

**PARTNER CONCURRENCY ACCEPTANCE AMONG AFRICAN AMERICAN WOMEN: MODEL,  
SCALE, AND MESSAGE DEVELOPMENT**

by

ASHLEY CHANTELE LIMA

(Under the Direction of Jessica Muilenburg)

**ABSTRACT**

**Background:** HIV and STIs disproportionately affect African American women despite evidence that disparities are not caused by increased behavioral risk-taking among the population. Rather, recent research implicates population-level characteristics for the disparity. HIV and STI risk reduction communication efforts targeting African American women often focus on increasing condom use and HIV testing behaviors, but rarely center on communication and do not address relationship factors that might result from population-level conditions. **Objective:** The primary objective of this research is to explore the unique shared lived experience of young adult African American women navigating sexual relationships and use findings to craft culturally appropriate messages. **Methods:** This goal was met by first exploring sexual relationships among the population using qualitative interviews. Eleven women participated in in-depth narrative interviews lasting from 46 to 129 minutes. Using narrative analysis, eight themes were interpreted from the data. Findings were used to inform the development of a model predicting partner concurrency acceptance, a scale measuring attitudes toward partner concurrency, and targeted communication materials. Finally, materials were pilot tested with an advisory board. **Results:** Women in the study accepted partner concurrency for a multitude of reasons that were largely influenced by power dynamics and social influences. Participants described relationships that fit into

three main categories. Meaning that informed women's reasons for accepting concurrency, their responses to concurrency, the extent to which they were comfortable communicating with a partner about concurrency, and their condom use with a partner engaging in concurrency was ascribed to each relationship type. Based on these findings, communication materials were developed that targeted women based on their relationship type. Three narratives reflecting the findings were featured in three targeted factsheets. Further, two scales were developed that could be used to test the effectiveness of these fact sheets in changing knowledge and attitudes related to partner concurrency. **Conclusions:** The findings from this research reflect the unique shared experience of young adult African American women navigating dynamic sexual relationships. Based on the findings, public health professionals should consider the complex nature of relationships in African American sexual networks when crafting HIV and STI prevention messages.

INDEX WORDS: STI; STD; HIV; Sexual partnerships; Sexual concurrency; Partner concurrency; African American; Black; Women; Young adult

**PARTNER CONCURRENCY ACCEPTANCE AMONG AFRICAN AMERICAN WOMEN: MODEL,  
SCALE, AND MESSAGE DEVELOPMENT**

by

ASHLEY CHANTELE LIMA

B.S., Spelman College, 2010

M.P.H., The University of Georgia, 2012

A Dissertation Submitted to the Graduate Faculty of The University Of Georgia in Partial Fulfillment of  
the Requirement for the Degree

DOCTOR OF PHILOSOPHY

ATHENS, GEORGIA

2015

© 2015

Ashley Chantelle Lima

All Rights Reserved

**PARTNER CONCURRENCY ACCEPTANCE AMONG AFRICAN AMERICAN WOMEN: MODEL,  
SCALE, AND MESSAGE DEVELOPMENT**

by

ASHLEY CHANTELE LIMA

Major Professor: Jessica Muilenburg

Committee: Karen Hilyard  
Kathleen Demarrais  
Teaniese Latham Davis

Electronic Version Approved:

Suzanne Barbour  
Dean of the Graduate School  
The University of Georgia  
August 2015

## DEDICATION

Dear Mami,

Thank you for encouraging my inquisitive nature, at least early on. For nurturing it from the start when (infamously) my favorite word was “why?” For being a parent who understood the difference between that nature and “talking back.” In short, thanks for raising a researcher. Thanks also for dealing with my crazy when I was getting 3 hours of sleep a night, and for physically being there to make sure I ate during comps and had a home to write my dissertation in after Liberia.

I love you.

Dear Daddy,

Thank you for being proud of me when everyone else was asking, “Why are you going back?” “Aren’t you tired of school yet?” “Don’t you want to just work?” These doubts were echoed in my own head every day. Nine years of schooling without a break, without working, makes for a road that is long, exhausting, and full of doubt. But you were always there ... rooting me on. Telling me how proud of me you were at every breakdown, at every all-nighter, at every hour-long ride to Athens when I needed to call someone because I was falling asleep at the wheel – you were there. And you were proud. Mommy got my bachelor’s degree. Moms deserve that. They raise us up and set us free. But as adults, dads baby us when we are being irrational, comfort us when we are being emotional, coddle us when we need to be spoiled, and then give us space when we want to be adults. So this one is yours. Thank you for believing in me even when I began to doubt myself. Thank you for understanding me when I began to lose myself on this journey.

I love you.

## **ACKNOWLEDGMENTS**

I would like to acknowledge the people whose participation, contribution, or influence helped make this study successful. Endless thanks to:

My participants for your time and enlightenment

My research assistants for your hours of hard work

My committee for your guidance and patience

Nance for your endless support and authenticity

Shari and Lou for letting me rant about Black feminism and gender ratio imbalance in the most inappropriate social settings. (That will continue. Sorry, not sorry.)

CLF for the experience. Without it, I would not have such a passionate dedication to and compassionate understanding of this research.

## TABLE OF CONTENTS

<b>Acknowledgments</b> .....	<b>v</b>
<b>List of Tables</b> .....	<b>vii</b>
<b>List of Figures</b> .....	<b>viii</b>
<b>Chapter 1: Introduction</b> .....	<b>1</b>
Background .....	1
Research Purpose and Questions .....	4
Public Health Impact .....	5
<b>Chapter 2: Literature Review</b> .....	<b>7</b>
Risk Factors .....	7
Sexual Concurrency .....	14
Sexual Networks .....	16
African American Sexual Networks and HIV/STI Disparity .....	18
Communication Approaches to Concurrency .....	23
Theoretical Framework .....	23
Chapter Conclusion .....	34
<b>Chapter 3: Methods</b> .....	<b>35</b>
Approach .....	35
Phase I: Qualitative Approach .....	37
Phase II: Scale and Material Development .....	45
<b>Chapter 4: Findings</b> .....	<b>53</b>
Phase I: Qualitative Findings .....	53
Phase II: Scale and Material Development .....	142
<b>Chapter 5: Discussion</b> .....	<b>166</b>
Summary .....	166
Discussion .....	167
Conclusions .....	175
<b>References</b> .....	<b>179</b>
<b>Appendices</b> .....	<b>192</b>
Appendix A. Lexicon of Participant Terms .....	192
Appendix B. Study Consent Forms .....	194
Appendix C. Individual Interview Guide .....	198
Appendix D. Advisory Board Materials .....	201
Appendix E. Pre-Pilot Test Fact Sheets .....	205
Appendix F. Post-Pilot Test Fact Sheets .....	209

## LIST OF TABLES

<b>Table 1. Advisory Board Guide .....</b>	<b>51</b>
<b>Table 2. Developed Scale Properties .....</b>	<b>143</b>
<b>Table 3. Concurrency Related Knowledge Scale.....</b>	<b>143</b>
<b>Table 4. Attitudes and Beliefs about Partner Concurrency Scale.....</b>	<b>144</b>
<b>Table 5. Relationship Type Explication. ....</b>	<b>147</b>

## LIST OF FIGURES

Figure 1. Adapted Network Hypothesis .....	18
Figure 2. Proposed Partner Concurrency Acceptance Model .....	30
Figure 3. The Extended Parallel Process Model .....	31
Figure 4. Research Strategy Overview .....	37
Figure 5. Sample Interview Timeline .....	39
Figure 6. Final Partner Concurrency Acceptance Model .....	142
Figure 7. Fact Sheet A – pre-pilot test.....	150
Figure 8. Fact Sheet B – pre-pilot test.....	151
Figure 9. Fact Sheet C – pre-pilot test.....	152
Figure 10. Fact Sheet A – post-pilot test .....	163
Figure 11. Fact Sheet B – post-pilot test .....	164
Figure 12. Fact Sheet C – post-pilot test .....	165

## CHAPTER 1: INTRODUCTION

### **Background**

Young people aged 15 – 24 years are diagnosed with nearly half of the 20 million new sexually transmitted infections (STIs) reported in the United States each year, despite only accounting for 25% of the sexually experienced population (Satterwhite et al., 2013). Alarming, in 2010 almost 26% of new HIV infections were diagnosed among youth (Whitmore et al., 2012). Individuals belonging to this age group are at increased risk of STI and HIV acquisition due to a combination of behavioral, cultural, and social factors (CDC, 2011d). Young people engage in behaviors, such as drug and alcohol use and unprotected sex, which place them at increased risk of STIs. Peer norms among this group are supportive of risky behaviors and discourage protective behaviors. Further, adolescents and young adults in this age group may also experience multiple barriers to accessing STI prevention services. Some of these barriers – such as lack of insurance, inability to pay for services, and lack of transportation – are a result of the lack of resources available to young people on the basis of their age, alone (CDC, 2011d). Other barriers may result from the fact that the US health care system caters to adults. For example, young people might have concerns about confidentiality (whether or not their parents will find out they are receiving services) or experience discomfort with facilities and services designed for adults (e.g. forms written using complicate or unfamiliar language).

### ***Significance of the Sexual Health of Young Women***

The age and biological sex of young women place the group at increased risk of STI infection (CDC, 2011d). In 2010, women aged 15 to 19 had the highest rate of STI infection, closely followed by women ages 20 to 24 (CDC, 2011d). Women in this age group had a higher rate of Chlamydia than any other age or sex group (CDC, 2011d). Further, in 2011 women had 2.5 times the reported Chlamydia rate

of men (CDC, 2011d, 2013f). One possible explanation for this gender disparity is that women are biologically and anatomically more susceptible to STIs, causing them to be about four times more vulnerable to infection than men (Sachdeva & Wanchu, 2006). Further, biologically, younger women are especially vulnerable to STI acquisition because of increased cervical ectopy (CDC, 2011d).

There are also differences in testing recommendations for young men and women, which call for annual screening for Chlamydia for women under the age of 25, but not for heterosexual men (CDC, 2013f). Higher incidence among women may be the result of increased diagnosis due to increased screening, but these differences in recommendations also increase risk for women who are getting tested but have partners who are not. Despite testing recommendations, many young women do not actually receive screening for STIs annually. In fact, less than half of sexually active young women adhere to this recommendation, often leading to STIs remaining untreated (CDC, 2011c). There are a number of reasons why young women might avoid screening and leave STIs untreated. One major explanation is lack of awareness of their STI status due to an absence of symptoms (CDC, 2011a). Approximately 80 to 90% of Chlamydia infections and 50% of gonorrhea infections are asymptomatic in women, leading to non-treatment (CDC, 2011e). Other reasons a woman might go unaware include confusing symptoms with normal discharge and/or inability to see symptoms (such as herpes or warts located inside of the vagina) (CDC, 2011a). Further, young women may go undiagnosed of an existing STI due to lack of access to care or insurance coverage, or fear of using insurance provided by their parents (CDC, 2011d).

Leaving STIs untreated has dangerous implications for young women, placing the group at increased risk of more irreversible and longer-term health risks, such as contracting HIV or experiencing reproductive problems (CDC, 2010, 2011e). When a woman who has an STI is exposed to HIV through sexual contact, she is two to five times more likely to actually contract the virus than an exposed woman who does not have an STI (CDC, 2010). Further, women can suffer other adverse long-term effects from STIs such as cervical cancer, pelvic inflammatory disease, and infertility (CDC, 2011a, 2011e, 2013d). In

fact, according to the Centers for Disease Control and Prevention (2013d), untreated STIs are responsible for infertility in at least 24,000 American women each year and HPV is responsible for almost all cases of cervical cancer. These outcomes reflect the possible serious and permanent consequences of the type of high-risk behavior so commonly observed in young adult populations.

### ***HIV and STIs among African American Women***

Rates of HIV and other STIs are disproportionately high among African American women. A significant disparity exists despite a lack of evidence that behavioral differences (e.g. alcohol and drug use, number of partners, condom use) between this group and women in other racial groups are responsible (Hallfors, Iritani, Miller, & Bauer, 2007). In fact, Hallfors et al. (2007) found African American's with "low-risk" behaviors had 25 times higher incidence of HIV and other STIs than their "low-risk" White counterparts. Notwithstanding a 21% decrease in HIV among the population between 2008 and 2010, African American women still account for 13% of all new HIV infections and 64% of new HIV infections among all women (CDC, 2014b).

In 2011, heterosexual transmission accounted for 89% of new cases among African American women (CDC, 2013a), and according to recent reports African American women account for almost twice as many heterosexually transmitted cases as African American men (CDC, 2014b). The incidence among this population is 20 times as high as that of white women and almost 5 times as high as Latina women (CDC, 2014b). Additionally, data from the 2011 Sexually Transmitted Disease Surveillance indicate African American women had the highest rates of every STI among women in any racial group (CDC, 2012). The rates of Chlamydia, gonorrhea, and syphilis among Black women were 6 times, 15.2 times, and 17 times those of White women, respectively (CDC, 2013e). Chlamydia rates increased among all African Americans by 17.6% between 2007 and 2011 (CDC, 2013e).

### ***Young African American Women***

Young African Americans are especially impacted by HIV and STIs. In fact, over a third (38%) of new infections each year occur among African American youth ages 13 to 29 (CDC, 2013b). The rate of new infection among African American women in this age group is 11 times that of young White women and 4 times that of young Hispanic women (CDC, 2013b). The 2011 Sexually Transmitted Disease Surveillance also exposed an STI disparity among young African American women. Considering all racial/ethnic and age categories, Chlamydia and gonorrhea rates were highest among young African American women ages 15 to 19 and 20 to 24 (CDC, 2012). The incidence among African American women in these age groups was 7507.1 and 7680.2 per 100,000 women, respectively (CDC, 2013e). These rates were almost six and five times the rates among White women, respectively (CDC, 2013e). Gonorrhea incidence among African American women aged 15 to 19 and 20 to 24 1929.6 per 100,000 women – 15.9 times the rate among White women in the same age group (CDC, 2013e). While African American women aged 20 to 24 fared worse with a gonorrhea incidence of 2050.4 cases per 100,000 women, the disparity between this group and White women was not as substantial at 12.1 times (CDC, 2013e).

Despite extensive research on HIV and STI disparities and risk behaviors, studies have not been able to consistently and significantly indicate differences in behavior between African American women and women in other ethnic groups with respect to sexual risk behaviors. Instead, researchers suggest concurrency (engaging in sexual relationships that overlap in time) and African American sexual network characteristics might be responsible for HIV and STI disparities (Hallfors et al., 2007).

### **Research Purpose and Questions**

The objective of this study is to identify factors that contribute to how African American women navigate partner concurrency (when a sexual partner engages in multiple sexual relationships that overlap in time). The long-term goal of this research is to develop effective messages about partner

concurrency acceptance that will reduce HIV and STI incidence among young adult African American women. The research will be guided by the following research questions:

Research Question 1: How do young adult African American women navigate partner concurrent relationships?

- 1.1 How are relationships defined and how are expectations established within these relationships?
- 1.2 What are women's attitudes and beliefs about partner concurrency?
- 1.3 What are the reasons young adult African American women accept or reject partners who practice concurrency?
- 1.4 What kind of partners do women accept concurrency from and in what contexts are concurrency accepted?
- 1.5 What societal, institutional, and cultural factors influence the expectations that young adult African American women have regarding sexual relationships?

Research Question 2: How do young adult African American women navigate HIV and STI risk in relationships in which the partner practices concurrency?

- 2.1 How are condoms used (or not used) in these relationships?
- 2.2 How do women communicate about sexual risk (sexual history, current sexual partners, condoms) in these relationships?

Research Question 3: How do young adult African American women respond to ethnically- and gender-appropriate, culturally sensitive communication about partner concurrent relationships?

### **Public Health Impact**

At the completion of this research, the researcher expects to have identified key factors that influence partner concurrency acceptance among young adult African American women. The research will also result in the development messages that induce negative attitudes toward partner concurrency

and increase knowledge about the risks associated with partner concurrency. Thus, by developing messages that are culturally relevant to and inclusive of African American women, this research can be expected to have a positive impact on increasing the health of African American women by decreasing the HIV and STI prevalence among this group.

### ***Innovation***

Previous research has focused primarily on individual concurrency among both males and females. However, few studies have examined acceptance of male concurrency among African American women. One qualitative study by Harris et al. (2010) examined this phenomenon among middle aged African American women. However, despite the burden of HIV and STI risk the group carries, this topic has not been explicitly explored among young African American women. Thus, this proposed research is innovative because it seeks to create a model (using in-depth, qualitative methods) explaining the factors driving acceptability of concurrency among young African American women.

Further, existing communication approaches generally advocate safer sex and testing behaviors among African American women (CDC, 2015). These messages are necessary, but do not inform African American women of the risks posed to them by their sexual networks and concurrency, and also rarely promote interpersonal communication between heterosexual partners. Few of these messages consider the disempowered position in which African American women are placed due to the African American sex ratio imbalance (Adimora & Schoenbach, 2005; Harris, Mallory, & Stampely, 2010). Further, with the exception of a study by Andrasik et al. (2012), there have been no other studies that have developed and tested concurrency messages. This proposed research is potentially innovative because it seeks to create and pilot test various messages that are tailored to young adult African American women and take into account sexual norms and patterns that may be unique to African American culture.

## CHAPTER 2: LITERATURE REVIEW

The purpose of this chapter is to provide a review of the literature related to the research questions guiding this study. Three bodies of literature inform this research: (1) public health literature regarding HIV and STI risk factors, sexual networking, and concurrency; (2) theoretical literature informing the theoretical framework and message development; and (3) qualitative literature guiding the methodological approach of this study. While this research specifically explores the risk posed to women by their sexual partners and partnerships, it is important to also highlight behaviors within these partnerships that place women at increased risk. Therefore, this chapter first addresses these risk behaviors, how the behaviors are influenced by relationship factors, and what predictors are associated with the risk behaviors. Next, the scope of the review is expanded to include literature addressing the relationship between concurrency and sexual networks, as well as literature explaining the risk posed specifically to African American women by both their partners and by African American sexual networks. Finally, this chapter presents a review of the literature pertaining to the theoretical and methodological frameworks in which the research is situated – specifically, literature on the epistemology, public health theories, and communication theories that guide the research.

