need to put effort into it. It doesn't matter if it is with Asians or Caucasians. Sure, Asian guys are more of a similar mentality. You tend to behave similarly. With Caucasian guys, you have to think, talk and learn their cultures, and vice versa. Respect is probably not the right word here and it is probably more about what it is. If you think something is important to you, it may be important to Caucasians as well. Some Caucasians think Asians are very attractive and special.

Bruce pointed out that rather than merely a personal choice, such a preference for particular partner types was subject to external influences:

I think there is always a story behind it no matter which kind of man you go for. For example, things like experiences you have had before in your life, the scenes you have been exposed to, etcetera, influence you. If you've grown up with Caucasian men or you think Caucasian men are beautiful, you might go for Caucasians. They are attractive to you. On the other hand, if you are really comfortable with yourself, you might look for Asian guys. That is just part of who you are. [Bruce]

The collective nature of East and South East Asian backgrounds seems to have contributed to the participants' group-orientedness. For example, the majority felt that the sense of belonging to a group was essential. To them, family was usually the primary social group to which most of them attached themselves.

I think the Asian culture is so important that you feel you belong to such a group. If you belong to a family, it is quite significant. You can still be independent and at the same time you can have something to back you up. You feel a lot stronger about which way you are heading. As a reasonably small minority in a White society, I believe, being part of the family is very important to me. [Brad]

According to some participants, Asian heritages can enable links with other Asians.

I was born in an Asian country. To be an Asian is important to me because of the Asian background. Also, it is because of those family things. Being a minority, sometimes I am ignored and discriminated against—kind of being pushed aside. But with Asians, we are equal. We can link with each other and exchange thoughts. Australians cannot understand Asian cultures very well. [Chou]

Besides attachment to one's family, having a partner to whom one can relate, also provides a sense of belonging. Some participants in the group considered that relationships marked an achievement of gay life.

To be a gay man, it probably means you will have a lonely life....When you lead a gay life, there is a lot you need to learn. A lot of people have learned hard lessons because they couldn't get any help....You should look for a partner. It will make things easier. If you don't have a partner, it seems that you haven't achieved anything. A partner will give you a happy life and will make everything look better than it is. A gay man without a partner is not successful and not wanted....I go to those gay scenes to look for a partner, [that is,] someone I can relate to and is also sexually compatible. [Bing]

Others feared loneliness in older age:

I am concerned that when I grow older, I will be lonely. [Brown]

Although friends might not be regarded as close as one's family and partners, they certainly can provide gay men with social support.

What is important is not who you are but whom you are with. Some Caucasians don't understand Asian cultures so they try to get away from you....But there are also many Caucasians who actually adore you because of your Asian cultural beliefs....I have a lot of friends who want me and need me. I feel happy to be needed....My current boyfriend is a Caucasian. We have been with each other for two years. I have lots of Asian friends as well. I don't have problems with either of them. I never say to myself that I only look for Caucasian friends. I look for someone who can click with my personality, be with me, and develop a friendship....In that way, I am very conservative. [Adam]

Mutual introduction through friends' networks could help to expand social circles. Bob compared meeting friends through gay venues with friends' networks:

If you don't mind strangers, you can go to nightclubs and dance parties. But if you are looking for someone especially with whom you want to have a serious relationship, you had better rely on your friends' contacts....I have my own circles of friends. I like socialising with them. I haven't been to those venues for a long time.

In terms of self-acknowledgement and acceptance of Asian identity, some participants in the focus groups felt that Asians were positioned as minorities in Australia. Through the group discussions, it was sensed that some Asians had a period of time when they disliked being identified as Asian.

As a minority, there weren't many of us. I don't know what causes it that some people hate to be an Asian. [Andrew]

Chao expressed his feeling that as a minority in society there was a lot of difficulties.

It's absolutely difficult to be an Asian....We are really minorities.

Although able to acknowledge their Asian heritages, some participants in the groups did not really have a strong Asian connection. For example, Andrew came to Australia at an early age and found:

I am not used to Asian cultures. I have had no contact with them....I have been in Australia since I was three. It is about 20 years.

Chou had been in Australia for a reasonably long period of time and was quite assimilated into the Australian culture. He felt out of touch with his roots:

I have been here for quite a long time. I have been influenced by the Australian culture a lot....If I go back home, I could no longer get along with people there.

Chao was a third generation Asian-Australian. He did not regard himself as a traditional Asian because his beliefs differed from those with more traditional values.

I am an Asian who was born here as the third generation. I am not a very good Asian according to the traditional definitions. I am not like those traditional Asians who regard family as the number one and who would like to sacrifice themselves for their families.

Gay identity and individualism

When asked about the essence of being a gay man, some participants in the groups felt that it was important to live and be treated as a normal human being. Aaron responded in this way:

As a human being. In the wider community, people always think gay men should wear skirts and high-heels. I don't think that is always the case. Society should change its mind about gay and gay images. I know a lot of gay people who go to work—start at nine and finish at five. They wear a tie and suit. People just could not tell by what they wear. There is still homophobia out there....The mass media of the wider community have had bad images about gay and gay community. For instance, the mass media's only interested in the flamboyant and colourful part such as the Mardi Gras. People don't know what a real gay life is about. Not only can we have such a colourful style but also we can just be a normal person. We can walk along the street dressed in jeans, bow ties, and shirts....The Mardi Gras and other political campaigns should not only dance and float. They should help to convey a correct message of who we are.

Bart believed that every gay man should choose his own lifestyle. He argued that not every gay man in Sydney wants to live the stereotypical gay lifestyle, which was usually connected with the prominent 'gay ghetto' in Sydney, Oxford Street:

What makes you a gay is a big question. A lot of people think that to be gay you should go to clubs, take drugs and so on. If you are not like that, you are less gay. I think it is sad for me to go to parties and dress like a girl....To be gay, to me, is just to be normal. Going to Oxford Street is not my style. A lot of people think we should dine on Oxford Street, shop on Oxford Street, and meet friends on Oxford Street. I don't like it....I don't like to pick up people in the nightclubs on Oxford Street either....To be gay means much more than that. We are free to choose the way we are.

Brown described different types of gay men:

Some like to go out and take drugs. Some like to stay at home. There are always someone who are similar to you and someone who are not.

The majority of the participants felt that gay communities and gay groups were important. When it comes to gay community in Sydney, most participants spoke of discrimination against gay Asian men. Some participants felt that certain sections of gay community stereotyped Asian men as passive. Adam put it this way:

I think in gay community Asians are discriminated. Asians are polite. They think Asians are always passive.

Under the burden of such stereotypes, Andrew vividly described how strange he felt when he wanted to become active in sexual activities.

I don't like to be the passive one all the time. But sometimes if I want to be the active one during sex, I will even feel bad about myself. It seems wrong. It seems as if I should not take charge.

Besides passivity, there were other non-specific stereotypes of gay Asian men:

It is very discriminatory. When we talk about a sense of community, it should be like that everyone looks after each other and interacts with each other. In gay community in Sydney, as an Asian, you get a lot of positive and negative feedbacks. The negative feedbacks make you feel isolated. You are a minority and you are stereotyped in many ways. [Brad]

To mention one example of such discrimination against Asian men, Ben described his experience in a gay bar:

Once I went to a gay bar on Oxford Street. I heard someone telling me: "You are an Asian. You should go to that Asian Corner." I didn't know what he meant by that. I was not happy....I said [to him]: "I like [it] here. It's none of your business."...Most people go out to have a good time. You don't want to be told where you should go and where you should not. Everyone can go wherever they want.

Such kinds of discrimination against gay Asian men could reduce the sense of belonging to gay community. Brad related an unpleasant experience which highlights obstacles to integration:

I was sitting at a table with a European guy. He was a flatmate of mine. He was saying that the night before they had been in a gay bar on Oxford Street. He found that there had been many Asians who looked all the same to him....You get the negative impression that we Asians are not attractive to them. You actually internalise [it] and accept that you are not attractive....So I can't really feel that we are integrated into gay community.

According to some accounts, gay community treated gay Asian men as second class and sexually unattractive. Chao expressed this feeling thus:

Before you are accepted as a gay man, you are firstly identified as an Asian. Generally this divides people into [those] who like you and who don't. A huge difference in this meat market depends on your skin colour. Racial discrimination does exist....You just feel you are not one of them.

Others highlighted minority status rather than discrimination per se:

I don't think this is discrimination. It is because Asians are minorities here. When I was in Jakarta, local Asian people don't like to go out with Caucasians either. [Chang]

Nevertheless, the majority of the participants in the groups had experienced discrimination either implicitly or explicitly in gay community in Sydney. Such discrimination can be manifested in several ways. However, it did not occur to all venues:

There are some venues when you enter you find they are not your places. But there are some gay bars where you see many Asians. Caucasians there are mixed with Asians. People will come to you and say hello to you. It makes you feel that you are welcome there. [Chou]

Some members of gay community in Sydney held the views that gay Asian men were sexually unattractive. In one of the group discussions participants expressed the view that most Caucasian men believed that the average genital size of Asian men was smaller than that of Caucasian men.

Caucasians all think that Asian people have everything small. Everybody here knows what I mean. I don't want to be that specific. We are seen as small. Caucasians are obsessed in something huge. Everything tiny seems to turn them off. [Bing]

Brad resented that some Caucasians tended to judge Asians by their bodies rather than their personalities:

Once on Oxford Street, someone asked me straight away that if Asians have big dicks. I said: "I can't tell you but I am all right." People are so superficial. You really don't want to waste your time with these people anyway. People should judge others by their personalities.

Body shape also appeared to be an issue.

Caucasians are obsessed not only with genitals but also with bodies....In Australia, everyone is looking for someone who is young, good looking, and has a nice body. You should be very handsome, and if not, it is just too bad. [Bing]

A blonde is like a Sex God in most people's minds. [Chao]

I am not experienced in gay community. When I think of it, it is to me more about competitiveness and about the need to [be] good looking. You should accept such rules when you go out. It seems to be the gay body mentality.... It is body language. You need to [be] good looking and have a nice body. [Bob]

The phenomenon of some older Caucasian men coupling with young Asian men was discussed. Some participants linked this phenomenon with Asians being treated as inferior to Caucasians in gay community in Sydney. They considered that in such couples Asians 'sacrificed' their youth and Caucasians 'sacrificed' their race. As Bruce pointed out:

The sad thing about gay community is that it seems to think Asians belong to the second class. I've got the feeling that some Caucasians would go for Asians only because they are too old to get any Caucasian man....I think things are getting better and we are more accepted.

Brad attributed this to the negative stereotypes of Asian men in gay community.

The stereotypes of Asian men being unattractive make gay community think that only older Caucasian men like young Asian men and that Asians are the second class....This is gay men's mentality.

Aaron argued the reverse:

I think Caucasians are generally the ones who are more selective. Asian people have bad names.

However, Bart looked at it from a different angle. Rather than blaming gay community, he attributed it to some Asians being too eager to find a partner.

Maybe that is because gay Asians are so desperate. When they are with old Caucasians, they look like father and son. To be honest, I find so many Asian-Caucasian couples like that. I think because Asians are afraid of being lonely....It is not right that you let old Caucasians be your father and pay everything for you. If you feel lonely, you should do something else rather than looking for someone all the time. The better way is to be stronger on your own.

Bing had an alternative perspective:

I think [the reason] there are so many older Caucasians and younger Asians is because Asians respect elders, would like to compromise, and are prepared to settle down with a normal guy whatever age he is.

Apart from feelings of being discriminated against in gay community in Sydney, the participants addressed feelings of connectedness to and distance from gay community. Some had little experience:

For gay community, I have no ideas at all. I don't know what they are doing, exactly. I don't go out much. [Ben]

Norms in gay community were perceived by some participants to be in contradiction with those of Asian cultures. Unable to make these two value systems accommodate each other, some gay Asian men felt shocked and out of place in gay community.

I have only been in one gay relationship till now. I never go to nightclubs. I don't drink, smoke and take any drugs. That is probably why I have never really met any other gay friends except him....What is particularly disappointing is that you see everyone in gay community is very liberal. It is hard to understand their radical behaviour. When you look at the Mardi Gras, it is like a 'big penis'. You think to yourself: "How am I going to get myself into it?" My partner felt the same way: "How in the hell am I going to deal with people who can dance topless on a metal penis!" Huge problems exist between gay community and gay Asians in order to accept each other. We, Chinese, and others like Vietnamese, etcetera, generally have a collective mentality. Once you have observed such individualist behaviour, you feel shocked and horrible....I just cannot find my place there. [Carl]

Here, Carl pointed directly to the disjunction between 'a collective mentality' among Asian men and 'individualist behaviour' in gay community comprised mostly of Caucasian men.

On the other hand, some participants suggested that gay community in Sydney was gradually becoming more acceptable to gay Asian men.

Gay groups are different. Some are more acceptable than others. Now gay community in general is more open-minded. [Blair]

Dual identity conflict and integration

According to participants in the focus groups, pressures came first and foremost from one's family. For some participants, it was a difficult decision whether to tell parents about their gay life. Some parents reacted reasonably after being told by their son that he was gay but some did not. It was a big relief to Allan after he told his parents:

I told them: "Mum and Dad, look, I am gay." I think they did really well. I accepted myself being gay after I told my parents. I am quite happy. Mum took it really well. It is Dad who thinks that I should not be like that. I am the eldest son with two younger brothers.

Ben's family also reacted positively:

I have been here for three years. I am lucky that I don't feel pressures from my family. My parents don't want to destroy my life. They know what I am doing and who I am. They have already met my partner and got to know him quite well.

For some parents, having a gay son meant disappointment because he would no longer fulfil their wishes that he marries and have progeny.

My Mum is quite upset. Dad has always got the feeling about whom I am...I talked to them and now they understand. Dad accepted that I am not going to get married. But he told me that he was too old to understand it...Generally people just don't talk about it. My parents are Chinese. They always follow the Chinese culture. [Adam]

Before deciding whether to tell his parents or not, Brown weighed up the benefits of being released from unrealistic expectations from the family

and the costs of being unable to realise family dreams. After some time, he decided to 'come out':

There are a lot of pressures from the family....To get married and things like that. It is hard because you want to make your parents happy. You want to make them proud of you. You want to give them grandkids. To get married is one of their many dreams for you. You feel bad....I was very depressed for quite a few years. Then I came out and told them. They were not very happy. They haven't accepted it yet. It is still under the carpet. But you know, at least that pressure is taken from me now. You feel a huge burden is gone once you tell them. They don't have such expectations on you any more. It makes things easier. In the back of their minds, they know that they won't get grandkids from you. There are fewer pressures.

Instead of telling his parents directly, Chang wrote to his parents who lived overseas:

I wrote a nine-page letter to tell them. I don't have the courage to tell them directly. But I cannot lie in my whole life. Mum and Dad don't want to talk about it. They would write to me saying that one of my cousins is getting married or one of my relatives has just had a child.

Having just come out, Andrew felt that he should be more patient and wait for his parents to accept him:

My mum hasn't accepted the fact that I am gay yet. I have just come out three months ago....They will find out gradually what has actually happened.

There was a strong sense that there was less pressure for those who did not have a family in Australia.

I think for gay Asians in Sydney, for example, if you have a family here, it is more difficult than if your family is still in the home country. It makes things a lot easier if your family is not here. The pressures from your family depend on whether you need to deal with it or not. For those who don't have a family here, you don't need to confront them and say [to them]: "Mum and Dad, I am gay." You don't need to let them know you live with gay friends and do gay things. I don't have my family here so I have no problems. [Calvin]

I don't have any pressures from my family. I live by myself. From time to time we get in touch with each other but not all the time. [Blair]

Living independently helped Bart to avoid coming out to his parents directly.

I don't live with my family. I think we split up when I was 20. I just want to be myself. I don't care what my family thinks. They want me to get married. The pressure is still there. But I don't really care. I haven't told my family yet. They don't have to know their son is gay. I think time can say everything. [Bart]

Among these 19 participants, only Clark reported that he had not disclosed his sexual orientation to anyone other than his gay friends.

Apart from external friction from families, an additional source of pressure came internally from gay Asian men themselves when trying to accept their dual identities. Allan told how he had been through stages of self-hatred:

I went through several stages. I've always known that I am gay since I was a kid. When I grew up, I realised that I was not the only gay guy. I have been through a stage that I actually hated myself. I accepted myself to be gay afterwards. When I was exposed to gay community and gay scenes, I realised that I was recognised as a gay Asian. I began to hate myself again. I also have had troubles with my family. They didn't know about it at first. I came out three years ago. I cried a lot. My study was affected as well at that time. I'm all right now.

Some participants in the group recognised that what they had experienced was largely due to the fact that they were members of a minority group within a minority group. Such double marginalisation had created difficulties for them. For example, Allan felt it hard to be a gay Asian in a Western culture even though he personally preferred Caucasian men:

I really prefer European to Asian guys. I feel more comfortable with European guys. I find the Mardi Gras very interesting. Being a gay Asian is quite hard though....Being a gay Asian in a Western culture such as in Sydney, it is hard....I find to be an Asian is also a big challenge.

Being placed in a marginalised position, Chou called for understanding and acceptance by gay community as well as the wider community.

I am a minority in the minority—I am bisexual. Sometimes, I am not even accepted by gay community. It is more about understanding and acceptance. I went through difficulties because I came from a fairly small group. I have to get people to understand me. [Chou]

Asian heritage could become a burden in the process of Asian men accepting themselves as gay. According to Carl, although always proud of

his Chinese traditions, Asian cultural beliefs created a hurdle, which restricted him from pursuing personal freedom.

People are attracted to me because I have got my cultural heritage. I am gorgeous. However, it also means there is a lot of familial and cultural baggage. You have to carry them around with you. You not only belong to yourself. Very few fortunate people can just be themselves and not worry about the relationships with their family. For example, for Chinese people, having face and not losing face are very important. Also, for people in Philippines, Catholicism opposes gay issues. It is a very fundamental religious belief. It is just “black and white” with nothing between. Therefore, you couldn’t have real freedom in those cultures. [Carl]

This comment was echoed by Clark:

I agree with you. I feel pressures from my family and my religion. I came from a Catholic country.

In terms of dual identity, some participants were resigned to the belief that they were born Asian and gay for which they did not have a choice.

Brian reconciled it thus:

We have no choices to be an Asian. I’m pretty sure that we didn’t choose to be gay either...Everyone will agree that we are born in that way. I don’t think there has ever been a choice. Therefore we have to be part of this society. If we can find a partner, we will be happy because we have achieved something. We will find peace at last.

Furthermore, to some participants, it was essential to get rid of negative feelings of being gay.

It is not something we talk about but we do. I don’t really see myself as disobedient. I am just a person. That’s all. Of that nature, everybody can be a good person. [Brad]

Some participants spoke of the importance of just being oneself and accepting oneself. For example, according to Brad,

I think we've talked about identification and partner choices. A lot of us usually try to be who we are not. We've been told a lot about what we should be, such as we should have a relationship, we should look nice, etcetera. We're bombarded by all these norms. Because we are different so we stand out immediately. Other than trying to be who you are not, it is better to just be yourself. It is hard to be an Asian gay man. You are dealing with so many difficult things in the first place and you are isolated as well. If you can stay away from all these social norms, you are just you. You are unique.

Before trying to be understood and accepted by others, according to some participants in the group, it was necessary to accept oneself first.

You go out to search what you want. When you go out, some people will look at you and say: "You are an Asian guy." Some people, then, won't even notice who you are, but just think they won't get along with you. So it depends on how you take it. You should accept yourself as who you are. [Allan]

Calvin, likewise, pointed to the importance of self-acceptance.

Connecting to gay community comes at a later stage. Accepting yourself always comes first. To say to yourself that I am gay or gay drags, you, then, will feel more comfortable. After that, you can decide what you would like to do. [Calvin]

And so did Brian:

There is nothing you can do to change the way you are. So accept it and behave yourself. Enjoy it.

On the other hand, Aaron recommended adaptation to the prevailing community norms:

We should try to put up with it. People should feel comfortable to be gay, to go out to gay scenes, to dress up and to become more flamboyant.

There were strong recommendations that gay Asian men should accept themselves, attempt to raise their self-esteem, be proud of themselves and be proud of their Asian cultures.

I think Asian guys need to feel proud of themselves. Like me!
[Andrew]

Be whoever you are but always be proud of yourself. It is your own Asian culture that sometimes makes you see things differently from Caucasians. [There's] nothing to be ashamed of. [Chang]

You need to believe in who you are. Push your self-esteem up so that no one can hurt you....The only way to do it is to get yourself improved. You should protect yourself. [Adam]

What is the most important thing to be an Asian is to be proud of yourself. I came from Asia. It is [where] my roots [are]. I can relate to Asian men, women and their families....We are minorities. We are unique. We are beautiful, warm-hearted, loving and caring.
[Calvin]

Immersion in gay culture was seen as one way to achieve confidence.

When I go to gay scenes, I start to think more about myself. I feel more appreciated to be an Asian. I feel more comfortable. I feel stronger. [Andrew]

Others suggested a more political route to achieve self and community acceptance.

I think we should stand out on our own culture....It is understanding as well as communication. Like this year's Mardi Gras, we had Asian Marching Boys. They marched through the China Town. I felt so proud. This is the way we should educate other people about our culture. We should let them accept us....I have been trying to gradually introduce the Asian culture to my Caucasian friends. I try to tell them how we think....We should also fight for equal rights. We don't have gay marriages in Sydney because the government doesn't approve it. But I have been to a lot of gay weddings in the past in San Francisco. We should be allowed to live similarly as normal people. [Adam]

During the Mardi Gras, there were Asian guys marching along with Caucasians. It was really good. [Allan]

As a member of the Asian Marching Boys in the 2000 Mardi Gras Parade, Bob expressed pride in himself and in his cultural background:

I think Asian people in Sydney should really make it a priority to get involved in Asian gay community activities. I was in the Asian Marching Boys. I thought the idea of getting involved in the Mardi Gras Parade was really big and significant. We have shown the public the cultural identity of gay Asians in Sydney. I thought it was great. I was really proud of myself.

According to some of the participants, gay Asian men in Sydney, as a collective group, were gradually changing their image in gay community.

This is the first time I've actually stayed longer in Sydney. I can see the difference this time. Asians become more confident. They behave in a way that shows their own confidence. You have to have confidence. [Brian]

Similarly, compared to the experience of gay community in Sydney many years before, Bing also noticed significant changes including in the make-up of gay couples:

Many years ago, you could not find an Asian going out with another Asian. It was something that had never happened. It was always Asians with Caucasians. But I can see the change now. It is quite refreshing. I can see how Asian people have changed. Asians become more attractive to Caucasians as well.

Over the years, Asian gay community in Sydney has achieved greater prominence. Some participants were entirely supportive of this fledgling community.

I think Asian gay community is fantastic. [Adam]

Also, one gay bar on Oxford Street, a popular meeting place for gay Asian men, as many participants in the groups mentioned, seemed to be responsible for helping to create a sense of Asian gay community.

There is not so much discrimination. You feel the sense of belonging because you can see lots of Asians there. [Brown]

Some gay Asian men in Sydney were dedicated to building a more united gay Asian group.

As gay Asians, we need sort of a sense of belonging. Some have their families to turn to so they can have some kind of closeness. If we have a supportive group and stick together, we shall be happier. What I've seen among Asians, however, is that they are distant from each other. We should be together and help each other. We should be more united....We need to belong to one big group. [Brian]

However, as Brian mentioned above, some gay Asian men appeared to be distant from their peers. Moreover, according to some participants, a tension seemed to spring from competition between gay Asian men.

I was wondering that sometimes there is a tension between Asians....One day I was shopping on Oxford Street with some friends. I came across a gay Asian. He looked at me with a disliked looking. I thought to myself: "Hi, don't hate me because I'm an Asian as you are!" [Allan]

It is more about competition among us although we seem to share more common elements. [Aaron]

In the face of potential identity conflict between being Asian and gay, as well as lacking support and guidance, some gay Asian men tended to force themselves to fit into mainstream gay community by simply following the latest fashion.

What I find interesting is that even if you are an Asian, you can fit into gay community by following the norms or stereotypes of gay community. But unfortunately, you would do it in a very superficial way. For example, you will find that you should go to parties and take drugs. You should go to gyms as well....I would expect more mechanisms to come from Asian gay community. It should have more activities. It should try to accommodate more Asians especially those who recently came out. [Bob]

The majority of the participants in the focus group discussions agreed that gay Asian men should empower themselves and become more involved in developing a gay Asian community.

Marginalisation of Asian gay men in Sydney is really enough. I think every Asian gay man should be more active and participate in the development of Asian gay community. [Bob]

One way to empower oneself, according to Brian, is to endeavour to change stereotypes of gay Asian men:

I don't think we should feel sorry to be gay. It is not easy, though, as sometimes you should say [that] you are different from others. We should do something to empower ourselves. I think it is time to start to do something now....[For example,] the so-called stereotypes, if you believe it, go ahead. I am not saying [that] you have to change it. But if you don't [believe it], do something to change it.

In Group A in particular, participants talked about the fact that media campaigns in gay community lacked gay Asian models because they were stereotyped as sexually undesirable. Some of these participants stated that if more gay Asian models appeared in gay media campaigns, it would help to change any negative stereotypes.

We're not recognised by the media. We, gay Asians, lack recognition....The media lacks Asian images....I think there are not enough Asian models....There are always Caucasian images because they are always regarded [as] beautiful. We need more Asian role models. [Andrew]

Such comments were welcomed by Adam, who also addressed the importance of media campaigns to assist gay Asian men to accept themselves and be accepted by others, albeit invoking the drag stereotype:

I have a lot of friends who are drags. The biggest issue for Asian gay men is the acceptance of themselves and by others. It could come through the media.

As a former Asian drag queen in New Zealand, Allan wanted to become an Asian model in Sydney. Here, too, we see the drag stereotype mentioned as a way to achieve recognition.

I was actually a very famous drag queen in New Zealand. I was the first Asian gay model in New Zealand....I hope I can make it big in Sydney as well. I hope I can stand out among those Caucasian guys. I have smooth skin. I am young and beautiful.
[Allan]

Besides changing Caucasian gay men's negative impressions of gay Asian men, another way to empower oneself, according to some participants in the groups, was to have a constructive lifestyle. For example, Blair suggested these strategies:

...to make new friends, to meet and talk to old friends, and to participate more. Be more confident.

Brad, on the other hand, suggested going out with those Caucasians who were attracted to Asians and who could also appreciate Asian culture:

Some Westerners cannot appreciate the Asian cultures. But some Westerners know a lot of Asian literature and appreciate Asian men....Asians should explore more to find proper Caucasian [friends or partners].

On the other hand, Bart recommended that Asian men should adapt more readily to Western culture.

I know it is hard to be an Asian in Western society. But, for example, if you are from China, you don't need to bring all the Chinese stuff to Australia and live in a Chinese way here. You should learn something Australian. You should become independent.

'To empower oneself', as used above, mostly referred to participants' endeavours to improve internal qualities, whereas, 'dealing with the influence of others' was closely related to participants' dealing with external environments at both macro and micro levels. In the group discussions, in addition to the notion of gay Asian men empowering themselves, issues of having control over oneself and resisting undesirable influences from others were also discussed in detail.

For example, in terms of the relationships between individuals and families, Ben felt that one should have more independence:

I don't rely on my family. The things I do, I do it on my own. I do it because I want to.

When it comes to gay community influence, participants acknowledged that gay community in Sydney is not homogeneous. They pointed to many and varying types of gay groups.

Calvin expressed the need to deal with the environment, given that there are many influences from different sections of gay community and from different kinds of gay people.

It depends on which part of gay community you are attached to. There are different kinds of gay men. Some are party types and some not. In a big city like Sydney, obviously there are a lot of influences. Particularly in gay community, it is the case. But it depends on how you take it. You should not let the environment control you. You should control the environment. You should hold your own life. Naturally, I would say “no” if they ask me to do something that would cause troubles. But if it were to have some new experiences, my answer would be “maybe”. There is nothing wrong to experience new things anyway, as far as you don’t do any harm.

Chao also pointed to the importance of making up one’s own mind:

It depends on which type of gay men you are going out with. Some are party types—they drink, smoke and go to parties. But there are a large number of gay men who are not like that. It is important to have gay friends but you don’t need to behave like them.

Chang highlighted the need to make sound decisions on one’s own:

All my gay friends here, most of them, are “party types”. It is a bit harder to accept their ideas totally. I enjoyed it very much when I first came here to be with them. Probably they have influenced me on how I see things but not how I should behave. I decide what I should do.

Chou recommended that gay Asian men use the strength of their cultural heritage to resist negative influences within gay communities:

It depends on how strong you are. If you are strong enough, it is hard to influence you because you have a strong Asian background to support you. Sometimes if you are an Asian and so you don't like to drink, you will feel out of the group. Someone believes that if you want to fit into this gay community and to have a sense of belonging to such a community, you need to sacrifice. Well, that is because you are young and inexperienced. Someone would probably go for it as they are told. They have learned to drink, to go to parties, etcetera. However, afterwards, you may regret when it is too late.

Chao drew attention to different pressures from gay print media and from gay friends. He distinguished between drug taking and casual sex, indicating that in his opinion, some prevailing norms in gay community were more acceptable than others:

Influences from the mass media are different from those from gay friends. Also, it depends on which part of gay friends you are with. Asians may think drugs are absolutely wrong so they may not take it. But about casual sex, they would not think much in terms of responsibilities. Especially, if you are single, you will think it is OK to do it.

Sexual exploration and unsafe sex

Some gay Asian men were keen to explore the varied aspects of gay life.

Some of my Asian gay friends are so adventurous....They want to do a lot of things and enjoy themselves. They would go out. They would dress up. They want to show other people who they are. [Adam]

However, some participants frowned upon those who were 'adventurous'.

Some Asians like to be silly. [Brown]

I am surprised at some friends from certain Asian countries [as] they are so adventurous. [Brian]

Blair compared sexual exploration by gay Caucasian and Asian men. He observed that some Asians tended to be not as adventurous as some Caucasians. He attributed the phenomenon mainly to the conservativeness of Asian traditions.

I think Asians, especially Chinese, are not very adventurous....I think they are not very adventurous when it comes to sex. I would say that their sexual experiences are, sort of, very limited....I am sure most traditional Chinese are like that...because sex cannot be talked openly according to Chinese traditions. They would not have known about it all....I think Caucasians tend to be wilder and more adventurous than Asians. The majority of Asians are conservative. It relates to the culture. We are not that wild.

Bob perceived that sexual repertoire may be related to familiarity with particular cultures or sub-cultures:

If you've been exposed to Western culture long enough, it turns out that it is you who make the decision. You decide whether or not you would prefer certain kinds of sexual activities. Some people tend to be more adventurous, whereas, others are comfortable to have oral sex only.

Also, Brown drew attention to individual differences and the potential to change over time:

The resistance towards sexual exploration is changing. After years of just doing one thing, people tend to find other ways to do things. But some might not like changes. Personally, I'd like to explore.

In terms of unprotected intercourse, it was perceived that some gay Asian men would not insist on condom usage with Caucasian men who were generally regarded as sexually more desirable.

I think lots of people don't have safe sex because they want to be accepted. If one wants to be accepted, he would do anything, I mean, without condoms. For example, if a Caucasian partner suggests anal sex without condoms, Asian guys normally will not insist on condom use. He will play a receptive role without condoms. That is the risk he is willing to take. [Brad]

Communication with partners and friends

Consideration of some gay Asian men's willingness to practise unsafe sex at the request of some gay Caucasian men raised the issue of whether there was adequate communication between gay Asian and Caucasian men. In particular, it was important to look at whether gay Asian men were disadvantaged when trying to undertake sexual negotiations with Caucasian men. This issue was discussed at length. Cultural differences were recognised as an obstacle when gay Asian men entered into a new environment.

I felt the cultural clash when I first came here. It is kind of a compromise between partners. [Adam]

Some participants found that after experiencing Western culture for a period of time and becoming 'Westernised', cross-cultural communication became easier.

There is always going to be problems....It is not the race. It is the culture. [I find that] although from overseas, if you have been here for quite a long time and quite Westernised, it is easier. [Andrew]

On the other hand, some participants in the groups preferred to make friends of a similar cultural background to theirs.

In my experience, I find [it] easier to make friends with Asians than with Caucasians. [Brown]

Brian talked about the differences in his experience of coupling with Asian and Caucasian partners, highlighting cultural differences in ways problems are sorted out.

I am fortunate enough to have both Caucasian partners and Asian partners. I think [that] the cultural things are definitely coming into place. Caucasians would like to sort out things by one, two and three. Whereas, Asians—especially we, Malaysians—don't dissect things one by one. I think it is a good thing. When with Caucasians, if you have problems, you try to solve them. Asian partners wouldn't go directly to the problems. I think this relates to the culture.

