

# TOP OR BOTTOM? VARSITY YOUTH TALK ABOUT GAY SEXUALITY IN A STEPPING STONES WORKSHOP: IMPLICATIONS FOR SEXUAL HEALTH

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## ABSTRACT

This article discusses the constructs of sexuality amongst a group of LGBTI university students during a Stepping Stones workshop aimed at exploring their engagement with sexual and reproductive health rights issues as it affects them. These constructs include notions of binary identities of being gay, such as being a 'top' versus being a 'bottom', that are then applied to sexual practices and behaviour that have serious implications for sexual health and bodily integrity. We discuss the intersections of gender identity, sexuality, sexual health and sexual rights, arguing that such constructs are not only limiting in their demarcations of sexual boundaries in relationships and for intimacy but also that attempts to engage sexual health promotion must take into account the intersecting identities of gender and sexuality that are tied to sexual behaviour.

**Key words:** LGBTI, heteronormative, gender and sexual identity, sexual health and rights, Stepping Stones, youth

## INTRODUCTION

In this article, we present and discuss findings from a participatory action research (PAR) project focused on exploring sexual and reproduction practices amongst LGBTI youth living in Johannesburg. The data were collected through mixed PAR focus group discussions with gay, lesbian and bisexual youth at a Stepping Stones Workshop. Sexual and reproductive health remains a key concern for young people, both male and female, and has been shown to have long-lasting impact on psychosocial development and well-being (Knight et al. 2014; Meyer 2003; Mitchell et al. 2014; Nel 2009). The Stepping Stones Workshop was initially developed as a response to some of the challenges of decision-making and knowledge about sexual behaviour that are often faced in sexual health, knowledge and practice (Bhattacharjee 2000;

Dunkle et al. 2006; Jewkes, Cornwall and Röhr-Rouendaal 1998; Jewkes et al. 2006; Paine et al. 2002; Santhya and Jejeebhoy 2015; Shaw and Jawo 2000; Welbourn 1995; Wood and Jewkes 1997). However, these attempts at addressing gaps in sexual and reproductive knowledge using the Stepping Stones training manual has not been fully employed amongst an LGBTI population group. The current study was undertaken as a means of addressing such an important gap by focusing on an LGBTI-identified population group and applying principles and processes of the training manual with this group. In so doing, the article contributes to the growing body of work on sexual health and behaviour amongst LGBTI youth (Knight et al. 2014; Mustanski, Ryan and Garofalo 2014; Nel 2009; Schalet et al. 2014; Tat, Marrazzo and Graham 2015; Waldman and Stevens 2015) by exploring aspects of sexual behaviour practice and relationships.

Previous work using the Stepping Stones training manual amongst heterosexual communities demonstrate that discourses and lived experiences of gender and sexuality in relation to reproductive health and rights highlight issues that may generally affect all youth (Jewkes, Cornwall and Röhr-Rouendaal 1998; Jewkes et al. 2006). The current research therefore contributes to this body of work through the use of such training explorative processes in researching sexuality and sexual rights issues more generally. For the current study, we explored thematic aspects of sexual behaviour, identity and health practices amongst LGBTI-identified youth at a Johannesburg-based university.

The primary objective of the study was to explore the sexual behaviour practices of this population group, that is, the LGBTI community in relation to issues of sexual safety, knowledge and rights. The secondary objective of the study was to use this as a benchmark for thinking about possible intervention strategies for sexual safety and behaviour amongst LGBTI youth. The overall broader objective of the study was to explore the similarities and differences in thematic relevance of the Stepping Stones training manual for a non-heterosexual population group. Research demonstrates that young people engage in similar practices of safe and unsafe sex (Aninanya et al. 2015; Harrison et al. 2015; Shaw and Sweeney 2015) and issues affecting many heterosexual youth remain the same for other population groups, although there will also be significant points of difference and emphasis. The current article discusses thematic findings related to constructs of gay sexuality amongst the gay-identified men participating in the focus group discussions of the workshops.