### **Risk Factors**

Research on HIV and STIs has identified an interrelated set of behaviors that place African American women at increased risk. These risk behaviors include: unprotected sexual intercourse (CDC, 2011b); lack of or infrequent sexual communication (Forna et al., 2006); early age of sexual debut (Kenney, Reinholtz, & Angelini, 1998; O'Donnell, O'Donnell, & Stueve, 2001); substance use (CDC, 2013c; Seth, Wingood, DiClemente, & Robinson, 2011); and engaging in multiple recent/lifetime sexual partnerships (Finer, Darroch, & Singh, 1999; Moreno, El-Bassel, & Morrill, 2007). African American

women can also be placed at risk of HIV and STI infection by way of their sexual partnerships. Like sexual behaviors, there are certain relationship factors, like concurrent sexual partnerships, that place women at increased risk of HIV and STIs, (Doherty, Shiboski, Ellen, Adimora, & Padian, 2006). After highlighting how relationship factors can influence women's behaviors, this section will expand on all of these behavioral and relationship factors that place African American women at increased risk of HIV and STIs.

### ***Impact of Sexual Partnerships on Women's Behaviors***

Before further discussing the behavioral and relationship factors that place African American women at risk for HIV and STI acquisition, it is important to note the relationship between these two types of factors. African American women engage in various types of relationships that occur on a continuum of exclusivity and closeness, and are filled with relational meaning. Relational meaning impacts how African American women navigate risky and safer sex behaviors within their relationships.

***Relational Meaning.*** According to Relational Framing Theory, individuals understand their relationships by using "relational frames", or "mental structures that consist of organized knowledge about social relationships" (Solomon & McLaren, 2008, p. 105). Within a relationship, these relational frames focus attention and guide the meanings individuals attach to particular cues from their partner (Solomon & McLaren, 2008). Two frames that guide the interpretation of interpersonal relationships and by which relational meaning is ascribed to interpersonal sexual relationships are (1) affiliation and (2) control.

Relational affiliation associated with sexual relationships is the appreciation or esteem one partner has for another and usually manifests in emotions of love, connectedness, emotional involvement, intimacy, and trust (Cline, 2003; Rosenthal, Gifford, & Moore, 1998; Solomon, Dillard, & Anderson, 2002). This affiliative meaning is, for women, associated with all sexual intercourse (Rosenthal et al., 1998). In general, however, it is associated with close (rather than casual) sexual relationships. Relational control is the degree to which one partner attempts to control the behavior of

another – either directly or indirectly (by establishing status over the other) (Solomon et al., 2002). For women, concepts associated with sex that characterize relational control meanings include giving sex, yielding to sexual advances, submitting, doing one's duty, or fulfilling marital/legal obligations (Cline, 2003).

Relational meaning can provide a backdrop for understanding risky sexual behaviors, why women choose to accept certain behavior from their partners and how they communicate with their partners about sex and risk (Cline, 2003; Edgar, Freimuth, Hammond, McDonald, & Fink, 1992). For example, research suggests engaging in unprotected sex is seen as a greater expression of love and affection than is using condoms, and indicates trust and devotion to the relationship (Rosenthal et al., 1998). Thus, it would follow, communication about condom use or other safer-sex practices would indicate distrust between partners in relationships with greater affiliative meaning (i.e. monogamous sexual relationships), but would be expected in relationships with less affiliative meaning (i.e. casual sexual relationships). Relational control framing in a relationship might have a different effect on safer-sex behaviors. A woman who understands her relationship using a relational control frame would have unprotected sex even if she preferred to use a condom. Further, a woman who sees her partner as exerting dominance over her might even avoid communication about safer sex practices or about her partners risk (e.g. STI status or whether or not he has other partners) (Cline, 2003).

It is important to understand sexual risk behaviors within context rather than assuming they occur within a vacuum and without the influence of other people, culture, and society. Relational Framing Theory provides a lens for understanding how women's relationships and their understanding of these relationships might affect their sexual decision and behaviors.

### ***Predictors of Behavioral and Relationship Risk Factors***

Understanding predictors of behavioral and relationship risk factors among African American women can contribute to the identification of preventative measures that reduce HIV and STI incidence.

Because this research involves sexually active African American women (who have already had their sexual debut), factors that predict age of sexual debut are not discussed here. Further, although alcohol and drug use is a risk behavior, it is not sexual in nature. Thus, alcohol and drug use will be discussed here as predictors of sexual risk behaviors, rather than risk behaviors themselves. Otherwise, the predictors related to sexual HIV risk behaviors – and their protective alternative behaviors – are discussed in the following sections.

**Unprotected sexual intercourse.** Various psychosocial factors predict condom use and nonuse. Bazargan, Kelly, Stein, Husaini, and Bazargan (2000) found condom use percentage was higher among African American college students (61.7% women) with higher knowledge of sexual acts that contribute to HIV, as well as among those with higher safer sex behavioral skills. Additionally, El Bcheraoui, Sutton, Hardnett, and Jones (2013) found condom nonuse was predicted by low perceived HIV risk.

Substance abuse and use are independently harmful to the health of urban African American women, but can also place these women in an altered mind-state that contributes to risky decision-making. HIV risk is not only associated with substance *abuse*, but with any use at all. In a study of HIV risk among students in a minority serving urban commuter university in the Midwest, Adefuye, Abiona, Balogun, and Lukobo-Durrell (2009) found having at least one drink of alcohol in the past 30 days was correlated with not using a condom among women. Seth, Wingood, DiClemente, and Robinson (2011) examined alcohol use on a non-abuse level and found frequency of alcohol use at non-abuse levels was correlated with and predicted risky sexual behaviors. Specifically, alcohol use predicted never using a condom with a casual partner over a 12-month follow-up period among young adult African American women (Seth, Wingood, et al., 2011). With these findings it is not surprising that Seth et al. (2011) also found alcohol consumption predicted positive results for Chlamydia and positive results for any STI. Poulson, Bradshaw, Huff, Peebles, and Hilton (2008) sought to estimate the alcohol- and/or marijuana-related risky sexual behaviors among a predominantly African American, mostly female sample. Their

data supported a positive correlation between marijuana use and risky sexual behaviors. Adefuye et al. (2009) also found support for this notion. Marijuana use was higher among their sample than in national surveys and was significantly correlated with not using a condom during last sexual encounter among women.

Age is also a predictor of condom use. Adefuye et al. (2009) found older women reported significantly less consistent condom use and condom use at last intercourse. Based on their findings, there is a negative linear relationship between condom use and age (Adefuye et al., 2009). These findings supported similar results from a study by Bazargan et al. (2000).

Unprotected intercourse is also predicted by various interpersonal factors. El Bcheraoui et al. (2013) found condom nonuse at last sexual intercourse was predicted by being unwilling to spoil the moment with a partner, having unplanned sex, showing commitment to a partner by not using a condom, worrying about partner's perception of lack of trust toward him or her, and being in a monogamous relationship. Through modeling, DePadilla, Windle, Wingood, Cooper, & DiClemente (2011) found partner communication was the strongest determinant of condom use among young African American women. These findings support those from a study by Small, Weinman, Buzi, and Smith (2010) that also indicated partner communication was the strongest predictor of condom use. Ferguson, Quinn, Eng, and Sandelowski (2006) explored interpersonal and gender role dynamics qualitatively and found participants felt women could not propose condoms because male would be skeptical of their status and that reasons women did not propose condoms include low self-esteem and embarrassment. Male proposal of condoms was not perceived as normative; women believed men might initially propose to gain trust so as to not have to use one at a later time (Ferguson et al., 2006). Love and perceived monogamy were other predictors of condom nonuse (Poulson et al., 2008). Overall, based on these findings, alcohol and drug use, age, and partner communication seem to be the most salient predictors of condom use

**Sexual communication.** Predictors of sexual communication with a partner among African American women about sexual history, condoms, or safer sex practices, in general, were the least prominent in the literature. Most of the time when communication was explored, it was explored as a predictor of another behavior (e.g. condom use/nonuse.) However, Seth and Patel et al. (2011) explored depressive symptomatology among adolescent girls and its impact on condom use and communication and found depressive symptoms predicted high fear of communication about condoms. DePadilla et al. (2011) additionally found having an older partner, negative personal affect, infrequent parental communication about sex, and substance use during sex all predicted decreased partner communication. Thus, though there was limited data identified, depression/negative personal affect may be the most salient determinants of partner communication about safer sex.

**Multiple recent/lifetime sexual partners.** Seth et al. (2011) found women who consumed alcohol were more likely to have multiple partners (two or more partners over a 6- and 12- month period) and risky partners (partners who: were recently incarcerated, used injection drugs, were diagnosed with an STI, or had concurrent partners) than those women who did not. A study by Adefuye et al. (2009) showed similar results, finding respondents who used alcohol or illegal drugs in the past 30 days were more likely to have 2 or more partners. In this study, multiple partnerships were higher among younger respondents (Adefuye et al., 2009). Another study of college students in the south found a greater number of sexual partners in the past year for women was predicted by African American ethnicity, more positive sex-related alcohol expectancies, greater perceived HIV risk, and greater frequency of alcohol use in past month (Randolph, Torres, Gore-Felton, Lloyd, & McGarvey, 2009). Further, African American women had greater number of sexual partners in the past year than men and women of other ethnicities (Randolph et al., 2009).

**Concurrent sexual partnerships.** Concurrent sexual relationships are defined in the literature as those that overlap in time (Adimora et al., 2003, 2004). In other words, they are sexual partnerships in

which the date of first sexual intercourse with one partner occurs before the date of last sexual intercourse with another partner (Adimora et al., 2003). Grieb, Davey-Rothwell, and Latkin (2012b) explored correlates of concurrency among low-income urban African American women reporting main sexual partnerships longer than six months in duration. According to findings, women who had one or more sexual partner who used drugs in the previous six months were more likely to be practicing concurrency. Unadjusted analyses showed concurrency significantly predicted: relationship status (not committed); sexual debut age 15 or younger; forced sex; incarceration of self and partners in previous six months; depression; drug use (admission to detox or having sex while high); known or suspected partner nonmonogamy; and partner drug use. Additionally, even when controlling for individual factors, younger age of sexual debut, uncommitted relationship status, and indicators of problem drug use remained significant predictors of concurrency (Grieb, Davey-Rothwell, & Latkin, 2012a). Important factors for women were first coitus before age 16, lifetime partners, and STD diagnoses during relationship.

Manhart, Aral, Holmes, and Foxman (2002) found support for early age of sexual debut as a predictor of concurrency. While an STI diagnosis during the relationship was the strongest predictor of concurrency, sexual debut before age 16, partnership duration of more than six months, and greater lifetime partners were also significant predictors. Finally, Nelson et al. (2007) measured predictors of concurrency using two methods of measurement in three urban areas and found concurrency was significantly associated with relationship duration being more than three months and pregnancy with the most recent partner using both measurement methods. Concurrency was also associated with: injection drug use; ecstasy use; receiving money for sex; childhood sexual abuse; being African American; having an African American partner; having a current partner; ever having sex the same day as meeting a partner; and condom use at last sex with the second partner. Base on the literature, the most salient predictors of concurrency are earlier sexual debut and drug use.

## **Sexual Concurrency**

Concurrency can be defined in terms of one's own behavior (individual concurrency) or in terms of one's sexual partner's behavior (partner concurrency). Several different types of concurrency – categorized by the basis of their occurrence – have been identified in the literature. Gorbach, Stoner, Aral, Whittington, and Holmes (2002) described six main patterns of concurrency: (1) experimental, exploratory concurrency in which neither partner is a “main” partner; (2) separational, developing during physical separations from main partner (e.g. due to incarceration of one partner); (3) transitional, concurrency as a result of transition from one main partner to the next; (4) reciprocal, mutually nonmonogamous and openly discussed; (5) reactive, occurring in response to concurrency among partner; and (6) compensatory, occurring in order to compensate for perceived flaws or deficiencies in the main partner. Condom use varies by type of concurrency, but in most cases is not practiced with a main partner (Gorbach et al., 2002). Additionally, Gorbach et al. (2002) identified three less common forms of concurrency: (1) group sex, sex with more than one partner at the same occasion; (2) coparents, sex outside of the main partnership that occurs between coparents of children; and (3) survival sex, sex that occurs in exchange for money or drugs.

Doherty, Schoenbach, and Adimora (2009) further described three different types of concurrency based on the pattern of overlap. The three types are: (1) transitional concurrency, when one relationship is started a month before another ends; (2) contained concurrency, when one sexual partnership begins and ends within the timeframe of another; and (3) experimental concurrency, when there is either a single sexual encounter with a second partner or when the second sexual relationship lasts for less than a month (Doherty et al., 2009).

### ***Concurrency Acceptance in the Context of this Research***

This research examined African American women's acceptance of partner concurrency from male partners. For the purposes of this research, concurrency acceptance was defined as a woman's

acceptance of a partner (as exhibited by her explicitly stated approval or continued participation in their sexual relationship) despite her knowledge or suspicion that he currently has or has had another or other sexual partners at some point during their sexual relationship. Examining women's suspicions as well as their knowledge that a partner was engaging in concurrency is justified by research reviewed in the next section that suggests individuals' beliefs about a partner's concurrency are usually consistent with actual concurrency.

### ***Concurrency among African Americans***

Previous research has measured concurrency in one of two ways: either by self-report of concurrency (an individual's response that he/she has maintained sexual relationships with more than one person at a time) or by self-report of dates of sexual partnerships (determining sexual concurrency by examining overlap in the dates). Research that has examined concurrency using both techniques within a computer-assisted survey interview (CASI) has found fair agreement between the two methods of measurement (Adimora et al., 2004; Nelson et al., 2007), but found the self-report of concurrency method was more interpretable and more appropriate for computer surveys (Nelson et al., 2007).

In a secondary analysis of data generated using the National Survey of Family Growth (NSFG), Adimora, Schoenbach, and Doherty (2007) used the date overlap method to determine concurrency prevalence among US men. They found overall concurrency prevalence estimates adjusted for missing dates of female partnerships were 11% among all men, 12% among sexually experienced men, and 12.5% among men who had at least one sexual partner in the past year (95% confidence interval [CI] = 5.8%, 7.4%) among US men. Concurrency was more likely among non-Hispanic Black men than among non-Hispanic White men (odds ratio [OR] = 3.06; 95% CI = 2.27%, 4.13%), and was associated with the highest income level among non-Hispanic Black men (OR = 1.79; 95% CI = 1.22%, 2.35%). Young adult men between the ages of 18 to 24 years were also more likely to report concurrent sexual partners than men in other age groups.

In a similar study using data from the same cycle of the NSFG, Adimora, Scoenbach, Taylor, Khan, and Schwartz (2011) sought to find the prevalence of concurrency among women in the United States. They found the overall adjusted concurrency prevalence estimate for all women was 8.3% (Adimora et al., 2011). The prevalence among non-Hispanic Black women was 16.3%, versus 7.0% among Whites (prevalence odds ratio [POR] = 1.99; 95% CI = 1.44, 2.75). Overall, racial differences in concurrency appeared to be mostly attributable to lower rates of marriage and younger age of sexual debut among African Americans (Adimora & Schoenbach, 2005; Adimora et al., 2007; Adimora et al., 2011).

These studies also investigated respondents' beliefs that their partners had practiced concurrency in the past 12 months. Findings suggest participants' beliefs about their partner's concurrency were fairly accurate, with 10.5% of all men and 17.8% of non-Hispanic Black men indicating their partner had likely had another partner (Adimora et al., 2007). Likewise, Adimora et al. (2011) found 8.6% of women believed their partner had another/other sexual partner(s) in the past 12 months. At 15.1%, the prevalence in this category was much higher among non-Hispanic Black women. These reports of beliefs about partners closely align with actual reports of concurrency in their respective studies.

### **Sexual Networks**

Concurrency is problematic because it amplifies the spread of HIV and other STIs within sexual networks, thereby increasing their prevalence within those networks. Sexual networks are groups of people who are interconnected directly or indirectly through sexual contact (Adimora & Schoenbach, 2005). Two key aspects of sexual networks affect the spread of HIV: (1) size and (2) connectivity (Anderson, 1999; Anderson, Gupta, & Ng, 1990; Carnegie & Morris, 2012). The size and connectivity of one's sexual network could be determined by a number of factors including: population size; network segregation (e.g. racial) and network isolation (e.g. geographical) (Morris, Kurth, Hamilton, Moody, &

Wakefield, 2009); and how partnerships are formed, dissolved, and sequenced (Morris et al., 2009).

Smaller and more connected sexual networks increase the likelihood of contact between members, and also increase the likelihood of contact between those who are HIV-positive and those who are HIV-negative (E. O. Laumann, Gagnon, Michael, & Michaels, 1994; E. O. Laumann & Youm, 1999).

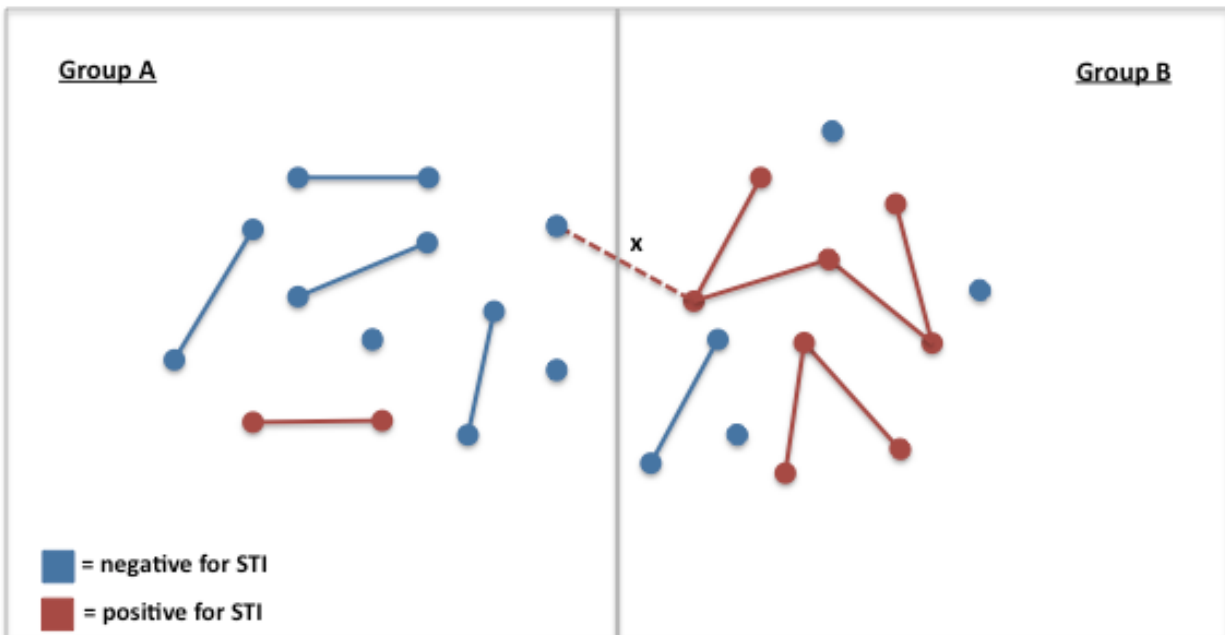
### ***Relationship between Risk Mixing and Sexual Network Characteristics***

Small, connected sexual networks also increase the probability that those who are high-risk (through some social aspect or behavior) come into contact sexually with those who are low-risk. This type of mixing (low-risk with high-risk individuals) is called dissortative mixing and, through the mechanism of introducing the risk of one group into another, increases the prevalence of HIV (Morris et al., 2009). Conversely, when high-risk individuals mixed (sexually) with those of like risk-level (assortative mixing) then HIV would be confined within a high-risk population (see Figure 1) (Morris et al., 2009). Examples of dissortative mixing include: an older man and an adolescent girl, a woman who is an injection drug user and a man who has never injected drugs, and a man who has sex with both women and men and a woman. These scenarios are examples of how individuals may act as “bridges” between two risk groups. This type of bridging is called social bridging (Doherty et al., 2006).