Even though Bing expressed the view that he had no difficulty in communicating with both his Asian and Caucasian friends, he still found that sometimes he was more likely to have misunderstandings with his Caucasian friends:

I have an Asian friend. We are very close. He is very easy. We never need to, sort of, make a big compromise. We just get along like that. But what I've found with Caucasian partners is that they like to discuss. Sometimes there is a tension. That, maybe, is due to the cultural differences [because] the ways and the approaches of us are different. But in my experience with Caucasian guys, it was not that complicated....Sometimes, we may misunderstand each other....For example, sometimes, it is just a joke. Because I have known him for so many years and we know each other well, I wouldn't mind. But if it is from someone else, I would be very upset about some of his comments....If I find that he is trying to upset me by doing it purposefully, it will be the end of it.

Adam felt that because he and his regular partner had good communication and shared personality traits, they trusted each other. They could talk openly to each other, which also enabled them to reach a sound agreement of not using condoms within their relationship.

With my partner, because he is my long-term partner, we don't use it....We would talk each time after we go out. In a relationship, communication is very important. If he finds someone attractive, we would talk about it....We don't have language problems. The personality of us clicks.

HIV status and negotiation around condom use

When it came to inquiries about others' HIV status and disclosure of one's own HIV status, it appeared that most gay Asian men in the groups were reluctant to have HIV tests, let alone to discuss HIV status with others. For example, Chang regarded it as offensive to inquire about others' HIV status. He managed to always use condoms for casual sex, whereas, within his regular relationship he and his boyfriend did not use condoms as they both had tested HIV negative:

I've never asked. If I have sex outside of the relationship, I'll do it in the safest way I can. That's the way it is. Sometimes, it is an offence to ask HIV status. I honestly have never asked. But me and my partner have kept checking HIV regularly.

Some gay couples, according to the participants, did not practise anal intercourse so that they did not need to discuss HIV status. But once anal intercourse was involved, most couples would have some sort of negotiation about sex.

Gay couples don't necessarily have anal sex. Some are happy to have other kinds of sex. When it comes to anal sex, there are some things to discuss, such as what kinds of things you want to do and what is your HIV status. If it were going to be risky, they would use condoms. [Calvin]

In general, there was consensus among the majority of participants that negotiation about whether to use condoms was necessary within regular relationships. But outside of regular relationships, Brad thought that some gay Asian men would assume (quite erroneously) a stranger to be HIV negative if the latter insisted on anal intercourse:

You know your long-term partner quite well. But with someone you have just picked up, you will ask. But sometimes with anonymous partners, some guys would just assume that others are [HIV] negative. These guys would think that if someone insists on anal sex, he must be [HIV] negative.

Contrary to other points of view about condom usage being highly dependent on context, some participants reported that they always used

condoms. For example, Brian felt that condoms must be used in every situation:

It seems to me that gay men are more straightforward than heterosexuals. My situation is that a condom is always a must. I am concerned about safe sex.

Chang, out of concern for his own health, perceived the use of condoms with casual partners as critical.

You have no choice. You have to think about your own health. You need to negotiate condom use. That is the first thing with casual partners.

On the other hand, instead of differentiating regular from casual partners, Chou found that it was easier to negotiate condom use with fellow Asians than with Caucasians:

I don't think I differentiate between casual and regular partners. I think that negotiations with your partners depend on the partnership. From my point of view, it is a lot easier to negotiate with Asian partners.

But Calvin pointed out that successful condom negotiation was more related to individual relationships rather than cultural differences.

For both Asians and Caucasians, safe sex is the top important thing in any relationship. Condom use negotiations depend on couples individually.

Safe sex practice

Among the participants, some preferred to use condoms even with regular partners. For example, Andrew made the use of condoms routine practice with his boyfriend:

I always use condoms....The only reason is because of HIV....I am in a relationship now and we just use condoms....We haven't had any problem....We haven't talked about it very much. We've just decided to use it.

Allan was very confident that he could use condoms and have them available for use at all times:

In my case, it is not a big issue. I would always use condoms. It is for my own good....I always have condoms with me.

Carl, who pitied those who had sex without condoms, had the self-confidence to talk about and use condoms routinely:

I have enough confidence in myself. I'll talk about condom use. Actually I tend to sympathise with those who have the courage not to use condoms. If something happens, it will be a very sad situation. Some people just depend on luck!

Most of the participants who always used condoms regardless of the circumstances, expressed paramount concern for their own health.

You don't risk your own life....Use a condom, otherwise no sex!
[Brown]

It is safe to use condoms. There is no distinction between both types of partners. [Chao]

Ben had helped lots of people living with HIV/AIDS. He firmly believed that one slip-up could lead to disaster:

I have been trained to take care of people living with HIV/AIDS for many years. Someone just did it once without condoms and it did happen.

Bing shared an example of successfully avoiding unprotected anal sex with his group participants:

Last time I met a friend, we had casual sex. I was not prepared. During that time, he asked: "What about anal sex?" I said: "Oh, I don't have any condom with me." He suggested that we should just do it. But there was no way I would do it. So we ended up doing something else. Anal sex without condoms is a definite "No". I always use condoms, always.

However, in contrast to the 'condom every time' strategy adopted by some participants, over half the participants in the group discussions were in favour of not using condoms within regular relationships.

Normally, inside a relationship, "Don't ask and don't tell." That is the rule. Most people don't use condoms inside their relationships. But if with outside partners, they would put condoms on. [Brian]

Some participants relied on trust in their decisions to have unprotected anal intercourse with regular partners. Trust, for them, was a major feature distinguishing regular partners from casual ones.

If you have casual encounters, you should probably be aware of the risk. So, always make sure that it is safe. But as to have sex with your partner, because you have known him reasonably well and reasonably long, I think, I would trust him. That is how I judge it. [Bob]

If you are with a partner who you could trust, you can have sex without condoms. When having casual sex, you just have to put condoms on to protect yourself. [Blair]

Along with trust, Bruce asserted that the decision not to use condoms within regular relationships also depended on other qualities of a partnership, such as 'openness':

It depends on how open the relationship is. It also depends on how much you trust each other.

Calvin pointed out that some long-term gay partners tended to be monogamous so that they could trust each other to forego condom usage completely:

If you are with someone you've just met, no condom is just not on. But when with your partner, there is something you need to negotiate. I know a lot of people in long-term relationships don't use condoms, because they trust each other and they don't play around. It's kind of a monogamous relationship. If outside of the relationship, condoms are preferred.

Chang described his own experience of not using condoms with his regular partner. He attributed his propitious situation partly to the influence of ACON's educational programs.

Me and my partner don't use condoms because we've been together for so long. As for HIV/AIDS, if you have casual sex, definitely, you should use condoms. So far we are happy and healthy....I went to several ACON sessions when I first came here. It helped me about safety issues. My partner was in Sydney before I came. He introduced me to those programs. [Chang]

However, some participants in the focus groups were sceptical about whether trust in one's regular partner might be misjudged.

The problem is that you should always use condoms. You and your partner could have anal sex elsewhere. You can catch some other sexually transmitted diseases. How could you go back and say to your partner, after you have had unprotected anal sex: "Darling, we should use a condom this time." If you have had unsafe casual encounters, you find it very difficult to tell your partner. But if you don't use a condom with your partner, you put him at risk. You can pass on something to him without the protection. A lot of straight couples actually have transmitted diseases to their partners by not telling them the truth. [Brian]

I think trust is one thing. But HIV/AIDS does occur within relationships. You really need to decide whether you want to take a risk with someone who you love....When you go out to have sex with someone outside of the relationship, even though you do put condoms on, you still put your relationship with your partner under risk. It depends on whether you really want to continue that relationship or not. [Brad]

Although there were diverse opinions about condom use within regular relationships, all participants unanimously agreed that with casual sex, condoms were a must.

If I meet some strangers, I'll talk about condom use....For casual sex, I definitely use condoms. [Clark]

With casual sex, you just put condoms on whatsoever because you don't want to take risks. [Chang]

For casual sex, no condom no sex....I don't believe there should be trust with someone you've just met. There are clubs in Sydney promoting anal sex without condoms. They regard it as "fetish". But I personally use condoms for casual sex. [Calvin]

Information seeking

Participants reported various ways of getting information. For example, some went to parties to meet new people, and others to sex shops.

I just go out to parties and meet people. [Allan]

Information for me, at first, was to find someone to link with. I went to some sex shops in the city. That was the place, I sort of think, I should go. There are other ways to find out information. [Aaron]

For Bing, talking with friends was a helpful source of information. He mentioned, in addition, the safety messages disseminated by ACON for men in gay community:

In my experience, gay men talk about sex a lot. We talk about sex and we are aware of the disease. So, in other words, information comes from word of mouth. They tell each other. Also, ACON has a lot of pass-on messages to everyone. Mostly, it is from friends who you've known for a long time.

In Group B, there was an examination about whether oral sex without condoms was safe.

I want to ask about oral sex with ejaculation in the mouth. Is it safe? [Bart]

Brad, a doctor in a sexual health clinic, replied:

We don't say oral sex is safe. We say it is safer.

Brian challenged his view:

This is based on American studies. But Asians may have more gum problems. So for them, maybe it is not safe at all.

One participant seemed more concerned about the risk of catching Hepatitis C than HIV.

Hep C is easier to catch than HIV, especially if you have some scratches. [Ben]

To which came the rejoinder:

Hep C can only be transmitted through blood. [Brad]

Other than through networks of friends, some participants got information through gay newspapers and magazines such as the Sydney Star Observer. Some used the gay media to locate information and to search for role models.

I think you have to go so hard to find information. It is very hard. At the beginning you would not have known that there are some support groups. When I was younger, it was difficult for me. I was looking through the media. There were so many gay people there so I tried to pick up my models from them. [Andrew]

Lack of English language proficiency hindered some gay Asian men's access to HIV/AIDS information. Although Ben noticed that some service providers in Sydney had incorporated several ethnic minority languages into their services, he still thought much more could be done:

I've found that there are lots of Asian guys who don't have enough information....Sometimes they don't like confrontation. For example, they would think: "Whatsoever, no condom is fine for me." They don't realise how big the risk will be....When I came to Sydney, I found language a big problem. If you cannot speak a word in English, you cannot get information properly. It is true that in some Asian cultures they just say: "No gay in my culture". Now in Sydney at least someone has used ethnic languages in their services. But it is not powerful enough. Those who know English very little are left behind.

Brian commented:

I think they can get some information from somewhere. But we don't know if they have got it correctly.

Allan expressed his willingness to give those people personal assistance:

I didn't come across that problem when I first came. But I think I will be the one to show them the way.

Discussion

In this study, the hypothesis was posited that gay Asian men may experience a dual-identity conflict and such conflict may be related to cross-cultural differences, especially in terms of individualism and collectivism. Despite individual differences, several major individualism-collectivism themes emerged from the group discussions, especially through the dialogue concerning different ways of dealing with a possible gay-Asian identity divide. The participants positioned family responsibilities, harmonious relationships and conservativeness as major characteristics of Asian cultural values. More

importantly, the participants emphasised the importance of relating to others, including family members, sex partners, close gay friends and other Asian people. These characterised the key components of collectivism described by Triandis and Gelfand (1998): interdependence, family integrity and sociability.

These gay Asian men were keenly aware of the cultural diversity of Sydney. However, they also recognised the individualist features of independence and self-reliance, which are the hallmarks of the broader Australian society as well as gay community in Sydney. As a group they had a strong sense that their collectivist values contributed to identity conflict, a theme which was frequently raised during discussion of issues such as 'coming out'.

As gay men, the participants faced a still predominantly heterosexist environment that is the broader society, where homophobia is firmly embedded in most sections of society. Notwithstanding, the participants expressed a strong willingness to lead a 'normal' gay lifestyle and be treated as 'normal'.

Although most expressed strong needs to attach to gay communities and to form a supportive gay Asian community, the majority felt disappointed because of continued discrimination against ethnic minorities in gay communities, even though most intolerance was subtle and implicit rather than overt. They asserted that gay community overly focused on physical

features and that gay Asian men were associated with negative stereotypes of being passive and sexually unattractive. The feelings of double marginalisation in gay community expressed by these gay Asian men are consistent with the findings of Pallotta-Chiarolli, Van de Ven, Prestage and Kippax (1999) in Australia and Choi, Salazar, Lew and Coates (1995) in the United States.

Tensions between being gay and being Asian are multifaceted. The evidence here supports the notion of a divide within Sydney gay culture, embedded in the individualist Australian culture at a macro level, and the largely collectivist Asian culture. The discussions revealed that gay Asian men were experiencing difficulties disclosing their gay identities. They encountered an ethnic culture in which public discussion of sexuality is often taboo and they also faced families whose expectations of a male son were usually based on heteronormative discourses. A clash of cultures was evident in these gay Asian men's self-identification processes. They faced the dilemma of whether to express individual desires, as is encouraged by individualist gay culture, or to fulfil particular responsibilities to in-groups, especially to family members, as is valued by collectivist Asian cultures. These findings suggest a link between elements of individualism-collectivism and gay Asian men's identity conflicts. In the face of such conflict, some of these gay Asian men had difficulties in cultivating a positive and comfortable self-identity in a cross-cultural situation. Apart from cultural friction, conflict

also resulted from their disadvantaged status in gay communities where ethnic minority gay men are marginalised in some sections of gay community in Sydney.

There is no simple solution to resolve the conflict and deal with the divide. One of the most prominent issues, as raised by most participants, seems to be the need to develop stronger ties between gay communities and their diverse range of constituents. It is important to achieve mutual understanding and appreciation of the cultural differences such as those that arise from different positions on the individualism-collectivism continuum. For example, in terms of 'coming out', gay communities could develop more supportive mechanisms for gay men of minority ethnic background, especially those who have recently arrived in Australia or recently 'come out'. There could be more supportive networks which include the families and close friends of gay men. Moreover, gay Asian communities could be funded and encouraged to provide greater peer support. Such efforts may have better outcomes if there is collaboration with other communities such as local ethnic communities. This is not to say that every man who has sex with men has to 'come out'. For some gay Asian men, with their different understandings of homosexual practice in relation to a gay identity, disclosure to significant others may not be a viable option.

This study highlights that gay Asian men's perceptions of Sydney gay community vary widely. Some feel out of place, whereas others have a sense

of pride in their involvement with and contribution to gay community. For the majority, it is clear that supportive families and close friends, involvement with gay community and increased visibility in both the gay and the wider communities help to cultivate a positive and comfortable self-identity.

Besides identity conflict, the focus groups investigated gay Asian men's self-efficacy in communication skills with sexual partners and friends. The results indicated that cultural differences were a major determinant of effective communication. Not surprisingly, those who had similar ethnic backgrounds and those who had common cultural experiences were less likely to incur misunderstandings.

Particular emphasis was placed on investigating participants' negotiation of safe sex. Most gay Asian men were unwilling to inquire about other's HIV status or disclose their own status. Some participants adopted certain strategies so that they could avoid discussing HIV status with either regular or casual partners. These participants' strategies included 'always use condoms for casual sex', 'no casual anal intercourse', 'no casual sex', 'no anal intercourse with either regular or casual partners' and 'always use condoms with both regular and casual partners'. Most of the participants acknowledged that negotiations around condom usage were possible within regular relationships. They argued that the effectiveness of safe sex negotiation with long-term partners depends on the quality of the relationship,

especially notions of trust. But in casual encounters, participants unanimously expressed the view that condoms were a necessity.

The focus groups also examined the sexual practices of gay Asian men and their perceptions of the sexual practices of gay Caucasian men. The discussions revealed that, in general, gay Asian men perceived themselves to be less sexually adventurous than their Caucasian counterparts. Some participants in the groups suggested that it might be related to the conservative nature of some Asian cultures. Nevertheless, some of the younger participants felt that they were more sexually adventurous than older generations.

There were suggestions that some gay Asian men would have unprotected anal sex to please their sexual partners, while recognising a risk of HIV infection. Some participants attributed this phenomenon partly to negative stereotypes of gay Asian men in some sections of gay community. They considered that in some sections of gay community because Asians were often regarded as less sexually attractive, gay Asian men, in general, had fewer opportunities to find a sexual partner than their Caucasian counterparts.

When asked about individual safe sex strategies, some reported that they always used condoms, whatever the circumstance, because of personal health concerns. There were disagreements, however, about whether it was necessary to use condoms with one's regular partner. Over half of the

participants tended not to use condoms within regular relationships. Their reasons for not using condoms included sero-concordance, mutual trust, long-term familiarity and monogamy. Some participants, however, were sceptical about whether and to what extent trust could play a role in sexual negotiation with regular partners. For some, the issue came down to a simple choice: Should trust prevail or should protection take precedence?

Participants also discussed ways of getting information about homosexuality and HIV/AIDS. Mostly, participants got information through circles of friends (gay friends, in the main), gay venues, gay community organisations, and gay media campaigns (especially those in gay newspapers). It seemed that English language proficiency among this group of men was not a major issue, although, one participant did express concern that those who could not speak and read English could be overlooked by service providers.

The insights of the participants in this study cannot be generalised to all gay Asian men in Sydney. Additional research should investigate individualism-collectivism variables with other groups of Asian men living in Sydney such as those living in other metropolitan areas. It would be worthwhile to explore whether subtle differences between the various collectivist East and South-East Asian countries themselves play a role in gay Asian men's ways of dealing with the gay-Asian identity divide. To do this, a much larger group of participants would be needed. It would also be useful to

investigate individualism-collectivism in relation to gay Asian men's preferences for sexual partners of a similar or different cultural background.

Chapter 4

Survey

Introduction

This chapter, which is concerned with responses to the questionnaire (see Appendix I), examines cultural and social cognitive aspects, including individualism-collectivism, self-efficacy and outcome expectancies in relation to gay Asian and Caucasian men's sexual practices, and describes aspects of the sexual practices of gay Asian and Caucasian men in Sydney. It provides detailed information on the sexual behaviours related to the theoretical framework underpinning this study.

Method

Sample

In this study, as complete random sampling is impractical (Gagnon, 1988), the following approaches were adopted. During the period November to December 2000, participants were recruited from various gay social venues in Sydney. Gay bars, nightclubs and cafes, where gay men gather and socialise with each other, were the main target venues. Some key gay organisations were also approached: ACON, a local 'gay' church located in Inner West Sydney, two university gay and lesbian associations, and a Sydney-wide gay and lesbian counselling service. Recruitment was extended to those who attended two educational programs conducted by ACON. Both

educational programs were based on peer education. One targeted young men under 25 years of age and largely consisted of gay Caucasian men, and the other specifically catered for gay Asian men. In addition, two specific gay social events (a gay community fundraising activity and a commercial 'expo') were also sources of recruitment. In this way, participants were drawn from diverse venues in an attempt to sample a range of gay Asian and Caucasian men in Sydney gay community.

Procedure

Two volunteer gay Asian men, recommended by ACON, assisted the researcher with the recruitment. They were trained by the researcher to approach and assist potential participants to fill in the questionnaire. Once approached, participants were first asked to read an information sheet (see Appendix H). It described the aims of the study, the content of the survey and the time estimated to complete it. It also stated the inclusion criteria: Asian and Caucasian men, either gay identified or not, who had sex with men in the past five years, and who were at the time of the survey living in Sydney. Anonymity was assured and participants were not required to sign a consent form to ensure their anonymity throughout the whole process.

At the recruitment stage, participants were also told that there would be a prize draw when recruitment had been completed. They were verbally informed that to assist the survey a prize had been donated by a local gay

nightclub and its nominal value was A\$100. Previous experience of surveys conducted among gay populations suggested that the offer of a nominal incentive could effectively promote participation (Van de Ven et al., 1999).

English proficiency was also taken into account as a possible hurdle to survey completion. As there was only an English version of the questionnaire, it was anticipated that some participants, especially among the Asian men, might have problems in understanding some of the terms. To overcome language barriers, the two volunteer recruiters were trained so that they could offer consistent translation of terms used in the survey.

Participants were asked to complete the questionnaire at the time of recruitment and return it to the researcher immediately after completion. However, participants were also allowed—but not encouraged—to mail a completed survey back to the researcher if they so chose.

Questionnaire and instrument

The questionnaire was designed as a self-administered cross-sectional survey. It has three major sections. Section A of the questionnaire (see Appendix I) consisted of Matsumoto's (1996) Individualism-Collectivism Interpersonal Assessment Inventory (ICIAI). This instrument was considered to have two major strengths that could contribute to this study. First, it assesses individualism-collectivism at the individual level and in relation to four specific groups: 'family', 'close friends', 'colleagues' and 'strangers'. This

approach was considered theoretically sound because most cross-cultural researchers agree that each individual possesses both individualist and collectivist components and that the display of some components on the individualism-collectivism continuum depends on social context (Hui, 1988; Hui & Triandis, 1986; Triandis, Bontempo, Villareal, Asai & Lucca, 1988). Data from the focus groups suggested that although he may be a collectivist, a gay Asian man might isolate himself from his family (i.e., move from the collectivist ideal) as a result of conflicting values. An individualist gay Caucasian man may attach himself to a group consisting of men with whom he shares common features. Second, this instrument has been shown to be valid and reliable in assessing major cross-cultural differences among a wide range of ethnic groups (Matsumoto, Weissman, Preston, Brown & Kupperbusch, 1997).

The format of Section A (see Appendix I) was identical to the original 'value domain' in Matsumoto's ICIAI (1996). It was introduced by detailed instructions, which defined four social groups, namely, 'family' (mother, father and any brothers or sisters), 'close friends' (with whom you spend a lot of time and/or have known for a long time), 'colleagues' (people at work, school or a social group), and 'strangers' (such as people in the subway, on the street, at public events, etcetera). Participants were then instructed to evaluate the importance of the items that followed in relation to each of these four groups. They were asked to base their responses on their own value systems and

respond to the items on a 7-point Likert-type scale ranging from 0 (*not at all important*) to 6 (*very important*). Higher scales were consistently associated with stronger collectivist orientation.

According to Matsumoto (1996), the 19 items covered four dimensions of individualism-collectivism. The first dimension, social harmony, contained nine items. These items included: to respect and honour traditions and customs, to be loyal to others, to respect others, to compromise one's own wishes for others' interests, to maintain harmonious relationships with others, to nurture others, to maintain the status quo, to cooperate with others, and to communicate with others verbally. The second dimension, social identification, consisted of four items. They were: to be like or similar to others, to accept awards on the basis of seniority or positions held in the hierarchy rather than actual achievements, to save face for others, and to follow group norms. There were two items in the third dimension, self-control, which were to maintain control toward others and to exhibit etiquette regardless of personal feelings. The last dimension, social sharing of recognition, contained four items. These were: to share credit for others' achievements, to share blame for others' failures, to sacrifice one's goals for others and to sacrifice one's possessions for others (Matsumoto, 1996).

Section B assessed three cognitive variables: self-efficacy in condom use, outcome expectancies in partners' reactions to condom use, and self-efficacy in negotiated safety (see Appendix I). The design of the questions in

this section followed a number of principles. First, the content of items should be able to measure cognitive constructs in a precise and specified way (Forsyth & Carey, 1998). For example, items should be able to precisely identify a group of relevant behaviours and link them with specified situations in which these behaviours are most likely to occur (Bandura, 1997). Second, in order to improve reliability and validity of the measurements, multiple items should be used for specific behaviours (Forsyth & Carey, 1998). Moreover, these multiple items pointing to specific behaviours should be distributed randomly among all the items so that psychometric quality can be ensured (Nunnally & Bernstein, 1994).

The first and second parts of Section B of the questionnaire consisted of questions originating from a study by Dilorio, Maibach, O'Leary, Sanderson and Celentano (1997). However, to adjust for the context of gay men in Sydney, a number of alterations were made. For example, condom use has been found to be closely associated with partner types, that is, condoms are more likely to be used during casual encounters, whereas, in regular relationships, especially when such relationships are understood to be monogamous, condoms are less likely to be used (Bosga et al., 1995; Buchanan et al., 1996; Prestage, Kippax, Van de Ven, French et al., 1996). Hence, the first part measuring self-efficacy in condom use only referred to casual encounters. Logically, the second part measuring outcome expectancies in partners' reactions to condom use was in the context of

regular relationships. The third part of Section B—self-efficacy in negotiated safety—was specifically designed for this study and referred to regular relationships. The selection criteria of the items were based on both the literature review and the findings of the focus group discussions. For example, items differentiating between regular and casual partners were consistent with issues raised in the focus group discussions.

The first part of Section B, self-efficacy in condom use, had 12 items. These questions in this part concerned condom use with casual partners only, either in real life situations or imagined scenarios. Each item began with “I can...” accompanied by a specified situation (Dilorio et al., 1997). These items covered four dimensions. The first was related to multi-faceted risk avoidance. It included refusing sexual intercourse when condoms are unavailable, avoiding situations that can lead to unsafe sex when condoms are unavailable, stopping to put condoms on before sexual intercourse, having non-penetrative sex when condoms are unavailable, and talking about the importance of condoms. The second dimension was associated with condom facilitation: being able to use condoms in the dark without fumbling and without slipping. The third dimension was related to eroticising condoms. It included having a pleasurable time during protected intercourse, putting condoms on without ruining the mood during sexual intercourse and enjoying protected anal intercourse. The fourth dimension was assessed by a single item pertaining to persuasion: getting every casual partner to use condoms

even if they are reluctant (Dilorio et al., 1997). Participants were asked to respond to each item on a percentage scale ranging from 0% (*not at all confident*) to 100% (*completely confident*) at intervals of 10%.

The second part of Section B, outcome expectancies in partners' reactions to condom use, had five items. Respondents were required to consider these questions within the context of regular relationships, either real or imagined. Each item started with "my regular partner would..." followed by a specific attitude (Dilorio et al., 1997). Four items referred to regular partners' negative attitudes towards participants' suggestions of condom use within relationships. These items were as follows: the regular partner suspecting the participant was having sex with other men, the regular partner's dislike of the suggestion to use condoms, the possibility of the regular partner breaking up with the participant and the regular partner's interpretation of the suggestion as a signal of mistrust. The remaining item referred to a positive attitude, namely, regular partners would be happier to use condoms (Dilorio et al., 1997). A 6-point Likert scale, ranging from 0 (*strongly disagree*) to 5 (*strongly agree*), accompanied each item. Higher scales were consistently associated with participants' more negative expectations of using condoms within regular relationships.

The third part of Section B, self-efficacy in negotiated safety, consisted of six items. Responses to these items were, necessarily, within the context of regular relationships, real or imagined. The content consisted of the

process of safe sex negotiation, from talking with regular partners about HIV status and sexual practices (especially the practice of anal intercourse) within and outside regular relationships, reaching and keeping agreements, to talking again with regular partners about the agreements if they are broken. A similar percentage scale to that used in the second part of Section B was used (Kippax et al., 1997; Van de Ven et al., 1999).

The items of Section A and Section B were framed in such a way that every participant could respond, accordingly, to an imagined or real scenario. This was justified on the basis of the definitions of self-efficacy and outcome expectancies. These two cognitive variables pertain to individuals' self-perceptions of behavioural capabilities or consequences under conditions that could either be real life situations or imagined scenarios (Bandura, 1986).

Section C of the questionnaire (see Appendix I) focused on a number of sexual practices of gay men, including condom use for anal intercourse. The questions also sought demographic information, indicators of gay and ethnic community attachment, sexual relationships, self-reported HIV status of participants and their regular partners, and uptake of negotiated safety.

The design of Section C in the questionnaire was based on instruments that had been previously used successfully in gay populations, notably the Sydney Gay Community Periodic Surveys (Prestage et al., 1999) and a parallel survey among gay Asian men in Sydney (Prestage et al., 2000). As homosexual practice is, to some extent, still stigmatised in the

wider community, participants may exhibit social desirability bias when reporting their homosexual practices (Zeller, 1993). There are various reasons for participants, consciously or otherwise, to provide unreliable information. For example, they may give unreliable information because of embarrassment or fear of criticism (Gerrard, Gibbons, & Bushman, 1996), especially when it comes to the 'taboo' subject of unprotected anal intercourse. Participants were instructed that there were no right or wrong answers to the questions. As the records would be kept confidential and anonymous, participants were encouraged to provide information as accurate as they could. Of equal importance, answers to questions relating to sexual practices in the survey were on a 3-point scale (*never, occasionally or often*). Compared to the simplified format of 'yes' or 'no' answers, this format could arguably increase the reliability of responses. Self-reported data may also introduce recall bias. In the survey, a period of '6 months' prior to the time of the data collection was set as the operational period. A '6-month' recall period has been found to give reliable results in gay men's sexual practice surveys (Van de Ven et al., 1999).

The major demographic variables were age and length of residence in Australia. Gay community attachment was assessed through self-sexual identification, sense of attachment to gay community, proportion of gay friends, amount of spare time spent with gay friends and disclosure of homosexual orientation. Ethnic community attachment was measured by

self-identification with family ethnic background, sense of attachment to ethnic community, amount of free time spent with gay Asian men, and proportion of Asian men as sexual partners. Information about HIV testing was collected by asking about participants' own HIV serostatus, time since latest HIV test (if any), knowledge of regular partners' HIV serostatus (if applicable), and respondents' disclosure of their HIV serostatus to regular partners.

Questions concerning sexual relationships included sexual relationships with men *at the time* of the survey, length of regular relationship (if applicable), types of relationship and number of male sex partners in the six months prior to the survey. Negotiated safety was investigated by asking about agreements with regular partners concerning sexual practices within and outside the relationship.

Detailed inquiries on condom use for anal intercourse with both regular and casual partners were included. Previous research involving gay men indicated that there are distinctive patterns of condom use associated with relationship type, that is, condoms are more likely to be used during casual encounters, whereas in regular relationships, especially when such relationships are perceived by both sides to be monogamous, condoms are less likely to be used (Bosga et al., 1995; Buchanan et al., 1996; Prestage, Kippax, Van de Ven et al., 1996). The data from the earlier focus group discussions suggested that such a pattern may have existed among gay

Asian men in Sydney. Thus, to investigate condom use for anal intercourse, participants were asked to report, separately, on the extent of condom use for anal intercourse with both regular and casual partners in the six months prior to the survey. Practices associated with various modes of anal intercourse (such as insertive versus receptive, withdrawal prior to ejaculation versus ejaculation inside) were investigated in detail.

Before the survey was administered, a pilot study was carried out at the end of October 2000. A group of five gay Asian men completed the survey and provided feedback, which was used to refine the final version of the questionnaire.

Data analyses and results

Data in the questionnaire were entered into SPSS/Win (version 10.05). Approximately 40% of the entered data were re-checked to ensure accuracy (summary of missing data are presented in Appendix J).

For consistency of interpretation, the scores of two items—Item 17 (Communicate verbally with them) in Section A and Item 35 (My regular partner would be happier if we used a condom) in the second part of Section B—were reversed (Matsumoto, 1996; Dilorio et al., 1997).

Overall, factor analyses, Cronbach alphas, some univariate analyses (correlation, cross-tabulation, effect sizes, Chi-square statistics) and two multivariate analyses (MANOVA in this Chapter and Logistic Regression in

next Chapter) were conducted. The multivariate analyses were carried out along the lines set out in Tabchnick and Fidell (1989).

Factor analyses

Both the Principal Component Analysis and The Principal Axis Factor (PAF) were applied. For each of the four social groups—family, close friends, colleagues and strangers—PAF was chosen to generate factor solutions. More importantly, only the solutions that generated *consistent* structures for the pooled sample, the separate Asian and Caucasian samples, and each of the social groups were accepted. To achieve this, some items were eliminated and the above procedures were repeated until structural consistency was reached.

Solutions with varimax and oblimin rotations were generated. As the factor structures were essentially the same for both, varimax was considered more appropriate, given that there would be further analyses. The major aim of this step was to reduce the original variables into ‘factors’ that were interpretable, meaningful and consistent (Hair, Anderson, Tatham & Black, 1992). Furthermore, Cronbach alphas were calculated to assess the reliability of both the emerging factor structures as a whole and of each individual factor.

A two-factor solution was generated for the ‘family’ group. Table 1 shows the first factor named *Social Harmony*, where most of the items (Items

4, 5, 8, 10, 11 and 12) were similar to those identified by Matsumoto (1996). In general, this factor consisted of items referring to honouring group traditions, being loyal to in-group members, mutual respect, maintaining harmony with in-group members, providing mutual help, and maintaining stable situations. However, both Item 6 (Sacrificing goals for them) and Item 7 (Sacrificing possessions for them) also loaded on this factor. This makes sense in a family context because one is likely to sacrifice one's own possessions and goals to maintain harmonious relationships for the sake of the family. For the total sample, the first factor had an eigenvalue of 4.10 (Caucasians = 4.17; Asians = 4.03) and it explained 37.3% of the total variance.