## **TOP/BOTTOM CONSTRUCTS AMONGST GAY MEN: IMPLICATIONS FOR SEXUAL PRACTICE**

Research on youth in higher education institutions has spanned a diverse array of focal points

that attest to the growing interest in capacity building of youth as social citizens of society more generally (Cloete 2014; Kruss et al. 2014). More recently, researchers have argued for an inclusion of transformation for the LGBTI community as necessary to this broader social citizenship agenda in post-apartheid South Africa (Msibi 2013). Engaging with queer transformation extends to broader psycho-social issues affecting LGBTI youth within institutions of higher learning in South Africa. This not only includes attention to their physical and mental well-being, but also issues of sexual and reproductive health and rights (Nel 2009). In this section we present a summary of research on LGBTI youth and sexual health with specific focus on the constructs of 'top/bottom' identity categories and the significance of these constructs in intervening for sexual health. The significance of performances of gender and sexuality for sexual health remains an important dimension of engaging healthy sexual practice. For theorists such as Judith Butler (1990) our engagements with gender identity must take a radical turn, one that recognises the performative and far from stable nature of gender itself. For her, gender identities are not only unstable but also impossible to fully embody. Such a radical approach means that we have to take seriously whether and how we work with identifications as stable and unproblematic manifestations of an authentic self or rather as performative and repeated practices that are open to shifts and fluidity. Identifications such as 'top' or 'bottom' in this sense then become discursive and embodied performances of gender that are open to critical interrogation and which must be understood as performative embodiments that may be strategic in parts but also detrimental to how sexual health behaviour is realised.

Research has demonstrated that LGBTI youth are more likely to struggle with issues of access to sexual health information and services and this may influence such a population in seeking information elsewhere, such as online interactive spaces (Knight et al. 2014; Mitchell et al. 2014). Constructs of sexuality in terms of being a 'top' or a 'bottom' have been explored by researchers interested in the sexual identification and practice of gay men, and attest to the complexities of identification that language and labelling practice imply in general (Grundy-Bowers, Hardy and McKeown 2015; Johns et al. 2012; Kippax and Smith 2001; Matebeni and Msibi 2015; McGill and Collins 2014a; McGill and Collins 2014b; McGill and Collins 2015). The terms 'top' and 'bottom' have been used within the LGBTI community to describe preferences of being either an insertive or receptive partner during sexual intercourse (Wegesin and Meyer-Bahlburg 2000). Other researchers have argued that such emphasis on the sexual preferences and practice in relation fails to acknowledge the wide and complex dynamics of the labels (McGill and Collins 2015). For such researchers, being a 'top' or a 'bottom' encompasses

a myriad of identity and behaviour practices that are not just restricted to sexual intercourse. More than this, the role or identity of top/bottom is characterised by continually shifting identifications related to a different influence, such that an individual may embody both identities and preferences of top/bottom simultaneously or at different moments in life and in a relationship (McGill and Collins 2015; Wegesin and Meyer-Bahlburg 2000). Indeed, some researchers have argued for the fluidity of gay men's sexual preferences, preferring not to use binary labels in thinking about gay sexuality (Johns et al. 2012) and have also used the label of being 'versatile' to discuss the fluidity of sexual positions during sex (Moskowitz, Rieger and Roloff 2008).

The importance and influence of heteronormative gender norms to how individuals identify as top or bottom is crucial to note here and requires some further investigation with regards to challenging heteronormative practices more generally but also within same-sex communities (McGill and Collins 2015). The implications of such labelling practices have presented interesting dynamics for researchers investigating sexual health practice and negotiation. For example, it has been found that individuals who identify as bottoms are more likely to be HIV-positive than individuals identifying as tops (Wegesin and Meyer-Bahlburg 2000). Other research demonstrates the role of sexual labelling as top/bottom in making sexual decisions within a relationship (Johns et al. 2012). However, it is important to note that these enactments of sexual preference will differ relative to the nature of the relationship, i.e. casual or romantic (Johns et al. 2012).