### ***Relationship between Concurrency and Sexual Network Characteristics***

While risk mixing increases the prevalence and reach of HIV infection within a network, concurrency increases the speed of infection throughout a network (Adimora & Schoenbach, 2005). Concurrent partnerships have the potential to spread HIV more rapidly throughout a network than consecutive partnerships (or those with no overlap) because there is no delay between sexual encounters with different partners (Kretzschmar & Morris, 1996). Once an individual acquires HIV from one concurrent partner, transmission to the alternative partner can occur without the lag in sexual activity associated with ending a sexual relationship and beginning a new one (Kretzschmar & Morris, 1996). Further, because the relationships are not monogamous and the HIV is being passed continuously

throughout a network rather than being discontinued after affecting one partnership (Morris et al., 2009), even low levels of concurrency within a small sexual network can have a detrimental impact on the HIV prevalence and persistence in that network (see Figure 1) (Carnegie & Morris, 2012). Thus, concurrency can be described as providing a temporal bridge for HIV infection (Doherty et al., 2006).



**Figure 1.** Adapted network hypothesis for the emergence of persistent disparities in HIV and other STIs (Morris et al., 2009). In Group A, monogamy slows the spread of HIV and STIs, thereby maintaining prevalence. Contrarily, in Group B, concurrency acts as a temporal bridge and amplifies the spread, increasing prevalence. Point x illustrates social bridging. Without bridging, a significant differential in prevalence remains between groups.

### **African American Sexual Networks and HIV/STI Disparity**

Three characteristics of African American sexual networks increase the population’s risk and contribute to a disproportionate burden of HIV and STIs. The first is a preexisting high prevalence of HIV and STIs within the population that increases African Americans’ risk of infection upon each sexual encounter with another African American (CDC, 2014b). This trend may explain findings from a study by Johnson et al. (1994) that a higher proportion of African Americans than Whites who engaged in concurrency had been treated for gonorrhea and/or tested positive for HIV. These higher rates were despite no significant differences in condom use and despite the fact that approximately the same percentage of African American and White men engaged in concurrency (50% and 47%, respectively),

and less African American women than White women engaged in concurrency (38% and 19%, respectively) (Johnson et al., 1994).

The second component is twofold: assortative *and* disassortative mixing. African Americans mostly engage in racially assortative sexual relationships, resulting in a small, segregated sexual network that has high connectivity (Adimora & Schoenbach, 2005; Carnegie & Morris, 2012). On the other hand, African Americans (more than other ethnic groups) engage in sexual relationships that are disassortative with respect to HIV and risk (Adimora & Schoenbach, 2005). This disassortative mixing (as described in the previous section, “Relationship between Risk Mixing and Sexual Network Characteristics”) increases risk among the entire sexually active population, rather than among only those high-risk members.

The third characteristic contributing to the HIV and STI disparity is concurrency. While findings are inconsistent, some research has suggested African American males engage in higher rates of concurrency than males in other ethnic groups (Adimora et al., 2007). In combination with a small sexual network, even a small prevalence of concurrency can create an HIV epidemic, because an epidemic is based on proportion, not quantity (Carnegie & Morris, 2012). Likewise, in a small, connected network, a small prevalence of concurrency can create a noticeable disparity compared to other networks (Carnegie & Morris, 2012).

These three attributes interact to amplify the spread of HIV and STIs, and are strongly influenced by the fourth characteristic: a sex ratio imbalance that is more substantial among African Americans than among those of other racial groups (Adimora & Schoenbach, 2005).

### ***African American Sex Ratio Imbalance***

African Americans are disproportionately affected by an unbalanced sex ratio (ratio of men to women among the population) (U.S. Census Bureau, 2000). According to Census data from 2000, there are 90.5 African American men per 100 African American women, compared to: Whites at 96.4 men per 100 women; American Indians/Alaskan Natives at 99.4 men per 100 women; Asian Americans at 93.5

men per 100 women; and Hispanic/Latino Americans at 105.9 men per 100 women (U.S. Census Bureau, 2000). This imbalance exists even before accounting for men who are not physically available to women. Adimora et al. (2013) examined the relationship between sex ratio, neighborhood poverty, and concurrency and found only 7.58% of African Americans in a nationally representative sample resided in a county whose sex ratio was balanced (versus 99.5% of Whites and 93.7% of Hispanics). This sex ratio imbalance is a result of factors such as violent crime, substance abuse, and incarceration all limiting the number of available African American men (Edward O. Laumann, Ellingson, Mahay, Paik, & Youm, 2004). As a result, and because African American women are likely to have sexual relationships primarily with African American men, many African American women are left unmarried and lacking options of suitable potential mates.

### ***Concurrency Acceptance among African American Women***

Lower sex ratios result in increased dyadic power among the sex with fewer members, allowing that group to engage in sexual activity without the exchange of commitment or monogamy (Guttentag & Secord, 1983). Thus, aside from reduced availability, the sex ratio imbalance also influences African American male-female power dynamics, placing men in a position of power and women in a juxtaposed position of disempowerment. The African American sex ratio imbalance disadvantages women attempting to negotiate and maintain mutually monogamous relationships, as men have ample opportunity to enter another relationship if they no longer want to pursue their own (Aral, 1999). Also, due to the sex ratio imbalance, men may feel their partners will not abandon them if they practice concurrency due to the difficulty African American women have obtaining primary partnerships (Thomas & Thomas, 1999).

Cultural norms among African American men and women reflect the reality of the sex ratio imbalance. African American men perceive concurrent sexual relationships while unmarried to be socially acceptable, expected, and associated with masculine identity (Nunn et al., 2011). Infidelity

among men is viewed by both sexes as normative behavior that women tolerate due to a perceived limited availability of other men, gender norms, and relationship power imbalances (Bowleg, Lucas, & Tschann, 2004; Harris et al., 2010; McLellan-Lemal et al., 2013). While many African American women incorrectly assume their partners are monogamous (Lenoir, Adler, Borzekowski, Tschann, & Ellen, 2006), many others are aware of their partners' concurrency and report feeling pressured to lower their expectations of monogamy and accept risky male partners due to a perceived lack of other choices (Harris et al., 2010). These women also feel disempowered in their relationships, especially regarding safer sex practices and communication (Harris et al., 2010). With two African American women heterosexually infected for every one African American man who is heterosexually infected, infected men may be spreading the infection to multiple women with whom they are having sexual relationships. The disproportionately high incidence of HIV among African American women may be a result of sexual concurrency among African American men and lack of empowerment to engage in safer sex behaviors among African American women.

### ***Predictors of Concurrency Acceptance***

With higher rates of concurrency among African American men and high prevalence of HIV and STIs in small sexual networks, African American women are already at increased risk of acquiring HIV and STIs. Considering the magnitude of the current HIV and STI disparities, these women can't "afford" to engage in risky behaviors with risky partners in risky networks any longer. It is important to gain a better and more explicit understanding of factors that contribute to African American women's acceptance of risky partners who practice concurrency and explore the protective behaviors (or lack thereof) that occur within these relationships. While this topic is not extensively explored in the literature, several studies of other topics have identified predictors of concurrency acceptance among African American women. The current research used these predictors to inform the development of a Concurrency Acceptance Model, which is described later (see Figure 2).

Harris, Mallory, and Stampley (2010) found African American women perceived a lack of choice of available partners (especially African American partners) due to the African American sex ratio imbalance, and cited this perception as a reason for accepting a partner who engages in concurrency. Because of this acceptance, and because there are higher rates of concurrency among African American men (Adimora et al., 2007), women are more likely to be exposed to a partner who engages in concurrency if they are: unmarried, African American, and involved with African American partners. Based on this research, predictors of concurrency acceptance include unmarried status, ethnicity, partner ethnicity, and perception of partner availability.

Certain relationship factors predict concurrency acceptance among African American women. In a qualitative study with African American women, Bowleg, Lucas, and Tschann (2004) found women who had already experienced a partner who had engaged in concurrency in the context of their relationship had more accepting attitudes toward concurrency and were also more likely to have engaged in concurrency, themselves. Partner concurrency was also associated with perpetrator-only, victim-only, and reciprocal intimate partner violence within relationships (Hess et al., 2012). Women who experience intimate partner violence in their relationships are at immediate physical risk and may not be able to discontinue relationships with partners who engage in concurrency, or even ask partners about whether or not they are engaging in concurrency. Thus, based on this research, having a partner who had previously engaged in concurrency, having concurrent partners, and being in an abusive relationship are predictors of concurrency acceptance.

Finally, social and cultural factors also predict concurrency acceptance. McLellan-Lemal, et al. (2013) found women tolerated partner concurrency due to their expectations of the relationship and were resistant to communicate about the relationship because of gender roles and sexual scripts. These women felt validated by being in a defined, socially recognized relationship and, therefore, would accept nonmonogamy from partners in order to sustain the relationship (McLellan-Lemal et al., 2013). Similarly,

Paxton, Williams, Bolden, Guzman, and Harawa (2013) found participants were willing to accept unfaithful partners due to loneliness and the desire for a relationship. Also noteworthy, in a study by Thompson Robinson, et al. (2005), both men and women indicated women continued relationships with partners who engaged in concurrency because of strong emotional connections and feelings of “love.” Based on this research, affective attachment and positive attitudes and acceptance of norms about being in a relationship are predictors of concurrency acceptance.

### **Communication Approaches to Concurrency**

A major objective of this research was to create and test messages about concurrency acceptance. To date, there is an absence of published domestic research on messages related to concurrency acceptance among African American women (or any other groups). Indeed, there is a lack of research using messages to address concurrency, in general. However, in a novel study, Andrasik et al. (2012) used a community-based participatory research approach to develop messages that informed a primarily African and African American community about concurrency and its impact on the spread of HIV. This research involved using two phases of interviews (individual interviews followed by focus groups) to generate data from stakeholders and community members with the goal of creating culturally sensitive messages (Andrasik et al., 2012). Messages were created using direct quotes from interviews as well as the tagline, “It’s called concurrency, and it’s spreading infection” (Andrasik et al., 2012). The tagline was included based on findings from the interviews that suggested a need to either promote a new, more colloquial term for ‘concurrency’ or to make the existing term more understandable.

### **Theoretical Framework**

Three types of theory inform the conceptual framework of this research: (1) epistemology, (2) public health theory and (3) communication theory.

## ***Epistemology***

Black Feminist Thought is both an epistemology (a theory of knowledge) and a critical social theory committed to justice for both “Black women as a collectivity and for that of other similarly oppressed groups” (Hill Collins, 2009, p. 14). The theory’s central themes include work, family, sexual politics, motherhood, and political activism (Hill Collins, 2009). Black feminism is concerned with the collective experience of Black women and how they derive meaning from lived experiences (Hill Collins, 1989, 2009). The theory emphasizes Black women’s voices by specializing in “formulating and rearticulating the distinctive, self-defined standpoint of African American women” (Hill Collins, 1989, p. 750) and represents two interdependent levels of knowledge. The first level of knowledge includes “everyday, taken-for-granted” knowledge that is shared by Black women (Hill Collins, 1989). The second level is the more specialized knowledge of Black female experts who are able to express the group’s standpoint. Overall, Black feminist thought “validates the experiences of Black women in the creation of knowledge” (Stephens & Phillips, 2005, p. 39). This epistemology will guide all data collection and analysis for the research project.

Many feminist researchers find themselves asking, “What is feminist methodology?” However, there is no absolute “right” answer to this question. In fact, most feminist scholars and researchers would argue against the idea of a “distinctive method of research” (Harding, 1987). Like other feminist theories, Black feminist thought does not explicitly delimit Black feminist research to any one specific method or methodology. However, Hill Collins comes very close by identifying Black Feminist Thought epistemology as dealing with a specialized subjugated knowledge and following a set of principles for assessing knowledge claims of those with shared experiences. In following these principles, Black Feminist Thought epistemology uses different standards that Hill Collins claims are consistent with Black women’s criteria validating knowledge (Hill Collins, 2009). These standards are as follows:

- The research must focus on meaning from lived-experiences.

- The research must take the form of dialogue.
- There must be an “ethics of caring.”
- There must be an “ethic of accountability.”

**Lived Experience as a Criterion of Meaning.** Hill Collins (2000) bases Black feminist epistemology on the lived experiences of African American women because lived experiences are the criterion for credibility by which African American women make knowledge claims. She cites, “distant statistics are not as important as the actual experience of a sober person” (Hill Collins, 2000, p. 276). According to Hill Collins (2000), in Black Feminist epistemology, women’s experiences are preserved and told in narrative form rather than “torn apart in analysis” (p. 258). They are “trusted as core belief, not “admired as science” (Hill Collins, 2009, p. 277). In other words, lived-experiences are valued in Black feminist epistemology; they are preserved, interpreted, and retold as interpretations. This view is adopted because Hill Collins (2009) recognizes the fact that even the researcher has a lived experience with which she is operating while understanding the lived experiences of others. She notes “even after substantial mastery of dominant epistemologies, many black women scholars invoke our own experiences and those of other African American women in selecting topics for investigation and methodologies used” (Hill Collins, 2009, p. 276).

**The Use of Dialogue in Assessing Knowledge Claims.** According to bell hooks (1989), “Dialogue implies talk between two subjects, not the speech of subject and object. It is a humanizing speech, one that challenges and resists domination” (p. 131). Hill Collins (2009) discusses this dialogue as being important for the formation of new knowledge. She says, “a primary epistemological assumption underlying the use of dialogue in assessing knowledge claims is that connectedness rather than separation is an essential component of the knowledge validation process” (Hill Collins, 2009, p. 279). In this statement Hill Collins is juxtaposing the use of dialogue in research to the use of methods that

isolate the researcher from the giver of knowledge and claiming the use of dialogue through interaction results in more validated research.

**The Ethics of Caring.** Hill Collins (2009) describes an “ethics of caring” as one in which “expressiveness, emotions, and empathy are central to the knowledge and validation process” (p. 282). The ethics of caring comprise three interrelated components are concerned with including our own feelings and emotions (as researchers) in the research process. The first of the three components is an emphasis on individual uniqueness. This component is centered on accounting for the expressiveness of African American women. The second component concerns the “appropriateness of emotion in dialogue” (Hill Collins, 2009, p. 282). This component counters the way Western society stigmatizes feeling and emotion and calls for emotion in research. In other words, this ethic rejects the “coldness” and detachment associated with positivist, “scientific” research. Finally, the third component involves developing the capacity for empathy. This involves showing empathy about the conditions of African American women involved in research. Together, these ethics of caring are concerned with involving emotion and creating a safe and compassionate space when involved in research. As “emotion indicates that a speaker believes in the validity of an argument” (Hill Collins, 2000, p. 263), allowing emotion in research builds trust with participants and ultimately allows researchers to access participants’ “inner voice” (Hill Collins, 2009, p. 283),

**The Ethic of Personal Accountability.** Further, the “ethic of personal accountability” refers to the expectation that researchers will be accountable for their knowledge claims and will “assume full responsibility for arguing their validity” (Hill Collins, 2009). This ethic concerns reflexivity in the way that it demands the researcher identify herself (i.e. identify her subjectivities), take full responsibility for the role that she plays in the research, and acknowledge her identity in the claims she is making about the research.

## **Public Health Theory**

**The Theory of Gender and Power.** According to Wingood and DiClemente's (2000) application of the Theory of Gender And Power (Connell, 1987) to HIV risk, sexual risk factors can be separated into three domains of gender inequity that operate together to increase HIV risk among women: (1) the Sexual Division of Labor (SDL), (2) the Sexual Division of Power (SDP), and (3) the Structure of Affective Attachments and Social Norms (SAASN) (Wingood & DiClemente, 2000). These structures exist on two levels, societal and institutional, and produce disparities in exposures (acquired risks that can be economic, physical, or social in nature and influence the risk of disease among populations) and risk factors (socioeconomic, behavioral, or personal factors that are associated with engaging in risk behaviors that increase risk of disease in an individual) (Wingood & DiClemente, 2000).

**Sexual Division of Labor.** At the societal level, the sexual division of labor refers to the "allocation of women and men to certain occupations" based on gender roles (Wingood & DiClemente, 2000, p. 542). This social structure is maintained at the institutional level through unpaid nurturing work, such as child and elderly care and housework, and through unequal pay in the work force (Wingood & DiClemente, 2000). According to the Theory of Gender and Power, inequities resulting from the sexual division of labor manifest themselves as economic exposures and as socioeconomic risk factors (Wingood & DiClemente, 2000). Economic exposures include the following: living at the poverty level, having less than a high school education, being unemployed or underemployed, having a high demand/low control work environment, having limited or no health insurance, and having no permanent home (Wingood & DiClemente, 2000). Socioeconomic risk factors are being an ethnic minority woman and being a younger (specifically, less than 18 years old) woman (Wingood & DiClemente, 2000).