For the 'family' group, the second factor, named *Social Identity* (which was also the original label of Matsumoto, 1996), consisted of three items (see Table 4.1). These items included individuals' identity in relation to others, such as being similar to others; accepting awards, benefits, or recognition based on one's seniority or position and following group norms. For the total sample, the second factor had an eigenvalue of 2.03 (Caucasians = 1.98; Asians = 1.72) and explained 18.5% of the variance.

Overall, the factor loadings for 'family' ranged from .46 to .87. The two factors together explained 55.8% of the total variance. Moreover, the overall Cronbach alpha was .89, with .90 for Factor 1 and .78 for Factor 2.

Table 4.1

Factor Solutions for 'Family'

Extracted factors	Total	Caucasian	Asian
Factor 1			
Social harmony			
11 Nurture or help them	.87	.87	.86
8 Respect them	.83	.87	.76
5 Be loyal to them	.77	.82	.72
10 Maintain harmonious relationships with them	.71	.70	.71
4 Respect and honour their traditions and customs	.67	.65	.69
7 Sacrifice your possessions for them	.62	.58	.67
12 Maintain a stable environment with them	.61	.59	.64
6 Sacrifice your goals for them	.51	.55	.46
Factor 2			
Social identity			
14 Be like or similar to them	.79	.74	.81
15 Accept awards, benefits, or recognition based only on age or position rather than merit from them	.65	.56	.58
19 Follow norms established by them	.62	.71	.54

There was a three-factor solution for the 'close friends' group. The structure of Factor 1, *Social Harmony*, was similar to that for the 'family' group, but did not contain items 6 and 7 (see Table 4.2). The structure of Factor 2, *Social Identity*, was exactly the same as the earlier structure (see Table 2). Factor 3, *Self-sacrificing*, emerged as an independent factor pertaining to sacrificing oneself for the sake of others. Although to sacrifice own goals and possessions may be considered intrinsic when it comes to family membership (as was in the factor solutions for 'family'), it is not so when it comes to membership of close friends and colleagues.

For the 'close friends' group, the factor loadings ranged from .52 to .84 and eigenvalues were 2.78 (Caucasians = 2.61; Asians = 3.02), 1.74 (Caucasians = 1.76; Asians = 1.54), and 1.19 (Caucasians = 1.25; Asians = 1.21) for the three factors, respectively. Again, these three factors together explained over half (51.8%) of the total variance. The overall Cronbach alpha was .81, with Factor 1, .83, Factor 2, .75, and Factor 3, .75.

Table 4.2

Factor Solutions for 'Close Friends'

Extracted factors	Total	Caucasian	Asian
Factor 1			
Social harmony			
11 Nurture or help them	.78	.68	.83
10 Maintain harmonious relationships with them	.69	.75	.69
8 Respect them	.68	.68	.66
4 Respect and honour their traditions and customs	.65	.65	.63
5 Be loyal to them	.63	.58	.67
12 Maintain a stable environment with them	.58	.56	.64
Factor 2			
Social identity			
14 Be like or similar to them	.75	.84	.71
19 Follow norms established by them	.66	.69	.58
15 Accept awards, benefits, or recognition based only on age or position rather than merit from them	.62	.52	.65
Factor 3			
Self-sacrifice			
7 Sacrifice your possessions for them	.79	.84	.73
6 Sacrifice your goals for them	.63	.60	.69

Table 4.3

Factor Solutions for 'Colleagues'

Extracted factors	Total	Caucasian	Asian
Factor 1			
Social harmony			
8 Respect them	.71	.68	.72
11 Nurture or help them	.71	.64	.75
10 Maintain harmonious relationships with them	.67	.64	.72
5 Be loyal to them	.62	.52	.66
4 Respect and honour their traditions and customs	.61	.50	.66
12 Maintain a stable environment with them	.55	.57	.55
Factor 2			
Social identity			
14 Be like or similar to them	.79	.74	.86
19 Follow norms established by them	.60	.67	.51
15 Accept awards, benefits, or recognition based only on age or position rather than merit from them	.56	.59	.47
Factor 3			
Self-sacrifice			
6 Sacrifice your goals for them	.81	.81	.80
7 Sacrifice your possessions for them	.72	.68	.76

The third social group, 'colleagues', had a similar three-factor solution to that for 'close friends' (see Table 4.3). In this structure, Factor 1, *Social Harmony*, had an eigenvalue of 2.57 (Caucasians = 2.15; Asians = 2.88) and explained 23.4% of the variance; Factor 2, *Social Identity*, had an eigenvalue of 1.54 (Caucasians = 1.54; Asians = 1.53) and explained 14.0% of the variance; and Factor 3, *Self-sacrifice*, had an eigenvalue of 1.31 (Caucasians = 1.32; Asians = 1.38) and explained 11.9% of the variance. The factor loadings ranged from .47 to .86. The overall Cronbach alpha was .79, with Factor 1, .81, Factor 2, .70, and Factor 3, .78.

The fourth social group, 'strangers', did not yield theoretically explainable and consistent factor structures. Hence, this group was excluded from the remaining analyses.

In summary, 11 out of the original 19 items formed conceptually sound and consistent structures for both the Asian and Caucasian men across three social groups, namely, family, close friends and colleagues. All the factor loadings were greater than .40 and the factors in each analysis taken together explained approximately 50% of the total variance, with the eigenvalues of all extracted factors greater than 1. The Cronbach alphas overall ranged from .70 to .90 and the reliability of the scales would not have been improved by deleting any item.

However, in order to achieve consistency of the factor solutions in the pooled and in the separate Asian and Caucasian samples, eight items were

deleted. These were: Item 1, 'to maintain self-control toward them; Item 2, 'to share credit for their accomplishments'; Item 3, 'to share blame for their failures'; Item 9, 'to compromise your wishes to act in unison with them'; Item 13, 'to exhibit proper manners and etiquette, regardless of how you really feel, toward them'; Item 16, 'to cooperate with them'; Item 17, 'to communicate verbally with them' and Item 18, 'to save face for them'. Most of these items were deleted because they did not load consistently on a fixed factor across the three social groups for the pooled and the separate Asian and Caucasian samples. Some had considerable cross factor loadings. Nevertheless, the item 'to compromise your wishes to act in unison with them' loaded in the same factor on the 'family' group across both the pooled and the separate Asian and Caucasian samples, and that the item 'to save face for them' loaded on the same factor on two social groups ('close friends' and 'colleagues') across the pooled and the separate Asian and Caucasian samples. In the end, both items failed to be included in the final solutions.

For self-efficacy in condom use with casual partners, the PAF analysis resulted in a two-factor structure. Factor 1, *the Practical Use of Condoms*, consisted of three items that were closely related to condom use techniques, such as the ability to avoid condom slippage, to put condoms on without fumbling, and to enjoy sex with condoms (see Table 4.4).

Factor 2 was named *Risk Avoidance* and referred to some conditions when condoms are unavailable. The two items in this factor focused on

participants' confidence to be able to refuse sexual intercourse and to avoid situations that could lead to unsafe sex with casual partners when condoms are unavailable.

Table 4.4

Factor Solutions for Condom Use with Casual Partners

Extracted factors	Total	Caucasian	Asian
Factor 1			
Self-efficacy in the practical use of condoms with casual partners			
29 I can put a condom on so that it will not slip.	.79	.86	.70
27 I can use a condom without fumbling.	.68	.70	.66
31 I can put a condom on and enjoy the experience.	.42	.35	.50
Factor 2			
Self-efficacy in risk avoidance with casual partners			
20 I can say no to intercourse with casual partners if we don't have a condom.	.57	.67	.46
24 When I don't have a condom I can avoid situations that can lead to unsafe sex.	.54	.63	.48

The final eigenvalues for those two factors were 1.33 (Caucasians = 1.43; Asians = 1.25) and 0.73 (Caucasians = 1.01; Asians = 0.52), respectively, and together they explained 41.2% of the total variance. The

factor loadings in this structure ranged from .35 to .86. The overall Cronbach alpha was .67, with Factor 1, .68, and Factor 2, .49.

In order to achieve a consistent factor solution, seven items in the first part of Section B were deleted. These included Item 21, 'I can have a good time using a condom with casual partners'; Item 22, 'I can use a condom with a casual partner even if the room is dark'; Item 23, 'I can get every casual partner to use a condom even if they don't want to'; Item 25, 'I can be the one to put the condom on without ruining the mood'; Item 26, 'I can stop to put on a condom before sexual intercourse'; Item 28, 'When I don't have a condom I can find another pleasurable activity' and Item 30, 'I can talk to casual partners about the importance of using condoms'. The item 'I can be the one to put the condom on without ruining the mood' loaded on the same factor across both the pooled and the separate Asian and Caucasian samples, but failed to be retained in the final solution.

All the five items in the second part of Section B loaded on a single factor, *Outcome Expectancies in Regular Partners' Reactions to Condom Use* (see Table 4.5). These items dealt with regular partners' potential aversion to condoms within relationships. It explained 35.3% of the total variance, with an eigenvalue of 1.77 (Caucasians = 2.02; Asians = 1.51). The factor loadings ranged from .23 to .77. The Cronbach alpha was .71.

For the reverse-scored Item 35 (appearing in Table 5 as 35r), the factor loading was less than .40 and its corrected item-total correlation was

less than .30. One possible explanation for this is that ‘not happy’ was not conceptually explicit. Hence, for future analysis, this item was excluded.

Table 4.5

Factor solutions for Regular Partners’ Reactions to Condom Use

Extracted factor		Total	Caucasian	Asian
Outcome expectancies in regular partners’ reactions to condom use				
33	My regular partner wouldn’t like it if I had a condom with me.	.69	.77	.59
34	My regular partner would break up with me if I said we had to use condoms.	.66	.68	.61
32	My regular partner would think I was having sex with another person if I said we had to use condoms.	.63	.67	.59
36	Saying we have to use a condom is like saying “I don’t trust you”.	.60	.59	.62
35r	My regular partner would not be happy if we used a condom.	.32	.40	.23

All the six items in the third part of Section B also loaded on a single factor, *Self-efficacy in Negotiated Safety* (see Table 4.6). It measured how efficacious one would be negotiating with a regular partner in order to prevent HIV transmission while at the same time enjoying love and intimacy within the relationship. The factor loadings for these items ranged from .57 to .81, with an eigenvalue of 2.77 (Caucasians = 2.54; Asians = 3.05). Self-efficacy in

negotiated safety, as a single factor, explained 46.1% of the total variance.

The Cronbach alpha for this factor was .83.

Table 4.6

Factor Solutions for Negotiated Safety with Regular Partners

Extracted factor	Total	Caucasian	Asian
Self-efficacy in negotiated safety with regular partners			
40 I can make agreements about sexual practices with my regular partner.	.77	.73	.81
38 I can talk to my regular partner about sexual practices within our relationship.	.72	.68	.77
41 I can keep sexual practice agreements I have made with my regular partner.	.68	.60	.76
42 I can talk with my regular partner if I have broken our sexual practice agreements.	.68	.72	.64
37 I can talk to my regular partner, so that we know if our HIV status is the same.	.62	.57	.68
39 I can talk to my regular partner about safe sex outside of our relationship.	.59	.57	.60

In sum, three parts of Section B of the questionnaire resulted in explainable and consistent factor structures for both the Asian and Caucasian men.

Factor scores, MANOVA and effect sizes

Unweighted factor scores were generated by averaging scales of all the items in the corresponding factors. These mean factor scores were then standardised. This procedure aimed to minimise any response bias due to cross-cultural differences (Kashima, Siegal, Tanaka, & Kashima, 1992). It has been found that, in general, Caucasians tend to respond more to scales at both ends, whereas Asians tend to respond more in the middle (Kashima et al., 1992). To reduce within-group deviation, a mid-point-scale, within-group standardisation procedure was carried out (Kashima et al., 1992). This standardisation procedure enhances the comparability of the factor scores of groups from different cultural backgrounds (Kashima et al., 1992).

MANOVA was then applied to explore potential differences between the Asian and Caucasian groups. As a Bonferroni adjustment was considered over conservative, alpha was set at .01 for the univariate tests. The MANOVA analyses indicated that there were significant differences between the Caucasian and Asian groups in terms of individualism-collectivism factors (see Table 4.7).

The higher the standardised scores, the higher the level of a collectivist orientation. For example, in Table 4.7, in terms of the 'Social Identity' for both the 'family' and 'close friends' groups, the gay Asian men had positive scores, indicating collectivist orientations, while the gay Caucasian men had negative scores, indicating individualist orientations. Although the gay Asian and

Caucasian men both had negative scores in 'Social Identity' and 'Self-sacrificing' for the 'colleagues' group, the gay Caucasian men had significantly lower scores, indicating stronger individualist orientations than their Asian counterparts.

It is of note that there were two positive 'Social Harmony' scores (one for 'close friends' and the other for 'colleagues'), for which the Caucasian men scored unexpectedly higher than the Asian men. This may be related to the special characteristics of the participants that the majority of the participants were strongly connected to local gay communities. It may be the case that the maintenance of harmonious relationships with close friends and colleagues, who may also be gay men, was more important for the Caucasian men than for the Asian men. Compared to their Caucasian counterparts, the gay Asian men may have valued attachment to families more than to close friends and colleagues. This will to be further explored in the following analyses.

Cohen's d' statistic was used to calculate effect sizes. That is, each difference between the mean of the Asian group and that of the Caucasian group (the means are expressed as absolute values) was divided by the estimate of the corresponding standard deviation of the pooled sample.

The means of the total sample showed that the participants' prime concerns were to have harmonious social relationships with close friends or family members, followed by concerns for harmony with colleagues. These

data also indicated that in addition to self-identity, to identify as a member of a family or close friend group was more salient than to identify as a member of a colleague group. These findings further supported previous factor solutions. That is, to sacrifice one's goals and possessions may be intrinsic to membership of a family but not to a group of close friends or colleagues. The sub-sample scores also revealed that the Asian men were more concerned about harmonious relationships with family members than their Caucasian counterparts. At the same time, the Asian men were less concerned about social harmony with colleagues than the Caucasian men. The Caucasian men were less concerned about harmonious relationships with family members and their major concern was for relationships with close friends. Their apparently different attitudes toward family members, close friends and colleagues may partly reflect their different views in terms of in-groups and out-groups among the gay Asian and Caucasian men.

Table 4.7

Standardised Mean Factor Scores of Individualism-Collectivism

Factors	Factor Scores			Univariate <i>F</i> value and Effect size <i>d'</i>
	Total	Caucasian	Asian	
Family				
Social harmony	1.67	1.27	2.07	64.2*** (<i>d'</i> = .74)
Social identity	-0.12	-0.49	0.26	56.5*** (<i>d'</i> = .70)
Close friends				
Social harmony	2.55	2.80	2.29	26.4*** (<i>d'</i> = .50)
Social identity	-0.13	-0.41	0.15	31.4*** (<i>d'</i> = .54)
Self-sacrificing	0.27	0.19	0.36	2.63 (<i>ns</i>)
Colleagues				
Social harmony	1.20	1.42	0.98	19.8*** (<i>d'</i> = .43)
Social identity	-0.53	-0.74	-0.32	17.2*** (<i>d'</i> = .41)
Self-sacrificing	-0.81	-0.98	-0.63	11.8*** (<i>d'</i> = .35)

Note. Wilks' $\lambda = .66$; $F(8, 389) = 25.4$ ($p < .001$).

ns not significant. *** $p < .001$.

After controlled for Type I error (Alphas set at .01 level), the MANOVA results in Table 4.8 suggest that there were significant differences between the gay Asian and Caucasian men in terms of self-efficacy in the practical use of condoms with casual partners, self-efficacy in negotiated safety with regular partners and outcome expectancies in regular partners' reactions to condom use. Compared to their Caucasian counterparts, the gay Asian men had higher scores in two self-efficacy variables (moderate to large effect sizes). The negative standardised mean scores of the outcome expectancies

variable mean that the participants expected unwillingness from their regular partners at the suggestion of condom use. Although both the gay Asian and Caucasian men had negative scores for that factor, the gay Asian men had lower scores, indicating they were more pessimistic about suggesting condom use within relationships than their Caucasian counterparts (a small effect size).

Table 4.8

Standardised Mean Factor Scores of Self-Efficacy and Outcome Expectancies in Relation to Sexual Practices

Factors	Factor Scores			Univariate <i>F</i> value and Effect size <i>d'</i>
	Total	Caucasian	Asian	
Self-efficacy in condom use with casual partners				
Self-efficacy in the practical use of condoms with casual partners	1.98	1.71	2.25	29.1*** (<i>d'</i> = .52)
Self-efficacy in risk avoidance with casual partners	1.76	1.83	1.70	1.89 (<i>ns</i>)
Outcome expectancies in regular partners' reactions to condom use	-0.50	-0.38	-0.62	6.16* (<i>d'</i> = .24)
Self-efficacy in negotiated safety with regular partners	1.69	1.51	1.87	12.7*** (<i>d'</i> = .36)

Note. Wilks' $\lambda = .89$; $F(4, 394) = 12.8$ ($p < .001$). *ns* not significant. * $p < .05$. *** $p < .001$.

Zero-order Correlations

Pearson's zero-order correlation coefficients were calculated as the next step. The correlations between the factors of individualism-collectivism ranged from moderate to strong (see Table 4.9).

In the total sample as well as in the two sub-samples, the strongest correlations were: between social identity with family members and social identity with close friends ($r = .80$) and between social identity with close friends and social identity with colleagues ($r = .75$). Other strong correlations were between social identity with family and social identity with colleagues ($r = .65$), between social harmony with close friends and social harmony with colleagues ($r = .65$) and between self-sacrifice for close friends and self-sacrifice for colleagues ($r = .53$). The other correlations were small or even non-significant. The correlations suggested a hierarchical order in terms of social distance between self and others, that is, in general, family was the closest social group, the close friends group was ranked next and the colleagues group was the most distant. Taking social identity scores for example, the correlations between social identity with family members and with close friends were stronger than those between social identity with family members and with colleagues. The correlations were also stronger between social identity with close friends and with colleagues, compared with those between social identity with family members and with colleagues. This suggested that the 'distance' between family members and colleagues was

much greater than that between family and close friends, as well as that between close friends and colleagues.

Table 4.9

Inter-Correlations Between the Individualism-Collectivism Factors

Factor pairs		Total	Caucasian	Asian
Family Social identity	Close friends Social identity	.85**	.83**	.84**
Family Social identity	Colleagues Social identity	.66**	.59**	.69**
Close friends Social identity	Colleagues Social identity	.73**	.74**	.78**
Close friends Social harmony	Colleagues Social harmony	.64**	.56**	.68**
Close friends Self-sacrifice	Colleagues Self-sacrifice	.54**	.52**	.53**

Note. As 'social harmony' items in 'family' were different from those in 'close friends' and 'colleagues', correlations between 'social harmony with family' and 'social harmony with close friends' as well as between 'social harmony with family' and 'social harmony with colleagues' were not calculated.

** $p < .01$, two-tailed.

Table 4.10 shows the correlations between the cross-cultural variables and the social cognitive ones. In general, the correlations were small to moderate. The mostly positive correlations suggested that those who had a strong tendency towards collectivism (they scored higher in the individualism-collectivism factors than the others, especially in terms of 'family' and 'close

friends') were more likely to have had higher self-efficacy in the practical use of condoms and risk avoidance with casual partners, as well as in negotiated safety with regular partners, and vice versa. It is noteworthy that there were two sets of negative but small magnitude correlation coefficients. One involved 'self-sacrifice for colleagues' and its associations with 'self-efficacy in the practical use of condoms' and 'risk avoidance with casual partners'. These negative correlations suggest that in the context of sexual practices, the less concerned the participants were in relation to self-sacrifice for their colleagues, the more self-efficacious they were in the practical use of condoms and in risk avoidance with casual partners, and vice versa.

The other set of negative correlations involved 'outcome expectancies in regular partners' reactions to condom use' and its associations with 'social harmony with family members' and 'social harmony with close friends'. They suggest that the more concerned the participants were about maintaining harmonious relationships with in-groups (family members or close friends), the less they would expect negative outcomes from their partners at the suggestion of condom use within relationships, and vice versa.

Table 4.10

Inter-Correlations Between the Factors of Individualism-Collectivism, Self-Efficacy and Outcome Expectancies

	Self-efficacy in the practical use of condoms with casual partners	Self-efficacy in risk avoidance with casual partners	Outcome expectancies in partners' reactions to condom use	Self-efficacy in negotiated safety with regular partners
Family Social harmony	.25**	.11*	-.13**	.16**
Family Social identity	.16**	-.09(<i>ns</i>)	.00(<i>ns</i>)	.07(<i>ns</i>)
Close friends Social harmony	.15**	.22**	-.10*	.21**
Close friends Social identity	.10*	-.05(<i>ns</i>)	.03(<i>ns</i>)	.06(<i>ns</i>)
Close friends Self-sacrifice	.04(<i>ns</i>)	.03(<i>ns</i>)	-.07(<i>ns</i>)	.09(<i>ns</i>)
Colleagues Social harmony	.05(<i>ns</i>)	.21**	-.07(<i>ns</i>)	.11*
Colleagues Social identity	.05(<i>ns</i>)	-.05(<i>ns</i>)	.08(<i>ns</i>)	.00(<i>ns</i>)
Colleagues Self-sacrifice	-.10*	-.12*	.07(<i>ns</i>)	.01(<i>ns</i>)

Note. *ns* not significant. * $p < .05$, two-tailed. ** $p < .01$, two-tailed.

Cross-tabulation, Chi-square and effect sizes

The original categories of sexual identification were re-coded into a new dichotomous variable of gay identified and non-gay identified. The category 'gay identified' included men who identified as 'gay', 'queer' or 'Tongzhi' (Chinese pun for gay). The category 'non-gay identified' included men who identified as 'bisexual' only (none of them self-identified as straight or heterosexual). More importantly, the major sexual practice of these bisexually identified men was with other men.

Two new dichotomous variables 'regular partners' and 'casual partners' were created. Those who reported any sex with regular partners or those who reported being in a regular relationship at the time of the survey (that is, either monogamous, the respondent or his regular partner had casual partners outside, or the respondent had several regular partners simultaneously) were regarded as having regular partners. Similarly, those who reported any sex with casual partners, and those who reported being in a casual relationship (that is, either the respondent had a casual partner, both the respondent and his regular partner had casual partners or the respondent had several casual partners) were regarded as having casual partners (Van de Ven et al., 1999).

Unprotected anal intercourse was assessed by two sets of questions. One set examined participants' practice of anal intercourse with regular partners, the other, with casual partners. If a participant reported (a) having

engaged in any type of anal intercourse (insertive or receptive, with ejaculation inside or with ejaculation after withdrawal), and (b) 'occasionally' or 'often' having not used condoms in any such situations, he was regarded as having engaged in any unprotected anal intercourse (Crawford, Rodden, Kippax & Van de Ven, 2001).

Two constructed variables were 'unprotected anal intercourse with casual partners' and 'unprotected anal intercourse with regular partners'. In this way, participants' interactions with casual partners were categorised into four mutually exclusive domains: those who reported not having had any casual partners (no casual partners); those who had had casual partners but never engaged in any forms of anal intercourse including insertive or receptive anal intercourse with or without ejaculation (no casual anal intercourse); those who had practised any forms of anal intercourse but always with condoms (100% protected casual anal intercourse) and those who had practised anal intercourse 'occasionally' or 'often' without condoms (any unprotected casual intercourse). Similar categorisation was applied to interactions with regular partners (Van de Ven et al., 1999).

Participants' HIV statuses were assessed by asking two questions regarding whether they had an HIV test and if so, the result of the test. The information about HIV status of regular couples was classified in the following way: sero-concordant if according to the participant's knowledge, both couples were sero-negative or sero-positive; sero-discordant if a participant

reported that his own HIV status was the opposite of that of his regular partner; and sero-nonconcordant if one party had not had an HIV test or if one party's HIV status was unknown (Van de Ven et al., 1999).

The variable 'negotiated safety' was constructed and relationships were assigned to one of four mutually exclusive categories. Participants who reported having 'no agreement' were assigned to 'none'. Those who reported having agreements, both within and outside relationships, which allowed 'no sex at all', 'no anal intercourse at all' or 'all anal intercourse is with condoms' were assigned to 'no unprotected anal intercourse'. Those who (a) had regular partners for at least six months, (b) knew that both their own and their regular partners' HIV statuses were negative, and (c) had spoken agreements which allowed unprotected anal intercourse within relationships, but not outside relationships, were assigned to 'negotiated safety'. Agreements that allowed unprotected anal intercourse within regular relationships when the couple's HIV statuses were discordant or non-concordant were assigned to 'unsafe'. If a couple's HIV statuses were concordant negative (concordant positive couples were not included in the negotiated safety analyses) but their agreements did not limit unprotected anal intercourse to within the relationship, the case was also classified as 'unsafe' (Crawford et al., 2001).

In sum, any unprotected anal intercourse among gay men was regarded as a risk for HIV transmission if it occurred (a) between regular partners when couples' HIV statuses were serodiscordant or non-concordant,

(b) between casual partners, or (c) with both regular and casual partners simultaneously (Crawford et al., 2001).

As most of the variables are categorical, univariate analyses were conducted using cross-tabulation and Chi-square statistics. To control for Type I error, Chi-square statistics were limited to a few tables and the alpha significance level was set at .01, as a Bonferroni adjustment was considered too conservative for this study. Cohen's effect size ($e = \chi^2/n$) was calculated as indication of the strength of associations (Cohen, 1969).

Source of recruitment

Most participants were recruited in gay social venues (see Table 4.11). Others were drawn from Sydney gay organisations and their educational programs, as well as from special gay events. A small number of participants chose to mail the completed questionnaire back and these were classified as 'mailed back'.

In all, 412 men (out of 563 who met the participation criteria) completed a questionnaire. One of the major reasons for eligible men of minority ethnic background declining to complete a questionnaire (as they reported to the recruiters) was language difficulty, even though the recruitment team offered assistance. Twelve surveys were discarded, as there was extensive missing information. This resulted in an overall response rate of approximately 71%.

Table 4.11

Source of Recruitment

	<i>n</i>	%
Gay social venues	291	72.8
Organisations and programs	50	12.5
Special gay events	50	12.5
Mailed back	9	2.2
Total	400	100

Ethnicity

According to the responses to Question 78 (What is the ethnic background of your family?), 201 men self-identified as ‘Caucasian’. In addition, some ($n = 14$) further specified their countries of origin as New Zealand, the United States and parts of Europe, notably Ireland, Germany, Italy, Greece and Spain.

Altogether, there were 189 men who self-identified as ‘East Asian’ ($n = 67$, 16.8%), ‘South Asian’ ($n = 27$, 6.8%), or ‘South East Asian’ ($n = 95$, 23.8%). Among the men from East Asia, the majority were of Chinese background—from China, Hong Kong or Taiwan. For those of South East Asian origin, most were from Singapore, Thailand or Vietnam. Apart from these men, there was one from Sri Lanka, another two from Papua New Guinea (not indigenous islanders), one from Pacific Island (not specified) and

a further ten of mixed origin. Altogether, this resulted in an 'Asian' sample of 199 men.

Table 4.12 shows that most Caucasian men were either born in Australia or born overseas but had lived in Australia for more than 5 years. Few Asian men were Australian born and more than half had lived in Australian for more than 5 years.

Table 4.12

Length of Residence in Australia

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Born in Australia	133	66.5	11	5.5	144	36.1
More than 5 years	33	16.5	91	45.7	124	31.1
3-5 years	6	3.0	32	16.1	38	9.5
1-2 years	5	2.5	34	17.1	39	9.8
Less than 1 year	23	11.5	31	5.6	54	13.5
Total	200	100	199	100	399	100
<i>Missing</i>	<i>1</i>				<i>1</i>	

Over 60% of the Caucasian men were either born in Sydney or had lived in Sydney for more than five years, whereas less than half of the Asian men had lived in Sydney for such a period (see Table 5.3). Those who indicated that they had lived in Sydney for 'less than one year' could have recently arrived in Australia from overseas or recently arrived in Sydney from other parts of Australia.

Table 4.13.

Length of Residence in Sydney

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Born in Sydney	51	25.6	8	4.1	59	14.9
More than 5 years	73	36.7	78	39.6	151	38.1
3-5 years	26	13.1	30	15.2	56	14.1
1-2 years	10	5.0	41	20.8	51	12.9
Less than 1 year	39	19.6	40	20.3	79	19.9
Total	199	100	197	100	396	100
<i>Missing</i>	2		2		4	

Age

Participants' ages in this sample ranged from 19 to 65 years, with a median of 31 years in the total sample (see Table 4.14). The median age of Asian participants was approximately six years younger than that of their Caucasian counterparts.

Table 4.14

Age

Years	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
18-19	4	2.0	4	2.1	8	2.0
20-24	19	9.5	35	18.1	54	13.8
25-29	33	16.6	74	38.3	107	27.3
30-39	78	39.2	64	33.2	142	36.2
40-49	50	25.1	14	7.3	64	16.3
>= 50	15	7.5	2	1.0	17	4.3
Total	199	100	193	100	392	100
<i>Missing</i>	2		6		8	
Median	36		30		31	

Overall, the demographic characteristics of this sample were similar to those reported in other gay community studies such as the Sydney Gay Community Periodic Surveys (Prestage et al., 1999) and the study of gay Asian men in Sydney (Prestage et al., 2000).

Ethnic community attachment

Among the Asian men, 24.5% reported feeling very much part of ethnic community in Australia and around a third did not feel attached to it at all (see Table 4.15).

Table 4.15

Degree of Ethnic Community Attachment (among Gay Asian men)

	<i>n</i>	%
Very much part of ethnic community in Australia	48	24.5
Only feel slightly a part of ethnic community in Australia	82	41.8
Do not feel part of ethnic community in Australia at all	66	33.7
Total	196	100
<i>Missing</i>	3	

As shown in Table 4.16, among the Asian men, around 26% spent a lot of free time with fellow gay Asian men, and nearly 38% spent little or no time with such men.

Table 4.16

Proportion of Free Time Spent with Other Gay Asian Men (among Gay Asian Men)

	<i>n</i>	%
None	21	10.6
A little	55	27.6
Some	71	35.7
A lot	52	26.1
Total	199	100

Data presented in Tables 4.15 and 4.16 provide evidence that Asian men, on the whole, had not established close social involvement with fellow Asian men in Sydney, as around a third of these men did not feel part of local

ethnic community and around a third spent little or no time with fellow gay Asian men. Table 4.17 shows that the majority of Asian participants were not involved intimately, in terms of sexual relationships, with fellow Asian men. Over 60% of the Asian men had never had Asian male sex partners and only about 39% of the Asian participants had other Asian men as their sex partners.

Table 4.17

Proportion of Fellow Asian Men as Sex Partners (among Gay Asian men)

	<i>n</i>	%
None	119	60.7
Some	60	30.6
Most	7	3.6
All	10	5.1
Total	196	100
<i>Missing</i>	3	

Sexual identification and gay community attachment

The majority of Caucasian and Asian men surveyed self-identified as gay (both over 85%, see Table 4.18). Among the homosexually identified, 341 were 'gay or homosexual', seven were 'queer' and the remaining two were 'Tongzhi'. Among the non-homosexually identified, all of them were 'bisexual'. Three participants did not disclose their sexual identity but none of them was identified as 'straight or heterosexual'.

Table 4.18

Sexual Self-identification

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Homosexually identified	180	89.6	170	85.4	350	87.5
Not homosexually identified	19	9.5	28	14.1	47	12.5
Total	199	100	198	100	397	100

Around 47% of the participants, in total, felt strongly attached to gay community in Australia (see Table 4.19). Among Asian participants, only around 13% did not feel attached at all to local gay communities, which is in sharp contrast to the fact that around 34% of the Asian men did not feel attached at all to local ethnic communities. Nearly 90% of the participants felt to some degree that they were part of gay community in Australia, with little difference between Caucasian and Asian men.

Table 4.19

Gay Community Attachment

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Very much a part of gay community in Australia	99	49.3	87	43.7	186	46.5
Only feel slightly a part of gay community in Australia	84	41.8	87	43.7	171	42.8
Do not feel part of gay community in Australia at all	18	9.0	25	12.6	43	10.8
Total	201	100	199	100	400	100

In the total sample, as well as the separate Caucasian and Asian sub-samples, over half reported that ‘most or all’ of their friends were gay men (see Table 4.20).

