

## **Summary of Study Findings**

### **Male Couples Relationships Study**

September 2004

Dear MCRS participant:

We have finished our primary analysis of the information collected during the Male Couples Relationship Study, and we have results to share with you. Please remember that results from this or any study represent trends for the entire group and do *not* necessarily reflect the behavior or attitudes of any one individual or specific couple who participated in the study. There were tremendous differences among individuals in our study group. Likewise, our study group may or may not reflect the broader community of men in committed relationships with other men.

### THE FINDINGS

There are three categories of findings to tell you about.

- 1) First, there are general Descriptive Findings about what our group of participants was like, where they lived, age, ethnicity, work status, the length of their relationships, etc.
- 2) Second, we present findings of our investigation of how men in committed relationships deal with issues of sexual activity outside of the primary couple. Specifically, we wanted to know about communication about sexual activity with people outside of the couple and about HIV and HIV prevention.
- 3) The Differences between Open, Closed and "No Agreement" couples findings present results of our examination of how couples with varying agreements about sexual exclusivity differed in sexual behaviors, psychological adjustment, and relationship features.

### **1. Descriptive Findings about our Participants**

The following findings are from the main data collection section (Phase II) of the Male Couples Relationships Study. In this phase, we collected information from both members of a male couple that had been together a minimum of one year, was HIV-negative, and was 18 years of age and older. A summary of the "Men in Relationships" (phase I) results, in which one of the surveys used in phase II was tested, is available on the study web site (<http://home.gwu.edu/~forssell/>)

### How participants heard about the study

Of those who returned surveys, 31% heard about the study through gay- and gay-friendly email list-servs and e-discussion groups sponsored by colleges, universities, gay organizations, “Yahoo!” or “MSN groups”. Another 11% found out about the study while on the internet, 32% from a friend, 18% from their partner, 5% from a news report about the study, and 3% from flyers in clubs and coffee houses.

### Recruitment and numbers of participants

Surveys were sent, either by email (130) or by hard copy via the postal service (39) to 169 couples. Of the 237 individuals who responded with complete questionnaires, 15 had partners who did not complete their surveys. Another couple had to be dropped because of extensive missing data. The remaining 220 individuals comprise the **110 couples** who completed both partner questionnaires and were included in the analyses below.

### Individual demographics

**Age** of participants ranged from 19 to 66. The average age of participants was 35 years.

**Ethnically**, the largest majority self-identified as White (87%), with Latino (5%), Native American (4%), African-American (1%), Asian-American (1%), and mixed ethnicity (2%) participants comprising the balance of our study group.

**Religion:** The majority identified as either Spiritual (26%) or Protestant (25%). Another 19% described themselves as Agnostic or Atheist, 10% as Catholic. The remaining 20% were Jewish, Muslim, Unitarian, Latter Day Saints, Quaker, Buddhist, and Wiccan.

**Education** in our sample included those with Masters level graduate work or higher (37%) and bachelor’s degrees (31%). The balance had, at minimum, completed high school or high school equivalency.

**Working / School Status:** Most participants were currently in the **workplace**. About 70% worked full time, 18% were full time students, and 5% were retired.

### Couple demographics

The **length of couple relationships** varied greatly. Couples in our study had been together an average of 6½ years. Our “youngest” couple had been together one year, while the longest duration relationship was 37 years.

### Where participants live

Regarding **living arrangements**, most couples (87%) lived together, either with or without children. Some lived separately, either alone (5%), with roommates (7%), or with parents (2%).

### Geographical Region

Because the study was based at Universities in two primary cities (Denver and Washington DC), it tended to include a large number of participants in Colorado, DC, and Virginia. However, because the study was also publicized on the internet and by email, our sample on the whole was geographically quite diverse.

- 17 couples lived in the **Northeast** (Washington, DC, Pennsylvania, New York, New Jersey, and Massachusetts)
- 27 in the **mid-West** (Iowa, Indiana, Illinois, Missouri, Ohio, and Wisconsin)
- 23 in the **South** (Florida, Georgia, Tennessee and Virginia)
- 15 in the **Southwest** (Arizona, Colorado and Texas)
- 7 in the **Northwest** (Nevada, Oregon, Utah and Washington)
- 12 in **California**
- One couple lived in **The Netherlands**, and one partner in another couple lived in **Australia**.
- Cities with 2 or more participating couples were Denver (8), Charlottesville VA (5), Washington DC (5), San Francisco (4), Chicago (3), Philadelphia (3), Alexandria VA (3), Indianapolis IN (3), Minneapolis MN, Madison WI, Phoenix AZ, Athens GA, Atlanta, Bloomington IN, State College PA, and Pittsburgh PA.

Almost half of our couples (45%) lived in a **large city** or urban area, 32% lived in a **town or small city**. Another 18% lived in **suburbs**, and 5% in **rural areas**.