**Sexual Division of Power.** The sexual division of power, at the societal level, refers to inequalities in power (over self and over others) between the sexes (Wingood & DiClemente, 2000). The

social mechanisms in this structure are maintained at the institutional level as abuse of authority and control over women in power imbalanced relationships and the disempowerment and sexual degradation of women in the media (Wingood & DiClemente, 2000). Inequities resulting from the sexual division of power manifest themselves as physical exposures and as behavioral risk factors (Wingood & DiClemente, 2000). Physical exposures are “institutional or interpersonal factors that exert their power over women” (Wingood & DiClemente, 2000, p. 543) and include having: a history of sexual or physical abuse, having significant exposure to sexually explicit media, having a high-risk steady partner, a partner who disapproves of practicing safer sex, and lack of access to drug treatment or to HIV prevention education (Wingood & DiClemente, 2000). Behavioral risk factors are defined as having a history of alcohol and drug use, poor assertive communication skills, low self-efficacy to avoid HIV, and limited perceived control in sexual relationships. Generally, behavioral risk factors are those that contribute to a woman’s lack of perceived control or power to avoid unhealthy behaviors (Wingood & DiClemente, 2000).

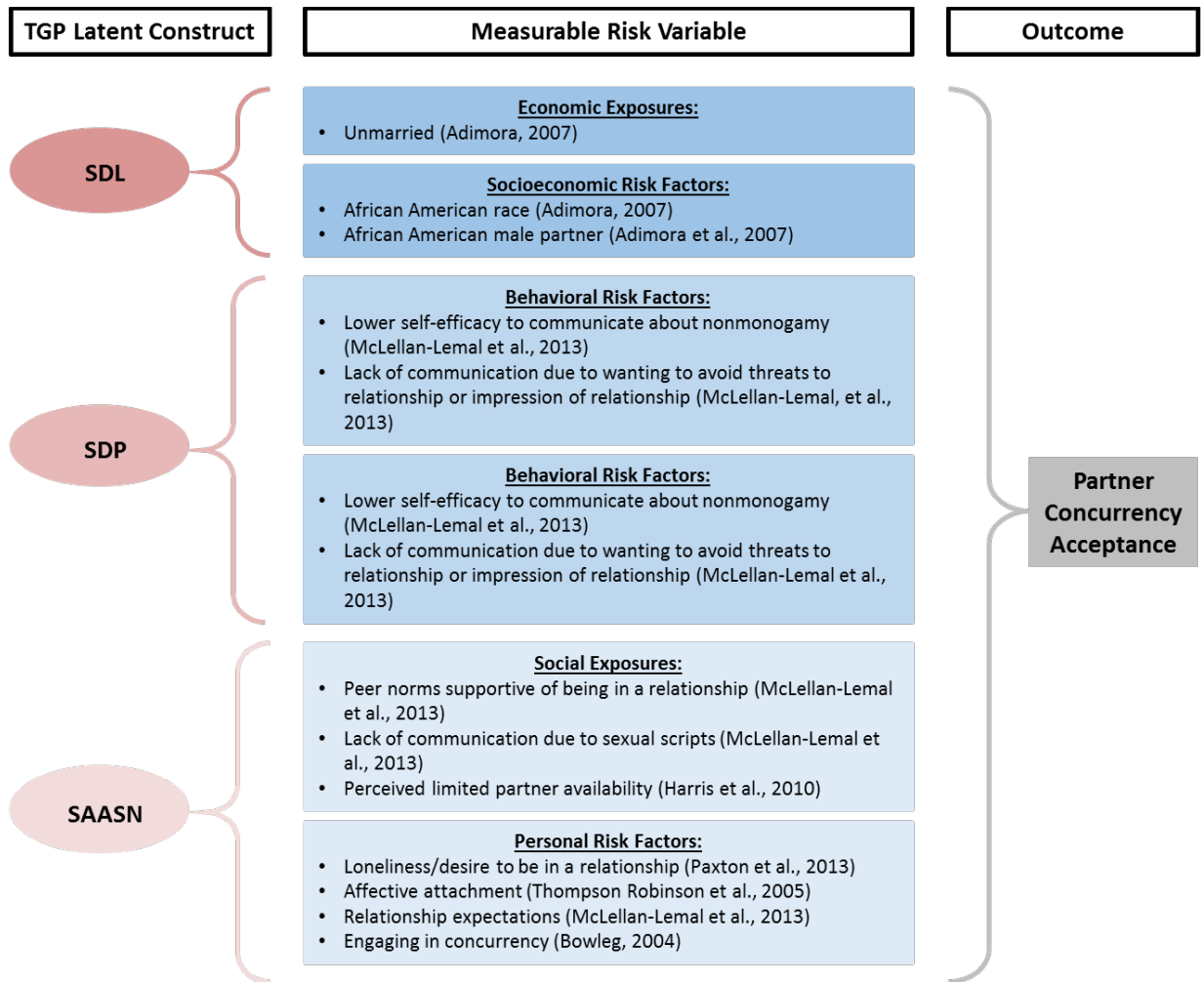
***Structure of Affective Attachments and Social Norms.*** At the societal level, the structure of affective attachments and social norms concerns the emotional and sexual (affective) attachments women have with men, and dictates appropriate sexual behavior (social norms) for women (Wingood & DiClemente, 2000). According to this structure, those women who have beliefs that favor conventional social norms are more at risk of HIV acquisition. Inequities resulting from the structure of affective attachments and social norms manifest themselves as social exposures and as personal risk factors (Wingood & DiClemente, 2000). Social exposures are: women who have older partners, an interest in or whose partner has an interest in conceiving children, family influence that is not supportive of HIV prevention, a mistrust of the medical system, conservative cultural and gender norms, and a religious affiliation that forbids the use of contraception. Personal risk factors include having limited HIV

prevention knowledge, negative attitudes and beliefs about condoms, and a history of depression or psychological distress (Wingood & DiClemente, 2000).

### ***Proposed Partner Concurrency Acceptance Model***

The Concurrency Acceptance model (Figure 2) was developed using constructs from the Theory of Gender and Power, as well as literature that identified predictors of concurrency. Wingood and DiClemente's original Theory of Gender and Power model predicts general HIV risk. Although concurrency acceptance could be included among factors that contribute to general HIV risk, the Concurrency Acceptance Model includes predictors that are specific to young adult African American women's acceptance of partner concurrency. The variables included in the proposed model are grounded in existing literature and were discussed previously (see Predictors of Concurrency Acceptance). The variables were assigned to the Theory of Gender and Power constructs based on the construct definitions.

This research contributes to the field by qualitatively exploring predictors of concurrency acceptance among a sample of African American women between the ages of 18 and 24 in order to further develop the Partner Concurrency Acceptance Model using qualitative findings. The final model is presented later with the qualitative findings (see Figure 6).

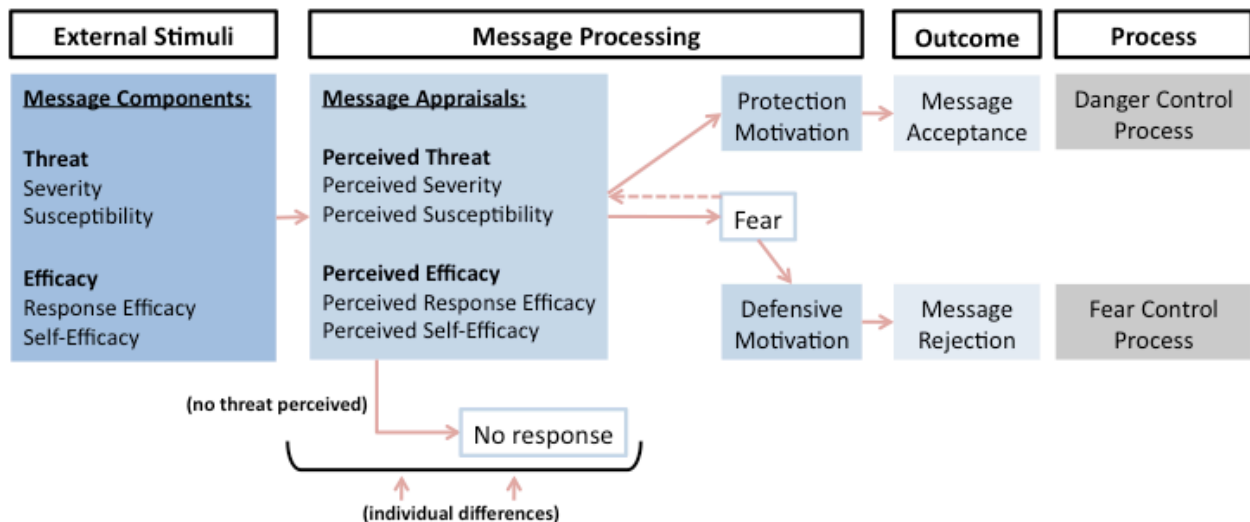


**Figure 2.** Proposed Partner Concurrency Acceptance Model (using constructs from the Theory of Gender and Power). SDL = Sexual Division of Labor; SDP = Sexual Division of Power; SAASN = Structure of Affective Attachment and Social Norms.

**Communication Theory**

One of the goals of this research was to develop culturally targeted materials addressing concurrency acceptance. These materials were developed using established communication theories and concepts to address interpersonal communication about concurrency acceptance.

**Extended Parallel Process Model (EPPM).** The Extended Parallel Process Model (EPPM) (Figure 3) was used as a framework to guide material development (Maloney, Lapinski, & Witte, 2011). The Extended Parallel Process Model predicts how individuals react when confronted with fear appeals, or fear-inducing stimuli. The model assumes individuals adopt a recommended behavior when a message induces a moderate level of fear and a higher level of efficacy to avert a threat. The model proposes severity, susceptibility, response efficacy, and self-efficacy as effective message components; perceived threat and perceived efficacy as message processing appraisals; and either message acceptance or message rejection as outcomes.



**Figure 3.** The Extended Parallel Process Model (Witte, Cameron, McKeon, & Berkowitz, 1996)

Threat is defined by the EPPM as a danger or harm posed by one’s environment (Witte et al., 1996). The construct is two-fold, and includes severity and susceptibility. According to the model, threat message components should manipulate language to communicate severity, and contextualize risk to communicate susceptibility (Witte, 1994). Threat message components affect perceived threat

(perceived severity and perceived susceptibility), which is a subjective evaluation by the audience. Perceived severity describes beliefs about the magnitude of the threat and the significance of its consequences. Perceived susceptibility describes an individual's beliefs about personally experiencing a threat.

Efficacy is related to the "effectiveness, feasibility, and ease with which a recommended response impedes or averts a threat" (Witte et al., 1996). Like threat, EPPM holds efficacy is also two-fold and includes response efficacy and self-efficacy. According to the model, efficacy message components should communicate response efficacy by describing the effectiveness of a recommended response in averting a threat, and communicate self-efficacy by describing the ability of the intended audience to carry out the recommended response. Response efficacy components affect perceived response efficacy, "beliefs about the effectiveness of the recommended response in deterring the threat," and perceived self-efficacy or the "beliefs about one's ability to perform the recommended response to avert the threat" (Witte et al., 1996, p. 320).

The model proposes that in order to have any response at all individuals must first perceive a threat, which is influenced by both threat messages and individual characteristics (i.e. a woman who is not sexually active would not be likely to perceive a threat from HIV messages). If a threat is perceived, it induces fear, which validates that threat and initiates protection motivation, resulting in message acceptance. Protection motivation also requires efficacy. If an individual does not believe anything can be done to avert a threat, defensive motivation is initiated, and the individual rejects the message. These outcomes occur independently of one another and via one of two processes: a danger control process, which is cognitive and involves consideration of threat and actions (the message recommendations) to avoid it; or a fear control process, which is emotional, and involves controlling fear by responding with denial, avoidance, or similar emotions (Witte, 1994, 1998).

**Cultural targeting.** This research also used cultural targeting when developing materials and messages. As HIV related mass communication campaigns have shifted focus from raising awareness (as was the case with early campaigns) to changing behavior, messages have become more targeted in response to the more urgent need for certain groups to reduce risk over others (Noar, Palmgreen, Chabot, Dobransky, & Zimmerman, 2009). Cultural targeting, or reaching subpopulations or groups of individuals with shared characteristics, informs messages that use language, images, and scenarios that are relatable to the intended audience (Devos-Comby & Salovey, 2002; Kreuter & Skinner, 2000).

Targeted interventions are now common in HIV communication, with a number of communication interventions yielding positive results (Davis et al., 2011; Romer et al., 2009; Ross, Chatterjee, & Leonard, 2004). Andrasik and colleagues (2012) used culturally sensitive messages to promote negative attitudes about concurrency among an African and African American population. However, aside from Andrasik and colleagues' (2012) novel study, there is a lack of published research on targeted communication about concurrency. Previous studies have focused mainly on behavioral outcomes more commonly explored in the literature (such as condom use, screening, and testing). This research focused on attitudes toward concurrency acceptance and sexual communication self-efficacy with a partner as outcomes.

**Narrative messaging.** Finally, in accordance with the epistemology adopted for this research, narrative messaging was also utilized in the materials. Using recurring themes and key concepts from existing literature, Hinyard and Kreuter (2007) define a narrative as "any cohesive and coherent story with an identifiable beginning, middle, and end that provides information about scene, characters, and conflict; raises unanswered questions or unresolved conflict; and provides resolution" (p. 778). Communication researchers are increasingly using narrative forms of communication instead of more traditional strategies such as statistical evidence, fear appeals, and appeals to logic/reason. However, a lack of consensus among researchers regarding what qualifies as narrative has led to challenges in

synthesizing results. Consequently, reviews, meta-analyses, and studies examining differences in impact between narrative and statistical evidence in communication have yielded inconsistent findings (Allen & Preiss, 1997; Baesler & Burgoon, 1994; Taylor & Thompson, 1982). Still, narrative messaging is used in this research because it aligns with the epistemological approach.

### **Chapter Conclusion**

Rates of HIV and other STIs are disproportionately high among African American women – especially young African American women, who are especially at risk due to behavioral, cultural, and social factors associated with their age. A significant disparity exists among African American women despite a lack of evidence of notable behavioral differences between this group and women in other ethnic/racial groups. Recent research has revealed sexual network characteristics and concurrency are primarily responsible for the group’s HIV and STI burden. While considerable research has focused on both behavioral and network explanations for the high HIV and STI rates among African American women, research on how the network characteristics affect attitudes, expectations, and behavior among African American women is lacking. This study seeks to link the two courses of research by using Black Feminist Thought epistemology, the Theory of Gender and Power, and Social Cognitive Theory to explore how African American women have reacted to African American sexual network conditions as well as what effect messages about these conditions will have on the population. Further, the research seeks to develop communication materials that address partner concurrency using established communication theory and concepts.

## CHAPTER 3: METHODS

This study employed a two-phase study design to investigate factors influencing and develop communication and research materials addressing partner concurrency acceptance among African American women between the ages of 18 and 24. The Institutional Review Board (IRB) of the University of Georgia approved the study procedures for this research. The approved consent forms for Phases I and II are located in Appendix B.

### **Approach**

The first phase of this research was qualitative and informed the second phase, which involved message and scale development and message pilot testing. Because this research was carried out in two phases and used two different methodological approaches, it is important to explicate which methods were used to address each research question (see Figure 4). However, because Black feminist epistemology requires an ethic of accountability, and recognizes even research questions and methods are guided by lived experiences, it is essential to take accountability for knowledge claims by, first, recognizing subjectivities.

### ***Researcher Subjectivities Statement***

Researchers approach projects carrying with them certain positionalities and experiences that may affect their interpretations and, thus, their relationship to the research. These experiences are derived from previous experiences – personal or otherwise – and result in researcher subjectivities that should be explicitly expressed, situating the researcher in the research. The following subjectivities statement (written in first person) explains how my cultural, professional, and personal experiences situate me in relation to my research.

My interest in relationships between African American men and women began as a child and was fostered by the split of my parents. With this experience, I became intrigued by what made relationships “work” or otherwise. I lived with my mother after the divorce and watched and carefully considered her experience dating African American men. I also observed how vastly different my father’s dating experience was from my mother’s – how much more choice he had. At a very early age I became interested in the power imbalance between African American men and women.

This intrigue was furthered when I began my higher education at Spelman College, a historically black women’s college where feminist theory and women’s empowerment are ingrained into each student’s educational experience over her four years of matriculation. This was the first setting in which I realized the strong, independent values which are so often (even if sometimes stereotypically) associated with African American women are not always utilized in our relationships with men. Contrarily, many of us lack the independence, assertiveness, and efficacy in our sexual relationships that we possess and use in other parts of our lives, leading us to sometimes make risky sexual decisions or to accept risky sexual partners.

Finally, while getting my PhD I had my first experience of learning my committed relationship was not as committed as I believed it to be. As I navigated my first break-up due to an unfaithful partner I was surprised by how many of the (African American) women in my life encouraged me to remain with my partner, how many suggested his infidelity was natural or bound to happen, and how many warned that I’d encounter the same outcome with any other partner. This experience furthered my intrigue with African American relationship dynamics, and women’s acceptance of partner concurrency became an obsession.

With that being said, careful consideration was given to the details of the interview guide and my interactions in the qualitative interviews to ensure my personal experiences did not lead

participants. I approached this research with interest in the experiences of the young women in the sample, regardless of whether or not those experiences were different from my own.