Other research shows that the use of labels of top or bottom also relate to other intricate dynamics of power and erotics and that such labels do not easily demarcate who is passive or powerless in the relationship (Hoppe 2011; Kippax and Smith 2001). Foucault's (1993) notion of the productive nature of discourse is useful to thinking about the place of power here. In this way, the production of sexed and gendered subjects can be read and understood via this idea of a power network. Through his idea of disciplinary power, Foucault (1993) makes the argument that subjectivity is constituted or produced through technologies of power and/or practices of the self. In other words, the individual becomes constituted or is made a subject via relations of power that both constrain and make possible different subjectivities. Such an understanding allows to think critically about conditions that limit how individuals exist within specific moments in time but at the same, how individuals may also resist these conditions of constraint. To quote Foucault (1980, 212): 'This form of power applies itself to immediate everyday life which categorizes the individual. Marks him [sic] by his own individuality, attaches him to his own identity, imposes a law of truth on him which he must recognize and which others have to

recognize in him.’ This understanding of power and subjectification is useful to consider with regards to gendered and sexual subjectivities and their re-enactments over time and space.

Recently, researchers have focused on the phenomenon known as ‘barebacking’ to explore dynamics of sexual identity and practice amongst gay men (Carballo- Diéguez et al. 2009; Grundy-Bowers, Hardy and McKeown 2015; Halkitis et al. 2008; Halkitis, Wilton and Drescher 2005; Halkitis, Wilton and Galatowitsch 2005; Yep, Lovaas and Pagonis 2002). ‘Barebacking’ is an informal term that is used to describe the deliberate participation in anal sex without a condom amongst gay men (Carballo-Diéguez et al. 2009) . While there is some contestation on the use of this term to describe gay men’s sexual practice (Huebner, Proescholdbell and Nemeroff 2006), researchers generally agree that the phenomenon of barebacking remains a critical practice that challenges so-called rational understandings of sexual behaviour and identity today (Halkitis, Wilton and Galatowitsch 2005; Yep, Lovaas and Pagonis 2002). The interface of riding bareback and sexual identity positioning (top/bottom/versatile) has provided some further debate on understanding the relational dynamics of sexual encounters and interactions amongst gay men (Grundy-Bowers, Hardy and McKeown 2015). The interface with other dynamics of race and class also point to the importance of research in this area (Fields et al. 2015; Herbst et al. 2014; Lick and Johnson 2015). The interaction of racial, classed and sexual scripts in sexual role performances and practice has been shown to influence the lived experiences and performances of gender and sexuality amongst gay men in a South African context (Collier et al. 2015; Masvawure et al. 2015) and attest to the importance of including this population group to understand how intersectionality matters for sexual well-being (Rabie and Lesch 2009).

## **RESEARCH METHODOLOGY**

A qualitative research design was adopted for the study. This methodology was considered appropriate given the explorative nature of the study objectives; which was to explore how LGBTI youth are engaging with sexual reproductive health issues. Focus group-style discussions were conducted with members over a period of seven weeks. A qualitative approach is further advantageous in a study such as this as it allows for open-ended thematic explorations to emerge that further explore the subjective meanings that participants attach to behaviour and practice (Attride-Stirling 2001).

## **METHODS**

Given the explorative nature of the study; a qualitative research design was adopted that

included focus groups each week with a mixed group of lesbian; gay; and bisexual-identified youth on campus. To the knowledge of the facilitators there was no transgender or intersex person in the group. The data presented and discussed here pertain to the group discussions of gay male sexual behaviour and identity; as discussed by the gay-identified students in the group during the break-away sessions. These break-away sessions were demarcated along gendered categories; with men and women positioned in different groups.