### Sexuality in Couples

Couples had varied approaches to addressing sexual activity outside the relationship. About half (49%) of the couples in our study described their relationship as sexually exclusive or "Closed", 38% were sexually non-exclusive or "Open", and another 13% had no established agreement about sexual exclusivity.

Consistent with other research on male couples, very few couples regularly used condoms within the primary relationship for anal sex. Only one-third reported such regular condom use. Nearly all couples (93%) had engaged in anal sex with each other at least twice, and a large majority (71%) had engaged in anal-oral sex (rimming) at least twice.

## **2. Communication about Outside Sex and HIV**

To examine how communication about extra dyadic sexual activity (sex outside the relationship affects) couples, we developed a psychological measure of couple *Communication about Extra Dyadic Sexual Activity*, which we call "CEDSA". Men who participated in the phase I "Men in Relationships" study helped to test this measure for eventual use in the second phase. We were interested in how communication about sex outside the relationship was related to HIV risk, mental health, the quality of the couple relationship, and how well couples were able to maintain sexual exclusivity, if that's what they had agreed to do.

We had three key hypotheses about CEDSA and sexual behaviors. We thought

- (1) The more couples communicated about extra dyadic sexual activity and HIV risk (i.e., higher scores on the “CEDSA” survey), the happier, healthier, and better adjusted they would be.
- (2) We also thought the more couples communicated about extra dyadic sexual activity and HIV risk, the less risky sexual behavior they would engage in. (For the purposes of this study, we defined risky sex as unprotected anal sex with persons outside the primary couple).
- (3) Lastly, we thought that couples who defined their relationships as “Closed” and who communicated more about outside sex & HIV would be less likely to violate their agreement on sexual exclusivity (i.e., “cheat”).

To test these hypotheses, we compared results on the CEDSA with results on other surveys of psychological functioning, quality of relationships, jealousy, and sexual activity included in the questionnaire.

We found that we were right about some things, but not right about others. Here is what we found

- ✓ The more couples talked about HIV and outside sex, the better relationships they tended to have. Specifically, higher scores on the CEDSA went along with higher scores on measures of Relationship Satisfaction, Couple Consensus, Love, Commitment, and Sexual Satisfaction.
- ✓ Also, higher CEDSA scores were related to certain types of psychological adjustment. The more couples talked about HIV and outside sex, the more likely they were to show lower Depression and lower Panic Anxiety (feeling fearful and panicky).
- ✓ Positive effects of communicating about outside sex on individual adjustment and relationship quality were especially strong for men in Closed couples.
- ✓ The more couples talked about HIV and outside sex, the less emotionally jealous they were.
- ✓ Contrary to expectations, couple communication about outside sex and HIV prevention was **not related** to lower risky sex. Persons in couples had unprotected anal sex with other partners regardless of how much they talked with their partners about sex with others and about HIV.
- ✓ Also contrary to predictions, CEDSA was not related to less cheating in closed couples. Talking about outside sex and HIV did *not* result in lower incidence of having outside sex for Closed couples. **However...**

- ✓ For Closed couples *only*, talking specifically about HIV with their partners **was** related to less risky sex with outside partners. That is, the more monogamous couples talked about HIV and preventing HIV, the more likely they were **not** to have unprotected sex outside the couple.

### **3. Differences between Closed, Open & No Agreement Couples**

The third major category of findings has to do with differences between types of couples. We wanted to know if agreements about sex with others had anything to do with what couples did, how they felt, how well-adjusted they were, etc. In past studies, couples have been divided into 2 groups, sexually exclusive “Closed” couples and sexually non-exclusive “Open” couples. However, we suspected there were couples who did not have a specific or well-established agreement about sex outside the relationship. We wanted to know about these “No Agreement” couples, as well.

- ✓ The most conspicuous observation was the similarity of Closed, Open, and No Agreement couples on most characteristics. These groups did *not* differ on levels of self-reported Relationship Satisfaction, Couple Consensus, Expressions of Affection, Commitment, Sexual Satisfaction, Sexual Frequency, Types of sexual behaviors in the couple, Outness to Family and Friends, Depression, Hostility, Nervous Tension, and Obsessive Compulsivity.
- ✓ As would be expected, Open couples had the highest rate of outside sex: 86% of Open couples had sex outside the couple at some time during the relationship
- ✓ However, 64% of men in “No Agreement” couples and 22% of men in “Closed” couples also reported engaging in outside sex at some time during their current primary relationship.
- ✓ 28% of persons in Closed relationships also reported at least one event of outside sex while involved in a sexually exclusive relationship (either in the current relationship or previously). 48% of Open and 71% of No Agreement partners reported the same thing.
- ✓ Regarding unprotected anal sex, we found that overall, relatively few couples were engaging in unsafe outside sex. Only 13% reported any unprotected anal sex with outside partners in the previous year.
- ✓ However, men in Open couples were more likely to have unprotected anal sex with outside partners than men in Closed or No Agreement couples.
- ✓ There was a relatively small group of men in our study who were engaging in a large amount of unprotected sex with outside partners. The five most sexually

active participants engaged in more than half of the reported unprotected outside sex; 10% of the most active participants engaged in 88% of unprotected anal events in the previous 12 months. This group of highly sexually active persons *included* men in couples that had described their relationships as Closed.