The questions guiding this research were approached using the following strategy:

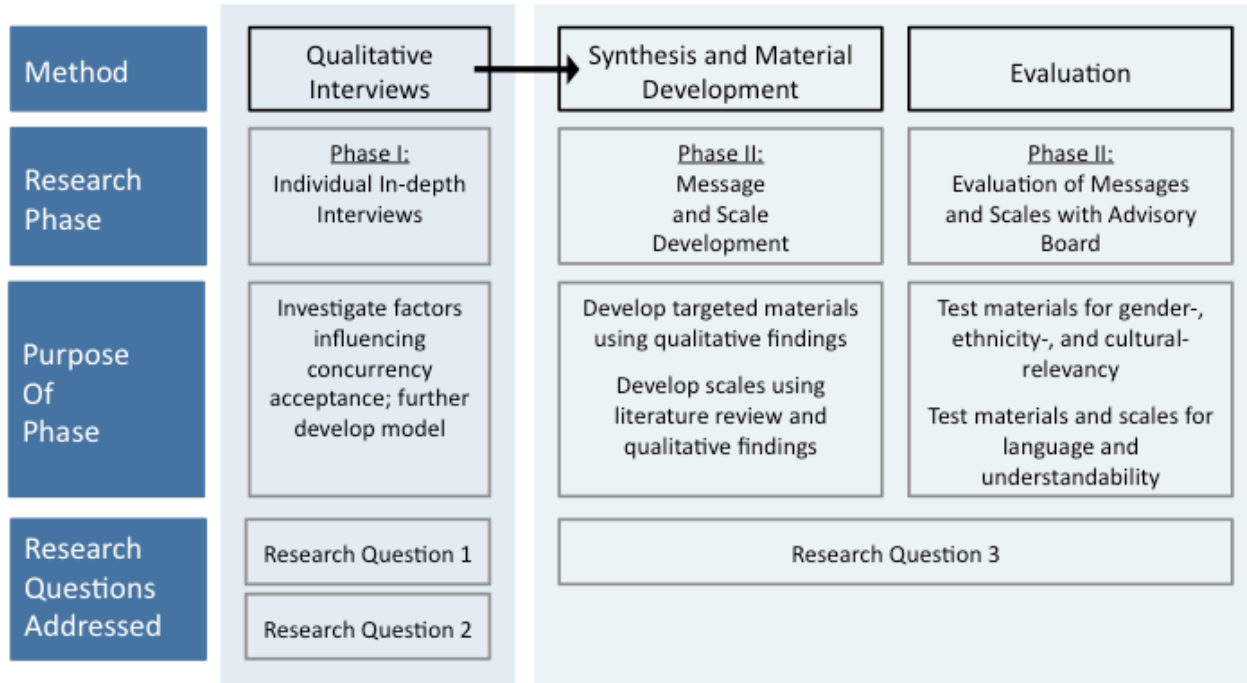


Figure 4. Research strategy overview

### Phase I: Qualitative Approach

The primary objective for the first, qualitative, phase was to explore the perspective of young adult African American women in sexual relationships. Generally, the purpose of the research was to describe the lived experiences of African American women in sexual relationships. Specifically, the research explored how these women make meaning in sexual partnerships in which they think or know their male sexual partner has engaged in concurrency. Phase I design involved qualitative interviews exploring women’s experiences in partner concurrent relationships. Data from the interviews informed the modification of the proposed Concurrency Acceptance Model and the development of messages and assessment measures.

### ***Participants and Recruitment***

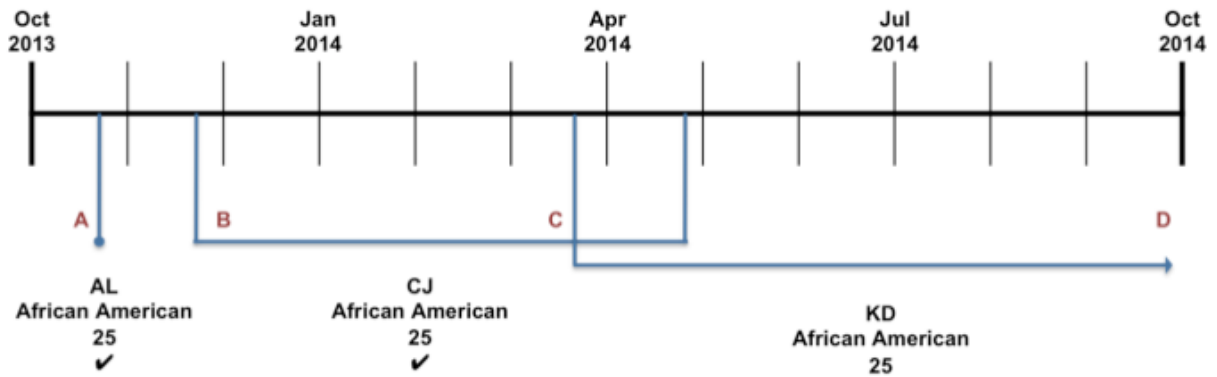
Phase I of this research began with recruitment. Because Patricia Hill Collins (2009) calls for the inclusion of African American women in all Black feminist work – and also because the research sought to address a disparity among young adult African American women – this research included African American women between the ages of 18 and 24 who had sexual intercourse with a male partner in the previous 3 months. Women participating in Phase I of the research also must have had a partner within the past 12 months who had or was suspected of having another or other sexual partners. Indeed, Black feminist thought epistemology suggests “African American women, as a group, experience a different world than those who are not Black and female” (Hill Collins, 1989, p. 747). However, according to Hill Collins, while African American women do share a common standpoint, Black feminist thought epistemology does not assume that all African American women share it uniformly, or that there is not a rich diversity that exists among African American women and their experiences (Hill Collins, 1989). Thus, in order to capture this diversity, the inclusion criteria were kept as inclusive as possible, including young African American women of all educational, social, and economic backgrounds.

Community-based recruitment methods were used to recruit women from community sites and events in Atlanta. Recruitment sites and events included: an outdoor shopping mall, public transit stations, an outdoor music festival, a predominantly white university’s campus, and a historically black college’s homecoming tailgate.

### ***Data Collection and Management***

Because this research was informed by Black feminist epistemology, which requires the use of dialogue in assessing knowledge claims, data was generated using qualitative interviews. This data was collected using one-on-one, face-to-face semi-structured interviews. Interviews consisted of both an interview guide (see Appendix C) and the construction of a relationship timeline to help guide both the participant and the interviewer during the interview (see Figure 5). Each interview began with a series of

questions about the woman’s preferences and relationship ideals before easing into her personal sexual experiences. Before talking about her experiences each woman was asked to complete a pre-labeled timeline of her sexual partners over the past year. At completion, the timeline included for each relationship: date of first and last sexual encounter; initials, race, and age of partner; and a check for those partners who the participant knew or suspected had another sexual partner at the time of the relationship.



**Figure 5.** Sample interview timeline. A: a single sexual encounter; B: a sexual relationship contained in time, not ongoing; C: a point where two sexual relationships intersect, individual concurrency; D: an ongoing sexual relationship that has not ended.

Interviews took place at quiet and private community locations and were recorded using two handheld recorders and transcribed after the completion of each interview (except in one case where two women were interviewed on the same day due to rescheduling). The researcher’s role in the research was to carry out all data collection and analysis. By collecting and analyzing the data, the researcher maintained a close relationship with the data and was able to capture as much of the experience and as many of the nuances of the interviews as possible. By doing so, the researcher also retained accountability for any interpretations made about the research, which is especially important with such a sensitive topic. Interpretation and representation of participants’ words are salient ethical concerns for feminist researchers. Working with African American women, it is especially important, as women and African Americans are oppressed groups whose knowledge has been historically subjugated and who have troublesome histories with the field of research as a whole. Hill Collins’ (2009) answer for

this is her 'ethic of accountability,' with which the researcher recognizes that her own lived experiences and subjectivities inform her beliefs about the knowledge she is assessing.

In order to fulfill Hill Collins' demand for an "ethics of caring," interviews were also conducted with expressiveness, emotions, and empathy (Hill Collins, 2009). The researcher began interviews by informing each woman that she was free to ask any questions she would like, even if she felt they might be inappropriate. The uniqueness and expressiveness of each participant was considered by allowing each participant's narrative to take its own direction. Additionally, throughout each interview the researcher attempted to answer any questions participants had regarding sex, safer sex, healthy relationships, cultural norms, or HIV and STIs. Each woman was assured that she could stop the interview or change the topic at any time. However, in the interest of valuing emotion rather than separating it from human experience, the research adopted deMarrais and Tisdale's (2002) perspective on inquiring into difficult emotions, which also fulfilled Hill Collins' call for emotion in research. While interviewing, the researcher was careful about immediately dismissing topics that caused difficult emotions to come forth. When a participant became overwhelmed or emotional, the research protocol called for three-pronged approach from the researcher: (1) the woman would be given a moment to collect herself enough to be able to continue the interview; (2) if the woman was still upset, the researcher revisited a previously discussed topic that was not as emotional for the participant; (3) if neither approach was successful, the researcher asked the participant if she would prefer to stop the interview. However, no participants became upset to the point of wanting to stop the interview.

All interviews were ended on a positive note, keeping in mind the heavy nature of the interview topic. The last question set emphasized African American women as a whole, rather than the participants' personal experiences. This allowed participants to "ease out" of the interview and possibly reflect on how their experiences align or diverged from their peers. Many participants left the interview in high spirits, expressing their gratitude that they were able to talk about their experiences. At the end of each interview participants were offered the researcher's contact information. Participants were advised that a one-page handout summarizing the findings written in clear, non-scientific language would be sent upon request. Although none of the participants requested a results summary, these measures along with the researcher's subjectivities statement fulfilled Hill Collins's call for an "ethic of accountability" (Hill Collins, 2009).

### ***Data Analysis***

This research was analyzed using narrative analysis with the goal of highlighting "patterned relationships in the flow of events and experience" within participants' "multivoiced selves" (Wertz et al., 2011, p. 227). Wertz et al. (2011) describes the process of narrative analysis as being reflective of putting together a puzzle with too many pieces. The researcher must first find all the pieces (make the invisible apparent), then decide what belongs (identify what is significant or insignificant), and finally must put it together (link facets of experience) (Wertz et al., 2011). While doing so, the researcher should closely consider the voices within each narrative, specifically paying attention to how these voices are layered (positionalities), how the voices interact, and the "continuities, ambiguities, and disjunctions expressed" (Wertz et al., 2011, p. 227).

Narrative analysis is two-dimensional (Wertz et al., 2011). The first axis of analysis is that of approach; analysis can be undertaken using either holistic or categorical approaches. With holistic approaches, the research considers the narrative of a life story as a whole, and compares sections of the text to other segments from within the same text (Wertz et al., 2011). Using this approach, looking at

“the whole” adds meaning to “the segment”, while piecing together “the segments” creates a whole (Polkinghorne, 1988). In other words: the life story adds meaning to each individual experience, while those experiences also add meaning to the life story. On the other hand, with categorical narrative analysis, sections or words from one text are extracted and compared to relevant sections from another (Wertz et al., 2011). This method could result in a “shared” narrative of a group of people. The second axis of analysis is that of content, or *what* is being told, versus form, or *how* a narrative is being told (Wertz et al., 2011). Whichever approach is adopted, however, the goal of a narrative researcher should be to “read texts for personal, social, and historical conditions that mediate the story. Analysis is aimed at discovering both the themes that unify the story and the disparate voices that carry, comment on, and disrupt the main themes” (Wertz et al., 2011, p. 226). With respect to this research, the personal, social, and historical conditions are those related to each African American woman’s sexual relationships.

**Narrative analysis and Black Feminist Thought epistemology.** Black Feminist Thought epistemology places emphasis on African American women’s voices and meaning from lived experiences. Likewise, narrative analysis places emphasis on the construction of meaning from lived experiences and the telling of those lived experiences in storied – or narrative – form (Polkinghorne, 1988). According to Polkinghorne (1988), “experience is meaningful and human behavior is generated from and informed by this meaningfulness” (p. 1). Likewise, Josselson (2011) wrote, “The stories that people tell about their lives represent their meaning making; how they connect and integrate the chaos of internal and momentary experience and how they select what to tell and how they link bits of their experience are all aspects of how they structure the flow of experience and understand their lives” (p. 224). Narrative research forgoes the existence of a single, historical truth and instead focuses on individuals’ understanding and organization of and construction of meaning from events (Wertz et al., 2011). While Black feminist thought epistemology assumes the impact of a single shared history on the

lived experiences of African American women, Hill Collins (2009) specifically rejects the claims that each African American woman has had the same experiences as the next, nor that each agrees on the significance of these varying experiences. Thus, the goals of narrative analysis align perfectly with the assumptions of Black feminist thought epistemology.

Narrative analysis can be carried out in a number of ways with a few caveats: (1) narratives are told and to be understood and interpreted contextually, and (2) consideration should be given to the “intended audience and the motives the narrator may have had for constructing the narrative in a particular way” (Wertz et al., 2011, p. 225). Additionally, narratives should be accepted as constructions of events rather than exact representations of what happened (Wertz et al., 2011). According to Polkinghorne “the realm of meaning is an integrated ensemble of connections among images and ideas that appear in various modes of presentation, such as perception, remembrance, and imaginations” and involves different levels of abstraction, awareness and control (Polkinghorne, 1988, p. 8). Also, special attention should be paid to the principles of reflexivity and the researcher’s standpoint when making observations and interpretations (Wertz et al., 2011). For this reason, researcher reflexivity is important as highlighted by Hill Collins’ (2009) ethic of accountability.

According to Josselson (2011), “narrative analysis is conducted within two hermeneutic conditions” (p. 226). The first is one in which meaning is restored to a text, and in the second, disguised meaning is decoded. The latter of these approaches reflects the goals of Black feminist research, as the researcher’s goal is to decode and account the “everyday, taken-for-granted” knowledge of the participant (Hill Collins, 2009). Likewise, in hermeneutic tradition, narrative analysis requires zooming in and out on the whole narrative and the parts that make it in order to better understand both the whole and the parts (Wertz et al., 2011). Again, this aligns with Black feminist thought which privileges the individual’s lived experiences with the goal of better understanding the lived experiences of all Black women (Hill Collins, 2009). Finally, in narrative analysis, the narrator construes herself as always in

relationship to another, whether another person, another part of self, or culture/society (Wertz et al., 2011). According to Black feminist thought, these others include an oppressive society and intersecting identities of sex, race, and class (Hill Collins, 2009). In fact, the latter of these others – intersecting identities – is an example of another assumption of narrative analysis. That is, no individual is “fixed in any representation of his or her own words and cannot claim any finality as to what a story means, since any story has potential for revision in future stories” (Wertz et al., 2011, p. 227). A Black feminist would take the standpoint that not only is there potential for future revisions, but with intersecting identities it is also likely that one event might be experienced and told in one way, at one point, with one identity (e.g. Black), but experienced and told, in another way and with another identity (e.g. woman) at a later point (Hill Collins, 1989). This research, specifically, will take into account the intersecting oppressions and intersecting identities of black women by addressing the question of how these oppressions influence young African American women’s understanding of relationships and how these identities manifest in relationships (see research question 1.5).

**Narrative analysis method.** While this section has outlined explicit assumptions of and guides to conducting narrative research – or narrative *methodology* – there is no rigid set of *methods* specified for doing narrative analysis. However, this research adopted and adapted Josselson’s (2011) process, which follows:

1. Engage in a comprehensive reading of the narrative to understand its structure and theme(s);
2. Return to each part to identify its deeper meaning, and contribute/apply that meaning to the whole (zooming in and out);
3. Engage in multiple readings to identify (a) the different identities and (b) how these identities are in interaction/dialogue with each other;
4. Code, considering all interpretations using the theory of gender and power;

5. Repeat process with next narrative, after, returning to the previously analyzed narratives to reconsider interpretations, identifying deeper meaning as relating to the whole group of narratives (zooming in and out);
6. Continue these readings until patterned themes are developed into a coherent unity.

This method aligns with Polkinghorne's (1995) "analysis of narrative" method, which involves deconstructing a narrative into thematic elements using a paradigmatic approach – except in this research, themes were interpreted using a theoretical approach using Theory of Gender and Power. This research employed a systematic procedure for coding data. Using the Theory of Gender and Power as a guide, thematic elements surrounding partner concurrency were identified within stories. These elements were coded and categorized using ATLAS.ti (a qualitative data manager) until they could be nested in a larger framework of themes. Each interview transcript served as both a "part" and a "whole." Most interviews were analyzed after its transcription and before the next interview was conducted in order to interpret themes from the data before moving forward with the research. At that time the interview transcript served as a whole made up of its own parts. However, with the completion of each interview, the previous interviews were included in analysis, "zooming in" on each interview as a part of the whole, and "zooming out" to treat the collection of interviews as the whole.

## **Phase II: Scale and Material Development**

### ***Scale Development***

Though there is evidence that individual and partner concurrency increase STD and HIV risk among African American women, there is limited research on African American women's knowledge about and attitudes toward these risky partnerships. There are also limited scales available to measure said knowledge and attitudes. One of the goals of this research was to develop measures related to concurrency and partner concurrency that can be used for quantitative research. Two scales were developed as part of this research. A knowledge scale was developed from the literature review and

based on apparent gaps in knowledge among the participants related to concurrency. Also, an attitude scale was developed based on attitudes among the women that were related to partner concurrency acceptance. These scales are discussed in detail later.

### ***Material Development***

Materials created for this research were developed to incorporate narrative messages, as well as threat and efficacy messages and behavioral recommendations.

**Narrative messages.** After all interviews were completed and analyzed, three narrative messages were created from the qualitative findings using Polkinghorne's "narrative analysis" techniques (versus analysis of narrative). Using this technique, themes interpreted from the data were restructured into stories (narrative messages) keeping the following elements in mind: the cultural context of the story; the "embodied nature of the protagonist;" the importance of significant others in influencing the protagonist's role; the interaction between the unique protagonist and the setting; the previous experiences of the characters; the importance of temporality, sequence, and distinction/uniqueness; and understandable and meaningful expression of the research and data (Polkinghorne, 1995, pp. 15-18). Each material was developed to include a different narrative message, but included identical threat and efficacy messages and behavioral recommendations.

**Extended Parallel Process Model messages.** The material development process included the development of messages that conveyed EPPM constructs. The materials for this research were developed to include messages that communicate threat posed to women by sexual network characteristics and efficacy to avoid said threat. Threat messages were developed that were related to the likelihood that having a partner who engages in concurrency will result in HIV or STI acquisition, and the severity of that outcome. Susceptibility message components were developed to address: STI risk among African American women as compared to women in other ethnic/racial groups; an explanation of the African American sex ratio imbalance; and a comparison of rates of concurrency among African

American men as opposed to men in other ethnic/racial groups. Because many women do not experience symptoms of STIs, vivid language describing the outcome (getting an STI) was not included in the materials during development. Instead, the materials address severity by describing the long-term effects of not getting an STI diagnosed and treated.

At the onset of this research, the materials were to include a sole recommendation for women to communicate with their partners about partner concurrency and avoiding STIs. However, based on the qualitative findings, it was apparent that other recommendations should also be included in this research. Thus, materials were developed to include recommendations to: communicate with partners about concurrency, use condoms, and get tested for STIs. The decision to include additional behavioral recommendations is discussed further in the study findings.