## **DATA COLLECTION**

### **The Stepping Stones training workshops**

Stepping Stones is a training manual that was developed in Uganda by Alice Welbourn (Welbourn 1995) and later adapted for a South African context by Rachel Jewkes and Andrea Cornwall (Jewkes et al. 2006). The training manual is designed to impart HIV prevention strategies by improving the sexual health and well-being of participants by facilitating stronger and healthier relationships. Focusing on issues of sexual knowledge and allowing participants space to reflect and share their knowledge and motivations for behaviour; the workshops promote open discussions between members. The training workshop is ideally suited for single-sex groups. Through role play; drawing diagrams; discussions; etc.; thematic issues are covered each week by the members and are facilitated; ideally; by a gender and sexual health expert (Bhattacharjee 2000; Jewkes, Cornwall and Röhr-Rouendaal 1998; Jewkes et al. 2006; Shaw and Jawo 2000; Welbourn 1995). The Stepping Stones training manual has not been widely used for an LGBTI population group, thereby limiting our knowledge of the feasibility of the workshop to address the sexual and reproductive health concerns of this cohort. The workshops were an attempt to address this gap by assessing the utility of the Stepping Stones training manual for LGBTI youth. In this study, the workshops focused on thematic aspects of relationships, sexual health practice and knowledge and were facilitated by one of the researchers. While there is no conceptual framework via which the Stepping Stones Manual may be understood, we offer here a possibility for utilising this Manual in relation to more radical approaches to gender identity. In particular, we argue for a radical approach to gender identity and power in intimate relationships using Butler and Foucault's notions of gender subversion and power respectively. In this sense then, Butler's ideas of how gender identities may be performed in strategic and repetitive ways as a means of resistance and management of the self is useful to thinking about gender and sexual identity positionings of 'top' and 'bottom' in gay male intimate relationships. More than this, the binary that is implied in such

identifications are more readily open to challenge and interrogation because these identifications are not seen to be stable or intrinsic identities, but rather performative practices within particular contexts that both constrain and open up myriad possibilities of gender embodiment.

## **PARTICIPANTS**

About 20 LGB-identified and heterosexual participants took part in the workshops, with varying attendance numbers of about 10 each week. The workshops included a mixed gender group as well as mixed group in terms of sexual orientation. Participants ranged in age from 18–25 years and were students at different institutions at the time of the study. The majority were at the University where the study took place.

## **PROCEDURE**

The study was conducted at the University of the Witwatersrand at a location participants felt comfortable with. They were informed about the objectives of the study and the implications of their participation. Ethical clearance for the study was obtained from the University Ethics Committee. Participants were also informed of their right to withdraw at any time during the study. One of the researchers facilitated the workshop discussions while other members of the research team recorded and noted the discussions. The focus groups were conducted each week over a 7-week period with the same group and was guided by different thematic issues or topics for each week. Flow charts, diagrams and discussion notes made by the different members of the research team were included for analysis. In this article, we focus on the thematic constructs of gay male sexuality that is based on the emerging themes arising from the focus group discussions. Themes were selected based on their relevance for the topic, i.e. how constructs of gay sexuality and identity of ‘top/bottom’ influence the sexual behaviour and health practice of the participants as gay men.

## **FINDINGS AND DISCUSSION**

The dominant and pervading construct of ‘top/bottom’ identities in speaking about gay sexualities was evident in the discussions of identity and sexual behaviour. Three broad themes are discussed in relation to the construct of top/bottom identities by gay men and their sexual behaviour: 1) social sexual scripts informing constructs of a top/bottom identity; 2) negotiating safe sex as a bottom identifying person; 3) risk factors affecting bottom-identifying gay men and access to health services. These themes are summarised below from the flipcharts produced

during group discussion by the gay cohort in the group and are discussed in more depth in the next section based on the notes documented during discussion.