- ✓ As has been found in other studies, we too found that Open couples tended to have been together longer than Closed couples. The average relationship length in Open couples was 9.4 years, whereas Closed couples had been together for an average of 4.5 years. No Agreement couples were together for an average of 8 years.
- ✓ There were differences in relationship adjustment as well. Open couples tended to be less emotionally jealous than Closed couples were.
- ✓ Similarly, Open couples tended to have lower Panic Anxiety than No Agreement couples.
- ✓ Open couples scored higher on the CEDSA than Closed couples did. That is, Closed couples did less communicating with each other about outside sex and HIV.

### What do the findings mean?

Our key hypothesis was that couples and individual men in couples would fare better when they communicated more about sex outside the relationship and the ramifications thereof. Regarding the psychological adjustment of individual men, and the relationship quality of whole couples, this idea was supported. Generally speaking, men were less depressed, less anxious, less jealous, and the quality of their relationships across many areas – couple agreement, general satisfaction, commitment, sexual satisfaction, feelings of love – was better when couples talked about extra dyadic sexual activity than when they didn't. This makes sense given that communication is a known contributor to quality of relationships and psychological adjustment. This study has furthered knowledge in this area by finding that communication about this specific (and perhaps difficult) issue may have beneficial effects. This finding could be useful to couples and individuals in psychotherapy by helping to improve their treatment and outcomes. However, we cannot yet say that increased communication about outside sex *causes* improved relationships. More work is needed to confirm these findings.

We were not supported in our idea that communication about outside sex would serve to decrease risky sexual behavior and undesired outside sexual activity. There are a number of possible reasons for this. First, we had assumed that men *intended* not to engage in unprotected anal sex and outside sex (if in a Closed relationship). On the contrary, it may be that some men do not find these behaviors either undesirable or a goal for in their personal sex lives. Supporting this, it has

been documented that “barebacking” (intentional unprotected anal sex) has been on the rise recently. However, this is not to say that all men who engage in unprotected anal sex with outside partners are not attempting to limit risk. Instead they may be practicing a different form of safer sex by being more selective about their sexual partners rather than by using condoms. Alternately, of course, it is possible that communication about outside sex may simply not be enough to contribute to effectively alter sexual behavior, even if desired. Some men, despite wanting to stay safe or not cheat, may simply “give in” from time to time.

Differences between Open, Closed, and “No Agreement” couples can be attributed to multiple factors as well. For instance, it has been well-established by previous research that Open relationships tend to be longer in duration than Closed relationships. It has been theorized in the past that this is because men in relationships were “destined to stray”, and that monogamous couples would eventually break up or change their arrangement to allow for outside sex. However, things have changed greatly in the HIV/AIDS era. More recently, it appears that a higher percentage of male couples are declaring themselves Closed. Furthermore, the rate of cheating in Closed couples observed in this study was lower than has been reported in past studies.

Nevertheless, many Closed couples were not able to avoid outside sex 100% of the time. A significant minority had violated their agreement to remain exclusive at least once. This has important ramifications for risk of HIV transmission. Because they have agreed not to have sex with others, men in Closed couples might be less likely to tell their partners if unprotected outside sex occurred, increasing the risk of transmission. Therefore, communication about outside sex may be especially important to Closed couples. This is echoed by the finding that communication specifically about HIV was related to lower rates of outside sex in Closed couples. Additionally, even though CEDSA was not directly related to lower incidence of outside sex, communication about outside sex was an important contributor to relationship quality, and may therefore *indirectly* help Closed couples honor their agreement to remain sexually exclusive.

Lastly, because Closed couples were higher in jealousy and also communicated less about outside sex, it may be that talking about outside sex helped them to alleviate fears that their partners would leave them if they should happen to have sex with someone else, whether or not such an event would actually occur. If so, persons in Closed couples might be encouraged to discuss the desire for or the temptation of outside sex with their partners to assuage feelings of jealousy or other fears, be they real or imagined. On the other hand, it may be that men who tend to be more jealous are more likely to enter into Closed relationships in order to avoid jealousy invoking situations, such as their partners having sex with others. If so, encouraging Closed couples to talk about outside sex might not be an effective strategy to reduce jealousy.