Table 4.20

Proportion of Gay Friends

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
None	0	0	2	1.0	2	0.5
Few	27	13.4	42	21.1	69	17.3
Some	59	29.4	55	27.6	114	28.5
Most or all	115	57.2	100	50.3	215	53.8
Total	201	100	199	100	400	100

Among all the men, nearly half spent ‘a lot’ of free time with gay men, somewhat more for Caucasian men than Asian men (see Table 4.21). Approximately 13% of the Asian participants spent little or no time with gay men.

Table 4.21

Proportion of Free Time Spent with Gay Men

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
None	1	0.5	1	0.5	2	0.5
A little	17	8.5	33	12.5	50	12.5
Some	70	34.8	80	40.2	150	37.5
A lot	113	56.2	85	42.7	198	49.5
Total	201	100	199	100	400	100

Most participants in the sample were quite closely attached to gay community: the majority self-identified as gay men, the majority also had a strong sense of being part of gay community, approximately half had a large proportion of gay friends, and nearly 50% also spent a lot of time with gay friends (as shown in Tables 4.18, 4.19, 4.20 and 4.21). Caucasian and Asian participants reported fairly similar levels of attachment to gay community.

Overall, Caucasian men were more likely to inform others of their homosexual orientation than Asian men (see Table 4.22). In the total sample, as well as in both the Caucasian and Asian groups, 'gay friends' occupied the top rank in terms of disclosure (both over 85%). 'Straight friends' ranked a close second for Caucasian men but to a lesser degree for Asian men. Parents and other relatives were third, again more so for Caucasian men than for Asian men. Furthermore, 'mother' seemed to be more commonly confided in than 'father'. A smaller proportion of Caucasian than Asian men had not disclosed to anyone.

Table 4.22

Disclosure of Homosexual Desire to Others

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Mother	139	69.5	48	24.6	187	47.3
Father	117	58.5	34	17.4	151	38.2
Other relatives	141	70.5	53	27.2	194	49.1
Female sex partner	34	17.0	12	6.2	46	11.6
Gay friends	188	94.0	169	86.7	357	90.4
Straight friends	167	83.5	92	47.2	259	65.6
Anyone	104	52.0	39	20.0	143	36.2
None	4	2.0	15	7.7	19	4.8

Note. Cells are not mutually exclusive.

HIV status

The overall HIV positive rate was 5.5% in this sample (see Table 4.23). In total, around 14% did not know their HIV serostatus. One Asian man and 20 Caucasian men reported being HIV positive. The proportion of Asian men who did not know their HIV serostatus exceeded that of Caucasian men.

Table 4.23

HIV Test Results

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
HIV negative	159	82.4	146	78.1	305	80.3
HIV positive	20	10.4	1	0.5	21	5.5
Not tested/no results	14	7.3	40	21.4	54	14.2
Total	193	100	187	100	380	100
<i>Missing</i>	8		12		20	

$\chi^2 = 30.18, p < .001$. Cohen's $e = .08$, small-to-medium size effect.

Nearly 65% of men who had an HIV test had been tested during the previous year (see Table 4.24). The pattern for Caucasian men and Asian men was quite similar.

Table 4.24

Time Since the Most Recent HIV Test

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Less than 6 months	86	46.7	60	39.2	146	43.3
7–12 months	39	21.2	33	21.6	72	21.4
1–2 years	28	15.2	35	22.9	63	18.7
Over 2 years	31	16.8	25	16.3	56	16.6
Total	184	100	153	100	337	100
<i>Missing</i>	9		34		43	

Note. Includes only those men who had been tested for HIV.

In the Caucasian group, of 127 who reported having regular partners, 111 (87.4%) answered the question, “Do you know the result of your regular partner’s HIV antibody test?” Among these 111 Caucasian participants, around 32% did not know their regular partner’s HIV serostatus (see Table 4.25). In the Asian group, of 129 who reported being in regular relationships, 112 (86.8%) responded to the same question and around 26% did not know their regular partner’s HIV status. The majority of Caucasian and Asian men who knew their partner’s HIV status had HIV negative regular partners.

Table 4.25

HIV Status of Regular Partners

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
HIV negative	66	59.5	80	71.4	146	65.5
HIV positive	9	8.1	3	2.7	12	5.4
Not tested/no results	36	32.4	29	25.9	65	29.1
Total	111	100	112	100	223	100
<i>Missing</i>	16		17		33	

Note. Includes only those men who 'currently' had a regular partner.

Seventy six percent who responded to the question, 'Have you told your current regular partner the result of your HIV antibody test?', answered 'Yes' (see Table 4.26). Further cross-tabulation showed that of the 28 participants who reported not knowing their own HIV status, 22 also reported not knowing their regular partner's HIV status.

Table 4.26

Participants' Disclosure of Serostatus to Regular Partners

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Yes	86	78.9	79	73.1	165	76.0
No	11	10.1	14	13.0	25	11.5
Not tested/no results	12	11.0	15	13.9	27	12.4
Total	109	100	108	100	217	100
<i>Missing</i>	18		21		39	

Note. Includes only those men who 'currently' had a regular partner.

Table 4.27 shows that according to their knowledge, over half of the participants who currently had a regular partner were in a sero-concordant relationship, mostly seronegative ones (61.3%, 133/217). The rate of sero-concordance for the Caucasian men was 57.8% (63/109); for the Asian men, the rate was 68.8% (75/109).

Table 4.27

Match of HIV Status in Regular Relationships

	Caucasian			Asian		
	Regular partner's HIV status			Regular partner's HIV status		
Respondent's HIV status	Negative	Positive	Unknown	Negative	Positive	Unknown
Negative	59	5	2	74	0	4
Positive	5	4	0	1	1	0
Unknown	25	1	8	15	0	14

Note. Includes only those men who 'currently' had a regular partner. $n = 218$, Caucasian = 109 (missing = 18) and Asian = 109 (missing = 20).

Sexual relationships with men

In total, at the time of the survey, nearly 27% of the men reported being in a monogamous relationship (see Table 4.28). Approximately 58% reported having casual partners, either casual partners only or both regular and casual partners. At the time of the survey, around 15% were not having sex with men. Of the 333 participants who reported being sexually active with men at the time of the survey, approximately 30% were monogamous, nearly 30% had casual partners and the remainder (nearly 40%) had both casual

and regular partners. The Asian and Caucasian men displayed fairly similar patterns (no statistically significant difference).

Table 4.28

Current Sexual Relationships with Men

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
No sex with men at present	21	10.8	38	19.3	59	15.1
Casual partners only	51	26.2	39	19.8	90	23.0
Monogamous (one regular partner only)	52	26.7	53	26.9	105	26.8
Both casual and regular partners	71	36.4	67	34.0	138	35.2
Total	195	100	197	100	392	100
<i>Missing</i>	6		2		8	

In the overall sample, nearly two-thirds who reported being in a regular relationship had maintained the relationship for at least one year (see Table 4.29).

Table 4.29

Length of Relationships with Regular Partners

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Less than one year	47	40.2	43	34.7	90	37.3
At least one year	70	59.8	81	65.3	151	62.7
Total	117	100	124	100	241	100
Missing	10		5		15	

Note. Includes only those men who currently had a regular partner.

Table 4.30 shows that of the 400 participants, approximately 64% had regular partners during ‘the previous 6 months’, which included situations when the participants had only one regular partner or several regular partners at the same time. In total, about 71% had casual partners during the six-month period prior to the survey, more commonly among Caucasian than Asian men, but not significantly so.

Table 4.30

Reported Sexual Contact with Male Partners in the Previous Six Months

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Any sexual contact with regular partners	133	66.2	124	62.3	257	64.3
Any sexual contact with casual partners	156	77.6	129	64.8	285	71.3

Note. Cells are not mutually exclusive.

Overall, the majority of participants (nearly 67%) reported having between one and ten sex partners, either regular or casual, in the previous six months (see Table 4.31). Around 21% had more than ten partners, and around 13% had no male sex partners at all.

Table 4.31

Number of Male Sexual Partners in the Previous Six Months

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
None	16	8.2	33	16.8	49	12.5
One	35	17.9	38	19.4	73	18.7
2-10	95	48.7	93	47.4	188	48.1
11-50	39	20.0	26	13.3	65	16.6
More than 50 men	10	5.1	6	3.1	16	4.1
Total	195	100	196	100	391	100
<i>Missing</i>	6		3		9	

Anal intercourse with casual partners

Overall, around 19% of the participants had engaged in any unprotected anal intercourse with casual partners (see Table 4.32). Of those who had casual partners, approximately 27% had some forms of unprotected anal intercourse. According to the statistics based on both the total sample and the sub-sample of men who 'currently' had a casual partner, the gay Asian men were less likely to have casual partners and to practise unprotected anal intercourse with casual partners, compared with their Caucasian counterparts.

Table 4.32

Anal Intercourse with Casual Partners

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Total sample ^a						
No casual partner	45	22.4	70	35.2	115	28.8
No anal intercourse	33	16.4	28	14.1	61	15.3
Always uses condoms	70	34.8	77	38.7	147	36.8
Sometimes does not use condoms	53	26.4	24	12.1	77	19.3
Total	201	100	199	100	400	100
Men who had casual partners ^b						
No anal intercourse	33	21.2	28	21.7	61	21.4
Always use condoms	70	44.9	77	59.7	147	51.6
Sometimes does not use condoms	53	34.0	24	18.6	77	27.0
Total	156	100	129	100	285	100

^a $\chi^2 = 17.1, p < .01$. Cohen's $e = .04$, very small effect size.

^b $\chi^2 = 9.2, p < .05$. Cohen's $e = .03$, very small effect size.

Anal intercourse with regular partners

Based on the total sample, nearly 32% of the men had any unprotected anal intercourse with regular partners in the six-month period prior to the survey (see Table 4.33). The Asian and Caucasian men did not differ in this regard. Over half of the 221 participants who reported having anal intercourse with regular partners in the previous six months (see also Table 4.33) did not use condoms consistently.

Tables 4.32 and 4.33 together clearly indicate that unprotected anal intercourse was more common with regular partners (49.4%) than with casual partners (27.5%) among those who had these partner types. Further analysis shows that there were 37 men (9.3% of the total sample) who reported having unprotected anal intercourse with both casual and regular partners in the six-month period prior to completing the questionnaire.

Table 4.33

Anal Intercourse with Regular Partners

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Total sample ^a						
No regular partner	68	33.8	75	37.7	143	35.8
No anal intercourse	15	7.5	21	10.6	36	9.0
Always uses condoms	53	26.4	41	20.6	94	23.5
Sometimes does not use condoms	65	32.3	62	31.2	127	31.8
Total	201	100	199	100	400	100
Men who had regular partners ^b						
No anal intercourse	15	11.3	21	16.9	36	14.0
Always use condoms	53	39.8	41	33.1	94	36.6
Sometimes does not use condoms	65	48.9	62	50.0	127	49.4
Total	133	100	124	100	257	100

^a $\chi^2 = 2.94$, *ns.*

^b $\chi^2 = 2.29$, *ns.*

Table 4.34 shows HIV statuses of both parties within regular relationships. As shown, most of the men who engaged in any unprotected anal intercourse were HIV negative.

Table 4.34

Condom Use for Anal Intercourse with Regular Partners by HIV Status

	Caucasian			Asian		
	Respondent's HIV status			Respondent's HIV status		
	Negative	Positive	Unknown	Negative	Positive	Unknown
No anal intercourse	12	0	3	12	1	8
Always uses condoms	43	6	1	30	0	9
Sometimes does not use condoms	53	6	5	53	0	5
Total	108	12	9	95	1	22

Note. Includes only those men who had regular relationships 'in the previous six months'.

n = 247. Caucasian = 129 (missing = 4) and Asian = 118 (missing = 6).

Table 4.35 shows engagement in unprotected anal intercourse by match of serostatus in regular relationships. 74.5% (35/47) of the gay Asian men who engaged in unprotected anal intercourse did so in the context of a sero-concordant regular relationship, whereas only 18.0% (9/50) of their Caucasian counterparts did so. The Caucasians were more likely to have engaged in unprotected anal intercourse with a sero-discordant or sero-nonconcordant regular partner than their Asian counterparts.

Table 4.35

Condom use for Anal Intercourse with Regular Partners by Match of Serostatus

	Caucasian		Asian	
	No UAI	Any UAI	No UAI	Any UAI
Sero-concordant	20	9	40	35
Sero-discordant	7	3	1	0
Sero-nonconcordant	32	38	21	12

Note. UAI = unprotected anal intercourse. Includes only those men who had regular relationships 'in the previous six months'. $n = 218$. Caucasian = 109 (missing = 24) and Asian = 109 (missing = 15).

$\chi^2 = 41.0, p < .001$. Cohen's $e = .16$, medium-to-large effect size.

Negotiated safety agreements

For those who reported having regular partners at the time of the survey, around 27% did not have any spoken agreement about sex practices (especially anal intercourse) inside their regular relationships (see Table 4.36). Nearly 29% allowed anal intercourse without condoms inside the relationship. The remaining 44% allowed no anal intercourse or anal intercourse only with condoms inside the relationship. There was no significant difference between the Asian and Caucasian men in this regard.

Table 4.36

Agreements with Regular Male Partners about Sex Practices Within Regular Relationships

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
No spoken agreement	21	19.4	38	34.5	59	27.1
No anal intercourse is permitted	10	9.3	11	10.0	21	9.6
Anal intercourse permitted only with condoms	39	36.1	36	32.7	75	34.4
Anal intercourse without condoms is permitted	38	35.2	25	22.7	63	28.9
Total	108	100	110	100	218	100

Note. Includes only those men who 'currently' had a regular partner.
Missing data: Caucasian = 19, Asian = 19.

Table 4.37 shows agreement about interactions outside regular relationships. There were no significant differences between the Asian and Caucasian men with approximately one-third having no spoken agreement and a similar proportion agreeing to all casual anal intercourse being protected.

Tables 4.36 and 4.37 together indicate that, overall, men in regular relationships were less likely to have agreements about sexual practices outside than inside the relationship. In sharp contrast to the adoption of unprotected anal intercourse within regular relationships, only one Asian and one Caucasian man permitted this practice outside the relationship.

Table 4.37

Agreements with Regular Male Partners about Sex Outside of Relationships

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
No spoken agreement	37	34.3	45	40.9	82	37.6
No sexual contact with casual partners is permitted	30	27.8	18	16.4	48	22.0
No anal intercourse with casual partners is permitted	8	7.4	8	7.3	16	7.3
Anal intercourse permitted only with condoms	32	29.6	38	34.5	70	32.1
Anal intercourse without condoms is permitted	1	0.9	1	0.9	2	0.9
Total	108	100	110	100	218	100

Note. Includes only those men who 'currently' had a regular partner.
Missing data: Caucasian = 19 and Asian = 19.

'Negotiated safety' has been specifically defined by the following conditions: being in a concordant-negative regular relationship; having a clear, spoken agreement which permits unprotected anal intercourse within the relationship and having a clear spoken agreement which only allows *safe* practices outside the relationship, that is, no casual partners or sex at all, no casual anal intercourse *or* always protected, casual, anal intercourse (Kippax et al., 1997; Van de Ven et al., 1999).

Table 4.38 shows numbers and percentages of men who reported practising negotiated safety or otherwise. The data show that of the men who had regular partners at the time of the survey, one-third had agreements

which did not allow unprotected anal intercourse either within or outside of their relationships. Only 15.0% (31 men) reported adopting negotiated safety agreements. There were no significant differences between the Caucasian and Asian groups. Separate analyses of the responses of the 31 men who entered into negotiated safety agreements indicated that 24 reported practising negotiated safety in accord with their agreements.

Table 4.38

The Practice of Negotiated Safety in Relation to Agreements with Regular Partners or Otherwise

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
No agreements	35	34.7	49	46.2	84	40.6
Agreements which do not allow unprotected anal intercourse in any situation	34	33.7	35	33.0	69	33.3
Negotiated safety	18	17.8	13	12.3	31	15.0
Unsafe agreements	14	13.9	9	8.5	23	11.1
Total	101	100	106	100	207	100

Note. Includes only those men who 'currently' had a regular partner.

Missing data: Caucasian = 100 and Asian = 93.

$\chi^2 = 4.12$, *ns*.

Risk practice

In this study, 'risks' lie in situations where gay men have any unprotected anal intercourse with casual partners only, with both regular and casual partners concurrently, or with regular partners whose HIV status is not sero-negative concordant with their own (Crawford et al., 2001). Using this risk calculus of taking both partner types and the HIV statuses of participants and their regular partners into account, it was found that 76% of gay men in the total sample practised safe sex and 24% of the men took various degrees of risk (see Table 5.29, where the outcome variable, 'risk', is divided into mutually exclusive categories, namely, 'no risk' and 'some risk'). There is a significant difference between the Asian and Caucasian men in terms of risk. The Asian men as a group took fewer risks than the Caucasian men.

Table 4.39

Risk Practice in Male-to-Male Sex

	Caucasian		Asian		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
No risk	140	69.7	164	82.4	304	76.0
Some risk	61	30.3	35	17.6	96	24.0
Total	201	100	199	100	400	100

$\chi^2 = 8.93, p < .01$. Cohen's $e = .02$, very small effect size.

Discussion

Participants in the survey were mostly recruited through gay social venues. The majority had lived in Australia for at least five years and over half had lived in Sydney for at least five years. Moreover, the majority were gay or homosexually self-identified and gay community attached. The median age of the Caucasian group was six years above that of the Asian group. In terms of attachment to ethnic communities in Australia, over one-third of the Asian participants did not feel attached to local ethnic community at all. More than a third of the Asian men had spent little or no time with other gay Asian men and around two-thirds had never had another Asian man as a sex partner.

The factor analyses, MANOVA, effect size calculations and zero-order correlations have provided evidence of differences between the gay Asian and Caucasian men. Specifically, the results suggest the relative importance of specific groups in relation to individualism-collectivism and social cognitive parameters.

The Asian men scored significantly higher than the Caucasian men in social harmony with family members, but lower than the Caucasian men in social harmony with both close friends and colleagues. It seemed that the Asian men tended to emphasise social harmony with family members but less so with close friends or work colleagues. This may partly reflect collectivists' inclination to differentiate in-groups from out-groups (Triandis, 1995).

The Asian men scored significantly higher in self-efficacy in condom use with casual partners, but did not differ from the Caucasian men in self-efficacy in risk avoidance with casual partners. Interestingly, the gay Asian participants did not score significantly lower in terms of the social cognitive variables than their Caucasian counterparts.

The cross-tabulation and Chi-square statistics indicate that the gay Asian and Caucasian groups shared some common characteristics. In terms of gay community attachment, the overall sample showed that nearly half felt strongly attached to local gay community, had a large proportion of gay friends and spent a lot of free time with gay men. Moreover, the majority of both the Asian and Caucasian participants had disclosed their homosexual identity to their gay friends. Among those who were sexually active with men at the time of the survey, approximately 30% were monogamous, approximately 30% had casual partners only and the remaining 40% or so had both casual and regular partners. Moreover, among those who were in a regular relationship at the time of the survey, around 60% had been in their relationship for at least one year. Also nearly one-third of those who were in a regular relationship at the time of the survey did not know their regular partner's HIV status. The majority of those who knew their regular partner's HIV status had an HIV negative regular partner. Approximately two-thirds of the participants reported having sex with a regular partner in the six months prior to the survey and approximately one-third reported unprotected anal intercourse with a regular

partner. Overall, unprotected anal intercourse was more common with regular partners than with casual partners. In terms of negotiated safety, agreements about sexual practices within regular relationships were more likely than agreements about sex outside of such relationships. Close to a half of those who were in a regular relationship at the time of the survey had safe sex agreements (including negotiated safety agreements and agreements not to allow unprotected anal intercourse under any circumstance).

The cross-tabulation and Chi-square statistics also indicate that the gay Asian and Caucasian men differed in some respects. Compared to their Caucasian counterparts, fewer gay Asian men had disclosed their homosexuality to others. Over one-fifth of the Asian men had not had an HIV test, which was significantly higher than the Caucasian men. Compared to their Caucasian counterparts, the Asian men who engaged in unprotected anal intercourse with regular partners were more likely to have done so in the context of sero-concordance rather than sero-discordance or sero-nonconcordance. Gay Asian men had fewer casual partners than their Caucasian counterparts. The Asian men who had casual partners engaged proportionately in less unprotected casual anal intercourse than the Caucasian men. From the univariate results, gay Asian men were as a group 'safer' than gay Caucasian men.

Chapter 5

Logistic Regression Models of Risk Factors for Gay Asian and Caucasian Men

Introduction

This chapter reports on logistic regression analyses of the factors independently associated with sexual risk practices of gay Asian and Caucasian men.

Apart from the perspectives of individualism-collectivism, social cognitive variables and gay community attachment indices (as reported in the literature review, Chapter 2), there are other risk factors in relation to sex practices among gay men. The most significant factors reported in the literature are age, partner types, and HIV serostatus and disclosure (Buchanan et al., 1996; Mansergh & Marks, 1998; Van de Ven, Prestage, Knox et al., 2000).

There are mixed findings regarding whether younger gay men are more prone to risk-taking than older gay men. For example, some studies, especially those conducted in North America, have found an 'age effect' and concluded that younger gay men are more likely to seroconvert (become HIV positive) than their older counterparts (Mansergh & Marks, 1998). Davidovich and colleagues (2001) found that for younger gay men, HIV seroconversion was more likely to occur in regular relationships, whereas, for older gay men it was more likely to occur in casual encounters. However, studies involving gay men in Sydney have consistently found no age effect. Van de Ven,

Nobel et al. (1997) and Van de Ven, Rodden et al. (1997) found that although older gay men (over 49 years) are less likely to engage in anal intercourse than younger gay men (under 30 years), there was no significant difference between the two groups in the rates of condom use for anal intercourse with either regular or casual partners. They suggested that younger gay men in Sydney should not be regarded as taking more risks than their older counterparts (Van de Ven, Noble et al., 1997; Van de Ven, Rodden et al., 1997).

Previous research involving gay men has suggested that there are distinctive patterns of condom use associated with partner (relationship) types. Specifically, condoms are more likely to be used during casual encounters than within regular relationships, especially when the regular relationship is perceived by both sides to be monogamous (Bosga et al., 1995; Buchanan et al., 1996; Prestage, Kippax, Van de Ven et al., 1996). If negotiated safety is practised with regular partners, HIV transmission is least likely between two confirmed HIV sero-negative partners who have no unsafe sex outside of the relationship (Kippax, Crawford et al., 1993; Kippax et al., 1997).

In terms of the relationship between HIV testing and safe sex behaviour, Van de Ven, Prestage, Knox and Kippax (2000) found that among gay men in Sydney there was no significant difference between those who had HIV test results and those who did not in terms of sex practices,

especially the practice of unprotected anal intercourse. However, there was evidence that those who had HIV tests were more likely to be gay community attached compared to those who had not had an HIV test (Van de Ven, Prestage, Knox et al., 2000).

In addition to HIV testing, the disclosure of one's HIV status to others, especially to regular partners, is crucial in order to establish a sero-concordant relationship (HIV negative with an HIV negative partner, in particular) and to practise negotiated safety so that the risk of HIV transmission within regular relationships is minimised while 'intimacy' is maximised (Kippax, Crawford et al., 1993; Kippax et al., 1997; Rhodes & Cusick, 2000).

Based on the conceptual framework, other research described above and previous results of this study, sexual risk of gay Asian and Caucasian men in Sydney was explored in logistic regression analyses.

Data analysis

The logistic regression analysis was applied with 'risk' ('no risk' versus 'some risk') as the dichotomous variable. Risk was calculated by taking into account: relationship types (regular, casual or regular plus casual relationships); duration of the relationship; sero-negative concordant HIV status between the participant and his regular partner; adoption of negotiated safety and unprotected anal intercourse with casual and regular partners (Crawford et al., 2001; Kippax et al., 1997).

Based on the theoretical framework and previous research findings, especially the univariate results of the survey data in this study, chosen independent variables were entered into the initial model using the forced-entry method (Studenmund & Cassidy, 1987). There were 21 variables in the initial model for the pooled sample. The variables were entered in the following hierarchical order: age; length of residency in Australia and length of residency in Sydney; eight standardised scores of individual-collectivism measurements (two factors from the 'family' group followed by three from the 'close friends' and three from the 'colleagues' group); gay community attachment variables (proportion of gay friends, amount of time spent with gay friends and sense of gay community attachment); self-identification (gay versus non-gay identified); disclosure of homosexuality to others (disclosed versus not disclosed to anyone); four standardised scores of social cognitive variables (two factors of self-efficacy in relation to casual sex followed by outcome expectancies in condom use and self-efficacy in negotiated safety in relation to regular relationships) and family ethnic background. It should be noted that the cross-cultural measures were arranged in an order so that the social group 'family' was followed by the 'close friends' group and then the 'colleagues' group. The logic of this order was based on the theory and the correlation coefficients analyses for these cultural measures that suggested hierarchical relationships (see Chapter 4). That is, in general, family members could be expected to be the closest to individuals, with close friends

next, followed by colleagues. Interactions between seven variables ('age', 'social harmony with family', 'proportion of gay friends', 'amount of time with gay friends', 'sexual identity disclosure', 'self-efficacy in the practical use of condoms with casual partners' and 'self-efficacy in risk avoidance with casual partners') and 'ethnicity' were entered into the initial model of the pooled sample after the 21 single variables (see Table 5.1). These seven interactions were chosen on the basis of the focus group discussions and the univariate results from the survey. A hierarchical testing method was used to produce a reduced model of significant variables and interactions (Menard, 1995).

Results

Table 5.1 shows the initial hierarchical model including the 21 variables plus seven interactions. In this pooled-sample model, seven variables were significant. Of the seven, five were single variables: age, social harmony with close friends, social harmony with colleagues, self-efficacy in the practical use of condoms with casual partners and self-efficacy in risk avoidance with casual partners. There were two significant interactions: ethnicity by age and ethnicity by self-efficacy in risk avoidance with casual partners.

Table 5.1

Initial Logistic Model of Sexual Risk Practice for the Pooled Sample of Gay Asian and Caucasian Men ($n = 383$)

Variables	Adjusted odds ratio	95% CI	<i>p</i>
Age	0.95	0.91–0.99	*
Length of residency in Australia	1.24	0.91–1.70	<i>ns</i>
Length of residency in Sydney	0.88	0.66–1.17	<i>ns</i>
Social harmony with family	0.80	0.52–1.25	<i>ns</i>
Social identity with family	0.82	0.45–1.50	<i>ns</i>
Social harmony with close friends	0.57	0.35–0.91	*
Social identity with close friends	1.33	0.67–2.68	<i>ns</i>
Self-sacrifice for close friends	1.05	0.71–1.55	<i>ns</i>
Social harmony with colleagues	1.73	1.13–2.66	*
Social identity with colleagues	1.07	0.66–1.76	<i>ns</i>
Self-sacrifice for colleagues	1.02	0.70–1.50	<i>ns</i>
Proportion of gay friends	1.49	0.82–2.71	<i>ns</i>

table continues

Variables	Adjusted odds ratio	95% CI	<i>p</i>
Amount of time spent with gay friends	1.56	0.76–3.22	<i>ns</i>
Sense of gay community attachment	0.74	0.45–1.21	<i>ns</i>
Gay identification	0.91	0.36–2.29	<i>ns</i>
Sexual identity disclosure	0.66	0.05–7.94	<i>ns</i>
Self-efficacy in the practical use of condoms with casual partners	1.60	1.02–2.51	*
Self-efficacy in risk avoidance with casual partners	0.38	0.25–0.57	***
Outcome expectancies in regular partners' reluctance to condom use	1.14	0.85–1.53	<i>ns</i>
Self-efficacy in negotiated safety with regular partners	0.03	0.77–1.44	<i>ns</i>
Ethnicity	0.03	0.00–1.83	<i>ns</i>
Ethnicity x age	1.09	1.01–1.17	*
Ethnicity x social harmony with family	0.92	0.54–1.57	<i>ns</i>
Ethnicity x proportion of gay friends	1.23	0.50–3.02	<i>ns</i>
Ethnicity x amount of time with gay friends	1.15	0.43–3.09	<i>ns</i>

table continues

Variables	Adjusted odds ratio	95% CI	<i>p</i>
Ethnicity x sexual identity disclosure	0.33	0.01–11.78	<i>ns</i>
Ethnicity x self-efficacy in the practical use of condoms with casual partners	0.45	0.25–0.82	*
Ethnicity x self-efficacy in risk avoidance with casual partners	1.53	0.86–2.70	<i>ns</i>

Note. *ns* not significant. **p* < .05. ****p* < .001

Table 5.2 shows significant variables and interactions that were retained in the reduced pooled-sample logistic model (Nagelkerke $R^2 = .25$). In the model, there were two highly significant factors, *Self-Efficacy in Risk Avoidance with Casual Partners* and *Proportion of Gay Friends*. This suggests that those who were more self-efficacious in avoiding risk situations in casual encounters and those who had fewer gay friends were less likely to have taken risks, and vice versa.

The two cross-cultural variables, *Social Harmony with Close Friends* and *Social Harmony with Colleagues*, were associated with risk taking in opposite directions. As expected, valuing harmony with close friends (such as to respect and honour others' traditions and customs, to be loyal, to respect others, to maintain harmony, to nurture or help others and to maintain relationship stability) was associated with reduced risk. Somewhat surprisingly, valuing harmony with work colleagues was associated with increased risk, after other variables in the model were accounted for.

As two significant interactions were found in the pooled model, namely, *Ethnicity by Age* and *Ethnicity by Self-Efficacy in the Practical Use of Condoms with Casual Partners*, separate logistic analyses for the Asian and the Caucasian groups were justified. There were 20 independent single variables (i.e., excluding 'ethnicity') followed by the above two significant interactions in the initial models for each separate sample. The analytical procedures (as above) were repeated.

Table 5.2

Reduced Logistic Model of Sexual Risk Practice for the Pooled Sample of Gay Asian and Caucasian Men ($n = 392$)

Variables	Adjusted Odds Ratio	95% CI	p
Social harmony with close friends	0.65	0.46–0.91	*
Social harmony with colleagues	1.57	1.10–2.24	*
Proportion of gay friends	2.01	1.39–2.89	***
Self-efficacy in risk avoidance with casual partners	0.53	0.41–0.69	***
Ethnicity x age			*
Asian	1.04	0.98–1.10	<i>ns</i>
Caucasian	0.95	0.91–0.99	**
Ethnicity x self-efficacy in the practical use of condoms with casual partners			*
Asian	0.70	0.48–1.02	<i>ns</i>
Caucasian	1.27	0.89–1.81	<i>ns</i>

Note. *ns* not significant. * $p < .05$. *** $p < .001$.

Table 5.3 shows the two separate logistic models for gay Asian and Caucasian men. The model for the gay Asian men (Nagelkerke $R^2 = .18$) shows that having fewer gay friends was associated with reduced risk and lower self-efficacy in risk avoidance with casual partners and lower self-efficacy in the practical use of condoms with casual partners were associated with increased risk. In the model for the gay Caucasian men (Nagelkerke $R^2 = .26$), lower self-efficacy in avoiding casual risk practice was associated with increased risk, whereas, more harmonious relationships with close friends, less harmonious relationships with colleagues and fewer gay friends were associated with reduced risk. For the Caucasian men alone, younger age was associated with increased risk.

In sum, each final model was minimally adequate, that is, the variables retained in the reduced models explained as much of the variation in 'risk' as the full set.

Table 5.3

Reduced Logistic Models of Sexual Risk Practices of Gay Asian and Caucasian Men

Variables	Adjusted odds ratio	95% CI	<i>p</i>
Gay Asian men (<i>n</i> = 198)			
Proportion of gay friends ^a	2.50	1.42–4.41	**
Self-efficacy in risk avoidance with casual partners ^a	0.64	0.45–0.92	*
Self-efficacy in the practical use of condoms with casual partners	0.64	0.44–0.92	*
Gay Caucasian men (<i>n</i> = 199)			
Proportion of gay friends ^a	1.80	1.12–2.89	*
Self-efficacy in risk avoidance with casual partners ^a	0.48	0.34–0.68	***
Age	0.95	0.91–0.98	**
Social harmony with close friends	0.63	0.41–0.97	*
Social harmony with colleagues	1.69	1.07–2.65	*

^a Common factors for both groups.

p* < .05. *p* < .01. ****p* < .001.