Top	Bottom
Makes the suggestion about whether to use a condom or not	Can make the decisions but it also depends
He is the one leading the direction of the relationship	Bottoms are not always as powerless as they may seem
Most of the time they are in the closet	Are more likely to be open about their sexuality
Will not access health services or seek help most of the time	Are more likely to seek help
Less likely to experience prejudice and discrimination	More likely to experience prejudice and discrimination
Is most likely the insertive partner	More likely to experience anal tearing
Less likely to be intimate	Seek intimacy
Assumes a protective role in the relationship	Needing protection

### ***'YOU CAN TELL THAT THIS ONE IS MORE SUBMISSIVE': SOCIAL SEXUAL SCRIPTS IN 'BOTTOM' IDENTITIES***

In their accounts of the sexual behaviour and practice as gay men, participants in the group often described such behaviour and practice through the constructs of sexuality in terms of being either a top or bottom. Such a construct is important for how we think about the sexual decisions and practices of these participants in their everyday lived experiences. Through these constructs the participants negotiate and make sense of their intimate partnerships and relationships. In this sense then, it can be argued that understanding the sexual scripts of individuals is important to sexual empowerment in their health-related practices. What is however interesting about the constructs of gay sexuality in this current study, is what may be seen as the reproduction or influence of social sexual scripts within the broader heteronormative society that we live in. These social sexual scripts are evident in how the participants make sense of and categorise themselves and others as either top/bottom. For example, one gay male described his criteria for positioning someone as top/bottom thus:

Most times it's just by the look of this person. You can tell that this one is more submissive. That is how you know that he is a bottom.

In another account, another participant described his own self-positioning in this way:

I have always been effeminate and that is how I present myself, and so people can also easily tell



about my orientation and with other gay guys I would be considered bottom because of my personality and presentation.

From the above excerpts the influence of social scripts to understand the gendering of behaviour and physical attributes as either ‘masculine’ (or therefore active) or ‘feminine’ (and therefore passive) is evident. Part of the heteronormative sexual script includes a binary understanding of gendered roles and characteristics of sexed beings (Schilt and Westbrook 2009). Such social understandings of gender and sexuality are reproduced in the participants’ accounts of who gets labelled as top/bottom. And yet, other researchers have urged that a more critical stance be adopted in the simplistic labelling of behaviour and position amongst gay men in terms of top/bottom and other binary constructs (Clarke and Smith 2014; McGill and Collins 2014a; McGill and Collins 2014b; McGill and Collins 2015; Moskowitz and Hart 2011; Moskowitz, Rieger and Roloff 2008). These researchers have argued for a more nuanced approach that recognises the continuum within which sexuality may fall, such that we may perhaps rather engage with the presentation of identity and behaviour as top/bottom as more of a gender performance than an intrinsic identity. In this regard, it would be possible to consider these constructs produced within the group discussions as part of a meaning-making process that includes the contradictory negotiation of social scripts in understanding sexuality more generally (Gil 2007). As social beings within society, it is not surprising that such scripts are reproduced and evident in how the participants make sense of sexuality. What is perhaps significant and useful for further research is trying to understand how and to what end gay men reproduce such binary understandings of sexuality and gender presentation. As some researchers have argued, although gay men may re/produce binary constructs of sexuality (such as top/bottom) they may also simultaneously challenge such binary constructs in practice and everyday lived experiences (McGill and Collins 2015; Moskowitz, Rieger and Roloff 2008).

What was further interesting in this discursive construct of sexuality in terms of who is passive/active in the relationship and sexual exchange was a contradictory sense of powerlessness in controlling the broader social narrative. When asked about the origin and use of top/bottom categories participants all mentioned that it comes from ‘the outside’. When asked to elaborate, one participant said: ‘We don’t decide. These labels are just there. They come from people – straight and gay.’