Efficacy messages were developed for this research that were related to African American women's ability to communicate with partners, use condoms, and get tested for STIs, and the effectiveness of those behaviors to prevent STIs (or in the case of testing, to prevent the long-term consequences associated with having an undiagnosed STI). At the onset of the research, it seemed necessary that these messages equally address self- and response efficacy. However, the final messages disproportionately emphasize response efficacy. This decision is discussed in detail the findings.

**CDC Clear Communication Index.** Once developed, messages were evaluated using the Centers for Disease Control and Prevention (CDC) Clear Communication Index (Index) (CDC, 2014a). The Index is a research-based tool used to evaluate public communication products, such as public health messages and materials (CDC, 2014a). The Index can be used for materials in all formats and for all distribution channels, and can be used in a number of ways, including: (1) to inform the design and development of a new messages and materials; (2) to assess the clarity of messages and materials before they are released to the public; (3) to foster discussion and collaboration as writers and reviewers work to attain scientific accuracy and clarity of content; a (4) to quickly assess the clarity and ease of use of existing

messages and materials. For this research the Index was used in the developmental process as well as to ensure that messages retained clarity after they were tested with the advisory board.

The Clear Communication Index assesses messages with 20 items that utilize plain language techniques described in the Federal Plain Language Guidelines (PLAIN, 2011). Each item is scored with either a 1 or a 0, with the final score converted using a 100-point scale. A score of 90 or higher is considered “passing.” However, communication experts evaluate whether lower scores are acceptable on a case-by-case basis. The 20-item tool evaluates materials in the following 7 areas (CDC, 2014a):

**Main message and call to action.** The material should contain one key message that the audience should remember. This is called the main message statement and can be two to three sentences long. The material should also contain one visual that supports this statement. The main message statement should be located on the front and at the top of the material, and should be emphasized with visual cues, such as bolding, color, and differentiated font size.

The material should also include a call to action for the audience. This is a directive of what the audience is supposed to do with the information gleaned from the material. Calls to action can include (but are not limited to) behavioral recommendations and prompts for the audience to seek additional information.

**Language.** The main message statement and call to action should use conversational language – namely, active voice. Further, the material should always use words the audience uses. If an unfamiliar word, like concurrency, must be used, then it should be explained in the same or next sentence. However, when possible the material should always use plain language and everyday language that is common among the audience. The Index guide also warns users about using slang or colloquialisms. Pilot testing is important to avoid using language that is offensive or inappropriate for the audience

**Information design.** Information in the material should be organized so that it is easy for participants to recognize what is important, and so that information is easily accessible: the most

important information should be summarized in the first paragraph or section, the material should be organized into chunks with headings, and bulleted lists should be used to break up text.

***State of the science.*** The material should acknowledge any uncertainty that experts have about the topic. This can include uncertainty about data, findings, recommendations, guidance, and action steps related to the topic.

***Behavioral recommendations.*** According to the Index, messages promoting health or safety should focus on behaviors, rather than medical facts or statistics. When recommending behaviors, materials should explain why said behaviors are important and what the consequences are of performing or not performing those behaviors. The material should also provide details about how to perform the behavior.

***Numbers.*** Numbers should only be used when necessary. If numbers are used in a material then they should be presented in ways that are familiar to the audience. The material should not use decimals; percentages; fractions; or very large or very small numbers. The audience should not have to perform any calculations, and if numbers are used, the material should present them in context and explain their relation to the main message.

***Risk.*** The material should explain the nature of the risk related to both the topic and the behavioral recommendation. If numbers are used to explain probability of risk, then they should be accompanied by visuals, such as infographics, that demonstrate the probability.

#### ***Advisory Board: Material Pilot Testing***

An advisory board comprising participants and other African American women who met the study's age requirements provided feedback on the messages. After all interviews were completed, women who participated in the interviews were invited to be on the advisory board. Previous participants were recruited until at least ten women agreed to come to the advisory board with a friend. (Women were over sampled to account for attrition.) Including women who participated in the

interviews as well as those who had not allowed better validation of the messages and scales. Those who agreed to participate met in a group setting and were provided food and compensated with a \$25 gift card for their participation. Participants in the advisory board group were given a worksheet including messages about partner concurrency. The women were asked to take a moment to read each of the messages and instructed to answer individually in written form for each message the effectiveness questions in Table 1 (e.g. Does this fact sheet make you feel having a partner who is sleeping with other women might cause you to get an STD? Why or why not?). After all of the women had time to process and record their responses, each was asked to partner with another woman and engage in a discussion about their answers to the questions related to: cultural relevancy (e.g. What do you think this fact sheet is saying?); message strengths (e.g. What are some good qualities of this message?); and opportunities for improvement (e.g. What are some bad qualities of this message?). Questions related to message effectiveness were not answered with partners or in the group discussion as they might elicit responses related to personal experiences. Each dyad was given another copy of the worksheet and instructed to answer the questions again after their discussion. Finally, once all dyads had the opportunity to complete the second worksheet, everyone came together to have a group discussion about each message (moderated by the researcher). The advisory board materials can be found in Appendix D.

ADVISORY BOARD GUIDE	
<b>Message Effectiveness</b>	<p><u>Threat Question</u></p> <ul style="list-style-type: none"> <li>• Does this fact sheet make you feel having a partner who is sleeping with other women might cause you to get an STD? Why or why not?</li> <li>• Does this fact sheet make you feel getting an STD would be serious? Why or why not?</li> </ul> <p><u>Efficacy Questions</u></p> <ul style="list-style-type: none"> <li>• Does this fact sheet make you feel a woman can decrease her chance of getting an STD or STD related sickness by: <ul style="list-style-type: none"> <li>• Talking to her partner about if he is having sex with other women?</li> <li>• Using a condom with her partner who is having sex with other women?</li> <li>• Getting tested for STDs?</li> </ul> </li> <li>• Does this fact sheet make <i>you</i> feel <i>you</i> can: <ul style="list-style-type: none"> <li>• Talk to your partner about if he is having sex with other women? Why or why not?</li> <li>• Use a condom when you believe your partner is having sex with other women? Why or why not?</li> <li>• Get tested for STDs? Why or why not?</li> </ul> </li> </ul>
<b>Cultural Relevance and Competency</b>	<p>What do you think this fact sheet is saying?</p> <p>What do you “take away” from this fact sheet?</p> <p>How do you respond to this fact sheet? How might your peers respond?</p> <p>What words or concepts don’t you understand?</p> <p>How do you think your peers could misunderstand this message?</p> <p>Is the picture relevant? Does it fit with the overall fact sheet?</p> <p>Of the three fact sheets, which color scheme is the best?</p>
<b>Strengths</b>	<p>What are some good qualities of this message?</p> <p>What is the biggest strength of this message?</p>
<b>Opportunities for Improvement</b>	<p>What are some bad qualities of this message?</p> <p>What is the biggest weakness of this message?</p> <p>What should be changed to improve this message?</p>

**Table 1.** Advisory board guide

Using this method to collect data about the messages allowed for multiple perspectives and multiple responses to each message. Women who might have normally been hesitant to respond in front of a group about the messages had the opportunity to work individually and then to work closely with one other person. Similarly, women who might have trouble developing responses to the message alone had the opportunity to work closely with a partner and then collaboratively with the group. Overall, the advisory board contributed to the development of messages that are ethnically-, culturally-, and gender-specific. Additionally, by creating a space or women to interact in this process I was able to use dialogue to assess knowledge claims, and by doing so in a connected procedure (rather than in

separation) I was able to validate the knowledge generated by the interviews. Feedback from the participants was collected and considered in the final stage of development of the messages.

## CHAPTER 4: FINDINGS

### Phase I: Qualitative Findings

In all, 67 women were recruited for Phase I, 15 women were eligible, and 11 women were interviewed. While the interview guide was created to elicit interviews lasting from 60 to 90 minutes, the actual range of interviews was from 46 to 129 minutes. Participants talked at length about their sexual relationships. However, embedded in participants' dialogues were attitudes and behaviors related to concurrency, concurrency acceptance, partner sexual communication, and condom use. Participants also dissected and explicated the dynamics of their relationships related to their expectations and their boundaries, and shared ideas about the influence certain social conditions and norms had on these relationships. In the following sections, segments of participant's narratives are used to support themes that were interpreted from these narratives. These themes are presented with the research questions (RQs) they address. Identifying information (i.e. of participants' partners, schools, etc) has been removed and replaced with descriptive text to protect the participants and dissociate their affiliation with any organizations or institutions.

#### ***Relationship Dynamics (RQ 1.1)***

Young African American women engage in various types of sexual relationships. While some may be serious, many are casual, occur in flux, and do not have clearly defined boundaries or mutually established expectations. It is vital to understand the nature of these relationships before proposing conclusions about why women accept concurrency from their partners. This research explored how relationship dynamics affects partner concurrency acceptance.

**Theme 1: Women juggled three aspects of sexual relationships – titles, expectations, and boundaries.**

Women assigned a broad range of titles to their partners and partnerships, including (but not limited to) “talking,” “fuck buddies,” “friends with benefits,” “friends,” “boo,” and “boyfriend.” (See Appendix A for lexicon defining these and other terms.) Within these partnerships, women had expectations (regarding relationship qualities such as communication, shared time, and future plans) and boundaries (regarding partners’ actions or what they would tolerate from their partner). These titles were commonly used among the participants, and were usually defined the same way in terms of expectations or boundaries.

The term “talking” was used broadly and to describe any relationship that was not defined as “boyfriend-girlfriend.” Other titles were used to define a range of relationship types that fell into identifiable subcategories of “talking”. Michelle described a “boo” in the following way:

He’s the closest thing to like... He’s probably the one I talk to the most. I see him... we sleep together without having sex a lot. So that’s my boo thang. I... he’s like number one actually. I just don’t want like ... we talk every day. I don’t want to be the second to third girl he goes out with. I want everything. I want my own special treatment. (Michelle)

Michelle used expectations of communicating every day and being prioritized or treated special to define her relationship. However, for Michelle, while there was an expectation of spending time together outside of having sex with a “boo,” there wasn’t necessarily an expectation of a future together. She continued:

It’s just fun right now. Like I ... I want it to be like a friendship and then he’s talking about investing into a business venture. Like, business partners slash ... I mean, I’m attracted to him but he knows we can’t get married. I can’t bring him around my mom. He’s old. 38. Damn near about to be 39. He has a nine-year-old daughter. What if I meet her? Look how young I look. That’s not gonna happen. I know my dad! And that’s not gonna happen. So I... he kinda knows we’re not gonna go anywhere. Unless we madly fall in love then we’ll make it work, but I don’t see that happening. (Michelle)

Michelle also distinguished “boo” from being a “fuck buddy” by her expectation of the amount of time spent together outside of having sex.

And I feel like either you’re a fuck buddy or ya’ll actually can ... like ... I can call him on my period and we can still kick it. (Michelle)

Likewise, Kelly also used expectations of spending time together to define her relationship. She knew her relationship transitioned from “boo” to “just sex” when she no longer spent time with her partner, and she adjusted to that change.

I caught feelings and then he didn't want what I wanted. At first, I was hurt. But then, I'm not even going to lie. I retaliated. And I stopped talking to him for about 3-4 weeks. And then he contacted me. He apologized, took me out, wined and dined me, treated me how I really wanted to be treated. So school's out. We chilled. School got back in, barely see each other again, only sex. Only when sex is needed. No time. I've gotten past it. For some reason, I've got to the mindset where I can't have it, then I don't want it no more. So I don't want it no more. I just want the sex. (Kelly)

Tiffany defined her relationship with her “sexual acquaintance” (who she later described as a “fuck buddy” after asking if she could speak freely) differently, in terms of both expectations and boundaries. She defined this partnership not only in terms of whether they spent time together, but also based on expectations regarding their interpersonal communication and boundaries regarding having other partners.

Well we weren't friends really so I can't say friends with benefits. We weren't! (Laughs) like I don't know. I thought we were gonna get to know each other? I thought that, yeah, we were gonna become friends, hopefully. But, no guess I was dream- ... mm. That one left. Yeah, no. But, um, sexual acquaintances? (Laughs) um we'd say hi to each other (laughs) when we saw each other. Not really have an in-depth conversation. Um, have sex. Have other partners. Always use condoms. (Tiffany)

Tiffany's struggled to give her relationship a title, which was common among the women when describing casual relationships. Many of the women first described their casual relationships as “nothing,” and then used ambiguous terms like “talking.” Tiffany went on to describe a time when she asked her partner about their title and whether he was having sex with anyone else.

I think I may have asked him like, “So, you talk to other girls or anything like that?” Okay yes, I asked him, “Do you talk to other girls?” And he said no I'm the only girl he's talking to, and he's basically not interested in having a whole bunch of sexual partners he just wanted that one person to have sex with, that I guess doesn't go any farther. It's just, you know, fuck buddies. He was really calm. He actually ... we were laying down when I asked him, and he sat up and was kinda like ‘oh okay time for this conversation.’ Yeah, like lets have this talk. But yeah he sat up and was really calm and he kind of was like, if you're fine with it I'm fine with it, but if you're not okay, we don't have to continue this. (Tiffany)

Kelly's partner told her he didn't want what she wanted and stopped spending time with her unless sex was involved. Tiffany's partner told her he was only having sex with her but was not interested in a relationship and that if she was not happy with, then that they could stop seeing each other. These two relationships provide examples of how male partners established the course of relationships. Men had the dyadic power to set the boundaries and expectations in a relationship, and decide if and when a relationship would develop into something serious. When the woman was not happy then she was faced with either accepting his terms or trying to find another partner. While Kelly accepted her partners' terms, Tiffany chose to find another partner, which she later explained as being the easier choice because she had already found someone else. (See Theme 5 for reasons women reject partners engaging in concurrency).

Like Tiffany, Yonce used expectations of interpersonal communication and boundaries around other sexual partners to define her relationship. Regarding her relationship with a man whom she later learned had a live-in girlfriend, she said:

Mm... I guess we were friends. Because we know each other. And we could talk to each other, but friends with benefits of course. And ... I guess umm ... I mean, I still expect him to be only having sex with me, but even if that's not the case, I don't expect him to have a girlfriend. (Yonce)

For Yonce, in a "friends with benefits" relationship, monogamy was ideal but it was acceptable for her partner to have sex with another woman. Her boundary was that he could not be in an actual defined relationship (boyfriend-girlfriend). Riley, on the other hand, did not idealize monogamy with her casual partners. Instead, she expected her partner to have other partners if they were not in a defined relationship, since they were both single.

Yeah, I was perfectly fine with that because I knew, like, some people ... I don't know ... I'm different. I just have a different perspective on life. Some people feel like if they talking to someone or being intimate with someone and they not together they still have a right to be mad. I don't feel like that because I feel like we have not defined that we are in a relationship. So I feel like you single and I'm single then you going to do single stuff and I'm going to do single stuff. Even though, my way of doing single stuff is

I'm probably not going to talk to everybody, and even if I do talk to somebody I'm not going to have sexual relations with that person. (Riley)

This is an example of how some women did not place boundaries on their relationships. Some acknowledged their partner was free to do what he wanted but still placed boundaries on what they, themselves, were free to do. Riley talked more about how she conducted herself as a girlfriend in her partnership despite not having a title.

Right now, I mean, it would be like friends with benefits. But, I don't know. I really do believe that – I talk to my friends about it all the time – I be treating myself like a girlfriend. Like I treat myself like a girlfriend. If I'm dealing with you I probably won't talk to anyone else. I'd say "I talk to someone already, it's okay." So yeah, friends with benefits, it's a "situationship" ... And that's really what it is because it's like ... you catch feelings you have feelings for each other you have sex with each other and you do all this stuff and treat yourself like you are a girlfriend but you already know nobody said y'all boyfriend and girlfriend. So you in a situation, you not in a relationship. (Riley)

When asked, Riley explained the term "situationship" has origins in a rap song. The opening lyric is "We all have situationships: good sex, bad relationships." Later, the artist raps, "Titles ain't shit, if the story don't match it. Now you got a itch lookin' for a way to scratch it. Flirting online hopin' shorty don't catch it." In other words, titles are irrelevant if both parties aren't honoring them, and if this is the case, the individuals in the relationship eventually seek additional partners. Indeed, a "situationship" was understood to be a negative title among the participants. Riley acknowledged she did not benefit from her "situationship" aside from having a sexual partner.

I don't know what benefits I've gotten out of that because I don't be feelin' like I be benefiting at all. That's why I don't understand why I do this. I be sitting there like what are we doing? Like I be in my room talking to myself like what do you get out of this. Because I feel like if anything, THEY get a benefit. Um ... I mean I have a strong sexuality so maybe I *do* kinda get benefits out of them. But I feel like, I am a real loyal person and my loyalty is there and I feel like if I'm g-in with you I'm g-in with you. I'm not g-in with nobody else. And I feel like they may feel like, "Oh I got somebody who *just* with me," in that sense. But they not giving me the same respect and same manners. (Riley)

Similarly, April was distraught when her friend brought to her attention the fact that her partnership had become a "situationship."

We were in a situationship. Like, it was a messy situation, I remember telling my girlfriend. She's like, "I would have never seen you in a situationship." I just started crying and I was like, "Me neither! I have standards and values. I can't believe this is happening." (April)

'Standards and values' were viewed as being morally contrary to acceptance of a "fuck buddy" or "friend with benefits" relationship. Women described feeling emotionally unfulfilled by these relationships, despite being physically satisfied. There was one non-exclusive relationship type, however, that women were fulfilled by. "Friends" (not to be confused with "friends with benefits") was a relationship type described by women as being fulfilling, though still not exclusive. Luna Belle described how her relationship progressed very slowly from friends to close friends before she and her partner became sexual partners. And while the progression stopped there, she was content with the lack of jealousy and friction between herself and her partner.

Okay, well I met him my freshman year at Clark. We'd been cool for a year and then sophomore year we got really close. Junior year we got even closer just on a friend level. Him and I always had like a boyfriend, girlfriend type of thing. Separately. Like one person each. And then I broke up with mine. He was cheating. And then he found his girlfriend cheated. And I had just gotten over that emotional process and so I was helping him and then he started to pledge (laughs). And so I was just, like, there for him through all these like emotional points of his life, and then like vice versa. I've been going through some things with like friends and finances etc, etc. And he's been there for me. And then we just started having sex. Now I think we're in the motions? Yeah. He's clearly having sex with other people because he's a (*name of fraternity*). But, like we're really good friends, and I'm like it's fine. We're using protection. So it's not that jealousy attached to it because I know where I stand with him and I know we're really good friends. And we're single so it's none of that confining... it's like if I need to get up at 5 in the morning and go do my homework it's not gonna be an argument. (LunaBelle)

Tony's relationship with her "friend" had many of the qualities traditional to a relationship. They spent leisure time together, had sexual relations, and had open and honest conversations – including conversations about the other women with whom he was having sex.