Discussion

The univariate and the multivariate analyses suggested that perspectives of individualism-collectivism such as valuing social harmony, ratings of self-efficacy and markers of gay community attachment, to some extent, were associated with gay men's sexual risk practice. The logistic models provided evidence that for both the gay Asian and Caucasian men, greater self-efficacy in avoiding risky casual practices was associated with diminished risk and a greater proportion of gay friends was associated with heightened risk. This suggests that HIV educational programs will continue to benefit from increasing awareness, confidence and ability to effectively deal with situations that could lead to casual, unprotected, anal intercourse. Contrary to findings from an earlier period in the epidemic when gay community attachment was a strong indicator of safe sex (Kippax et al., 1992; Kippax, Connell et al., 1993), in the study, a marker of gay community attachment (proportion of gay friends) was associated with increased risk.

For the gay Asian men, increased levels of self-efficacy in risk avoidance with casual partners and increased levels of self-efficacy in the practical use of condoms with casual partners were related to decreased levels of risk taking. Educational programs that cater for gay Asian men should continue to emphasise raising self-efficacy levels. For the Caucasian men, besides self-efficacy in avoiding risky casual encounters, the logistic models included some unexpected results in terms of individualism-

collectivism variables. As expected, valuing harmony with close friends was associated with decreased risk. Somewhat surprisingly, valuing harmony with work colleagues was associated with increased risk, after other variables in the model were accounted for. A possible explanation is that when responding to the cross-cultural value scales (Section A in the questionnaire), some participants may have linked the general cultural values with the specific context of sex, given that at the beginning they were told that the survey investigated their homosexual orientation and practices. For example, they may have interpreted the concept of relational harmony in association with the possibility of potential sexual contact with others. Hence, a possible explanation for the results is that care and concern for close friends alone could outweigh any individual tendency to take risks, whereas, heightened concerns for colleagues, who are usually regarded as less important than family members and close friends, may not interfere with the individual practice of safe sex. Overall, in this study, self-ratings of self-efficacy in risk avoidance in casual encounters appeared to be the best predictor of risk avoidance.

This study indicated that for the Caucasian men alone, younger age was related to increased sexual risk. This is at odds with the previous findings of Van de Ven, Rodden et al. (1997). They found no age effect amongst Sydney gay men based on much larger samples over a long period of time and on separate analyses of risk taking with casual and regular

partners. The discrepant finding may be due to the different calculations of risk in the two studies, as this study combined risk taking with both regular and casual partners. Alternatively, it may be attributable to the more homogeneous sample with less variability in this study than previous ones.

Chapter 6

Individual Perspectives of Homosexuality and Safe Sex

Introduction

This chapter reports on individual interviews with 10 Caucasian and 9 Asian participants. The interview data strengthen and throw new light on the previous findings drawn from the focus group discussions and the survey.

Following the focus groups and the survey, in-depth one-to-one interviews were conducted so that these research findings could be further investigated. Some previous findings pointed to a potential link between gay community attachment, vicarious learning and safe sex practice, which was explored in the interviews.

Method

Recruitment

Those who had previously completed the questionnaire and left their contact details for further co-operation with the researcher were contacted by phone and they formed the majority of the interview group. Some peer education officers of ACON offered the researcher opportunities to recruit the rest of the interviewees during their educational sessions. All participants were recruited on a volunteer basis with no reward.

Participants

There were 10 participants of various Caucasian backgrounds and 9 of various Asian backgrounds (see Appendix M). To avoid common method variance, none of them had participated in the earlier focus groups. Of the Caucasian participants, five were born in Sydney, two in other regions of New South Wales, two in Perth, Western Australia and one in Melbourne, Victoria. One man, self-identified as Caucasian, was also part Aboriginal and part Scottish. Among the Asian participants, seven had South-East Asian backgrounds (including three of Indo-Chinese origin), another one from China and the remaining one from India. Due to the cultural complexities of Turkey and more importantly, to maintain a consistent profile of participants' ethnic backgrounds throughout the study, a Turkish participant was excluded from subsequent data analysis. Among the 19 participants, seven were aged between 20-30 years, seven between 30-40 years and five above 40 years. Their lengths of residency in Sydney ranged from half a year to 49 years. All of the Asian participants had been living in Sydney for at least three years, either continuously or intermittently. One Asian participant was born in Sydney and was a second-generation Asian Australian and the other eight Asian men were first-generation immigrants.

Procedure

The interviews were carried out in November and December 2001. Participants were asked to sign a consent form (see Appendix J), which gave a brief introduction to the study and outlined the content of the interview questions. The participants were informed in advance that the interview process would be audio taped and were further assured of confidentiality before the commencement of the interview. The interview protocol (see Appendix L) was semi-structured and consisted of questions relating to factors that had emerged from analyses of the survey data, which allowed interviewees to inject their own understandings and interpretations into these research findings (Minichiello, Aroni, Timewell & Alexander, 1995; Shiner & Newburn, 1997).

The major themes in the protocol were risk-taking in terms of age and ethnicity differences, self-efficacy beliefs and sexual practices with regular partners and in relation to casual encounters, interpersonal relationships, gay community attachment and ways of acquiring information and learning various skills, which were the key themes that emerged from the focus groups and the survey. This protocol allowed the researcher some flexibility during individual interviews to not only focus on the major themes but also to explore emerging perspectives. Each interview lasted between 40 and 90 minutes. Participants negotiated with the researcher a venue where they felt comfortable being interviewed. Eleven chose to be interviewed in their own

home, two in an interview room at ACON, two at their workplaces, one inside his car, one at his friend's home, one at a cafe and one in a park.

Data analysis

The interviews were audio taped and transcribed verbatim immediately afterwards. All information that could identify the interviewees were eliminated from the transcripts and the consent forms were kept separate from the transcripts. These transcripts were then analysed using the qualitative analysis software *Nvivo*. A tree-node coding system (see Appendix N) was established on the basis of the theoretical framework, the logistic results and novel perspectives from the interviews. Thirteen major nodes were established: Sydney gay community, risk taking, safe sex attitude, casual partners, regular partners, HIV testing, coming out, concern for and support from others, working environment, information acquisition, gay Asian men, gay friends, and drugs, alcohol and sex. All 19 transcripts were coded consistently by the researcher, based on the theoretical framework and findings from the focus groups and the survey.

Results

The results are presented under five sub-headings (see Table 7.1), namely, the cross-cultural dimension, the intra-personal dimension, gay community influences, gayness, 'Asianness' and identity conflict and risk.

Table 6.1

Major and Subordinate Themes of Individual Interviews

Major themes	Subordinate themes
Cross-cultural dimension	Friendship Work environment Support
Intra-personal dimension	HIV test Unprotected anal intercourse with regular partners; negotiated safety and communication with regular partners Unprotected casual anal intercourse and communication with casual partners Safe sex and condoms, fear of HIV/AIDS, impact of new treatments, importance of anal sex and regular versus casual partners Information acquisition and ways of learning Substance use in relation to sex

table continues

Major themes	Subordinate themes
Gay community influences	Gay events and gay scenes Sydney gay community Personal experience of gay community Gay and the wider community
Gayness, 'Asianness' and identity conflict	Self-identification Disclosure to family members Disclosure to significant others Impact of culture, religion and regional differences Gay Asian men and positions of disadvantage Asian gay community and its growing visibility
Risk	Asian and Caucasian Younger and older Individual and collective

Cross-cultural dimension:

Friendships

The majority of participants maintained a mix of straight and gay friends from different social groups, workplaces and gay communities. However, for most men their close friends were gay. The participants felt, in general, that they shared more common elements or interests with gay friends than with straight friends.

In terms of straight friends, I count some of my colleagues as my friends....I guess probably I won't really have close straight friends, to put in that way....Even though when you are with close friends who happen to be straight you never know what kind of boundaries they have. You don't want to make them uncomfortable. So I guess in that sense, I'm not really close to my straight friends. I don't want to cause them any uneasiness for something [that] can't be talked about with them. [Ji, 32, Asian]

Most of my close friends, indeed, all my close friends are gay here—I'm talking about in Sydney—because we do understand each other about how we feel and a lot of things we don't have to hide. [Od, 34, Asian]

Initially we had talked about coming out and how you felt about it. That really bounds you with people because you've got so much in common in that way. Then as we moved along, we've found more things in common. We might like this kind of music or that kind of sport. [Lu, 21, Caucasian]

Some participants such as Le (45, Asian) found that friendships with 'drinking buddies' at gay bars in the Oxford Street area were far less 'rewarding' than those built through social functions such as peer educational groups. Others found that some gay friendships had the potential to develop into sexual relationships. Several participants had HIV positive friends or lived with someone who was HIV positive.

Seven Caucasian participants had gay Asian friends, although they were not necessarily close friends. However, only three Asian participants had fellow gay Asian friends and two of these were close friends with each other. In socialising with close friends, most participants enjoyed doing and sharing things together. Some counselled each other at difficult times. Others like Ad (26, Caucasian) and Rh (28, Asian), both being gay and

sharing a house together, tried to be 'matchmakers' for each other. Iw (39, Asian) and Od (34, Asian) commented that when they first arrived in Sydney they were grateful to have friends who introduced them to the new environment. Some interviewees stressed that peer pressure from close friends could be positive as well as negative. They suggested that if with a 'bad crowd', one was more likely to develop bad habits and not be able to resist negative peer pressure, whereas, with a 'good crowd', one was more likely to get support and positive guidance.

Because you are around them so much socially, whatever, you're influenced by them. It's hard to say "no" when you are exposed to different things. You don't want to do it but if you've got that peer pressure, of course, it intensifies [it] a bit. So I definitely choose to associate with certain people because I didn't feel that pressure....I went through like somebody you couldn't trust. Then, whatever you can tell that you are into a bad crowd. That influenced you. Then I realised it's not the best thing as far as drug taking and alcohol, that kind of things....So I moved up and find a bit of support group like The Fun and Esteem in the last four years. We get really close. [Lu, 21, Caucasian]

Work Environment

In the workplace, some like Ad (26, Caucasian) felt distanced from or alienated by 'straight' colleagues who were often judgemental. Others like Le (45, Asian) felt there were always differences between 'them' and 'us'. As far as coping strategies within the work environment were concerned, Ji (32, Asian) tended to 'act straight' so that other people would not feel threatened, and De (32, Caucasian) made clear distinctions between work and private life.

Of course, I'm not a threatening gay, because at work I'm quite straight acting. I guess it's probably not a threatening thing for my work colleagues to face it everyday. Maybe that's the reason why it is kind of 'gay friendly'. [Ji, 32, Asian]

Although the majority felt the work environment quite accepting, three participants considered that they did encounter discrimination at their workplaces. Two, Pe (49, Caucasian) and Se (31, Caucasian), had successfully dealt with it under the anti-discrimination policy in their company or organisation. Some participants like Al (45, Asian), Iw (39, Asian) and Od (34, Asian) found that some industries, such as the hospitality industry, were better than others.

I work for a large company and if there is any discrimination, people will be fired....One person has been counselled about it. Intolerance is not tolerated in my working environment. My management is very supportive to build a diverse environment....There are a couple of gay people working in this area. [Se, 31, Caucasian]

Support

Organisational support was often remarked upon by the participants as professional, resourceful and accessible and it was usually spoken of as the most reliable source upon which these gay men could rely if they needed help. Three organisations—ACON, the Gay and Lesbian Counselling Service and Sexual Health Clinics—were frequently mentioned. According to the participants, these organisations provided information and advice on safe sex through various channels such as pamphlets, phone counselling, condom supply and peer support programs. Some also served as an introductory

channel to gay community, for example, Od (34, Asian) mentioned the Silk Road (one of ACON's project for gay Asian men). Some participants such as Mi (20, Asian) found the voluntary sharing of personal experiences during the peer educational program sessions especially beneficial.

Like, say, in regards to coming out, I'm out and if I meet someone who's not out yet, I'm going to tell him my experience and I'm going to advise him what to do, when is the right time to come out and stuff like that. So basically we just help each other from the past experience. [Mi, 20, Asian]

However, confidentiality of information still worried some participants.

For example, Ad felt the following:

Confidentiality is a problem sometimes. (WHAT DO YOU MEAN?) I find facilitators gossiping...I'd be very careful about who I talk to...because there seem to be so many loose lips. [Ad, 26, Caucasian]

Most of the participants mentioned that medical support usually came from local General Practitioners (GPs). Most of the GPs were gay-friendly and most of them were actually chosen by or referred to the participants because of their gay-friendly attitude. Some like Pe (49, Caucasian) trusted this kind of 'specialist' service and De (32, Caucasian) liked to discuss issues such as erection problems with his GP but not anyone else. However, some like Mi (20, Asian) did not like to disclose their homosexuality to doctors.

In terms of social networks, the majority described having many acquaintances but few friends (Ad, 26, Caucasian).

I wouldn't say I have many gay friends or I would expect better assistance. That's the nature of the gay social life [that] you have many acquaintances but a few friends. [Ad, 26, Caucasian]

To further investigate how these HIV negative gay men felt about support, they were asked to respond to a hypothetical question: “Who would be the one that you would ask help from if you become HIV positive one day?” Among the responses, besides organisational and medical services mentioned earlier, most responded that they would seek help from their close gay friends.

Knowing them, I think they’ll be very supportive because people here are supportive and aren’t really negative all the time. The majority would be good about it. Yes, I’m sure they’ll be upset. They’ll ask what happened and what I did wrong. But across the board, they’ll be mostly supportive. [Lu, 21, Caucasian]

Some even mentioned their HIV positive gay friends who already had some experiences in dealing with the disease (e.g., Br, 25, Caucasian). Du (28, Asian) was particularly worried about contracting HIV as he did not have a reliable friendship network. Five participants, however, said that they would be very cautious, or even reluctant, to tell their family members, as realising someone in the family was HIV positive was only going to add another ‘burden’ to other family members (Od, 34, Asian).

(HOW ABOUT YOUR FAMILY?) They’ll be heart-broken. They’ll be extremely worried and concerned. That will be the last thing I’ll tell them. (HOW ABOUT YOUR PARTNER AND CLOSE GAY FRIENDS?) For my close friends, I’m more inclined to tell them. They’ll be more understanding, of course. You’ll tell your partner too. [Rh, 28, Asian]

I’m not sure I’ll tell my mother. I might not tell mum. I might not tell anyone in the family initially anyway. [St, 40, Caucasian]

Intra-personal dimension

HIV Test

For those who had a regular, male, sexual partner at the time of the interviews, the majority, to their knowledge, had established a sero-negative concordant relationship. When asked about the main concerns about having an HIV test, regardless of being tested or not, the majority mentioned that they had experienced certain anxiety over having an HIV test and knowing the result.

So basically I just don't want to face the reality. Not that I think I would be positive. But it's the psychological block in my head. There's fear like that you'd think to yourself: "Oh, my God, I may." By doing the test, it might just confirm it. Personally I try to deny the bad things in my life. [Ji, 32, Asian]

There was an accident happened between my boyfriend and I [where] the condom actually broke. I was petrified....I didn't sleep. I freaked out. I came here [ACON] the next day and got information about where to go to have a test. I went down to have the test...I went back three months later to have another test....When I was waiting for the result, I was petrified. I was actually crying and was really upset when I was there waiting in the doctor's room for my result....It turned out [that] everything was OK and I was safe. But the waiting time was just horrible. [Du, 28, Caucasian]

It seemed quite common among the participants that when they had an unsafe sexual incident or a condom accident, they would go for an HIV test to make sure that they were not infected.

I know I had been careless and afterwards I paid the price [because] I was worried and concerned. I was anxious about it so I had an HIV test in six weeks' time and tested everything. [Pa, 39, Asian]

Ad (26, Caucasian) remembered times when he was extremely worried about a penile infection and a feverish episode after incidents of unprotected anal intercourse, which, in the end, turned out not to be HIV infection. The one-week waiting period for the HIV test result usually put the participants in a somewhat panicked mood, as they knew that although unlikely, a positive HIV test result could happen.

Most of the Caucasian participants had HIV tests and regarded having an HIV test as a health check-up so that they could “make sure everything is OK.” (Br, 25, Caucasian & Co, 26, Caucasian) While some felt it a “personal responsibility” to have HIV tests (Pe, 49, Caucasian), others like Lu (21, Caucasian) tended to have an HIV test before the commencement of a new relationship or after the end of an old relationship. Some who tended to have regular HIV tests revealed that it was partly under peer influence. For example, Lu (21, Caucasian) thought: “Everybody does it”. Others were advised by their local GPs.

(WHAT MAKES YOU GO TO HAVE HIV TESTS?) [It is] just a normal procedure for me, at least every year or so. I’ve got a good GP....He’s very particular about me doing it regularly. [Al, 45, Asian]

For some of the Asian men, having an HIV test was compulsory before or after they arrived in Australia (Ji, 32, Asian & Od, 34, Asian). Two Asian participants Rh (28, Asian) and Mi (20, Asian) had not had an HIV test. Rh (28, Asian) just assumed that his HIV status was negative:

[It is] pretty scary. Probably I should have a test. I've always thought that I should. But the fact is that sometimes I did have a couple of casual occurrences, but not many at all. [Rh, 28, Asian]

Some participants tended not to have regular HIV tests as they estimated their risk levels to be low as they were in a regular relationship, had limited sexual partners, or always practised safe sex.

(DO YOU CHECK IT REGULARLY?) No, I haven't because [I have] very limited sexual partners and it's always safe sex. Since that time, I only had three long-term partners. [Co, 26, Caucasian]

Unprotected Anal Intercourse with Regular Partners, Negotiated Safety and Communication with Regular Partners

As expected, unprotected anal intercourse was more commonly reported within regular relationships. Some participants like Co (26, Caucasian) followed the steps and practised negotiated safety according to ACON's recommendations. That is, they had an HIV test, waited for the three months window-period to pass, had another HIV test, talked about sexual practices within and outside of the relationship and abandoned condoms for anal intercourse with their regular partner thereafter. But most participants managed to abandon condoms within regular relationships in less methodical, more self-justified, ways. While some took risks in regular relationships by having unprotected anal intercourse outside of negotiated safety, others behaved safely. They either always used condoms during anal intercourse (e.g., Br, 25, Caucasian and Iw, 39, Asian) or abstained from or reduced the

frequency of anal intercourse (e.g., Rh, 28, Asian and Mi, 20, Asian). Overall, the 'safety rules' seemed to be the most difficult to maintain within an open regular relationship, compared to a monogamous one. Du (28, Caucasian) reported that sometimes when having 'threesomes' he and his boyfriend practised unprotected anal intercourse with a third party of unknown HIV status. On those occasions, although they knew their own HIV status to be negative, they found it difficult to maintain the safety rules when a third party was introduced. Pa (39, Asian) and his Caucasian boyfriend maintained an open relationship. Realising that it was always possible to have a few 'slips' outside the relationship, they refrained from casual anal intercourse and maintained condom use within the relationship. One participant reported having contracted a sexually transmissible infection (STI) from his regular partner, which was the 'last straw' in that relationship (St, 40, Caucasian).

In terms of communication with one's boyfriend, the word 'trust' was frequently mentioned. Some participants described themselves as communicative or assertive so that there would be "no rumours and secrets" within their regular relationships (e.g., De, 32, Caucasian). Others were not really outspoken about sex issues. For example, within some relationships, both parties were so familiar with each other that they "knew what to do" (Ke, 35, Asian). Whereas, for others, there were some "unwritten rules" to which both parties consented (Ji, 32, Asian).

(IS THERE ANY AGREEMENT?) We haven't talked about it. That's like we have an understanding that we are together now and so we'll devote our time and our sexual practices to each other. That was the unwritten rule or we understand that was the case....So we didn't engage [in] other sexual activities with other parties. We weren't in an open relationship. We were in a closed one. [Ji, 32, Asian]

But some participants like Du (28, Caucasian) found it difficult to negotiate with their regular partners for fear that they might lose the relationship.

Unprotected Casual Anal Intercourse and Communication with Casual Partners

In contrast to the high frequency of unprotected anal intercourse within regular relationships, anal sex with casual partners was less likely to be unprotected, according to most interviewees. Although five participants out of 19 reported instances of unprotected casual anal intercourse, in terms of their attitudes toward sex with casual partners, the majority stated that they had 'no casual sex' if they were in a monogamous relationship, had a few casual encounters, had 'no casual anal intercourse', practised 'more oral than anal' sex with casual partners or 'always protected casual anal intercourse'. Almost all of the participants were attuned to the risk of HIV infection through unprotected, casual anal intercourse. According to Le (45, Asian), at some gay cruising venues people were so scared of HIV/AIDS that they limited most of their casual practices to masturbation or oral sex. He also said that

there was hardly any casual anal sex at all, as more people were trying to find long-term partners. On the other hand, some participants recalled times when they had unprotected casual anal intercourse 'at the heat of the moment', when highly aroused or under the influence of alcohol or drugs (e.g., Se, 31, Caucasian). Some regarded it as "the risk that you take in life" (Du, 28, Caucasian).

Besides some information exchange about personal likes and dislikes in relation to sexual preferences, most communication with casual partners seldom involved discussion about HIV status or individual attitudes toward condom use. Most of the participants felt awkward inquiring about another's HIV status in casual encounters, especially with a stranger (e.g., Pa, 39, Asian). Some just assumed that everyone was HIV positive and that to use condoms was a necessity (e.g., Se, 31, Caucasian). Others tried to have casual sex with acquaintances so that they knew something about their casual partners beforehand. Interestingly, in some 'one-night-stand' situations, some participants tried to judge the strangers from their own past experience or 'by instinct'. For example,

(HOW DO YOU JUDGE OTHERS?) Just by talk [and] the outside appearance of the person. I go for my instinct. If I think this person is OK to be with, I'll go for it. [Mi, 20, Asian]

(DURING CASUAL ENCOUNTERS, WHAT KIND OF PERSON IS MORE LIKELY TO BE TRUSTED BY YOU?) Rightly or wrongly, it is more likely to be a physically small person. I feel like it becomes a matter of physical strength. If I am forced into something, it will be easier to negotiate with someone who's physically less powerful....It's more a matter of a personality thing [as well]....If they seem to be less sensitive to your preference and less communicative, that'll be a sign that it'll be risky to have any type of sex with them. [Ad, 26, Caucasian]

Safe Sex and Condoms, Fear of HIV/AIDS, Impact of New Treatments,
Importance of Anal Sex and Regular versus Casual Partners

In terms of attitudes toward safe sex, the majority of the interviewees insisted on following safety guidelines, especially with casual partners. During his interview, Du (28, Caucasian) quoted the condom use slogan: "If it's not on, it's not on." Most participants felt that they would have no difficulties in refusing a casual partner should he suggest unprotected sex. In reality, some participants consciously did so and succeeded in avoiding some risk situations.

When sometimes two of you were together in the room and the other person is getting 'hot'. At that time, it's awkward to get a condom. Normal people, or most of them, know what to do. They just put it on. But some people don't want to lose the moment. So they would try to ask: "Can I hook you?" I said: "With condoms." They would pick up the condom. When they tried not to, I rejected. My mind becomes automatically say "no" and so does my body [clenching his thighs at that moment]. [lw, 39, Asian]

(WAS THERE ANY OCCASION BEFORE WHEN CASUAL PARTNERS WERE RELUCTANT TO USE CONDOMS?) It only happened once. I was in a sex venue where I was fairly abandoned....I was under the pressure in one situation to have unsafe sex, which didn't culminate....At certain point, when it became obvious that it wasn't going to happen in a safe way, [I thought] easy come and easy go. [Ad, 26, Caucasian]

For some, the mere presence of a condom seemed to signal that anal intercourse was expected. For example, Pe (49, Caucasian) deliberately hid condoms in casual encounters so that there was no suggestion of the desire for anal sex. However, when asked about their attitudes toward condoms, there was no doubt that for most of the men sex was 'more enjoyable without condoms'. Firstly, they perceived condoms as physically not very appealing. Secondly, condoms were felt to reduce the level of intimacy by blocking skin contact so that part of the physical sensation or excitement was lost. Finally, using a condom 'on the spur of the moment' broke rhythms and added pressure while one was concentrating on performance. However, despite all these misgivings which made some of these gay men dislike condoms or even experience a kind of "condom fatigue" (Kn, 66, Caucasian), the majority reported that they were resigned to condom use in most circumstances. As Pe (49, Caucasian) put it,

I dislike them. Everything about it I dislike. But there's no choice, as simple as that. Having said that, I don't look for any excuse not to use them. I just accept them as being part of the life. [Pe, 49, Caucasian]

Some tried to avoid condom use by adopting different strategies. For example, some reduced the frequency of or abstained from anal intercourse,

some practised negotiated safety and others were willing to take certain levels of risk. In contrast to these men, other interviewees, however, stuck to condom use and embedded it as “part of the sex” (Co, 26, Caucasian).

In terms of close friends’ safe sex attitudes, some participants criticised what they perceived as less consistent condom use in gay community.

During pre-AIDS days, people were a lot freer and they didn’t really worry. There was no such thing as safe sex. Then the whole HIV/AIDS thing came out in the 80s and people became very aware, very careful and somewhat frightened. But in the 90s, because there are so many treatments available, people have changed their views. They’ve made different choices. Especially the generation of 20s and early 30s, some don’t want to worry about safe sex as much....Just from what I hear in the community and read in the gay papers, I think people are a bit more relaxed. Myself, sometimes, have had unsafe sex that I shouldn’t have done. [Pa, 39, Asian]

Several participants who had attended the ACON peer educational program The Fun and Esteem, praised the ‘definitely safe sex’ attitude among most of their peers.

With my circle of friends, they were all coming from the ‘The Fun and Esteem’ Project....They were quite concerned about the safe sex methods. They understand and follow the safe sex message....It’s the way you live with your life....Just like that when you get up, you’d clean your teeth in the morning, when have sex, you put condoms on. It’s nothing obscure anyway. [Co, 26, Caucasian]

Most participants commented that condoms were readily available at most gay venues and events.

In terms of casual partners’ safe sex attitudes, the majority perceived that in most cases a casual partner would not refuse to use condoms if the

participants insisted. For example, Br (25, Caucasian) noted that “Everyone’s being quite willing to put condoms on.”

The notion of a continuing HIV/AIDS threat and the awareness of impact of new treatments seemed to resonate yet produce mixed effects for these gay men. Not unexpectedly, some older participants had more experience with HIV/AIDS than younger ones. For example, Pe (49, Caucasian) had an ex-boyfriend who died following AIDS several years earlier and every time when there was a memorial candle service he still felt sad about it. Concerning recent developments in treatments and vaccines, while some men still firmly believed in safe sex, others tended to hold an optimistic view and were less cautious. There was a feeling that gay men, especially younger ones, needed more education about new treatments and interventions such as post-exposure prophylaxis (PEP) and they should be made more aware.

(WHAT ABOUT PEP?) I’ve heard that this is quite unpleasant. I haven’t had one, although I’ve had some risky encounters. The reason why I haven’t had one is because I suppose it was a bit brave to come out and say I’ve done this and to go through the whole process. It would be good if they explain to people what the process is. I would expect that they don’t want people to use it like morning-after pills. [Se, 31, Caucasian]

More importantly, participants felt that they should be informed of the way people were living with HIV/AIDS, such as the daily administration of medication, drug side effects and drug resistance.

For me, it's very important to have safe sex. I've never done PEP although I've been in situations when I needed PEP. I've heard a lot of people who've done PEP saying that just a month on HIV medication was enough to know that it's not an easy life. Even if you are on the drugs, the administration of different drugs and their side effects is difficult. So it is not curable. It's not like that you can take a pill once a day and that's it. It's a very tough regime. I don't think people should be less into safe practice. [Br, 25, Caucasian]

For the majority of participants, anal sex represented a kind of 'bond', which connected bodies of 'loved ones'. Some said that they would only engage in anal sex with those they loved, most likely a boyfriend or someone 'special'. To them, body-to-body contact was associated with the feelings of love, trust, intimacy and sharing. In return, it brought fun and excitement.

Well, when it comes to penetration, I respond to it in a way that it's only for someone very special. That's the only time I would do it. [Ji, 32, Asian]

It's a close bond or association. Someone you love is inside. [Br, 25, Caucasian]

However, to sustain a regular relationship, some felt that "There was something more important than anal sex" (Pa, 39, Asian). By the same token, in a casual encounter, although to engage in anal intercourse with a stranger might or might not happen, it was not the only practice that could bring satisfaction.

(WHAT ABOUT ANAL SEX?) It's not something I do every time. It's not like some guys as that's all they do and that's all they are interested in. I've got a range of things. Sometimes, if it doesn't happen, that's equally good. Some times when it does, it's great....It's part of a sense of connectedness and intimacy with a partner rather than just simply pleasure. Certainly, condoms have interrupted that to some degree, but that's what it is. [Pe, 49, Caucasian]

With or without condoms, however, anal intercourse could sometimes be painful for the receptive partner if the insertive partner was inexperienced or the intercourse was hurried.

(IS THERE ANY DIFFERENCE BETWEEN ANAL SEX WITH BOYFRIENDS AND WITH CASUAL PARTNERS?) No, it's not the same....I guess performance pressure is higher [in casual encounters]. It's very easy for it to become unsatisfactory or painful than the others....The receptive one is easy, but much more likely to find it painful when it comes from a rushed penetration....I'm more likely to go down the path with someone I trust. At the same time, it's a shortcut to a more intensive sexual experience with someone you are less likely to see again. It's always the case that it's now or never. [Ad, 26, Caucasian]

Relationships with regular partners differed from those with casual partners. In general, regular relationships tended to involve elements of romance, understanding and caring, whereas, during casual sex, one was more likely to be with someone with an unknown history. To reduce uncertainty with an anonymous, casual partner, some participants managed to set up certain rules in choosing a casual partner.

Further investigation revealed certain complexities in relationships. Some regular relationships tended to be 'short-lived' or 'sex-centred' (Du, 28, Caucasian), while others lasted for a long time with both parties continuing to enjoy each other's company. Three participants had long-term regular

relationships for 7, 9, and 12 years, respectively. Some participants like Od (34, Asian) regarded principles of “monogamy, loyalty and commitment” essential in a relationship, while others such as Pa (39, Asian) recognised the differences between both parties and successfully managed an open relationship. For some participants, casual partners were acquaintances or somewhere “between a boyfriend and a casual partner” instead of total strangers (Al, 45, Asian). Some participants engaged in casual sex together with their regular partner (e.g., Du, 28, Caucasian). Others had several casual partners simultaneously (e.g., Pe, 49, Caucasian). While most of the Asian interviewees preferred a Caucasian partner, Od (34, Asian) was only interested in Asians of a similar cultural background.

Eight participants had experienced some condom slippage or breakage. Afterwards, some went to have an HIV test but others did not take further precautionary actions.

(Information Acquisition and Ways of Learning)

Not surprisingly, most participants were well informed about HIV/AIDS. The most frequently quoted information channels were the gay media including gay newspapers, magazines and TV or videos, followed by services within gay communities such as pamphlets, phone counselling, peer educational programs and volunteer work. Some information was also exchanged within circles of friends, although some participants preferred

information from more professional sources such as general practitioners, health clinics or even local councils.

(HOW DO YOU NORMALLY GET INFORMATION?) Firstly, porn [laugh], some porn videos, experience with other guys, [and] from your past experience with partners. What I mean is more likely to be from your own sexual experiences with other people—the things you do and the things you picked up from them—by observing when it happened, and by talking with friends too. We still talk about how to do it, but not often. These are the main sources. [Rh, 28, Asian]

The younger interviewees were more likely to have obtained HIV/AIDS information through formal school or university education (e.g., Co, 26, Caucasian). The Internet, for some participants, was also an effective means to make friends and exchange opinions (e.g., Od, 34, Asian & Iw, 39, Asian). As mentioned earlier, Pe (49, Caucasian) had direct experience with HIV/AIDS as his ex-boyfriend was diagnosed HIV positive and subsequently died following AIDS. He not only educated himself by constantly reading, observing and seeking professional advice but also helped his ex-boyfriend's family to cope with the difficulty.

I had to almost life support them, counsel them and help them to breach the gap and find out that he's not only gay but also HIV [positive] and going to die. That was a very tough period. I just learned and read and spent a lot of time in hospital. I did reading and talked to doctors and nurses to get a lot of background information. So it was a very practical learning experience in my background. [Pe, 49, Caucasian]

Lu (21, Caucasian) occasionally discussed some of his problems with his older gay brother. Most of the Asian participants did not experience any language problem in obtaining information. Some Asian participants had also

found a few leaflets printed in their original languages. Overall, HIV/AIDS related information was widely disseminated. However, some participants felt that safe sex information was not as pervasive as it should be at gay venues, especially sex-on-premises venues and gay bars. Several participants felt that the information and educational campaigns in gay communities were getting boring and repetitive. For those who only recently made contact with gay communities, introductory information was not so readily accessible (e.g., Lu, 21, Caucasian). To obtain information through different channels was, hence, important in the accounts of the participants. Also, some skill-based programs in gay communities also helped them to learn about techniques.