This sense of powerlessness and lack of agency in determining the construct and use of labels was echoed by all of the participants who described sexual labelling by both LGBTI and heterosexual communities as ‘disempowering’. And yet such labelling was still evident in how the participants used notions of being a top or bottom as part of their everyday categorisations and interactions with other gay-identified men. It is in this regard that some researchers define

sexuality as ‘a social process rather than a biological imperative’ (Irvine 2003, 490). The influence of heterosexual scripts in how sexual positions are taken up and performed (Sakaluk et al. 2013) amongst gay men and youth in particular is crucial to understanding the dynamics of sexual health behaviour. Within a South African context, some researchers have argued that reproductions of heteronormative scripts amongst gay men may be seen as both subversive and a reproduction of the dominant hegemony (Rabie and Lesch 2009). The latter work demonstrates how black gay men living in the rural context often rely on social scripts to talk about gay sexuality as feminine in particular ways. At the same time, these reproductions were also affirmative of gay sexualities as being different from the heterosexual reproductions and performances. Foucault’s idea of a ‘power network’ (1982) is useful to think about here. The organisation of sexuality – who gets labelled as a ‘top’ or ‘bottom’ – and the resultant implications of power dynamics in the relationship reflect broader social discursive disciplining cultures around gender and sexuality. The participant accounts in these excerpts also reflect such an organising and disciplining culture that normalizes particular sexual tropes and scripts as feminine (and therefore passive or lacking agency) and masculine (and therefore active or having agency). Sexual hierarchies are thus re(produced) that may leave little room for differentiation.

### **NEGOTIATING CONDOM USE: PROS AND CONS OF BEING A BOTTOM**

A second dominant theme emerging concerned the influence of identity categorisation as top/bottom and the implications for how one is able to negotiate and make decisions about sexual practice with a partner. In this account, participants were divided about how these identities impacted and influenced sexual decisions in the relationship. Three different issues were evident here: a) *being a bottom influenced the lack of power in a relationship, and severely affected one’s ability to make basic decisions such as when to use a condom or lubricant;* b) *being a bottom facilitated condom and lubricant negotiation,* c) *condom and lubricant negotiation was dependant on the nature of the relationship, casual or committed.* The following statements demonstrate the diversity of opinion in the group:

If the top/butch is physically and psychologically abusive, condom negotiation is a lot more difficult.

But bottoms are more likely to insist on not only condom use but also the use of lubrication.

If it is just someone I am having a one-night stand with, I am less likely to insist on a condom, because it happens in the moment.

With my partner, I can insist when I want to use lubrication because we are familiar with each other and I have the space to say such things. But with some random stranger, not likely.

The importance of gender and power in same-sex relationships is not only evident in how these young men construct and negotiate identities and sexual behaviour, but also more generally, focus our attention to the performance of identities during sexual encounters. For example, Johns et al. (2012) have argued that sexual fluidity is present in how many young gay men negotiate and define their identities, however, this is also interfaced with the power dynamics of the relationship. Gendered roles and identifications such as butch/top or femme/bottom influence the sexual positions that young men will take up during sex (i.e. a receptive or insertive partner) and also influence the sexual decision making practices during these encounters (Johns et al. 2012). Implicit in the participant accounts is also a construct of particular sub-cultures within the gay community that separates sexual intimacy from sexual intercourse in significant ways. Sexual intimacy is constructed here as solidifying how one performs top/bottom identities in the relationship and during sex, whereby attachment to one's partner enables one to exercise agency in negotiating condom usage as opposed to meaningless sexual encounters with strangers.

### **BEING A BOTTOM AND ACCESS TO HEALTH**

Related to the issues of condom negotiation, participants constructed bottoms as potentially more likely to seek assistance from health services than those identifying as tops. This was attributed to bottoms less likely living in the closet because of an open sexuality and physically identifying categorisation as gay. In this construct, the ability to not hide one's sexual orientation was considered to be advantageous in the sense that because they are more identifiable as gay, bottoms are more likely to feel less shame and less fear in seeking out the assistance of health service providers and finding out more information about sexual health practices:

Bottoms, on the whole, are more likely to be aware of risky gay sexual behaviour simply because they are more likely to self-identify as gay, and therefore more visible to LGBTI Health Service Providers.

Tops, generally, are less likely to come-out the closet or identify as gay and therefore not likely to access services catered towards gay men.