I've known him since I got to college. Umm we've just been friends. Honestly, we've just been friends. We smoke together and we just hang out. We just cool, we just hang out, smoke together, talk, text. We don't talk about nothing. Well we don't really text about nothing, but when we get together and really talk, we just chill, watch movies. We're just friends. Yeah, we're just friends. We're just friends but honestly, sex ... honestly, I'm just sexually attracted to him. I used to like him but then I was like (no) I just know who

you are now. Like, you're just my friend. So I know you're sorry, so I don't even like you. You're just ... I just think you're still attractive though. But I would never date you. He's my like ... he's ... I would never trust him. Because I know that you're a THOT [slang: that hoe over there]. But you're a THOT. You be telling me that you're a THOT, 'cause I'm your friend and like we just was talking the other day and I was like, "Bruh like we really are like best friends now." We just be hanging out so much. We chill, but you're just a homie. I know how you are with women, you've really shown me who you are so I don't even want to ... I would never deal with that. I mean... he's still my homie, though. That's what's so great about it, like you're still my friend. After sex we be in here dying laughing, crying, just hanging out. You're just my friend, but we've just got a sexual chemistry. And it works out and that's cool I'm not trying to be your wife ... nothing. Like, I like him to an extent, but I don't want to ever pursue you, date you, nothing. (Tony)

Another primary difference between "friends" and "friends with benefits" was the progression of the relationship. As illustrated by LunaBelle and Tony, women who developed friendships with their partners before they started having sex described their partners as "friends" versus "friends with benefits". Because each knew her partner well as a friend first, she knew his sexual history and dating habits, and came into the relationship with information that informed her expectations. While Riley and April were in "friends with benefits" relationships from which they wanted more, Luna Belle and Tony were content with their "friends" because they established their expectations to match what they already knew about their partners.

Although there were no apparent patterns regarding what moved a non-exclusive relationship into a mutually monogamous relationship, there were clear patterns of progression toward becoming either "friends" or "fuck buddies". Non-exclusive, untitled relationships progressed along two main paths, with different starting and ending points. In some situations, like LunaBelle and Tony's, partnerships progressed slowly, building platonic friendships before becoming sexual partners. These partnerships grew into "friendships." In others, women met their partners and developed relationship that more rapidly progressed from being "strangers" to being sexual partners. These partnerships usually grew into relationships defined as "just sex" or "fuck buddies." Tiffany explained how she met her partner at a social gathering, they hung out a few times, and then they began having sex.

Okay, we met at a party he got my number and we started texting from there. It really was ... I don't think it ever was going to grow into a relationship because of his intentions. He always texted me like "come over, come over" and I'm like "no, no, no" and then one day I was like "okay I'll go over" and we chilled, watched movies, and that was about it. I went back home that night. He didn't try any sexual advances or anything like that, which I think I found kind of attractive because you know you just expect a dude when you're at his room ... but he didn't try anything so I'm like "oh, okay!" (laughs). And so went over there again another night and there was some fondling going on, things like that. And didn't have sex yet that day either. And then it was the third day I actually went over that we actually had sex. And that relationship was mainly based around sex. Like I wanted to go farther but he didn't and I think it was because we had sex too fast. That was my mistake. (Tiffany)

Tiffany believed there were no chances of moving the relationship toward being exclusive because of the pace with which it progressed toward becoming sexual. While it is impossible to say whether or not her belief was true, her expectation that the relationship would never become exclusive might influence the boundaries she gave her partner. If she expected that the relationship would always be casual, then she might not ever demand monogamy from this partner.

Tiffany felt it was her fault that her partner didn't want her to be his girlfriend because she had sex with him too quickly. April echoed this sentiment and went further even, calling behavior such as having sex without developing a relationship "reckless."

We just started kissing and then one thing led to the next. I remember thinking, 'Is this happening?' Like, I laid there like, "Is this really ... am I really doing this?" I really didn't enjoy it because I was so in shock at myself because I don't sleep with people like that. That's like my girlfriend, she is reckless; I really take time to develop things. I was just like, he hasn't proven to me anything! And I've just given up the token and, like, he hasn't proven anything and I've just given him a 'walk past jail' card. I couldn't believe it. Then I just thought the chances of us together are very slim because I feel like, you know, you don't give someone everything, you know. (April)

Indeed, some relationships did take time to develop; some relationships moved very slowly from platonic friendships to sexual partners. Tony talked more about how her friendship became sexual and how her expectations were informed by their friendship.

But the thing about it ... he asked me ... I knew that he been wanted to have sex with me but he was still being cool and being my friend. But at this point, why even sugarcoat it? Like, I know you're about to come over here and we're about to have sex. I'm not about to tell you to ... we're not bout to cuddle, I'm not bout to tell you... and we ended up

hanging out afterwards but he already ... he asked me, "What's gotten into you?" Because, I prolonged it for so many years. He came in here like, "What's the difference today?" And I was like, "I'm just tired of you..." 'Cause he's like one of those guys that, like, every girl just thinks so highly of him. And I just think (no) you're just a little baby. You just like my regular friend. I don't think nothing of you 'cause you rap. I don't think nothing of you 'cause you can dress. I don't think nothing of you 'cause of your standing at school. I just think I know you as a person and these are just other things that are attached to you, but I just know you and I'm not interested. (Tony)

Tony knew her sexual partner for years and made the decision to act on their sexual chemistry by initiating a sexual relationship with him. At the point of initiation she was not interested in anything more from their relationship, and she did not develop any additional expectations after they started having sex. However, some women's expectations changed after they started having sex.

Umm, once we had sex, that's when I actually saw that I was attracted to him so I actually want something out of it. Whether I'm gonna get it, I don't know. That's why I don't have my hopes in but I'm trying to really talk to him, and just him. He's the one I like the most. Out of that whole list (points at chart), he's the one I like the most. (Michelle)

Because, I mean, at first we weren't going into a relationship, but we tried. But we realized it wouldn't work because he's in so many activities. He's always working, and me? I want my time. And he couldn't give me my time, and vice versa, I was always working, going to school, taking care of my son, so it was like, you know. Just keep it that way. End all confusion. So I won't be all extra emotional. But the day that we ended up having sex, I caught feelings. (Kelly)

Michelle and Kelly provided examples of how, even if women enter partnerships with the intentions of keeping the relationship casual, they sometimes develop expectations that are attached to the sex. LunaBelle explained how the length of time she and her partner were friends before they started having sex, not the sex itself, affected her expectations and boundaries within their relationship.

We got in an argument (laughs) because I was over there one day and I came into the room talking and he was on the phone and he told me to shush. And I was like, 'Oh, no. This is not happening. I am not a side chick. I've been there for you like your best friend.' So I left and then he called me, and called me, and called me, and was finally like "Are you gonna talk about this or what?" You know. And so yeah we're having that conversation today. You know it's just the fact that we've had history. It's not just as if I met him and a week later ... or even a month later we're having sex. Like we've been friends for 3 years. Like really good friends so it's like, "Okay. I'm gonna talk when I wanna talk." You know? (Luna Belle)

Overall, relationship title had a major influence on women's expectations and boundaries within a relationship. With respect to boundaries, women expressed feeling men could have another sexual partner when they were not in a defined relationship. Relationships given a title of "boyfriend-girlfriend" had very clear expectations and boundaries, and the only time sex with an outside partner fit within the boundaries of these types of relationships was in the context of a "threesome" in which both partners were involved.

My ideal relationship (pause) ... well I consider my last boyfriend, it was pretty ideal but we argued a lot but that's the kind of ... I'm a Leo, so that's what kind of keeps me going I don't want to be bored. So I had a lot of fun with him. We used to go to clubs together, and surprisingly we had lot of threesomes. No cheating. Even though it sounds like we're cheating because of threesomes. But I like girls too, so it was cool. But, like, he couldn't do it by himself type thing. No lying. Honesty is key. (Michelle)

In our relationship, I would not, of course want to date other people or see other people. But I'm actually open-minded to this, because I have a very open view on our sexuality. I don't mind bringing other people into our sexual experiences as long as we're both being open and honest about it. We're talking about how this is being done. We're deciding who this person is, and we know the boundaries within our relationship. I'd be open to like maybe trying something new and like maybe bringing in other people that I'm actually ... you know, I actually have an attraction for women, so you know, it's something that can be pleasurable to us both, you know. With the experience of doing something new and trying something, stepping outside our normal boundaries and limits. I feel like especially when I'm in a relationship when I can trust, those things are fun. Yeah, I would definitely have to be involved. It couldn't be anything secret, like I said. If at any point it's something deceitful, it violates that line, those boundaries, of our relationship. (Talor)

Even in "boyfriend-girlfriend" relationships, however, women identified boundaries. Both Michelle and Talor expressed a sexual attraction to women and found it pleasurable and acceptable to include other women in their sexual experiences. However, these women still demanded that they be present during the threesome and that their boyfriend be open and honest about the experience. One missed opportunity in this research was exploring how women protected themselves during these sexual experiences.

**Theme 1 summary.** While women used various titles to describe their relationships, expectations and boundaries associated with these titles were consistent and occurred along a

continuum. Overall, relationship types fell into three categories: (1) Casual, Sex Only, (2) Casual, with Expectations, and (3) Mutually Titled and Defined.

Relationships in the “Casual, Sex Only” category were given titles like “fuck buddy,” “just sex,” and sometimes “friends with benefits,” though the latter seemed to be slightly different than the two former. Relationships in this category were primarily based on sex, with very little time spent together outside of sexual experiences. Women sometimes entered these types of partnerships wanting more than just sex, but quickly realized the nature of the relationship and either adjusted their expectations or eventually ended the relationship. Women in these relationships had no expectations of monogamy and felt their partner was had no boundaries with regard to other women.

Relationships in the “Casual, with Expectations” category included those given titles of “friends,” “dating,” and “boo.” Although “talking” was used broadly, it was also used specifically to describe these relationships that were more than just sex, but less than boyfriend-girlfriend. Women in these relationships spent leisure time with their partners, sometimes going on dates. Another characteristic of relationships in this category was that they progressed slowly, over time. This slow progression affected expectations because it allowed women to gauge their partner’s sexual history and concurrency before initiating sex. For this reason, women expected honesty, priority, and respect from these partners, but not necessarily monogamy. Women also used rationalizations like “I’m not his girlfriend” or “We’re not in a relationship” to justify their acceptance of partners’ concurrency. Further, a woman’s expectation of honesty did not always mean she wanted to know about her partner’s concurrency – only that he did not lie if confronted.

Finally, relationships in the “Mutually Titled and Defined” category were one’s in which both the woman and man recognized their partner as having a clear title – boyfriend or girlfriend – and had clearly defined boundaries that both partners agreed upon. Partners in this relationship were not

allowed to have sex outside of the relationship (with the exception of women who included other women in their sexual experiences).

### ***Concurrency Acceptance (RQ 1.2 – 1.5)***

In order to explore how young African American women navigate partner concurrent relationships, it was important to glean knowledge on women's attitudes and beliefs about partners who engaged in concurrency. The research also necessitated an assessment of how social and cultural norms, and women's perception of and adherence to these norms influenced partner concurrency acceptance. Thus, this research explored how these psychosocial and external influences, along with the previously described relationship factors, affected women's acceptance of partners who were engaging in concurrency.

**Theme 2: Women generally held passive attitudes toward partner concurrency when the partner was casual or untitled. In Mutually Titled and Defined relationships, women held negative, but often forgiving attitudes toward partner concurrency. Women also held gender normative beliefs about concurrency among men.**

For this research, concurrency acceptance was defined as continuing a sexual relationship with a partner despite knowing or suspecting he is engaging in concurrency. However, holding positive, passive, or nonchalant attitudes toward a partner's concurrency can also be viewed as a form of cognitive acceptance. Considering the well-documented association between attitudes and sexual behavior, exploring women's attitudes toward concurrency and concurrency acceptance is a necessary step in understanding their acceptance of partner concurrent relationships.

Being with a partner who had other sexual partners was not viewed negatively across all participants. Women viewed partner concurrency acceptance as something that each woman should decide on for herself. None of the women said that they necessarily preferred it or wanted it for themselves, however not all were overtly opposed. LisaK felt each woman's situation was unique – that

there was no 'black and white.' She also spoke specifically on having unprotected sex in these relationships, addressing how women should deal with the possible outcomes.

It depends on what type of woman they are. Like I'm not going to be like, "hell no that's wrong," because I don't view things as black and white. Everything is grey. You never know. And you ... it's just like this: you being a grown woman about it ... you a grown woman to have unprotected sex with this man or you going to have sex with this man and you know that he is having sex with another woman, be grown enough to realize the consequences, you know. Like, hey this is what can happen to you. (LisaK)

LisaK was one of only a few of the women who directly associated concurrency to STI risk.

Earlier in her interview she described her experiences with getting an STI from a previous partner.

Women, like LisaK, who previously had an STI had greater STI risk perception. While this risk perception informed their beliefs about the risks of partner concurrency, it did not necessarily influence their decision to continue having sex with partners who were engaging in concurrency. (See Theme 6 for factors considered when continuing or discontinuing sex in partner concurrent relationships.)

LunaBelle also believed women should make their own decisions about whether to accept partner concurrency and talked about how she avoided some of the "consequences" LisaK alluded to. She explained what she considered when she decided to begin a sexual relationship with her friend who she knew had other partners.

I think it's a matter of personal preference. For me I tend to not be extremely emotional. Like, logic always rules over emotion generally in my head. But you know, in comparison, I have tons of friends who – their emotions dictate their lives. So it's almost impossible for them to start having a sexual relationship and not get emotionally involved. So for them I would absolutely not recommend it. For me it's more or less ... I want to know I'm protected. I want to know we're being safe and you're not being stupid. You're not thinking with your little head instead of your big head, you know. I want to know I'm protected because I tend not to be jealous. So yeah I think it's really just a matter of knowing yourself and not setting yourself up for that emotional failure. (LunaBelle)

Tiffany also felt women's decisions about their partners' concurrency should be made on situational basis. She believed it was okay for a woman to accept a partner who engaged in concurrency as long as the woman's expectations did not go beyond just sex.

It depends on the woman and what she's looking for with that man. If she's just looking for somebody to have sex with, then yeah I guess it's okay. If not, then no, because it's very harmful to the mind. It's been harmful to my mind, wooh. And for me I would say no. Definitely no. (Tiffany)

According to Tiffany, women were at risk of being hurt if they could not maintain their expectations while engaging in partner concurrent relationships. Tony also talked about the relation between expectations and concurrency acceptance. However, unlike Tiffany, she did not believe it was possible for individuals in these relationships to maintain their expectations. Thus, she felt women should not accept partners who are concurrent because eventually expectations would be mismatched.

You shouldn't because ... well my thing is men don't even want their side hoe to have a hoe. Like you want your side hoe to be just for you, but you got a hoe, and side bitch, and then a wife, and a girlfriend but you don't want me to be with nobody else type deal, like, no. Yea, also I think you shouldn't because eventually somebody becomes invested and most of the time it doesn't work out. (Tony)

Tony also described a noticeable double standard – men expecting to have multiple partners but not wanting any of their partners to have sex with other men. She explained how, in her personal experience with this double standard, this expectation from her partner was driven by an emotional attachment that neither of them intended on developing.

He's not comfortable with me having other partners. He won't tell me but he'll be like you better not be with nobody else, type deal. But I don't give a fuck, 'cause you have a girlfriend. So you shouldn't be caring about what I'm doing as a single person. You're being territorial of me because it became emotionally invested for the both of us. (Tony)

Angel, the youngest participant in the study, recognized the same double standard – even while still in high school. Instead of relating it to expectations, she likened the concurrency double standard to other double standards related to gender norms and sexuality:

'Cause it's like, for example, if a boy eat pussy, oh it's a high-five. But when a girl suck dick, oh she a hoe. Well it's like, if a girl talking to two boys and trying to be a player: 'oh, she a hoe, she talk to everybody.' But when a boy do it, it's like a difference. Like they ... I don't know it's just they get ... some boys get away with certain stuff that females don't. (Angel)

Many women accepted the concurrency double standard as being a result of men's "nature," holding attitudes that reflected these gender norms. April had a forgiving attitude toward partner concurrency because she felt men could not resist their natural, sexual urges, saying: "I believe that guys have this carnal nature and I believe they can mess up sometimes."

April's belief that concurrency is in men's nature reflects the age-old aphorism, "boys will be boys," and could also be interpreted as being fatalistic, as this belief implies that men will have sex with multiple women no matter what a woman does, because it is in their nature. Kelly also had a fatalistic attitude toward concurrency, believing individuals in every relationship eventually engage in concurrency. However, she attributed her accepting attitude to having old-fashioned beliefs about what a relationship entails.

I feel like I have an old soul. I look at many of these relationships they lasted through 80, 90 years – until death do us part. I believe those vows: death do us part. I feel like, everybody weathers a storm. If you don't weather a storm, that's not a relationship. Even if ... okay, I will be hurt if he stepped out. But no relationship goes above that. Somebody just wants to step out, eventually. But you keep on riding. I'm more focused on ... I need some kind of function, some sort of stability. (Kelly)

Kelly did not only have an accepting attitude toward concurrency because she felt it was inevitable in a long-term relationship, but she also accepted concurrency because she valued the stability associated with such relationships. For Riley, men's behavior was not necessarily "carnal," but was only possible because women allowed it. She believed men push boundaries in order to see what they could get away with, and that if women would follow through on the boundaries they set then men might respect these boundaries.