With the “Nitty Gritty” course, there is the understanding that it [i.e., anal sex] is not something that can be easily rushed into. You can physically massage relevant parts of the body to improve your chance of painless penetration. It is more comfortable and the importance of using a good lubricant, something like that...(WHAT DOES “NITTY GRITTY” MEAN?) The nuts and bolts—like what actually goes on and what you actually do—different ideas, from artistic to more sexual practice....It has the presumption that you are sexually active and you are interested in learning more about the nitty gritty of sexual techniques. [Ad, 26, Caucasian]

Substance Use in Relation to Sex

Although alcohol and drugs could interfere with decision-making, participants felt that most gay men were still able to practise safe sex under the influence of drugs or alcohol. Some argued that “being high or intoxicated” should not be used as an excuse to forego condoms (Br, 25, Caucasian). The common understanding was that recreational drug use was very popular at gay dance parties.

Gay community influences

Gay Events and Gay Scenes

The most distinctive gay event, mentioned by most participants, was the annual Sydney Gay and Lesbian Mardi Gras, including the festival and the parade. For most of the men, it was the time they felt most accepted by general community. For some, it also provided opportunities to share their lifestyle with other “brothers and sisters” as well as straight friends (Iw, 39, Asian). Some even brought their family members to the parade (e.g., St, 40, Asian).

There was a strong sense of ‘ghetto community’ in participants’ descriptions of gay communities in Sydney. Several elements helped to differentiate various scenes, the first being location. According to Mi (20, Asian), for example, the Oxford Street scene had the highest concentration of visible gay men or lesbians. Some participants had observed that the Oxford Street scene was changing as several gay venues had been closed down in the last 12 months and some of the remaining gay venues had become more “straight and gay mixed” (De, 32, Caucasian). This brought a sense of loss of space for some interviewees like Br (25, Caucasian).

It’s not that I don’t like straight people coming to gay venues. Just the notion that if you have too many straight people, a gay venue becomes straight and straight behaviour becomes normal. If two men kiss each other, people will give a strange look....Some venues I wouldn’t go there any more because it’s too straight.

Other participants noticed that gay community had started to spread beyond the Oxford Street 'ghetto' into nearby suburbs. Among the growing suburban scenes, the Newtown area was becoming popular. Compared to the Oxford Street precinct, Newtown was considered more "down to earth" as it focused less on physical appearance and was less judgemental (Ad, 26, Caucasian). The Newtown area was also less segmented in the sense that people living there could be gay, lesbian or straight, whereas, people living around Oxford Street were perceived to be predominantly gay men. In general, most participants agreed that the city gay scenes were irreplaceable because they provided services and entertainment that specifically catered for gay lifestyles, whereas, the suburban scenes provided a counterbalance where one felt more relaxed and less pressured by others (e.g., Pe, 49, Caucasian).

Gay scenes could also be categorised, according to their major functions, into cafes and bars; sex-on-premises venues (including beats); public social gatherings (mainly peer educational groups); dance parties; political, sports or religious activities and private gatherings. Among them, bar scenes were the most frequently mentioned by the interviewees. When referring to sex-on-premises venues, some participants like lw (39, Asian) complained about the hygiene standards at some saunas and sex clubs and others were critical that some clients at sex venues lacked a safe sex attitude. Du (28, Caucasian) was strongly against the lack of safe sex culture in some

sex clubs: “They just pick up and fuck....Late at night they were mostly intoxicated or high....These places should be closed down”. Contrary to this view, other participants felt that at most sex-on-premises venues, the safe sex message was adequate and condoms and lubricant were readily accessible.

(IS THE SAFE SEX MESSAGE VISIBLE IN THESE VENUES?) Yes, not so much in the toilets or beats but certainly in the saunas, ‘safe sex’ is very much in your face. Most people acknowledge that it’s important to engage in safe sex. With no doubt, they all know that. It’s the matter of during the practice, when you are actually in the situation, whether you would actually use it or not. [Ji, 32, Asian]

(WHAT ABOUT THE SAFE SEX MESSAGE IN THESE PLACES?) They’re everywhere. It’s good. I think most of the customers or clients know already what’s the message there. Every time you have sex, just grab a condom. [Iw, 39, Asian]

Sometimes, sex venues always have condoms. They are always so readily available....It’s always around. There’s always poster information to remind you too. There’s no excuse or reason not to practise safe sex. This is easily available. [Br, 25, Caucasian]

As mentioned above, it appears that safe sex message was visible in most gay commercial sex-on-premises venues. It certainly helped to promote condom use among some of their patrons. But others may have ignored the message and sometimes continued to engage in unsafe sex.

Le (45, Asian) was somewhat frustrated to experience changes at some ‘beats’. He felt that some shopping centres or public toilets, which used to be popular for people to have casual sex ten or twenty years ago, now provided hardly any opportunity for casual sex. Most public social gatherings were sponsored by ACON or other gay organisations through projects such as ACON’s peer educational programs (e.g., The Fun and Esteem and the

Silk Road). Most of the participants who attended these functions regarded the experiences as enriching.

I've turned up in the Silk Road a few times and I've learned a lot from that. Unbelievable amount from that....I've looked for partners to start with....I've found that the information that I've obtained from turning up at the Silk Road, even though most people would not even bother or they would think it is not very exciting at all, I find that it's very good. [Le, 45, Asian]

I've learned a lot of lessons from the Silk Road. I've learned a lot especially during the sharing....So I've got the idea that what are the sex venues like and what kind of activities they have. [Od, 34, Asian]

ACON's "The Fun and Esteem" project and "Queer Screen", [the latter is] a Gay and Lesbian Film Festival....They are more enriching than the bar scene....You don't have the pressure of going out and no one's drinking alcohol. They are there to share experiences. That's quite different from being in nightclubs where you are just drinking, listening to the music and dancing. [Instead,] you have access to social interactions. [Br, 25, Caucasian]

Dance parties with their 'casual sex and drugs' were a highlight for most of the men. Some participants felt that most dance scenes tended to favour younger gay men and older ones were more likely to drop out or be left out. There was a transition for some participants from the 'flamboyant' gay scene to a quieter lifestyle, house parties and socialising within circles of close friends. Some of them moved to a less gay-centred suburban area (e.g., Se, 31, Caucasian); some had joined gay political, sports or religious groups (e.g., Al, 45, Asian and Pe, 49, Caucasian) and others lived a lifestyle that was likely to cater for individual needs (e.g., Co, 26, Caucasian). Not all participants were active in gay scenes. Some lived with a boyfriend in suburban areas and occasionally went to Oxford Street for a few drinks.

Others did not read the gay newspapers or be involved in any activity in gay community.

Finally, there were different types of men in various gay scenes. There was a consensus that gay communities were more or less conscious of body images. Co (26, Caucasian) described the following types of gay men: “young, thin and daunting-looking types; gym-types with huge muscles; bear men; leather types and denim ones”. The body consciousness of gay community partly led to its lack of acceptance of those who did not follow the prescribed fashion. According to some participants, those people would not be welcome in some places (e.g., Co, 26, Caucasian and Mi, 20, Asian).

Sydney Gay Community

At the broad level, a large and visible gay community in Sydney provided a safe space for these gay men to express themselves, to feel accepted and to support each other. Most of the interviewees, when asked to describe Sydney gay community, pictured it as “diversified, vibrant and multicultural” (Br, 25, Caucasian). There were different gay events, gay scenes and types of gay men from various socio-cultural backgrounds. At the sight of the symbolic rainbow flags or same-sex people holding hands, greeting and kissing each other, some participants felt unprecedented freedom, which they had not experienced in other places, especially in most Asian cultures. For example,

You can feel free, not everywhere in Sydney, but in some areas like Oxford Street, you feel that “Ok, we are free to show”. It’s free to express it....You don’t fear that “Oh, do I have to hide?”....Maybe that’s the thing that you are accepted as whoever you are. [lw, 39, Asian]

Some Asian participants experienced a degree of culture shock when first exposed to such a liberated environment.

When you come to Australia, especially Sydney, it’s open. ‘Open’ in a sense that there are gay bars and pubs and people walking hand-in-hand in the street. It’s a different scene or culture altogether. It’s not that prevalent back at home. In the first few years, you just look at it but you don’t do it. Until slowly you get used to the cultural climate or whatever you want to call it, you, slowly but surely, follow the ways in which ‘normal’ guys do it....In Sydney, you have people walking down the street hand-in-hand. You have people wishing and kissing you: “Hello, how are you?” You can see those things. But if you compare that back to India, it’s not done. So during the first few years, it was like “Hang on, I don’t do these things”. But then, gradually your mind slowly looks at things and finds these things normal in this country. [Al, 45, Asian]

When I came to Sydney, my eyes were open. The first time when I saw Mardi Gras, “Oh, my God, so this is the gay world.” It’s so open and accepted in the community....Definitely Asian countries can’t accept gay in the public. I’m lucky to be living in Sydney currently because the culture is so open and the community does really accept. (IS THAT ALSO THE REASON YOU CHOSE TO COME TO SYDNEY IN THE FIRST PLACE?) Honestly, it wasn’t the reason at first. But after I arrived here, I realised that this is the place where I should be. [Od, 34, Asian]

Most interviewees felt comfortable and enjoyed the companionship of other gay men within gay community. Some were amazed at its large network in which people knew each other through circles of friends (e.g., Pe, 49, Caucasian). Some participants considered Sydney gay community to be dynamic and ever changing. According to some, it entered into a “post-gay” era (Kn, 66, Caucasian) when gay men faced less difficulty in expressing

themselves, homosexuality was more accepted by the wider community and gay and straight people were becoming more intertwined than ever before.

Gay community, which is the Oxford Street, has changed. Places have gone. Actually there are more straight people around Oxford Street now than past. But otherwise, gay community is getting very diversified, very large and you don't have to use scenes to actually be gay or identify as gay men. There are other venues and other ways. [Br, 25, Caucasian]

Probably we are moving into 'post-gay community' times. Younger people growing up now don't need to identify as gay. They just are gay. "No need to identify", in a sense, means that if you want to make a statement now people just accept it, which is different to what it was 15 or even 10 years ago. [Kn, 66, Caucasian]

However, Sydney gay community had its drawbacks. Although the overall community was open-minded and tolerant, some sections tended to be narrow-minded and bigoted. Some participants, like Le (45, Asian) who identified himself as "technically bisexual", were strongly opposed to the discrimination against bisexuals and men of minority ethnic backgrounds within gay communities. The exceptional body consciousness of some sections also added notions of exclusivity. Another negative feature of gay community was related to its hedonism. Gay community attached men were provided with ample opportunities to meet other men: some sought love and friendship and others tended to simply pursue sensation and adventure (e.g., Se, 31, Caucasian & Du, 28, Caucasian). Some participants felt disappointed at the 'sex, party and drug' culture and found it superficial and pretentious (Od, 34, Asian).

(WHAT DO YOU THINK OF SYDNEY GAY COMMUNITY?) It's crazy. [laugh] It's quite diverse but definitely has a reputation for being quite hedonistic. Generally, it's pretty positive and it's really comfortable being gay here. The gay community has sort of created an environment where you feel safe....I love it and loathe it. The gay community is good because it provides entertainment, support and boys....My experience with the gay community is [that] it's quite hollow. The bars and other social venues are very hollow....The friends you make are 'out' friends....I've made one close friend in Oxford Street during the last six years of being there. It says a lot about what people are there for....A lot of scenes are sex-centred....Gay community is largely centred on socialising in gay bars. It doesn't need to be. You should, sort of, try to maintain a balance between socialising and home life. Being gay doesn't mean you have to do this and that. [Se, 31, Caucasian]

Personal Experience of Gay Community

There was a sense that every participant in the interview group was more or less attached to gay community in their own way. The participants were either volunteers for different gay organisations or activities, members of peer support groups, gay activists, gay churchgoers or gay bar patrons. Although not every participant felt strongly attached to gay community, the majority had made some personal contribution to it by various means.

For me, because they were so welcoming when I first came into the city and I've learned so much after I came here, I find it important for me to share my experiences and pass on that sort of information to other people to help them build their support network, be comfortable with themselves, and have the mechanism to develop that way. [Co, 26, Caucasian]

I've been in the Mardi Gras parade several times. I was in the parade. That sort of celebration was amazing. It's a real thing. There's a real happy sense of that. There's a sense [that] with some of the volunteer work that I've done I've made a difference and I've contributed to it. I've done something that made things work. There is a sense of satisfaction around that. [Pe, 49, Caucasian]

In gay community, people are constantly coming and going. For example, while some interviewees advanced from previously being in fringe statuses to regular participants, others tried to lead a life of their own away from the core of Sydney gay community (e.g., Se, 31, Caucasian). Some participants, on the other hand, always kept a balance between individual preferences and collective interests (e.g., Co, 26, Caucasian).

Accordingly, these men had various histories of being gay. Some moved from other places to Sydney, aspiring for a better life (e.g., Ad, 26, Caucasian). Most Asian participants strongly appreciated the opportunities in Sydney where they could express their homosexuality freely, make friends with common interests and not worry about families overseas knowing about it.

I am freer, free to express myself....I don't have my family here to bother me....I can do whatever I like. I have great friends and I'm a very self-contented person. [Od, 34, Asian]

Most of the participants also grew with the ever-changing gay communities. For some, self-confidence had been enhanced over the years (e.g., Br, 25, Caucasian), while others took a more realistic view about the positive and negative sides of gay life and gay community. At different stages, the oldest Caucasian participant, Kn (66, Caucasian) had experienced marriage, divorce and excommunication and at the time of the interview he lived happily with an Asian boyfriend. In general, more and more

participants seemed to realise that gay community could not satisfy everybody and some started to find ways of their own.

I was going out a lot. So on weekends, I just went out and spent hundreds and hundreds dollars partying. It was a lot of fun and I had a great time. But I just feel that I've been doing this for two years now and it's time for a change. I should look after myself and have better health....It's just a change of lifestyle. [Se, 31, Caucasian]

Gay Community and the Wider Community

While the wider community was becoming more accepting of homosexuality, some participants had personally experienced or had heard of others experiencing various forms of abuse, usually in the form of name-calling, chasing and even assault (e.g., Pa, 39, Asian & Le, 45, Asian). Gay community became more intertwined with mainstream society. Some participants called for tolerance and acceptance from both sides to combat any antagonism (e.g., De, 32, Caucasian & Se, 31, Caucasian).

Gayness, 'Asianness' and identity conflict

Self-identification

One of the 19 interviewees self-identified as "technically bisexual" (Le, 45, Asian). Another, in his early twenties, was still uncertain about his sexuality (Mi, 20, Asian), whereas, the rest were gay-identified. Two participants, Du (28, Caucasian) and Kn (66, Caucasian), had been married before and several participants had sexual experiences with women occasionally.

Disclosure to Family Members

Some participants felt fortunate to have supportive families and they did not struggle too much during their 'coming out' process. In particular, Co (26, Caucasian) praised his family for not having any negative attitude towards homosexuality, being close and being accepting. Some participants, however, had anticipated difficulties from family members. Over the years they had been trying to gradually "re-educate and re-inform them" in order to "get rid of misinformation and superstition" or guide them towards "being less judgemental" (Pe, 49, Caucasian & Ad, 26, Caucasian). For most of the participants, mothers were more likely to be accepting, although some mothers tended to have strong emotional reactions initially. Fathers were, in the main, less accepting and often evaded sex-related topics. Besides difficulties with parents, some participants had conflict with other family members such as in-laws, which also alienated them from their broader circle of relatives (e.g., De, 32, Caucasian). Some participants felt uncertain about leading a different lifestyle, were afraid of disappointing parents by not living up to their expectations (e.g., Ad, 26, Caucasian) or were concerned about misunderstandings in which homosexuality was related to "disease and a lot of embarrassment" (Ke, 35, Asian). On the family side, one participant's parents were confronted simultaneously with being told that their son was gay and that he had been sexually assaulted in a Catholic college (Br, 25, Caucasian). Another family, together with the participant, his ex-wife and

three children, was forced to deal with the community reactions towards the participant (a husband and a missionary at that time) being discovered having sex with a boy in the neighbourhood (Kn, 66, Caucasian). The parents of another interviewee blamed themselves for having brought up a gay son and forced the interviewee to undertake psychiatric counselling in order to “straighten him up” (Iw, 39, Asian). Overall, five Asian participants had not disclosed to any of their family members but all of the Caucasian participants had told their families.

Disclosure to Significant Others

The majority felt that it was, sometimes, easier to disclose to members of the general public than to family members or someone close. Mi (20, Asian) had lost all his previous friends once he disclosed to them because they thought he was “a changed person”. Those who had not disclosed to family members, however, had disclosed their gay identity to at least some close gay friends. In other situations such as at workplaces, some participants preferred to give small hints rather than disclose directly (e.g., Le, 45, Asian & Pe, 49, Caucasian).

I've made small gestures and they all know. But I've never really told them straight to their face. I can't....I believe that having grown up in a society, we are so indoctrinated with rights and wrongs and what is the norm. It's very difficult to be different. People say that it's wrong and it's awful. You shouldn't be in it. It's sick. We are misfits....We feel that we are afraid to say anything because of the social implications....They accept it to the point that they can understand or comprehend....It's still them and us....It's not a question of being strong or being yourself. It's the question of considering others and also considering the culture that we're already in, which needs to change a great deal. [Le, 45, Asian]

But overall, as Kn (66, Caucasian) commented, the social stigma, which used to regard homosexuality as "hooligan behaviour" deserving of police attention, had almost vanished.

Impact of Culture, Religion and Regional Differences

In terms of identity conflict, culture appeared to play a significant role. This was more typical among the Asian participants who had experienced the dual-identity conflict of being gay and Asian. Most Asian interviewees perceived remarkable differences between Sydney gay culture and the culture in which they used to live. Most experienced a kind of "culture shock" when they first arrived in Sydney as they found that "things were done in different ways" (Al, 45, Asian). After a certain transitional period, some successfully adapted to the local mainstream as well as gay culture. Al (45, Asian) came from a major city in India and was brought up in an English-speaking school system. He had a large family in which everyone was open-minded. He had worked in the hotel industry for many years where he met all

sorts of people. He found the cultural assimilation process relatively easy. Le (45, Asian) believed that a lot of Asian men were struggling with cultural clashes and social ostracism and some led a double life in which they were married (or having sex with women) and having sex with men at the same time. It was apparent that to deal with the dual-identity conflict, some of the gay Asian men succeeded in adapting to the host culture and others struggled between the two cultures. However, almost everyone had made some compromise. Being both gay and Asian, some participants loosened ties with family members or ethnic communities. As a result, some participants lived separately from their families and did not have much contact with them (e.g., Ji, 32, Asian), some did not have any Asian friends or Asian sex partners (e.g., Mi, 20, Asian) and the majority of Asian participants did not feel attached to local ethnic communities at all. For those who had lived in Sydney for a long time, there was a feeling among some Asian participants that they were Westernised to a point but at the same time they still cherished some traditional Asian values (e.g., Pa, 39, Asian). Other Asian participants (e.g., Le, 45, Asian) proudly announced: "I am an Australian!"

Five Asian participants remained 'in the closet' without telling their families. Most agreed that 'coming out' was not unproblematic. In the context of Sydney gay culture, however, some found that to self-identify as gay and to disclose to others helped them gain social support.

If you're in Sydney—since Sydney has a huge network support—if you are gay and Asian, there's a lot to be gained and a lot of support to have in being out and gay. But I would also say that it's something you need to decide on individually. There are places to go, like ACON Silk Road Asian project. Because if you are not English speaking, it could be difficult to find support. But if you go to ACON, they can provide a support system and you can meet other men who are in the same predicament or situation. Being gay is part of your identity and it's very important to address that. [Pa, 39, Asian]

In addition, some participants simply wanted to live a 'normal life', which was not perceived as being too different from prevailing heterosexual norms (e.g., Od, 34, Asian).

If cross-cultural differences and dual-identity conflict were the major hurdles for the gay Asian men, discrimination against homosexuality in some parts of the mainstream culture was a universal problem that every gay man appeared to face. In the accounts of the participants, some had lost their close friends as a consequence of 'coming out' (e.g., Mi, 20, Asian); some had initially forced themselves to get married and lead a 'normal' life (e.g., Kn, 66, Caucasian); some still felt the gap between 'them and us' every now and then (Le, 45, Asian); some were intimidated by anti-gay abuse (e.g., Du, Caucasian); and others were cut off from family inheritance, or life insurance or superannuation of their ex-partner who died following AIDS (De, 32, Caucasian). Some participants found that in rural areas of Australia, homophobia was still prevalent and people could not "be gay and live in the country" (Du, 28, Caucasian). Others found that some religions strongly

opposed homosexuality and some had to detach themselves from their previous religious affiliations (e.g., Br, 25, Caucasian and Od, 34, Asian).

Gay Asian Men and Positions of Disadvantage

Some Caucasian interviewees commented that in general, gay Asian men had a lower level of self-esteem than their Caucasian counterparts. But Kn (66, Caucasian) considered that younger gay Asian men tended to be more self-confident than their older counterparts. Others like Br (25, Caucasian) found that those who were second-generation migrants or those who had been living in Sydney for a reasonably long period were more likely to have friends from a number of ethnic backgrounds and to have attached themselves to the Western mainstream and/or gay culture. On the other hand, those who had been in Sydney for comparatively shorter periods tended to mix with friends from their own cultural background only.

The majority of the interviewees understood that gay Asian men were more likely to be in a marginalised position in both the gay and wider community and that they were less likely to receive social support. In particular, most of the Asian participants could not derive tangible support from family members, either because their families were still overseas or they were estranged from them. Most participants, Asian and Caucasian, disapproved of stereotyping of gay Asian men as reserved, subservient and less sexually attractive. Several participants commented that some sections

of gay community were more White-dominated and less tolerant of diversity, in which gay Asian men tended to be treated as second-class citizens.

It is basically dominated by White figures....You rarely see a model in Asian or black figure. You can see [sometimes], but rarely. I suppose White male probably don't want to try something new because they don't know. People are scared of trying new things. People are scared of change. People are scared of the unknown. So that's why they don't want to know people from other cultures, especially like Asian men. [Ke, 35, Asian]

Mi (20, Asian) remarked, "People only want something familiar....Something the same!" Some participants noted that gay Asian men usually had fewer chances of being 'picked up' in most gay venues than gay Caucasian men, whereas, others found that some gay venues were friendlier than others to gay Asians.

To help people from other cultural backgrounds to overcome hurdles, the majority expressed the importance of providing more guidance to those coming from another culture, especially newcomers. Pe (49, Caucasian) recommended that the Australian government should take more responsibility to improve its HIV/AIDS related services towards people from other countries. Some Asian participants expressed the importance of having a support network during their arrival and transitional periods. Pa (39, Asian), who was a gay Asian activist, strongly suggested the enhancement of Asian gay community by increasing its supportive function towards gay Asian members.

Asian Gay Community and Its Growing Visibility

There was a sense among most of the Asian participants and some of the Caucasians that in the last few years, Asian gay community had grown. Through the flourishing of networks, some of the gay Asian men were able to share their knowledge and experiences with those who were either from a similar cultural background or those who appreciated Asian cultures. Most Asian participants like Pa (39, Asian) felt that within this network of “gay Asian men and their friends”, which often included some gay Caucasian men, there was not only a strong sense of belonging, recognition and support, but also a sense of ‘Asianness’ of which they felt proud.

I believe I’m strong in being active in raising awareness and visibility of Asian community. Therefore I’ve been involved in like the Sydney Lesbian and Gay part. Yeah, all those things and the Asian Marching Boys really help me to feel like a part of Asian community. You bring people together in events and things and help them to gain a sense of identity and security. [Pa, 39, Asian]

Many Asian participants praised activities such as the Asian Marching Boys entry in the Sydney Gay and Lesbian Mardi Gras parade and the Chinese New Year Party held at the Chinese Garden. These activities helped to increase the visibility of gay Asian men in both the mainstream and gay community.

Risk

Asian and Caucasian

In assessing the sexual risk-taking of gay Asian and Caucasian men, the participants had the general impression that gay Caucasian men were more likely to be “wild”, “promiscuous” and “adventurous” and gay Asian men were more likely to be “reserved”, “closeted” and “committed”. Furthermore, some Caucasian participants pointed out that gay Asian men had several distinct disadvantages: they were usually at the margins of gay community, facing occasional racial discrimination in the ‘gay market’ and often lacking support networks; some tended to lead a sheltered lifestyle and were unwilling to share their feelings and experiences with others and other Asian men were perceived to be more susceptible to ignorance or external pressure and took a casual approach towards safe sex. It is important to note that the disadvantages of gay Asian men, as mentioned by some of the gay Caucasian participants, were mostly consistent with those mentioned by the majority of the gay Asian participants as well.

Younger and Older

In terms of age and sexual risk taking, the general impression among the participants was that older gay men were more likely to have settled in a relationship, dropped out of gay scenes and had friends who died following AIDS. Younger gay men, on the other hand, lived in a ‘post-AIDS’ era, had

been brought up in a 'safe sex culture' and consequently the majority were well educated and well informed about HIV/AIDS. Most of the younger participants in the interview group did not know any people living with HIV/AIDS. However, living in a 'post-AIDS' era in which the development of new drugs and treatments 'reduced' the HIV/AIDS threat, younger gay men were perceived to be more likely to be sexually active or involved with drugs and alcohol, which made them susceptible to unsafe sex.

(Individual and Collective)

Le (45, Asian) expressed an opinion about 'individual' versus 'collective' risk. He felt that at the individual level, most gay men tended to practise safe sex most of the time, but occasionally some might have a few 'slips'. In those cases, he felt that to occasionally have unprotected sex was "the risk some gay men would be willing to take". At the collective level, on the other hand, he noticed that the majority of gay men were cautious and protected themselves against HIV infection, but there was a few people who were promiscuous or adventurous. He concluded that the behaviour of a few of those people could be reflected in surveillance statistics, but they could not really represent the majority.

Discussion

Participants' accounts of their perceptions of safe sex and various aspects of gay life in these in-depth interviews enabled a deeper understanding of the risk factors deduced from the logistic models. Moreover, some new perspectives emerged in these accounts, which threw light on the previous findings from the focus groups and the survey.

The individual interviews suggested that having 'close gay friends' was one of the most important elements of social capital for the participants. For some, the importance of having close gay friends even exceeded that of family members. Work colleagues, however, were usually not included in most participants' intimate friendship circles. The majority perceived that gay organisations such as ACON were able to provide tangible and reliable support and their services ranging from media campaigns, peer support programs to individual counselling were regarded as quite effective.

Most participants were concerned about HIV testing. Some participants maintained regular HIV testing as part of a routine health check. The majority worried about test outcomes. Some participants in the interviews revealed that they had dropped routine HIV testing in recent years because they considered their possibility of HIV infection to be low.

No participant in the interviews indicated that he was HIV positive. Most participants tried to engage in anal intercourse with those whose HIV statuses were also perceived to be negative. Within regular relationships, not

all participants strictly followed the recommended procedures for negotiated safety. Most participants, however, found ways to abandon condom use for anal intercourse with a regular partner. Some established monogamous relationships, which did not allow anal intercourse outside of the regular relationship. Others, while not using condoms with their regular partners, always used condoms for anal intercourse with casual partners.

In contrast to the prevalence of unprotected anal intercourse within regular relationships, unprotected anal intercourse was less frequently reported with casual partners. Sexual communication and negotiation were also less likely to occur in casual encounters as most participants felt that unlike regular relationships, there was little 'trust' in casual encounters. The participants had varying definitions of a 'casual' partner: it could be a complete stranger for some participants but a friend or an acquaintance for others.

Although almost every participant echoed the importance of safe sex, 'condoms' had different connotations for different people. Most participants conceded that although condoms were likely to reduce pleasure, they had no choice but to use them for anal intercourse on health grounds. While a condom was mostly used in casual encounters, not using condoms with regular partners was a means to achieve intimacy, enhance pleasure and improve the relationship. Fully aware of the protective function of condoms, some participants, however, were less consistent in using condoms in recent

years. They referred to 'condom fatigue' (having used condoms for too many years) and optimism generated by recent clinical and preventive developments in the field of HIV/AIDS.

Although no participant in the interviews indicated that he had problems using condoms, condom failure was mentioned. After episodes of condom slippage or breakage, some participants had an HIV test for 'peace of mind' while others did not take any action. No participant in the interviews reported having had post-exposure prophylaxis (PEP) after condom failure.

As a group, the participants had sound general knowledge about HIV/AIDS transmission and they acquired such information through various sources, mostly through the gay press and gay/AIDS organisations. Some participants complained that although safe sex information was highly visible in most commercial sex-on-premises gay venues, some clients in the places did not take notice. Participants' knowledge of new medical developments such as PEP or HIV vaccine initiatives was not well grounded. Furthermore, most participants, especially the younger ones, did not have direct contact with HIV/AIDS, which may be related to their limited knowledge of current therapeutics.

Participants perceived that gay community in Sydney was somewhat segmented and its constituents were grouped into various categories. There was a shared view that gay community in Sydney was becoming more diversified and 'multicultural'. There was no doubt that participants interwove

gay community into aspects of their lives by various means and to different degrees. Despite its drawbacks, gay community provided a sense of belonging and, more or less, influenced these men's dealing with homosexuality and gay life. Most participants acknowledged that they had benefited from attaching to gay community and some even made contributions to gay community. The relationship between gay community and the wider society was also perceived to have improved over the years. Nevertheless, discrimination against minority groups still exists both within gay community and outside.

To self-identify as gay and to disclose to others, especially to family members, was an important issue for most participants, regardless of cultural background. As gay men, the participants faced a still predominantly heterosexist environment—the broader society—where homophobia is still embedded in some sections of society. Some older participants saw that as the broader environment in Australia was becoming more tolerant towards homosexuality, younger generations seemed to be experiencing less pressure to conform. The interview data further confirms the viewpoint that gay Asian men's generally less tolerant ethnic cultures and their disadvantaged positions both within gay community and in the wider society have created extra obstacles. Most had to deal with cross-cultural differences as well as heterosexuality-homosexuality differences. Most gay Asian

participants welcomed the fledgling Asian gay community and held out hope of it becoming stronger and more visible.

Most Asian participants perceived that gay Asian men were, in general, less sexually adventurous than their Caucasian counterparts. There was a strong suggestion that gay men of the younger generation who lived in a 'post-AIDS' era were less threatened by HIV/AIDS than their older counterparts and that most of the younger generation were less likely to have direct contact with HIV/AIDS either.

Chapter 7

Conclusions and Discussion

Introduction

This chapter summarises the major findings and examines the limitations of the study. It discusses the implications for theory and for future research in relation to HIV/AIDS prevention and presents recommendations to social policy and HIV/AIDS education.

Limitations of the study

The observations of the participants in this study should not be generalised to represent all gay men or men who have sex with men (MSM) in Sydney. The majority of the participants in this study self-identified as gay or homosexual men, were gay community attached and had been living in Sydney for at least three years. Unrepresented in the study were non-gay community attached or non-gay self-identified men. Moreover, the study was undertaken in Sydney alone. As most of the interviewees were keenly aware, Sydney has over the years gained a reputation for its diversity and tolerance of minority sexual orientation groups. It may be that in other areas of Australia, especially rural areas, with less tolerant attitudes toward homosexuality, different results would have been forthcoming.

To investigate cross-cultural differences, gay men who came from either an East or South-East (very few South) Asian background or a

Caucasian background (mostly Australian and Western European) were asked to participate. While for most of the gay Caucasian men, the broader Australian culture was their culture of origin, for most of the gay Asian men, it was a secondary or host culture. As suggested by Kong (2002) in a comparison of Hong Kong gay men living in London with those in Hong Kong, gay Asian men living in a Western country may be different from those who stay in their native country. Such differences need to be considered in interpreting and generalising these results. It is also important to acknowledge that nuances between and within various collectivist East Asian and South-East Asian (or sometimes including part of South Asian) cultures and various individualist cultures are not investigated in this study.

It is well recognised that the most common route for HIV sexual transmission among gay men or MSM is the practice of unprotected anal intercourse (Center for Disease Control and Prevention [CDC], 1998). Throughout the study, 'risk' was defined as unprotected anal intercourse with any casual partner or with a regular partner whose HIV status was not concordant with the participant's (Crawford et al., 2001). In the survey, different modes of anal intercourse (that is, with or without condoms, insertive or receptive, withdrawal before ejaculation or ejaculation inside) were investigated in detail. However, other sexual practices such as oral sex with or without ejaculation and sexual practices with women such as vaginal intercourse were not investigated. Furthermore, information regarding

negotiations and sex practices with other men was only collected from the participants themselves, while these men's sexual partners were not directly investigated.