## What comes next?

This study resulted in many interesting and important findings, but much is yet to be done. Future research should further examine the relationship between communication about outside sex and HIV to confirm any positive causal effect on adjustment in individuals and male couples. If there is a definite relationship between the two, psychotherapeutic techniques for individuals and couples could be developed and adapted for use.

Since talk about HIV for couples in our study was related to decreases in unprotected sex in Closed couples, HIV intervention methods might be adapted to incorporate discussion of HIV in Closed couples. Likewise, efforts at HIV/AIDS reduction should be targeted toward Open couples, given the higher rate of unprotected outside anal sex in that population.

The group of couples who identified as having no agreement about outside sex should also be studied more in the future. We know relatively little about this type of couple and whether “don’t ask, don’t tell” approaches to outside sex are effective in the long run. We found it quite interesting that these couples seemed to have been together a relatively long time – 8 years on average. However, because there were so few of these couples in our study, it would be difficult to draw strong conclusions about “No Agreement” couples. More work is, of course, needed.

Because we were interested in preventing initial HIV infection in either member of the couple, we had limited our study to couples where both members were HIV negative. More work is needed, both with HIV-positive and mixed HIV status couples, in order to get a better understanding of the dynamic of prevention and communication about outside sex and prevention of HIV in couples with varying HIV-status.

Lastly, because our study was relatively small, many of our findings will need to be replicated with larger numbers of couples. Similarly, although our sample was geographically dispersed, they were unfortunately ethnically and racially quite homogenous. A more diverse population should be studied in future research.



## Endnotes

We will continue to analyze the data we have collected and to make our findings public. Recently I presented some of our findings at a conference on sexuality at Cardiff University in Cardiff, Wales and at the annual meeting of the Society for the Scientific Study of Sexuality in Orlando, Florida. We are also preparing the first of several articles for publication in professional journals. Updates on these efforts will be posted on our website. Emailed updates will also be periodically sent to participants. If you wish to receive this information via email, be sure to send your new email address whenever it changes. Our email address here is [MCRS@gwu.edu](mailto:MCRS@gwu.edu). Please let us know if you wish to be removed from the list.

Sincerely,

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### Acknowledgements

*For their continued assistance, enormous patience, and eternal understanding both with this project and with my goals, I wish to thank my advisor Dr. Susan Harter, my advisor and dissertation chair Dr. Valerie Stone, committee members Dr. Drew Mattison and Dr. Arthur Jones, and Drs. Wyndol Furman, George Potts, Rob Roberts, Janette Benson, and Hallie Ward at the University of Denver. For their assistance with this project, I would also like to thank Dr. Elliot Hirshman, the faculty at The George Washington University, and my research team for the Male Couples Relationship Study. My sincerest gratitude goes to the 237 men who participated in this research and shared their lives and experiences with me. Finally, the most special thanks go to my partner Warren Arbogast for being my sounding board and "test subject", and for his everlasting support and encouragement.*

## **Gay Men and Male Couples Resources**

### Washington, D.C.

Whitman Walker Clinic: (202)-797-3500; <http://www.wwc.org>

Whitman Walker Gay Men's Health and Wellness (counseling) (202) 745-6125

### Denver

GLBT Community Center of Colorado; 1050 Broadway, Denver, (303) 733-7743;  
<http://www.coloradoglb.org/>

### San Francisco:

Mental Health Information & Referral: (415) 981-4700

San Francisco Sex Information Switchboard: <http://www.sfsi.org/> (415) 989-7374

San Francisco Gay Hotline: 415-355-0999

### New York:

Gay & Lesbian Switchboard of NY Project: 212-989-0999

### Boston:

Multiple referrals for GLB services: [http://www.glbthealth.org/res\\_mass.html](http://www.glbthealth.org/res_mass.html)

### Chicago:

Horizons Community Services: <http://www.horizonsonline.org/>

## **National Resources**

Gay and Lesbian National Hotline:

<http://www.glnh.org/> ; Toll free: 1-888-THE-GLNH (1-888-843-4564)

National LGBT College & University Campus Groups

<http://www.lgbtcampus.org/>

Partners Task Force for Gay and lesbian Couples:

<http://www.buddybuddy.com/orgs.html>

Human Rights Campaign:

<http://www.hrc.org/links/resources.asp>

## **General GLBT Resources`**

PFLAG (Parents, Friends, & Family of Lesbians and Gays) <http://www.pflag.org/>

Queer Resources Directory: <http://www.qrd.org/QRD/>

Gay Crawler (Gay subjects search engine): <http://www.gaycrawler.com/>

*Please call the Male Couples Relationship Study (202-994-6323) or email us at [MCRS@gwu.edu](mailto:MCRS@gwu.edu) if you need further assistance in locating counseling services*