With regards to top-bottom politics and safe sex, I do think bottoms are vulnerable, not just out of biologically risking anal tearing, but also in terms of power relations.

These statements support other research that demonstrate silencing and closeted sexual behaviour as influential to how gay men negotiate access to sexual health services more generally (Berg et al. 2015; Emler et al. 2015; Pachankis et al. 2015). According to research, many closeted gay men often experience a sense of shame through internalised homophobia

and may also feel fear about being 'outed' when seeking knowledge and information about sexual health practice (Emlet et al. 2015). For many of these men, silencing or alternative means of accessing information may be adopted (Mitchell et al. 2014) that do not guarantee effective strategies of combatting unsafe sex practice. The interface of internalised homophobia with seeking access to health services and other avenues for counselling and communication is a strong relationship that many gay men face (Weber-Gilmore, Rose and Rubinstein 2011). This is not to argue that bottom-identifying men are more easily able to access health-related services. Indeed, many openly gay men have reported feeling discriminated against and shamed by health practitioners because of their sexuality (Emlet et al. 2015; Fisher and Mustanski 2014; Knight et al. 2014; Meyer 2003; Mitchell et al. 2014). Other research points to the presence of psychosocial and mental stress factors amongst many gay men (Cook et al. 2013; Nel 2009; Sandfort, Melendez and Diaz 2007). Clearly, more research needs to be done to explore the circumstances under which gay men will access sexual health services, the different experiences of such initiatives, and interaction with service providers. The findings of the study demonstrated that sexual and reproductive health concerns amongst LGBTI youth were linked to broader socio-cultural and political concerns and affected whether LGBTI youth would seek particular kinds of information and help from health services. The findings also demonstrated that many LGBTI youth were concerned about issues of physical safety in how they negotiated and performed their sexuality and sexual behaviour practices. This has serious implications, for the when, how and if of safe sexual practice will be a matter of concern in how they negotiate their everyday lives. At the same time, the findings also demonstrated that LGBTI youth were similar in their desire for and emphasis on issues of intimacy in relationships, identity expressions and general sexual behaviour as part of intimacy and expression of self. The accounts at the same time demonstrate Butler's (1990) idea of the performativity of gender. Constructs of 'top' or 'bottom' are deployed in ways that both constrain and allow for reimagining of gender identity more generally. The participants deploy these constructs in ways that sometimes limit their actions for sexual health behaviour and yet, at other times, these constructs are strategically deployed to achieve certain goals. Clearly, how gendered and sexual identities are deployed and enacted within relationships is important to consider in initiatives of sexual health and practice. The Stepping Stones workshops with this cohort demonstrate the impossibility of working with gendered and sexual categories as fixed and immutable. Rather, Butler's approach to disrupting these binaries is important to sexual health workers and the people that they work with.

## LIMITATIONS AND REFLEXIVITY

One of the limitations of the current study is the influence of a mixed-gender focus group in conducting the discussions. The study could therefore have benefited from a single-sex form of data collection that would have allowed for more in-depth discussions and voices to emerge. Exploring the intersecting issues of masculinity, race and class amongst other social categories would be useful in further elucidating how gay men both define and navigate issues of sexuality and identity for themselves.

## CONCLUSION

The study explored constructs of top/bottom identities amongst a group of gay men during a Stepping Stones workshop. The findings suggest that heteronormative social sexual scripts are present in how these identities are constructed and negotiated. At the same time, the participants produced counter-narratives of what being a top/bottom meant relative to the relationship. The implications for sexual health practice were discussed as significant to how safe sex was both negotiated and practiced. While bottom identities were also constructed as powerless, there were also counter-discursive constructs that presented these identities as more open to seeking sexual health services due to their non-closeted status. Understanding how young people within the LGBTI community construct their sexual identities is important for how health service providers may intervene and provide the necessary service to this marginalised population group. More research that explores the complexities of identification, the different moments when top/bottom and other identifications are considered important to sexual health practice must be a priority.

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