HIV information gathered in this study was through self-report via self-completed questionnaires and face-to-face interviews. Clinical HIV tests to confirm reported results were not undertaken. Substance use in relation to gay men's sexual risk practices were not investigated, although in the individual interviews, some participants argued that alcohol and drugs did not necessarily interfere with their safe sex decisions. Previous research findings, however, have been mixed. Some studies have found that although those who used drugs may have been more inclined to seek physical sensations, drug use was not directly related to homosexual men's high-risk behaviour (McCoul & Haslam, 2001). Others have pointed to the use of certain drugs as a significant predictor of unprotected receptive anal sex (Ostrow, Di Franceisco, Chmiel, Wesch & Wagstaff, 1995).

Importantly, as this was a cross-sectional study, no *causal* relationships may be inferred.

Major findings

The hypothesis of the study was: Gay Asian men experience an identity conflict associated with being both gay and Asian in Sydney. The focus group discussions provided support for the hypothesis. Both the focus

groups and the individual interview data sets suggested that there were tensions between the collectivist orientation (stemming from gay Asian men's backgrounds) and the individualist nature of the host Sydney mainstream culture (along with its gay subculture), all of which contributed to this conflict. The findings suggest that to deal with this identity conflict, some gay Asian men struggled in relation to maintaining their ethnic traditions, identifying and disclosing their homosexuality, interacting with other gay men and with gay community and achieving a sense of belonging.

The findings from the focus groups and the individual interviews highlighted that identity conflict was likely to be particularly salient when it comes to the issue of 'coming out', especially to family members. Both the survey and the individual interview data suggested that most gay men were more likely to disclose their gay identity to close gay friends than to others.

The first research question was: How are aspects of individualism-collectivism, Social Cognitive Theory and gay community connectedness related to sexual risk behaviour? Based on the survey data, the logistic regression models identified statistically significant factors associated with gay men's sexual risk practices.

Two individualism-collectivism variables, social harmony with close friends and social harmony with colleagues, were significantly associated with sexual risk in the pooled sample. The findings indicated that for both gay Asian and Caucasian men, harmony with close friends (that is, respect and

honour of others' traditions and customs, loyalty, respect for others, relationship harmony, nurture or help of others and relationship stability) was associated with less risk taking, whereas, harmony with work colleagues was associated with more risk taking. The individual interviews further revealed that gay men tended to develop strong relationships with close gay friends. The MANOVA analyses of the survey data also indicated the primacy of 'family' for many of the Asian participants, although their families were, on the whole, likely to be less accepting and supportive in matters to do with homosexuality.

Self-efficacy in condom use with casual partners (the practical skills of condom use and risk avoidance) played a prominent role among the risk factors. On the whole, both gay Asian and Caucasian men achieved relatively high scores in condom use self-efficacy.

Vicarious learning, another important variable in Social Cognitive Theory, played a part in the gay men's safe sex practices, especially in ways of accessing information, networks and services and interacting with peers within gay communities. These issues were explored in detail in the individual interviews in conjunction with assessments of the influence of gay community.

The cross-tabulation analyses of the survey data suggested that gay Asian and Caucasian men did not differ in regard to gay community attachment, although interview data suggested that the degree of attachment

seemed to vary. During the exploratory focus groups and later the in-depth individual interviews, most gay Caucasian as well as gay Asian participants talked about ACON's education and support role and how this impacted on various aspects of gay men's lives. In particular, safe sex practices and safe sex culture were attributed to prominent safe sex campaigns of gay organisations (in particular, ACON). Most gay Asian participants also developed attachment and a sense of belonging to the fledgling Asian gay community, a sub-community within broader gay community.

The logistic regression models suggested that having more gay friends, a social element of gay community connectedness, was related to increased risk taking. The individual interviews further revealed that gay men had various ways of making contact with gay community, but most were well informed of HIV/AIDS transmission modes and possibilities and acknowledged the importance and effectiveness of condom use. In contrast to the generally high levels of condom use self-efficacy, however, the individual interviews suggested that some gay community attached men had, over the years, adopted a less committed attitude toward safe sex practice than had been the case earlier in the HIV epidemic. Some interview participants admitted that they were less worried about the negative consequences of unprotected anal intercourse with either regular or casual partners. These findings are consistent with those of Van de Ven, Rawstone, Crawford and Kippax (2001) who reported a significant increase

in unprotected anal intercourse with both casual and regular partners among Sydney gay men.

Evidently, other risk factors incorporated in the risk definition, such as HIV status and partner types, are important for the investigation of gay men's sexual practices. HIV prevalence in the total survey sample was around 6% and approximately 14% of the participants did not have HIV test results. The individual interview data revealed that while some participants maintained regular HIV testing over the years, others had been tested less frequently in recent years. When it came to inquiring about casual partners' HIV status, most participants in the individual interviews reported that they were unlikely to make direct enquiries about such information.

In terms of partner types, in the six months prior to the survey, the cross-tabulation analyses showed that around 56% had anal intercourse with casual partners and around 55% had anal intercourse with regular partners. The cross-tabulation results further suggested that, as expected, the incidence of unprotected anal intercourse was higher in regular relationships than in casual ones. Approximately 45% of the men who were in a 'current' regular relationship, and had practised unprotected anal intercourse, had done so in the context of negative sero-concordance (that is, each partner's HIV status was negative within the regular relationship). The individual interview results further indicated that while some participants assumed that

they were practising 'negotiated safety', they did not follow the safety rules as recommended by health professionals and educators.

Overall, the individual interviews suggested that most of the gay men had developed diverse perceptions, understandings and interpretations regarding 'risk' and that they had adopted risk minimisation strategies that suited them personally. Some of these strategies could not totally rule out the possibility of HIV transmission. For example, some interview participants reported occasional instances of unprotected anal intercourse with someone whose HIV status was unknown and others mentioned that they tended to judge others' HIV status without direct inquiry. Although most of the participants recognised the risks associated with unprotected sex, they were still willing to adopt these strategies in the hope that they could avoid HIV infection while fulfilling emotional and physical desires.

The second research question of the study was: Are there differences between gay Asian and Caucasian men in Sydney in terms of safe or risky sexual practices?

The gay Asian men had higher scores in 'social harmony with family', but lower scores in 'social harmony with close friends' and 'social harmony with colleagues' than their Caucasian counterparts (see the MANOVA analyses of the survey data).

The gay Asian men had higher scores in 'self-efficacy in the practical use of condoms with casual partners' and 'self-efficacy in negotiated safety

with regular partners' than the Caucasian men, but they did not differ from the Caucasian men in terms of 'self-efficacy in risk avoidance with casual partners'. On the other hand, the gay Caucasian men had higher scores in 'outcome expectancies in regular partners' reactions to condom use' than the Asian men (all of them refer to the MANOVA analyses of the survey data). The separate logistic models of the risk factors for the gay Asian and Caucasian men suggested that, among the gay Asian men, those who were more self-efficacious in the practical use of condoms were less likely to take risks, and vice versa, but this factor was not in the gay Caucasian men model.

In terms of age, the demographic profile of the survey data indicated that the Asian participants were about six years younger, on average, than the Caucasian participants. The logistic models of the risk factors for the gay Asian and Caucasian men showed that for the gay Caucasian men, younger age was associated with more risk, but there was no 'age effect' for gay Asian men.

Cross-tabulation results of the survey data revealed that, overall, the Asian men had fewer HIV tests than the Caucasian men. In terms of disclosure of homosexual identity, the cross-tabulation analyses confirmed that fewer gay Asian men than gay Caucasian men had disclosed their gay identity to others. This result is in line with the 'identity conflict' experienced by some gay Asian men, further supporting the research hypothesis.

Cross-tabulation results based on the survey data suggested that compared to their Caucasian counterparts, the gay Asian men had fewer casual partners and engaged in less unprotected anal intercourse with casual partners. Moreover, the Asian men engaged in less unprotected anal intercourse with a regular partner whose HIV status was different or unknown than did their Caucasian counterparts. Cross-tabulation analyses further indicated that among those who had anal intercourse with regular partners, more Asian men were in a sero-negative concordant, regular relationship than the Caucasian men. Overall, the cross-tabulation results based on the survey data suggested that the gay Asian men had proportionally less risky sexual practices than the gay Caucasian men.

Notably, both the Asian and Caucasian logistic regression models for risk had two common factors: 'proportion of gay friends' and 'self-efficacy in risk avoidance with casual partners'. 'Self-efficacy in the practical use of condoms with casual partners', was only in the gay Asian men model. Three other factors, 'age', 'social harmony with close friends' and 'social harmony with colleagues', were in the gay Caucasian men model.

The study also provides evidence that the gay Asian and Caucasian men shared common characteristics in terms of a homosexual identity and homosexual practices. Most participants were gay community attached and had strong bonds with gay friends. They were most likely to disclose their homosexual identity to and draw support from their circle of gay friends (see

both the cross-tabulation analyses of the survey data and the individuals interview results). Both gay Asian and Caucasian men displayed similar patterns of sexual relationships with regular partners. In terms of sexual risk practices, gay Asian and Caucasian men alike engaged in much less unprotected casual anal intercourse than unprotected anal intercourse with regular partners (see the cross-tabulation results of the survey data).

Within the rubric of individualism-collectivism, the correlation analyses of the cross-cultural factors confirmed a logical hierarchical relationship between 'family members', 'close friends' and 'colleagues'. That is, family members were the closest social group associated with individuals, close friends were placed next to family members and colleagues were ranked last. The cross-tabulation results based on the survey data revealed that the gay Asian men had little attachment to local ethnic communities in Sydney.

Implications for theory and future research

Cross-cultural dimensions

In this study, perspectives of individualism-collectivism were found to be crucial to our understandings of the differences between the gay Asian and Caucasian men. In particular, it deepened our knowledge about the identity conflict experienced by some gay Asian men in being both gay and Asian in a predominantly 'straight' Western society. On the other hand, it is speculative, but the similarities of the gay Asian and Caucasian men found in

this study may reflect the influences of growing multiculturalism and globalisation in Sydney, as well as around the world, which enable different cultures and social groups to more readily interact and accommodate each other (Altman, 2001; Hofstede, 2001; Pallotta-Chiarolli, 1998).

The majority of the participants in the survey indicated connectedness to various sections of gay communities in Sydney and the individual interviews further revealed the importance of close gay friends in the lives of most gay Asian as well as gay Caucasian men. These findings taken together suggest that gay men's sexual risk practices may be more strongly influenced by gay or homosexual subcultures than factors in the general mainstream culture. Different values and norms operating within the gay subculture are likely to play a crucial role in gay men's behaviours including their sex practices.

A possible way to improve the adaptability and relevance of the individualism-collectivism measures for gay and MSM populations could be to add 'same-sex partners' and 'gay friends' to the social groups under investigation (together with 'family', 'close friends' and 'colleagues' in the original individualism-collectivism measurements).

As a group, the gay Asian men—the majority migrants—may have exhibited a weaker collectivist orientation. For example, most gay Asian participants in the focus groups expressed their preference for a Caucasian sex partner. The survey cross-tabulation analyses showed that the gay Asian

men had few sex partners who were Asian. While very few gay Asian men in the survey indicated a sense of belonging to local minority ethnic communities, the majority of them were somewhat connected to gay communities in Sydney.

For future studies, larger samples would also be worthwhile to investigate individualism-collectivism in relation to gay Asian men's preferences for sexual partners of a similar or different cultural background.

Some cross-cultural researchers (Triandis, Kashima, Shimada & Villareal, 1986) have suggested that migrants, in general, may overly identify with a mainstream host culture while subordinating their culture of origin, identified as the 'bend over backwards' phenomenon. To investigate the possibility of migration being a mediating factor, a comparison between gay Asian men living in their native countries and gay Asian men living in Western countries could shed more light on this issue. Apart from migration, the gay Asian men's seemingly disengagement from their culture of origin, as suggested in this study, may also have been related to intolerance towards homosexuality in some minority ethnic cultures.

Within the perspectives of individualism-collectivism, it is acknowledged that while interactions with other people are common for both allocentrics and idiocentrics, it is how and to what extent individuals define self in relation to others that often differentiate allocentrics from idiocentrics (Kim et al., 1996). When it comes to homosexual self-identification,

connections to gay communities and interpersonal relationships and sexual practices, gay men, individually or in a group, interact with each other at many levels and in different ways. The strong interwoven nature of 'self' and 'others' in this context creates complexities for allocentric-idiocentric comparisons.

Social Cognitive Theory dimensions

Consistent with previous research findings (e.g., O'Leary et al., 1992), self-efficacy in condom use was strongly associated with gay men's safe sex practices. This study further suggested that to encourage gay men to use condoms during anal intercourse with casual partners, it is important to improve individuals' self-efficacy in risk avoidance as well as the practical use of condoms in casual encounters.

However, in interpreting the relationship between gay men's self-efficacy in condom use and their actual use of condoms during anal intercourse, there are other factors that could complicate the link between these two variables. For example, some research in recent years suggests that some gay men have experienced a 'coping burn-out' in regard to condom use which increases the likelihood of not using condoms (Odets, 1994). Other studies have documented that some gay men hold quite optimistic views about treatment advances and such views are associated with less diligent attitudes toward safe sex (e.g., Van de Ven, Prestage, Crawford et

al., 2000). Still others have found a 'complacency' effect between self-efficacy in condom use and the actual use of condoms, suggesting that some gay men were less likely to put effort into practising and adhering to safe sex practices (Robins, Dew, Kingsley & Becker, 1997).

Future research will be important to include measures of self-efficacy and outcome expectancies in sexual negotiation. If such measures can incorporate gay men's concerns about emotional as well as physical outcomes within regular relationships, they may yield useful findings.

Vicarious learning in relation to gay men's safe sex practices, as part of the conceptual framework of this study, was explored in the individual interviews. The individual interviews explored whether and to what extent gay men learned vicariously from their gay friends' experiences as well as from information provided by these friends. They also explored whether the process was, in turn, related to participants' safe sex practices. The interview results suggested that the gay men did obtain safe sex skills by learning both directly from their own experiences and vicariously from their friends, especially from close gay friends. More importantly, these results indicated that for some skills, such as the ability to negotiate with sexual partners, to acquire information and to seek access to professional services, vicarious learning was important.

For future research, it is expected that the development and application of quantitative measurements of vicarious learning in relation to gay men's safe sex practice would be most fruitful.

In general, this study found that it is appropriate and productive to apply Bandura's (1986, 1997) Social Cognitive Theory (SCT) to the investigation of gay men's motivation in practising safe or risky sex. This research suggested that there are two important issues related to SCT. First, an individual's decision about whether to use condoms on a specific occasion is not solely based on concerns about his own health or self-protection from HIV infection. It can be based on other concerns such as relational harmony, intimacy and pleasure (Suarez & Miller, 2001). Instead of being solely a means of protection, condoms can also be interpreted by gay men as symbolic of interpersonal communication representing love, respect and trust for some, but humiliation and contempt for others (Middelthon, 2001). Second, individuals' safe sex practices are also likely to be influenced by peer support or pressure (Connell et al., 1989; Kelly et al., 1995). This study supports the view that gay community subcultures influence individual safe sex practices. It suggests that individuals may have different interpretations of risk on the basis of personal cognitive perceptions and that some may be motivated to practise and maintain safe sex, while others may be motivated to take certain levels of risk, more or less 'calculated'.

Gay community impact

This study has strongly suggested that gay community subculture is an important element in understanding gay men's safe sex practices. In the early 1990s, it was widely acknowledged that gay community, with its peer education endeavouring to create a safe sex culture, had indeed encouraged gay community attached men to adopt and adhere to safe sex practices (Connell et al., 1989; Gold et al., 1994; Kippax et al., 1992). However, in recent years along with the changing profile of the HIV/AIDS epidemic, most gay community attached men seem to have adopted diversified personal risk reduction strategies. Over the years, some gay men had adopted strategies that were less rigid in avoiding risk but more flexible in gaining intimacy and pleasure (Smith and Van de Ven, 2001).

The findings here indicate that the gay Asian men, most of whom were gay community attached, did not have low scores in self-efficacy in condom use and sexual negotiation. These findings contradict previous research, which suggested that allocentrics tend to have lower levels of general self-efficacy than idiocentrics (Kitayama, Markus & Lieberman, 1995; Tafadordi, Lang & Smith, 1999). It may be that attachment to gay community assisted these gay Asian men to express their homosexual desire in the 'tolerant environment' of Sydney, provided them with opportunities to meet other gay men and boosted their levels of self-efficacy in safe sex.

Gay community attachment was evaluated by three indices, namely, 'proportion of gay friends or gay Asian friends', 'amount of free time spent with gay friends' and 'sense of belonging to gay community'. It is anticipated that the application of more specific indices of gay community attachment, which could identify fine details in relation to gay men's social engagement (such as volunteering in gay organisations or membership of gay social groups), could help future studies to explore in greater depth the impact of gay community on gay men's safe sex practices.

Clearly the relationship between a broader category MSM (homosexually self-identified or not) and gay community influence is an important subject for additional work in future.

'Risk' definition

Negotiated Safety

To practise 'negotiated safety' according to the recommended guidelines, partners have to do the following: undertake HIV tests; establish sero-negative concordance in HIV statuses; reach safe agreements about sex practices outside the relationship while abandoning condom use within the relationship; trust each other to adhere to agreements and if the safety agreements are broken, re-negotiate (Crawford et al., 2001; Kippax et al., 1997).

The cross-tabulation analyses of the survey data indicated that among those who were in regular relationships at the time of the survey, close to a half had reached safe agreements about their sexual practices within and outside of regular relationships. However, a small proportion of those in regular relationships had reached 'proper' negotiated safety agreements and only a proportion of these men practised negotiated safety according to their agreements. That is, their agreements allowed unprotected anal intercourse with their regular partners in the context of a sero-negative concordant relationship and they had no unsafe practices outside of the relationship, including no casual sex, no anal sex or always protected anal sex with casual partners (Crawford et al., 2001; Van de Ven et al., 1999).

The individual interviews revealed that in many cases participants had their 'folk' procedures in practising 'negotiated safety'. Some participants reported that they simply dropped condom use after several occurrences of anal intercourse with the same partner, without disclosure of HIV status or explicit sexual negotiation. According to some interview participants, there were other forms of misapplied 'negotiated safety'. For example, some relationships were not completely monogamous as agreed. Some participants assumed that their partners did not have casual sex outside the relationship but there was no clear agreement between them. Some couples did not fully inform each other of their HIV statuses. Some participants simply assumed that they were HIV negative without undertaking clinical tests.

Some couples did not discuss emerging situations when previous agreements had been broken and re-negotiation was necessary. Further examination of the sexual agreements of the participants revealed that some agreements were unrealistic and others not sufficiently explicit, especially regarding the kinds of practices which were allowed outside of regular relationships. These cases suggest that couples within regular relationships, sometimes, had to negotiate and compromise between avoiding sexual risk and maintaining harmony.

Regular and Casual Partners

The survey and individual interviews revealed that some gay men had several regular sexual partners during the period of six months under investigation. These sexual relationships were either serial ones (that is, a previous relationship ends and a new relationship follows) or concurrent (that is, relationships with several men at the same time).

It is recommended that future research into gay men's sexual relationships with regular partners, 'primary' regular partners should be examined separately from 'other' regular partners, as there may be important differences between primary and non-primary regular partners. These issues are worthy of further investigation.

This study found that gay men had various ways of defining 'casual' partner. Some participants regarded casual partners as total strangers whom

they only met for a 'one-night' stand. Others, however, only had casual sex with acquaintances, friends or close friends. Others did not clearly differentiate 'casual' partner from 'boyfriend'. Various types of 'casual' partners defined by these gay men problematised the risk calculus used here, where any unprotected anal intercourse with a casual partner *per se* was regarded as 'risky'.

It may be useful in future to look at different types of casual partners such as 'strangers', 'acquaintances', 'close friends' and 'someone not a boyfriend but with whom one has occasional or frequent sex'.

HIV Status

This study examined whether participants had been tested for HIV and when and how frequently they were tested. It further examined whether participants had disclosed their own HIV status to regular partners and whether they were informed of their regular partner's HIV status. Assessments were via self-report.

Future research would benefit from clinical tests to assess the validity of self-reported data. It would also be interesting for future research to investigate what motivates some gay men to adhere to regular HIV testing while others do not.

Contributions of the Theoretical Framework

The majority of theoretical models used in other studies, such as the Health Belief Model (Janz & Becker 1984), the AIDS Risk Reduction Model (Catania, Kegeles & Coates, 1990), the Theory of Reasoned Action and Planned Behaviour (Ajzen, 1991; Fishbein & Middlestadt, 1989) and the Information-Motivation-Behavioural Skills Model (Fisher, Fisher, Williams & Malloy, 1994), have, in general, incorporated a 'health rationality' principle. That is, most of these models are based on the view that individuals make rational decisions about the 'pros and cons' of taking precautions against infection, which is regarded as the primary concern. In contrast, the results of this study suggest that individuals not only make rational decisions to stay 'healthy' but also to satisfy emotional as well as physical needs such as love, intimacy and pleasure, through sex with others. This position is supported by recent findings in the field of HIV/AIDS research (Adam, Sears & Schellenberg, 2000; Offord & Cantrell, 1999; Robinson, Bockting, Rosser, Miner & Coleman, 2002; Rhodes & Cusick, 2000). Some studies indicate that some gay men adopt risk reduction strategies other than the 'condom every time' strategy (Adam et al., 2000; Flowers, Smith, Sheeran & Beail, 1997; Rosengarten, Race & Kippax, 2000; Suarez & Miller, 2001; Van de Ven et al., 2002). Consistent with these findings, this study further supports the view expressed elsewhere (Smith & Van de Ven, 2001; Suarez & Miller, 2001) that gay men have, over time, adopted diversified risk minimisation strategies by

engaging in selected sexual practices with particular partners and some have even adopted an 'acceptable' level of risk in order to satisfy various needs.

Implications for policy and education

Collective training combined with individual approaches

Triandis (1989; 1995) argued that people of collectivist background are more likely to identify with and be influenced by in-group members and that collectivists often give preference to group-oriented information rather than to individual-oriented information. This study found that gay Asian men of collectivist East or South-East Asian background were able to identify with and be attached to gay community as well as to the fledgling Asian gay community. Most of these gay Asian men shared the experience of dealing with the identity conflict of being gay and Asian in a Western culture. Educational programs conducted by gay organisations should continue to implement collective training of gay men or MSM of collectivist background. For gay Asian men, these special programs should target different subgroups and facilitate their abilities to deal with possible identity conflicts, especially in terms of self-identification of homosexuality and disclosure to significant others.

In relation to the co-existence of homosexuality and ethnicity among gay Asian men, this study suggests men of minority ethnic background often have unique cultural interpretations of homosexual practice and homosexual

identity, which are different from Western understandings that are prevalent in most *individualist* countries such as Australia. Policy makers and educators need to recognise that 'gay' and 'coming out' are concepts which do not necessarily apply to all, a view supported by Dubé (2000).

Educational programs targeting gay men in general, allocentrics or idiocentrics, should combine collective group training with individual approaches. The findings of this study imply that general safe sex education should emphasise individual self-efficacy as well as skill development in relation to condom use and sexual negotiation. To enhance safe sex among gay Asian and Caucasian men, it would be productive to promote both self-efficacy and skill development at the individual level and provide peer support at the group level.

Gay organisations should further cooperate with ethnic communities as well as with the wider society so that educational programs and services can improve knowledge levels among gay men's family members and close friends who themselves have a certain level of influence on gay men's lives. Research findings of this study as well as those of previous studies (Pallotta-Chiarolli, 1998; Pallotta-Chiarolli et al., 1999) suggest that positive and accepting responses toward homosexuality, especially toward gay men's identity disclosure, are important. Family members and close friends can support identity formation and well-being. For gay Asian men in particular, the support and guidance from family members and close friends are

essential. Combining collective training and individual approaches for gay men and those who are related or close to them is likely to create a more understanding and supportive atmosphere on both sides.

Uptaking of negotiated safety

HIV testing, open discussion of HIV status and establishment of a sero-negative concordant relationship are three key prerequisites for negotiated safety (Kippax et al., 1997). Gay men should be encouraged to maintain accurate knowledge of their own and their regular partner's HIV status. Moreover, gay men who take risks should be encouraged to undertake regular HIV testing as a health management practice (also recommended by Adkins, 2001).

Previous research found that within regular relationships, HIV transmission is most likely to occur during unprotected anal intercourse when one partner is HIV negative and the other's HIV status is unknown (Coxon & McManus, 2000; Crawford et al., 2001). Safe sex education among those who are in regular relationships should, therefore, focus not only on regular HIV tests, as suggested above, but also on disclosure of HIV status and establishment of sero-negative concordance between regular partners.

Guidance about the practice of negotiated safety should especially address two major issues raised in this study. First, it is unreliable to make assumption about one's own and another's HIV status without clinical testing.

Second, within regular relationships sexual negotiation is a continuous process and it should be reviewed and re-negotiated when previous agreements break down or are no longer applicable.

Safe sex campaigns

Undoubtedly, safe sex campaigns should continue to emphasise the necessity of safe sex in casual encounters. This study supports media campaigns, especially gay media campaigns, in continuing to broadcast explicit messages about condom use during anal intercourse. It provides evidence that safe sex practices are strongly associated with enhanced self-efficacy in avoiding risk situations with casual partners. Educational programs, possibly by involving role-play, should try to raise gay men's self-efficacy in safe sex under different circumstances. At the same time, commercial sex-on-premises venues such as sex clubs and saunas should not only display explicit messages about safe sex and provide condoms and lubricant, but also help gay men to access optimal 'emergency services' (such as PEP) when condoms break or when there is unprotected anal intercourse with the possibility of HIV infection.

Discrimination

Societal homophobia oppresses gay men, lowers their self-worth and has adverse impact on safe sex (Chng & Géliga-Vargas, 2000). This study

confirms that discrimination against homosexuality still exists in the wider community, although to a lesser extent and less explicitly than in past years. In this as well as other studies (e.g., Choi et al., 1995; Choi, Yep and Kumekawa, 1998; Pallotta-Chiarolli, 1998), some minority ethnic cultures have been found to be less accepting of homosexuality than Western cultures. At the social policy level, homophobia should be tackled within the broader society, for example, in workplaces and school systems. Minority ethnic communities should be encouraged to try to understand and accept not only the private practice of homosexuality but also its public expression.

The findings of this study show that within gay community there is discrimination against people of minority ethnic background. Gay community should endeavour to welcome diversity by welcoming and accepting minority group members. Gay media campaigns should present more role models from linguistically and culturally diverse backgrounds. Importantly, gay community should promote understanding and appreciation of cultural differences and provide gay men and MSM of minority ethnic background with alternate choices in relation to self-identification and attachment to gay community, a view supported by Ridge, Hee & Minichiello (1999).

Preventive and clinical advances

The individual interviews of this study highlighted that some gay men are not fully cognisant of new technologies such as PEP, combination anti-

retroviral therapy and HIV vaccine initiatives. This study also indicated that in recent years some gay men have been less consistent in practising safe sex. The findings here support those of Van de Ven, Prestage, Crawford et al. (2000) that rising levels of unprotected intercourse are associated with optimistic views that the HIV epidemic is less threatening than it was, say, a decade ago. Gay men should not only be updated regularly about new HIV treatments but also be adequately informed of the effectiveness and restrictions applying to the new therapeutics. Gay men who are HIV negative could be encouraged to have more direct contact with people living with HIV/AIDS and be made aware of the strict regimes, potentially adverse side effects and high rates of failure of current antiretroviral therapies.

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Appendix A

Newspaper Advertisement

(Capital Q Weekly, 28 April 2000, p5)

A university researcher is looking for 30 to 40 Asian men who live in Sydney and have sex with other men to participate in a non-profit research project. The research project is being conducted jointly by School of Education and National Centre in HIV Social Research, UNSW and Asian Gay Men Project, the AIDS Council of NSW. Two focus groups will be held at ACON, 9 Commonwealth Street, Surry Hills. The dates are Friday 5 May at 7:30 pm and Monday 8 May at 5:30 pm. Please contact Alexander for more information on 9206 2080 or email: asia@acon.org.au / liminmao@hotmail.com.

Appendix B

THE UNIVERSITY OF
NEW SOUTH WALES



COMMITTEE ON
EXPERIMENTAL
PROCEDURES INVOLVING
HUMAN SUBJECTS
(CEPIHS)

25 February 2000

Dr John McCormick
School of Education
Faculty of Arts and Social Sciences

Dear Dr McCormick

Cross cultural difference and motivation
in HIV/AIDS education
CEPIHS No. 00005

At its meeting held on 15 February 2000, the Committee on Experimental Procedures Involving Human Subjects (CEPIHS) considered the above application.

Exercising the authority delegated to me by the Vice-Chancellor, I give permission for this project to proceed.

Would you please also note:-

- approval is valid for five years
- any modifications to the project must have the prior written approval of the Committee
- Consent Forms are to be retained within the archives of the School and made available to the Committee upon request.

Yours sincerely

Professor P B Mitchell
Presiding Member
CEPIHS

copy to: Dr Paul Van de Ven - School of Education

SYDNEY 2052 AUSTRALIA
Telephone: +61 (2) 9385 4234
Facsimile: +61 (2) 9385 6648
Location: Rm 4.09, Ethics Secretariat
Ground Floor, Building 888
Enter Gate 2, High Street, Kensington

Appendix C

THE UNIVERSITY OF
NEW SOUTH WALES



HUMAN RESEARCH ETHICS
COMMITTEE (HREC)

29 November 2000

Dr John McCormick
School of Education

Dear Dr McCormick

**Cross cultural differences and motivation
in HIV/AIDS education
HREC 00005**

At its meeting held on 21 November 2000, the Executive of the Human Research Ethics Committee (HREC) ratified my Executive Approval dated 1 November 2000.

Exercising the authority delegated to me by the Vice-Chancellor, I give permission for this project to proceed.

Would you please also note:-

approval is valid for five years

any modifications to the project must have the prior written approval of the Committee

- Consent Forms are to be retained within the archives of the School and made available to the Committee upon request.

Yours sincerely,

Professor Philip B Mitchell
Presiding Member
HREC

copy to: Dr Paul Van de Ven – National Centre in HIV Social Research
Ms Elmir Mao – School of Education

UNSW SYDNEY NSW 2052
A U S T R A L I A
Telephone: +61 (2) 9385 4234
Facsimile: +61 (2) 9385 6648
Email: ethics.sec@unsw.edu.au
Location: Rupert Myers Building
C/o Research Office / Ethics Case 14,
Barker Street, Kensington

Appendix D

THE UNIVERSITY OF
NEW SOUTH WALES



HUMAN RESEARCH ETHICS
COMMITTEE (HREC)

29 October 2001

Dr John McCormick
School of Education Studies

Dear Dr McCormick

Cross cultural differences and motivation in HIV/AIDS education
HREC 00005.

Thank you for the fax from Ms Limin Mao dated 24 October 2001, together with the modified Subject Information Statement and Consent Form. The final stage of the above study is approved.

Yours sincerely

A/Professor A Lloyd
Presiding Member
HREC

copy: Limin Mao - Sch. of Education Studies

UNSW SYDNEY NSW 2052
A U S T R A L I A
Telephone: +61 (2) 9385 4334
Facsimile: +61 (2) 9385 6648
Email: ethics.sec@unsw.edu.au
Location: Regent Myers Building
C/O Research Office / Ethics,
Gate 14, Barber Street Kensington
ABN 57 195 873 179



PO Box 350 Darlinghurst NSW 1300 Australia • Ph (02) 9206 2000 • Facsimile (02) 9206 2069 • TTY (02) 9283 2088
 Web site: www.acon.org.au • Email: acon@acon.org.au

Limin Mao
 12 Spring Street
 Double Bay
 NSW 2028

27 March 2000

RE: ACON ethics approval for Asian Gay Men Study

Dear Limin,

Your research proposal has undergone review from ACON's internal ethics system and we are pleased to supply ethics approval for the Asian Gay Men's study.

We feel that the purpose and nature of this study will be important in planning future educational programs and services for Asian gay men and are willing to provide assistance where possible.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'M. Bebbington', written over a light blue horizontal line.

Mark Bebbington
 Sydney Education Unit Manager

Western Sydney Office • PO Box 41 Parramatta NSW 2124 • Ph (02) 9204 2400 • Facsimile (02) 9691 2988
 Hunter Branch • PO Box 220 Islington NSW 2296 • Ph (02) 4927 9808 • Facsimile (02) 4927 9485
 Northern Rivers • PO Box 8063 South Lismore NSW 2480 • Ph (02) 6622 1555 • Facsimile (02) 6622 1520
 Illawarra Branch • PO Box 1073 Wollongong NSW 2500 • Ph (02) 4228 1163 • Facsimile (02) 4226 9638
 Mid North Coast • PO Box 1329 Port Macquarie 2444 • Ph (02) 6684 0943 • Facsimile (02) 6683 3810

**THE UNIVERSITY OF NEW SOUTH WALES
SUBJECT INFORMATION STATEMENT AND CONSENT FORM:
FOCUS GROUP DISCUSSIONS**

You are invited to participate in a study of safe sexual behaviours of Asian gay men in Sydney. We hope to investigate a theoretical model of major influences on safe sex behaviours from cultural and motivational perspectives. You were selected as a possible participant in this study because you satisfy our inclusion criteria, that is, Asian gay men now living in Sydney.

If you decide to participate, we will organise a focus group discussion with the help of the Asian Gay Education Project of the AIDS Council of NSW (ACON). We intend to discuss issues around what it is like to be a gay Asian man living in Sydney. A topic guideline for the proposed focus group discussion is attached. The group discussion will last for 1–2 hours with 6-8 members in each group. The intended venue of the focus group discussion will be a small, private meeting room at ACON. The group discussion will be audio-taped and later transcribed.

We cannot and do not guarantee or promise that you will receive any benefits from this study. Any information that is obtained in connection with this study and that can be identified with you will remain confidential and will be disclosed only with your permission or except as required by law. If you give us your permission by signing this document, we plan to *discuss/publish* the results in various publications and conference presentations. If requested, appropriate information will be given to you as a feedback. In any publication, information will be provided in such a way that you cannot be identified.

Complaints may be directed to the Ethics Secretariat, University of New South Wales, SYDNEY 2052 AUSTRALIA (phone 9385 4234, fax 9385 6648, email ethics.sec@unsw.edu.au).

Your decision whether or not to participate will not prejudice your future relations with the University of New South Wales. If you decide to participate, you are free to withdraw your consent and to discontinue participation at any time without prejudice.

If you have any questions, please feel free to ask us. If you have any additional questions later, Dr John McCormick, on 9385 1987, will be happy to answer them. You will be given a copy of this form to keep.

**THE UNIVERSITY OF NEW SOUTH WALES
SUBJECT INFORMATION STATEMENT AND CONSENT FORM (continued)**

You are making a decision whether or not to participate. Your signature indicates that, having read the information provided above, you have decided to participate in the focus group discussion.

Signature of subject

Signature of witness

Please PRINT name

Please PRINT name

Date

Nature of Witness

Signature(s) of investigator(s)

Please PRINT Name

REVOCAION OF CONSENT

I hereby wish to **WITHDRAW** my consent to participate in the research proposal described above and understand that such withdrawal **WILL NOT** jeopardise any treatment or my relationship with the University of New South Wales (*Hospital or my medical attendants*).

Signature

Date

Please PRINT Name

The section for Revocation of Consent should be forwarded to John McCormick, School of Education, The University of New South Wales, 2052.

Appendix G

Focus Group Discussion: Topic Guideline

Themes	Questions
Ethnic identity	<p>To be an Asian, what do you think is important?</p> <p>Do you think family responsibilities are paramount?</p> <p>Do you think to comply with the group values and rules, is more important than to just be yourself?</p>
Gay identity	<p>To be a gay, what do you think is important?</p> <p>What sort of contact have you had with gay community?</p>
Disjunction	<p>Do you feel it a challenge to be Asian and gay?</p> <p>Do you feel pressures either from your ethnic community or from gay community? If so, which pressures are more difficult to deal with?</p>
Partner preference	<p>What kind of partners do you think suit you best (Asian or Caucasian, long-term boyfriend or casual)?</p> <p>Do you ask your partners what their HIV status is before having sex?</p> <p>To what kind of gay venues do you usually go to find sex partners? Where else do you look for sex partners?</p>

table continues

Themes	Questions
Skills	
English competency	How well do you think you can make yourself understood in English?
Sex negotiation and agreement	Do you often talk about condom use with your partners before having sex?
	About sex, is there any kind of agreement between you and your partners?
	Do you feel any differences between suggesting safe sex to a Caucasian partner and to an Asian partner? Which one is easier to negotiate?
	Do you use condoms during anal sex? Are there times or situations when you don't?
Vicarious learning	What kind of sources do you mostly get information or experience from?
	Are your gay friends or your partners influential to you? What kind of influences would affect you mostly?
Self-efficacy	
Condom-use efficacy	Do you think if you want to, you can always use condoms during sex?
Negotiation efficacy	Do you think if you want to, you can always persuade you partners to agree with you?
Integration efficacy	Do you think even if now you may face difficulties, you can eventually integrate your Asian identity with your gay identity successfully?
	Do you think if you want to, you can find a right way to attach yourself to gay community and have positive experiences within gay community?

THE UNIVERSITY OF NEW SOUTH WALES INFORMATION SHEET: QUESTIONNAIRE

The nature of the study

This survey is part of the study of sexual behaviours of Asian and Caucasian gay men in Sydney. The questionnaire has three sections. The first section asks about **your cultural beliefs**. The second section asks about **your confidence in regard to condom use and negotiation with sexual partners**. The third section asks about **your actual sexual behaviours with other men in the last six months**. It will take you about half an hour to complete.

Who is being asked to participate?

Both Asian and Caucasian men (gay-identified or non-gay-identified) who are now living in Sydney are being asked to participate. Only **Asian and Caucasian men who have had sex with another man in the past five years should complete the questionnaire**. You should only complete one questionnaire, even if you are approached on more than one occasion.

Anonymity and Consent

This survey is completely anonymous. Do not write your name or put any identifying marks on the survey form. To ensure anonymity, consent forms are not being used.

We cannot and do not guarantee or promise that you will receive any benefits from this study. Your decision whether or not to participate will not prejudice your future relationship with the University of New South Wales. If you decide to participate, you are free to withdraw your consent and to discontinue participation at any time without prejudice.

Feedback

As this is an anonymous survey, feedback will be provided through the AIDS Council of NSW (ACON) and a report will also be prepared, together with publications and conference presentations.

Inquiries

Complaints may be directed to the Ethics Secretariat, The University of New South Wales, SYDNEY 2052 AUSTRALIA (phone 9385 4234, fax 9385 6648, email ethics.sec@unsw.edu.au).

Appendix I

Questionnaire

Section A

Instructions

This is a questionnaire about your values when interacting with others. We would like to ask you about your values when interacting with people in four different types of relationships: (1) Your Family; (2) Close Friends; (3) Colleagues; and (4) Strangers. For the purposes of this questionnaire, we define each of these relationships as follows:

YOUR FAMILY: By “family,” we mean only the core, nuclear family that was present during your growing years, such as your **mother, father, and any brothers or sisters**. Do **not** consider other relatives such as aunts, uncles, grandparents, cousins, etc, as your “family” here unless they actually lived with you while you were growing up.

CLOSE FRIENDS: By “close friends,” we mean those individuals whom you consider “close;” i.e. **with whom you spend a lot of time and/or have known for a long time**. Do **not** consider people who are “just” acquaintances, colleagues, or others whom you would not consider as your close friends. Also, do **not** consider intimate partners (eg boyfriend, girlfriend) here, either.

COLLEAGUES: By “colleagues,” we mean those people with whom you interact on a regular basis, but with whom you may not be particularly close (for example, **people at work, school, or a social group**). Do **not** consider close friends on the one hand, or total strangers on the other.

STRANGERS: By “strangers,” we mean those people with whom you do not interact on a regular basis, and whom you do not know (ie **total strangers such as people in the subway, on the street, at public events, etc**). Do **not** consider friends, acquaintances, or family.

You can refer to this list as many times as you want when completing your ratings.

We know that your values may differ *within* each of these groups, depending on with whom you are interacting. Try **not to be too concerned with specific individuals, but rather, try to respond to what you believe about each of these groups as general categories of social relationships.**

Also, don't be concerned at all about how your responses compare to each other. There is no right or wrong, good or bad. Don't worry about whether your responses are consistent. Just tell us how you truly feel about each group on its own merits.



VALUES

In this section, tell us about the *values* you have when interacting with people in the four relationship groups. **Values are concepts or beliefs about desirable end states or behaviours that guide our selection of behaviours and evaluation of events.** Use the following rating scale to tell us how important each of the following is as a value to you. **Write the appropriate number in the space provided for each of the four social groups:**

	Not at All Important 0	1	2	3	4	5	Very Important 6	
	Close							
	Family		Friends		Colleagues		Strangers	
1 Maintain self-control toward them.	_____	_____	_____	_____	_____	_____	_____	_____
2 Share credit for their accomplishments.	_____	_____	_____	_____	_____	_____	_____	_____
3 Share blame for their failures.	_____	_____	_____	_____	_____	_____	_____	_____
4 Respect and honour their traditions and customs.	_____	_____	_____	_____	_____	_____	_____	_____
5 Be loyal to them.	_____	_____	_____	_____	_____	_____	_____	_____
6 Sacrifice your goals for them.	_____	_____	_____	_____	_____	_____	_____	_____
7 Sacrifice your possessions for them.	_____	_____	_____	_____	_____	_____	_____	_____
8 Respect them.	_____	_____	_____	_____	_____	_____	_____	_____
9 Compromise your wishes to act in unison with them.	_____	_____	_____	_____	_____	_____	_____	_____
10 Maintain harmonious relationships with them.	_____	_____	_____	_____	_____	_____	_____	_____
11 Nurture or help them.	_____	_____	_____	_____	_____	_____	_____	_____

- | | | | | | |
|-----------|--|-------|-------|-------|-------|
| 12 | Maintain a stable environment
(eg maintain the status quo)
with them. | _____ | _____ | _____ | _____ |
| 13 | Exhibit "proper" manners
and etiquette, regardless of
how you really feel,
toward them. | _____ | _____ | _____ | _____ |
| 14 | Be like or similar to them. | _____ | _____ | _____ | _____ |
| 15 | Accept awards, benefits, or recognition
based only on age or position rather
than merit from them. | _____ | _____ | _____ | _____ |
| 16 | Cooperate with them. | _____ | _____ | _____ | _____ |
| 17 | Communicate verbally
with them. | _____ | _____ | _____ | _____ |
| 18 | "Save face" for them. | _____ | _____ | _____ | _____ |
| 19 | Follow norms established
by them. | _____ | _____ | _____ | _____ |



Section B

On this page, we talk about CASUAL partners. If you don't have casual partners think how it would be if you did have casual partners.

For each statement below circle the percentage which best shows your level of confidence.

	Not	Completely confident									
20 I can say no to intercourse with casual partners if we don't have a condom.	0	10	20	30	40	50	60	70	80	90	100%
21 I can have a good time using a condom with casual partners.	0	10	20	30	40	50	60	70	80	90	100%
22 I can use a condom with a casual partner even if the room is dark.	0	10	20	30	40	50	60	70	80	90	100%
23 I can get every casual partner to use a condom even if they don't want to.	0	10	20	30	40	50	60	70	80	90	100%
24 When I don't have a condom I can avoid situations that can lead to unsafe sex.	0	10	20	30	40	50	60	70	80	90	100%
25 I can be the one to put the condom on without ruining the mood.	0	10	20	30	40	50	60	70	80	90	100%
26 I can stop to put on a condom before sexual intercourse.	0	10	20	30	40	50	60	70	80	90	100%
27 I can use a condom without fumbling.	0	10	20	30	40	50	60	70	80	90	100%
28 When I don't have a condom I can find another pleasurable activity (such as mutual masturbation).	0	10	20	30	40	50	60	70	80	90	100%
29 I can put a condom on (myself/ my casual partner) so that it will not slip.	0	10	20	30	40	50	60	70	80	90	100%
30 I can talk to casual partners about the importance of using condoms.	0	10	20	30	40	50	60	70	80	90	100%
31 I can put a condom on (myself/my casual partner) and enjoy the experience.	0	10	20	30	40	50	60	70	80	90	100%

On this page we talk about REGULAR partners, that is boyfriends or lovers who are different from casual partners. If you don't have a regular partner, please think how it would be if you did have regular partners.

For each statement below circle the number which best shows your level of agreement.

- 32** My regular partner would think I was having sex with another person if I said we had to use condoms.
- 33** My regular partner wouldn't like it if I had a condom with me.
- 34** My regular partner would break up with me if I said we had to use condoms.
- 35** My regular partner would be happier if we used a condom.
- 36** Saying we have to use a condom is like saying "I don't trust you."

	Strongly disagree			Strongly agree		
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5

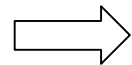
For each statement below **circle the percentage which best shows your level of confidence about the following situations. (If you don't have a regular partner, think how it would be if you did.)**

Not

Completely confident

- 37** I can talk to my regular partner, so that we know if our HIV status is the same.
- 38** I can talk to my regular partner about sexual practices within our relationship.
- 39** I can talk to my regular partner about safe sex outside of our relationship.
- 40** I can make agreements about sexual practices with my regular partner.
- 41** I can keep sexual practice agreements I have made with my regular partner.
- 42** I can talk with my regular partner if I have broken our sexual practice agreements.

	0 10 20 30 40 50 60 70 80 90 100%
	0 10 20 30 40 50 60 70 80 90 100%
	0 10 20 30 40 50 60 70 80 90 100%
	0 10 20 30 40 50 60 70 80 90 100%
	0 10 20 30 40 50 60 70 80 90 100%
	0 10 20 30 40 50 60 70 80 90 100%



Section C

For each question below **tick the box which best applies to you.**

43 How many of your friends are gay or homosexual men?

- None
- A few
- Some
- Most
- All

44 How much of your free time is spent with gay or homosexual men?

- None
- A little
- Some
- A lot

45 How much of your free time is spent with gay or homosexual **Asian** men?

- None
- A little
- Some
- A lot

46 Do you think of yourself as:

- Gay/homosexual
- Bisexual
- Straight/Heterosexual
- Queer
- Tongzhi

Other (please specify) _____

In this survey we distinguish between **REGULAR** (boyfriend/lover) and **CASUAL** partners.

47 Do you currently have sex with **casual** male partners?

No Yes

48 Do you currently have sex with a **regular** male partner?

No Yes

49 How would you describe your sexual relationship with your **current regular** male partner?

(tick one)

we are monogamous – **neither of us** has casual sex

both my partner and I have casual sex with other men

I have casual sex with other men but **my partner does not**

my partner has casual sex with other men but **I do not**

I have **several regular** male partners

no current regular male partner

50 If you are in a **regular** relationship with a man, for how long has it been?

Less than 6 months

6–11 months

1–2 years

More than 2 years

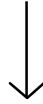
Not in a regular relationship with a man

LAST SIX MONTHS

- 51 How many different **men** have you had sex with in the past six months?
- None
 - One
 - 2–5 men
 - 6–10 men
 - 11–50 men
 - More than 50 men

Regular male partners — last 6 months

- 52 Have you had sex with regular male partner/s in the last six months?
- Yes No *Go directly to Question 59.*



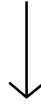
In the past **SIX MONTHS** which of the following have you done with your **REGULAR** male partner/s?

- 53 I fucked him **with a condom** Never Occasionally Often
- 54 He fucked me **with a condo** Never Occasionally Often
- 55 I fucked him **without a condom** but pulled out before I came Never Occasionally Often
- 56 He fucked me **without a condom** but pulled out before he came Never Occasionally Often
- 57 I fucked him **without a condom** and came inside Never Occasionally Often
- 58 He fucked me **without a condom** and came inside Never Occasionally Often

Casual male partners — last 6 months

59 Have you had sex with casual male partner/s **in the last six months?**

Yes No Go directly to Question **66**.



In the past SIX MONTHS which of the following have you done with any of your **CASUAL** male partners?

60 I fucked him ***with a condom***

Never Occasionally Often

61 He fucked me ***with a condom***

Never Occasionally Often

62 I fucked him ***without a condom*** but pulled out before I came

Never Occasionally Often

63 He fucked me ***without a condom*** but pulled out before he came

Never Occasionally Often

64 I fucked him ***without a condom*** and came inside

Never Occasionally Often

65 He fucked me ***without a condom*** and came inside

Never Occasionally Often

66 Have you ever had an HIV antibody test?

No Yes

67 When were you last tested for HIV antibodies?

Less than a week ago

1–4 weeks ago

1–6 months ago

7–12 months ago

1–2 years ago

2–4 years ago

more than 4 years ago

No test

68 Based on the results of your HIV antibody tests, what is your HIV status?

No test/Don't know

Negative

Positive

IF you are **in a regular relationship with a man** at present, please complete the next four questions; **IF not, go to question 73.**

69 Do you know the result of your regular partner's HIV antibody test?

Yes—Positive

Yes—Negative

I don't know/He hasn't had a test

70 Have you told you current regular partner the result of your HIV antibody test?

Yes

No

I don't know/I haven't had a test

71 Do you have a **clear (spoken) agreement** with your regular partner about anal sex (fucking) within your relationship?

No agreement

Agreement: No anal sex at all

Agreement: All anal sex is with a condom

Agreement: Anal sex can be without a condom

72 Do you have a **clear (spoken) agreement** with your regular partner about sex with casual partners?

No agreement

Agreement: No sex at all

Agreement: No anal sex at all

Agreement: All anal sex is with a condom

Agreement: Anal sex can be without a condom

73 Whom have you told that you are sexually attracted to men?

(tick as many as applicable)

- I haven't told anyone
- My mother
- My father
- Other relatives
- Female sex partners
- Any gay friends
- Any straight friends
- Anyone else

74 Do you feel part of the gay community here in Australia?

- Yes, very much
- Yes, a little
- No, not at all

75 How old are you? _____ years

76 How long have you lived in Australia?

- I was born in Australia
- Less than a year
- 1-2 years
- 3-5 years
- More than 5 years

77 How long have you lived in Sydney?

- I was born in Sydney
- Less than a year
- 1-2 years
- 3-5 years
- More than 5 years

78 What is the ethnic background of your family?

- Caucasian
- East Asian
- South Asian
- South-East Asian

Other (please specify)

If you are of an **Asian** background, please complete the next two questions.

79 Do you feel part of your ethnic community here in Australia?

Yes, very much

Yes, a little

No, not at all

80 How many of the men you currently have sex with are **Asian** men?

None

Some

Most

All

Thank you for your cooperation!

Appendix J

Summary of missing data (N = 400)

	Valid <i>n</i>	Missing
Section A		
Q1		
self-control toward family	397	3
self-control toward close friends	398	2
self-control toward colleagues	399	1
self-control toward strangers	399	1
Q2		
Share credit with family	395	5
Share credit with close friends	397	3
Share credit with colleagues	398	2
Share credit with strangers	398	2
Q3		
Share blame with family	396	4
Share blame with close friends	397	3
Share blame with colleagues	397	3
Share blame with strangers	397	3
Q4		
Respect traditions of family	396	4
Respect traditions of close friends	397	3
Respect traditions of colleagues	396	4
Respect traditions of strangers	397	3
Q5		
Loyal to family	397	3
Loyal to close friends	399	1
Loyal to colleagues	397	3
Loyal to strangers	397	3
Q6		
Sacrifice goals for family	397	3
Sacrifice goals for close friends	398	2
Sacrifice goals for colleagues	398	2
Sacrifice goals for strangers	398	2

table continues

	Valid <i>n</i>	Missing
Q7		
Sacrifice possessions for family	398	2
Sacrifice possessions for close friends	398	2
Sacrifice possessions for colleagues	398	2
Sacrifice possessions for strangers	399	1
Q8		
Respect family	399	1
Respect close friends	400	0
Respect colleagues	400	0
Respect strangers	400	0
Q9		
Compromise with family	395	5
Compromise with close friends	396	4
Compromise with colleagues	396	4
Compromise with strangers	396	4
Q10		
Harmony with family	398	2
Harmony with close friends	398	2
Harmony with colleagues	398	2
Harmony with strangers	397	3
Q11		
Nurture family	399	1
Nurture close friends	400	0
Nurture colleagues	399	1
Nurture strangers	398	2
Q12		
Maintain stability with family	398	2
Maintain stability with close friends	399	1
Maintain stability with colleagues	398	2
Maintain stability with strangers	398	2

table continues

	Valid <i>n</i>	Missing
Q13		
Exhibit etiquette towards family	399	1
Exhibit etiquette towards close friends	399	1
Exhibit etiquette towards colleagues	399	1
Exhibit etiquette towards strangers	399	1
Q14		
Be similar to family	396	4
Be similar to close friends	397	3
Be similar to colleagues	397	3
Be similar to strangers	397	3
Q15		
Accept awards from family	389	11
Accept awards from close friends	390	10
Accept awards from colleagues	390	10
Accept awards from strangers	389	11
Q16		
Cooperate with family	399	1
Cooperate with close friends	399	1
Cooperate with colleagues	400	0
Cooperate with strangers	399	1
Q17		
Communicate with family	398	2
Communicate with close friends	399	1
Communicate with colleagues	399	1
Communicate with strangers	398	2
Q18		
Save face for family	393	7
Save face for close friends	393	7
Save face for colleagues	395	5
Save face for strangers	394	6
Q19		
Obey norms of family	395	5
Obey norms of close friends	396	4
Obey norms of colleagues	396	4
Obey norms of strangers	396	4

table continues

	Valid <i>n</i>	Missing
Section B		
Part I: Self-efficacy in safe sex with casual partners		
Q20 Say no to intercourse without condoms	400	0
Q21 Have a good time with a condom	398	2
Q22 Use condoms in a dark room	399	1
Q23 Persuade casual partners to use condoms	398	2
Q24 Avoid unsafe situation without condoms	399	1
Q25 Put condoms on without ruining mood	397	3
Q26 Able to stop and put condoms on	396	4
Q27 Put condoms on without fumbling	398	2
Q28 Find another pleasurable activity instead of intercourse without condoms	398	2
Q29 Put condoms on without slippage	399	1
Q30 Talk about importance of condom use	397	3
Q31 Put condoms on and enjoy it	398	2
Part II: Outcome expectancies in regular partners' reactions to condom use		
Q32 Assume to have sex with another	400	0
Q33 Dislike condoms	400	0
Q34 Possibility of breaking up	399	1
Q35 Happier if condom is used	399	1
Q36 Symbol of mistrust	399	1

table continues

	Valid <i>n</i>	Missing
Part III: Self-efficacy in negotiated safety with regular partners		
Q37 Status disclosure	399	1
Q38 Negotiate sex within the relationship	400	0
Q39 Negotiate sex outside the relationship	396	4
Q40 Make agreements	395	5
Q41 Keep agreements	398	2
Q42 Re-negotiate if agreements are broken	398	2
Section C		
Q43 Gay friends	400	0
Q44 Free time with gay men	400	0
Q45 Free time with gay Asians	398	2
Q46 Self-identity	400	0
Q47 Casual partners	397	3
Q48 Regular partners	395	5
Q49 Regular relationship	390	10
Q50 Length of regular relationship	383	17
Q51 Men in the last six months	391	9
Q52 Regular partners in last six months	394	6
Among those who had regular partners in the last six months (Q53–Q58) (<i>n</i> = 257)		
Q53 I fuck with condom	254	3
Q54 He fuck with condom	249	8
Q55 I fuck without condoms but withdraw	253	4
Q56 He fuck without condom but withdraw	249	8
Q57 I fuck without condoms and came inside	257	0

table continues

	Valid <i>n</i>	Missing
Q58 He fuck without condoms and came inside	257	0
Q59 Casual partners in last six months	391	9
Among those who had casual partners in the last six months (Q60–Q65) (<i>n</i> = 280)		
Q60 I fuck with condom	272	8
Q61 He fuck with condom	271	9
Q62 I fuck without condom but withdraw	269	11
Q63 He fuck without condom but withdraw	265	15
Q64 I fuck without condom and came inside	267	13
Q65 He fuck without condom and came inside	265	15
Q66 HIV test	396	4
Q67 Time of latest test	395	5
Q68 HIV status	387	13
Among those who 'currently' had a regular partner (Q69–Q72) (<i>n</i> = 256)		
Q69 Know partner's status	223	33
Q70 Tell own status	217	39
Q71 Clear agreement about sex within regular relationships	218	38
Q72 Clear agreement about sex outside regular relationships	218	38

table continues

	Valid <i>n</i>	Missing
Q73 Disclose homosexuality:		
Told none	395	5
Told mother	395	5
Told father	395	5
Told relatives	395	5
Told female sex partner	395	5
Told gay friends	395	5
Told straight friends	395	5
Not told anyone	395	5
Q74 Gay community	400	0
Q75 Age	392	8
Q76 Residence in Australia	399	1
Q77 Residence in Sydney	396	4
Q78 Family ethnic background	400	0
Among the Asian participants (Q79–Q80) (<i>n</i> = 199)		
Q79 Attachment to ethnic community	196	3
Q80 Sex with fellow Asian men	196	3

Appendix K

Approval No: CEIPHS No.00005

THE UNIVERSITY OF NEW SOUTH WALES SUBJECT INFORMATION STATEMENT AND CONSENT FORM: INDIVIDUAL INTERVIEWS

You are invited to participate in a study of sexual behaviours of gay Asian and Caucasian men in Sydney. We are investigating a theoretical model of major influences on safe sex behaviours from cultural and motivational perspectives. You were selected as a possible participant in this study because you satisfy our inclusion criteria, that is, Asian or Caucasian men who have sex with men and now living in Sydney.

If you decide to participate, we will organise a one-to-one interview. We intend to discuss issues related to what it is like to be a gay man living in Sydney. The one-to-one interview will last approximately 1 hour. The intended venue of the one-to-one interview will be a private venue. The interview will be audio-taped and later transcribed. We cannot and do not guarantee or promise that you will receive any benefits from this study.

Any information that is obtained in connection with this study and that can be identified with you will remain confidential and will be disclosed only with your permission or except as required by law. If you give us your permission by signing this document, we plan to *publish* the results in various publications and conference presentations. In any publication, information will be provided in such a way that you cannot be identified.

Complaints may be directed to the Ethics Secretariat, University of New South Wales, SYDNEY 2052 AUSTRALIA (phone 9385 4234, fax 9385 6648, email ethics.sec@unsw.edu.au).

Your decision whether or not to participate will not prejudice your future relations with the University of New South Wales. If you decide to participate, you are free to withdraw your consent and to discontinue participation at any time without prejudice.

If you have any questions, please feel free to ask us. If you have any additional questions later, Dr John McCormick, on 9385 1987, will be happy to answer them.

You will be given a copy of this form to keep.

**THE UNIVERSITY OF NEW SOUTH WALES
SUBJECT INFORMATION STATEMENT AND CONSENT FORM (continued)**

You are making a decision whether or not to participate. Your signature indicates that, having read the information provided above, you have decided to participate in the individual interview.

Signature of subject

Signature of witness

Please PRINT name

Please PRINT name

Date

Nature of Witness

Signature(s) of investigator(s)

Please PRINT Name

REVOCAION OF CONSENT

I hereby wish to **WITHDRAW** my consent to participate in the research proposal described above and understand that such withdrawal **WILL NOT** jeopardise any treatment or my relationship with the University of New South Wales.

Signature

Date

Please PRINT Name

The section for Revocation of Consent should be forwarded to Dr. John McCormick, School of Education, The University of New South Wales, 2052.

Appendix L

Interview Protocol

The following topics will be discussed in a semi-structured interview:

- risk taking in terms of age differences among gay Asian and Caucasian men;
- with reference to casual partners:

attitudes towards sex with casual partners, chances of getting casual partners among gay Asian and Caucasian men and anal intercourse with casual partners—protected and unprotected anal intercourse;

- self-efficacy in practical use of condoms with casual partners among gay Asian and Caucasian men (preventing condom breakage, slippage and effective condom use);
- self-efficacy in risk avoidance with casual partners (refusing unprotected anal intercourse with casual partners and avoiding risk situations);
- with reference to regular partners:

HIV testing and knowledge of regular partner's HIV status, the practice of anal intercourse and condom use and the practice of negotiated safety;

- interpersonal relationships—concern for self, family members, close friends, colleagues and gay friends; and
- gay community attachment and vicarious learning:

information enquiry and problem solving regarding safe sex, identity conflict (double marginalisation) and gay networks.

Appendix M

Participant Profiles: One-to-One Interviews

Pseudonym	Age (years)	Birthplace	Ethnicity	Interview location	Length of residency in Sydney (years)
Ad	26	Perth WA	Caucasian	Home	2
Br	25	Sydney	Caucasian	Hyde Park	25
Co	26	Sydney	Caucasian	Home	26
De	32	Melbourne VIC	Caucasian	Cafe in Oxford Street	1.5
Du	28	Northern NSW	Caucasian & Aboriginal	ACON interview room	0.5
Kn	66	South Coast NSW	Caucasian	Office	30
Lu	21	Sydney	Caucasian	ACON interview room	21
Pe	49	Sydney	Caucasian	Office	49
Se	31	Perth WA	Caucasian	Home	6
St	40	Sydney	Caucasian	Home	40

table continues

Pseudonym	Age (years)	Birthplace	Ethnicity	Interview location	Length of residency in Sydney (years)
Al	45	Bombay India	Asian (Indian)	Home	12
Iw	39	Jakarta Indonesia	Asian (Indonesian)	Home	4
Ji	32	Indonesia	Asian (Indo- Chinese)	Home	23
Ke	35	China	Asian (Chinese)	Home	12
Le	45	Singapore	Asian (South-East Asian)	Car	40
Mi	20	Sydney	Asian (Filipino & Spanish Australian)	Home	20
Od	34	Indonesia	Asian (Indo- Chinese)	Friend's home	3
Pa	39	Singapore	Asian (Malay- Chinese)	Home	12
Rh	28	South-East Asia	Asian (South-East Asian)	Home	4

Appendix N

Node Coding System for One-to-One Interviews

- (1) /Sydney gay community
- (1 1) /Sydney gay community/other gay communities
- (1 2) /Sydney gay community/types of gay men
- (1 3) /Sydney gay community/gay scenes
- (1 4) /Sydney gay community/gay events
- (1 5) /Sydney gay community/experience within gay community
- (1 6) /Sydney gay community/discrimination in wider community
- (1 7) /Sydney gay community/attitude towards straight people
- (1 8) /Sydney gay community/attachment to gay community
- (2) /risk taking
- (2 1) /risk taking/Asian versus Caucasian
- (2 2) /risk taking/younger versus older
- (3) /safe sex attitude
- (3 1) /safe sex attitude/self
- (3 2) /safe sex attitude/close friends group
- (3 3) /safe sex attitude/condom attitude
- (3 4) /safe sex attitude/new treatment
- (3 5) /safe sex attitude/meanings of anal intercourse
- (3 6) /safe sex attitude/differences between regular and casual partners
- (3 7) /safe sex attitude/HIV/AIDS threat
- (3 8) /safe sex attitude/condom failure
- (3 9) /safe sex attitude/individual perception of risk
- (4) /casual partners
- (4 1) /casual partners/chances of picking-up
- (4 3) /casual partners/casual sexual practices
- (4 3 1) /casual partners/casual sexual practices/casual partner's safe sex attitudes
- (4 3 2) /casual partners/casual sexual practices/unprotected anal intercourse in casual encounters
- (4 4) /casual partners/sexual communication with casuals
- (5) /regular partners
- (5 1) /regular partners/sexual communication with regulars
- (5 2) /regular partners/unprotected anal intercourse in regular or negotiated safety
- (5 3) /regular partners/regular sexual practices
- (6) /HIV testing
- (6 1) /HIV testing/disclose to and inform regular partners
- (6 2) /HIV testing/meaning of HIV test

- (6 3) /HIV testing/anxiety
- (7) /coming out
- (7 1) /coming out/disclosure to family members
- (7 2) /coming out/disclosure to significant others
- (7 3) /coming out/self-identification
- (7 4) /coming out/identity conflict
- (8) /concern for others and support from
- (8 1) /concern for others and support from/medical service
- (8 2) /concern for others and support from/organisational service
- (8 2 1) /concern for others and support from/organisational service/peer education programs
- (9) /working environment
- (10) /information acquisition
- (11) /gay Asian men
- (11 1) /gay Asian men/Asian versus Caucasian
- (11 2) /gay Asian men/gay Asian community
- (11 3) /gay Asian men/gay Asian men within gay community
- (11 4) /gay Asian men/local ethnic community
- (12) /gay friends
- (12 1) /gay friends/talk with close gay friends
- (12 2) /gay friends/influences of gay friends
- (12 3) /gay friends/gay Asian friends
- (12 4) /gay friends/learning
- (13) /alcohol and drugs and sex