I think men do whatever the women allow them to do. I really do feel that way. I feel like men feed off a woman's vibe. So if a woman's going to stay after he mess up, then he knows she's going to continue to stay after he mess up. So that's why if he mess up he knows exactly what he has to do to get you to stay after he mess up ... so I feel like they only go as far as women let them. So if you let him know, "Hey! You doing this, this, and this and I'm not going to have it," then they will probably shape up or they will leave. And as long as you hold your mark on what you are doing, that's how they are going to conduct themselves. (Riley)

While Riley's commentary seems to place relationship power in women's possession, she makes a point that speaks to the effects of the African American sex ratio imbalance. That is: men have choice. If a man does not want to "shape up," he can leave. There is no competition among men for women, so it is easy for a man to leave a woman who is demanding monogamy from him. Michelle seemed to understand the power of choice. She explained that her partner, who was touring with a famous rap group, was often around other women, and thus it was expected that he would have sex with someone else. Michelle also had an accepting, fatalistic attitude toward partner concurrency. She believed asking her partner not to have sex with anyone else was futile because even if she did ask, he would have sex with others anyway.

I would see him when he came out here, but I wouldn't have sex with him. And then, yea we had sex. But we used a condom. Orally I didn't. I didn't use a condom. I mean he's cool but I mean, I know for a fact he was talking to other ... he's like ... he's having sex. Because he said he's having sex. Like, he's admitted to it, but we are not together so I can't knock him for it. Plus. I think he was going to do it anyways. He goes on tour all of the time and there's girls. (Michelle)

Michelle also held accepting attitudes because she and her partner were not in a Mutually Titled and Defined relationship. Further, aside from relationship type, the stage of the relationship was also a determining factor. Women had more positive attitudes toward partner concurrency at the beginning of a sexual relationship but condemned the idea of partners initiating new partnerships after they began having sex. Talor would not tolerate a partner starting a new sexual partnership after they began having sex, but did not see a problem with being the sexual partner intruding on an existing sexual relationship. This double standard may be a result of competition among women.

Had you come into the relationship saying 'I'm currently sleeping with other people,' yes, I would have understood. I wouldn't have faulted you for being involved in a relationship prior to me. Had you gotten somebody else during the time of our relationship, I don't know if it would have gone much further. Especially had I known about it. And, like, I felt like the whole thing ended based on the secrecy. It never really ended because I knew for a fact that you were cheating or that you were sleeping with other people. It's just all the inconsistencies. (Talor)

Talor emphasized 'knowing for a fact' that her partner was engaging in concurrency, versus having suspicions. She was not the only woman to make this distinction. This differentiation affected women's decisions about whether or not to continue to have sex with partners and is discussed later (see Theme 5). Talor's words were also exemplary of how some women had more negative attitudes toward dishonesty than possible concurrency. In fact, some women had outright accepting attitudes toward concurrency, as long as their partner was honest with them about other women. Tony also valued honesty. She wanted her partner to be honest about having sex with others, leaving her to make a decision about how she will react. Tony is clearly not decidedly opposed to her partner's concurrency.

I want you to be ... I want him to be honest, too, if he cheated on me. If you honestly cheated on me, then tell me "I cheated on you." And I'm 'bout to go from there, but you're still honest. I don't want you to be selective about what you're being honest about. I want you to just know that my reaction is about to be selective. Emotionally, everybody can't handle it, but I feel like the fact that I've dealt with these guys has made me feel some type of way about a guy that's at least honest. (Tony)

Tony explained how her experiences with men who engage in concurrency affected her expectations. Because she had accepted so many partners who she knew or learned were having sex with other women, she grew to appreciate honesty in place of monogamy. In this way, experiencing previous partner concurrency encouraged concurrency acceptance. LunaBelle described her experiences with a partner whom she expected to have sex with others. She also expected honesty from this partner, and his dishonesty was one of the only issues in their relationship.

With him it's like, the times that we've gotten into arguments it's because he felt like he needed to hide something from me and it's in the context of other women so it's like: we've been friends for a super long time; you ask me all these super in depth questions about the guys who are talking to me or want to have sex with me, or who I AM having sex with but then in my face you try to hide something about another woman, you know. (LunaBelle)

Tony and LunaBelle had nonchalant attitudes related to concurrency. These attitudes were directly tied to their expectations, which were informed by their relationship type. Each woman previously described their relationships with the partner as "friends." This is an example of how

relationship type, expectations, and attitudes are correlated. While some women sought honesty from their partners, April prioritized keeping up appearances in public. April had negative attitudes toward partner concurrency, but interestingly, her negative attitudes were neither driven by risk protection nor by emotional safekeeping. Rather, her attitudes were influenced by an expectation of respect and a need to keep up appearances in public.

It's something that my dad really ingrained in me and my family, is that there is nothing more important than someone can give you than respect. So when you are verging on disrespect and you feel that's it's wrong, or you know you want to flirt with someone and you know that's wrong and you know that's disrespecting me, it's not only embarrassing to me but it makes you look bad in my opinion. 'Cause you are blatantly disrespecting me and other people know that you are with me. You are not going to disrespect me. It's one thing in my opinion to disrespect me in private, but to disrespect me in public and try to make me look weak, like, I have a problem with that. (April)

April recounted a situation that occurred earlier in her relationship with her current partner.

When she found out he was having sex with another woman she never described feeling angry with him, but rather was embarrassed about how his concurrency made her look.

Everyone is kind of intermingled so when someone told me that this girl and him were talking and I was like, "No they are not." And they were like, "At least they are having sex." And I was like, "Oh." That made me feel really awkward because first of all I don't want her to think of me bad, and at the same time I don't want to look bad 'cause we are sleeping with the same person and he told me we were committed. (April)

April's attitudes toward her partner's concurrency seemed to be primarily concerned with how she appeared to others as a result of it. While these attitudes informed her negative attitudes toward concurrency, her need to be in a publicly recognized relationship may be the same thing that informed her decision to stay with her partner once she found out he was having sex with someone else. She remained with this partner and their relationship eventually progressed, becoming more serious. This is not surprising since later in her interview, April spoke generally on whether women should stay with men who have sex with other partners, saying:

I would have to say it depends on how remorseful they are, and if they stop, and the things they say. And then I think ... I'm really torn but I think. I kind of ... I think sometimes ... I really believe people make mistakes sometimes and are led by lust and

there is nothing there. But I think when people carry on affairs, it's multiple women all the time, it's no remorse there 'cause you are doing it all the time and you're not thinking about your family. So I just think about how remorseful they are and what they say and what they want to do moving forward. (April)

There was a salient pattern of “cognitive dissonance,” or stress resulting from holding contradicting beliefs and attitudes, among the women with regard to concurrency (Festinger, 1962; Greenwald & Ronis, 1978). Tiffany had a positive attitude toward concurrency, but not in her own relationships. All of the women had negative attitudes towards partner concurrency from a boyfriend, yet many of the women continued to have sex with partners who were engaging in concurrency. (See Theme 4 for women's responses to concurrency.)

**Theme 2 summary.** Women generally had contradicting attitudes about partner concurrency. Many women expressed attitudes that were accepting of concurrency generally, but had negative attitudes when speaking about their own partners. Women's attitudes toward partner concurrency were informed by many related attitudes, beliefs, and values, including negative attitudes toward being single or without a sex partner and placing value on being in a publicly recognized relationship. Many women felt powerless regarding their partner's concurrency, and therefore also held passive attitudes. Accepting attitudes were informed by beliefs that partner concurrency was: inevitable, normative among men, and a result of men's carnal nature. Further, the latter belief – that engaging in concurrency was innate for men – resulted in women also holding forgiving attitudes toward partner concurrency.

Negative attitudes related to partner concurrency were not informed by women's beliefs about risk. In fact, one of the only women to directly relate partner concurrency to STI risk still believed that there were 'grey areas' in which women should accept partner concurrency. Instead negative attitudes toward concurrency were informed by women's pride, ego, and desire for respect.

Finally, some women held neither accepting nor negative attitudes toward partner concurrency. These women held nonchalant attitudes; they were apathetic toward partners' concurrency, and were more concerned with partners' honesty about concurrency.

**Theme 3: Women used different types of information and different techniques to determine whether or not their partner had other sexual partners.**

In order to qualify for this research, women must have known or suspected their partner of having another or other sexual partner(s). The decision to include women who had suspicions is justified by the influence such suspicions could potentially have on women's decision-making about safer sex. Women used different types of information and different techniques to either inform their suspicions or gather evidence about their partners' concurrency. These included: assessing his social desirability; considering periods during which there was separation or interruptions in sex; evaluating whether the partner invited or allowed the woman in his home; surveying the partner's social media activity; observing the partner's behavior (including any changes in behavior); encountering another woman; and receiving STI diagnoses.

**Partner's perceived social desirability.** When relationships were new or very casual women judged whether they thought their partner was having sex with others by assessing his social desirability – his wealth or success, physical attractiveness, and whether he was socially well known and liked. Michelle felt certain her partner had other sexual partners before their relationship even became sexual. However, these notions did not deter her from having sex with him, but only made her take measures to ensure she obtained his respect.

He was a DJ for some celebrities. I don't know if you've ever heard of the (*name of popular rap group*)? Yea so he used to be their DJ. So I kinda knew he's like a hoe. But when I started talking to him I wanted him to know that I wasn't a groupie, so I didn't have sex with him for a minute. (Michelle)

Talor and Kelly assessed their partners' social attractiveness (physical attractiveness and success), to determine whether they had other sexual partners at the beginning of the relationship.

He's a gorgeous man. He's like 6 foot 3, chiseled features, nice body, light-brown skin because he's mixed. Very well put together. Like I said, he has his own job, so he's not ... he's not short on money. He's not rich, but he has enough to take care of himself, his home, his car, his bills, you know, and still have extra to take me out and do nice things or just gas money to provide to taking me back and forth to whatever I need to handle. So just that alone makes me think that you're not alone (laughs). (Talor)

He was out of my league. I found out, as I talked to him more and more, I found out that he's a singer. He has these beautiful eyes. He has this body. He has a daughter, but she's not here. He has these goals, and his goals are off the chain. He was afraid to tell me that his father is a celebrity. He's already established into the R&B singers' world. And you know, I see those different women they have on their arm, and I'm like, I'm not dressing like that. That's not me. That's not my cup of tea. That's just, you know. We've spoken about the other girls he's been with. But I feel like he, because of his stardom or whatever, I feel like I think there's a female that he's messing with. He says there isn't, but I think – I have no proof, but I think it is. (Kelly)

LunaBelle explained that she felt a previous partner would be an attractive option to other women and how that fact, along with his access to women, made her feel he had a lot of choice.

He's really, really handsome, and really suave, and really intellectual. And I'm not the only one that picks up on that, you know? He's right across from, like, an all-female school – and (*additional nearby historically black college*) also might as well be an all-female school. So it's like he has so many options that I doubt, I highly doubt, that I was the only one. (LunaBelle)

Likewise, LunaBelle also considered choice when judging whether her current partner was engaging in concurrency. Except, aside from him becoming more physically attractive according to social norms (he had recently lost a lot of weight), she believed this partner's choice was also afforded to him socially through being in a fraternity.

Like the incident of me talking (while he was on the phone), and him telling me to shush ... and the fact that he's not used to all this attention from losing weight and crossing (*fraternity*). You think about the guys who have been doing this whole game since like high school so they're really good at it. They're really cunning. It's like fresh for him ... all this attention. So it's like so obvious when he's talking about other girls. It wasn't like on a specific level. I knew he was still having sex with his ex when he went back home. And I know he has tons of girls trying to have sex with him just because of that (*fraternal organization colors*). Other than that, I don't know any specifics or numbers or anything. But I do know he's having sex with other people. (LunaBelle)

LunaBelle's suspicions about her current partner provide an example of how women in college are part of a unique sexual network in itself, with social status afforded to different groups of men based on their affiliations, resulting in even more choice among those men. Additionally, LunaBelle's intermittent separation from her partner presents another issue. Because many college students do not permanently reside where they attend school, there are often periods of separation between sexual partners (during holiday breaks, etc). Those periods of separation may result in introduction to other social circles, sexual networks, and sexual partners.

**Physical separation, or other unrelated interruption of sexual intercourse.** Many women's beliefs about whether their partner was having sex with others were informed by whether there were periods of sexual cessation due to either physical separation between the two or some other reason. Like LunaBelle, Michelle and Tony also had partners from whom they were separated for an extended period of time. One of Michelle's partners was a "friend" with whom she had casual sex and from whom she had very few expectations.

I know he has sex with girls. He didn't live in Atlanta. He was coming to visit so I knew he was talking to girls. I knew it. And then he lives ... he has a place out here. He has a place in Vegas, and a place in California by himself. But I know he's like ... (Michelle)

Tony began a casual sexual relationship with her partner before moving home to sit a semester out of school. She had no expectations that he would abstain from having sex with other women while she was gone because of the type of relationship they had.

So we ended up having sex in September and then we never had sex I think until I got back in January. I know you were having sex with somebody else whether you tell me or not. I was gone this long we're not dating we're just keeping up with each other, like, we're friends. We're still texting each other, calling each other ... (Tony)

According to Michelle and Tony's logic, a man is expected to have sex with another woman if he does not have physical access to his partner for sex. Women did not use this method of determining partner concurrency when they were in exclusive, titled relationship. However, a similar premise was

used among women in all relationship types. That is: women felt their partner had other sexual partners if they themselves were not having sex with their partner despite not being separated.

(I knew) when ... um ... he didn't want to start having sex with me around April. And I'm like yo, come on let's get it in. You know what I'm saying? Like, we would do all this kinky, crazy like you know I made it exciting. Like, I made sure it wasn't boring. So it was like then ... come on bruh ... And I was on birth control at that time, too. Like, come on bruh. You know what we got to do, let's do it. Let's do the damn thing. And like he just didn't want to do the damn thing and I was like, "Hello? It's me, your girl ... you love me right? What's up?" (LisaK)

We dated for like two months before we even had sex, and he never pressured me. He never brought it up. This makes me suspect initially that he probably had other females that he was having sex with because it was the fact that ... it was two things. A: he never pressured me for sex, and B: he never actually invited me to his home. (Talor)

Aside from the lack of sexual activity between herself and her partner, Talor also used the fact that she had never been invited to her partner's home to come to the conclusion that he was having sex with other women. This was common among the women and is discussed more in depth in the next section.

**Not being invited to partner's home.** Women were also suspicious of a partner when that partner would not allow a visit to his home. April had previously been to her partner's home, but was told not to come when she called him one night after running into him at a party. After some back and forth with him about why she could not come over, and contemplating driving to his house anyway, she decided not to pursue the issue any further so as to avoid confrontation.

Later that night when I called him I was like "Hey I am about to come by." And he was like, "Oh no, don't come." I asked why and he was like "I am going to bed." No you're not! Like, it was a party you are not going to sleep. I was drunk; I was like, "You're not going to sleep." And he was like, "Yes I am April." He said, "I don't want you to come because I want to start new with you, I want you to think of me as a better person. So I will talk to you Monday when you are sober. I know myself you're drunk." In my head I'm like that's some BS, even though I was drunk, I was like, "Whatever." I was driving ... I was like, he got a girl and doesn't want me to come. I am not dumb, I really can put a lot of pieces together. But, I just went home. I am not about that thug life and acting crazy, like I am not really about that. (April)

Talor also confronted her partner directly about why she could not go to his house. She was initially hesitant to do so because she did not want to imply to him that she wanted to have sex, since they were not yet sexually involved. It was not until after they started having sex at various other locations that she began to inquire.

I knew he had his own place, which is why I'm wondering, you know... why? Why haven't I been there? But since he hadn't pressured me about sex or whatever, I was like, okay well that would probably be really weird (laughs). You know I stereotyped myself. That would probably be really hoe-ish for you to ask, like: why can't I just spend the night? Like, I'm wondering, you know. So I just wanted to go with the flow, you know. Let him take the lead. Well he goes, he does this really romantic night, gets a really nice hotel. We ended up having sex the first time there. And then after that, we had sex one other random time at his father's house, later on that week or so. You know, after that, that's when I started actually asking him, "Why can't I come to your house?" Then: a parade of lies. And I know they were lies because at that point, nothing started to add up. (Talor)

Yonce's partner did not lie. Once she asked about why they always had to be at her house, he confessed that he was involved with someone.

I was like, "Why do we always have sex at my house? Why can't I go to yours?" And then he was like ... he didn't want to tell me at first, and then he was like, "I have a girlfriend and we live together and we have a baby." I was like, "Oh okay." And then that was it. And I just stopped talking to him. (Yonce)

In fact, many of the women's partners gave straightforward answers when confronted about visiting their homes. Michelle described the behavior of a man with whom she had a one-night stand while on a vacation with mutual friends. She did not learn much about him while on the trip, but kept in contact with her partner upon their return to Atlanta.

We had sex. Then I found out he had a girlfriend and lives with her (laughs). Cause he sold weed. He told me to pick some weed up from him and then he brought it outside. And then I met him at the gate but the gate had a fucked up button. And I was about to go in the house and he told me, he was like ... he kept acting suspect. That wasn't the first time. That was suspect and then he asked me to come over, then we were supposed to kick it another time and then he flaked. He flaked a few times. I'm like, this is what I would do when I had a boyfriend. I would flake on people all the time and never make it. So I texted him like, "Do you have a girlfriend?" Oh, and his Instagram, like he would post all the time! So, I was like, "do you have a girlfriend?" He said he started talking to someone. And I said okay. Then the things he was saying like, "Oh I can't come over at certain times and stuff. And I'm like do not put me in no situations.

Like, what if your girlfriend comes home randomly? I'm not trying to be in that. So, that's it (laughs). (Michelle)

Michelle's partner took precautions to prevent his live-in sexual partner from learning the truth about his sexual experience with another partner. He did so by preventing that secondary partner (Michelle) from entering the home he shared with his primary partner. In this way, he prioritized the security of his relationship with one partner over the other, with one woman being more important to him than the other. This arrangement was well known among participants. The women involved in this type of arrangement were described as 'main chick' and 'side chick' (also, 'main bitch' and 'side bitch'). Like 'situationship,' these terms were popularized in Black popular culture, and have been adopted by young African American women as normative. Michelle also used her partner's habits on social media to inform her beliefs about his concurrency. This, along with actively investigating, was the most commonly used technique used by the women to determine if their partners were engaging in concurrency.

**Social media.** It is not surprising that women in this research were heavy users of social media, given their age group. Most of the women described gathering information about at least one of their partners via social media (including Facebook, Twitter, and most commonly, Instagram). As Talor explained, women believed social media could be a forum for male partners to connect with new women:

Oh, like he would say, "I don't have any social media." Then I'd look on his phone, and he has Facebook. And he'd be like, "Oh, it's my brother's Facebook account. He's locked up in jail, so I just run his Facebook." And I'm like, but that means you're on Facebook even if it is your brother's account. It's social media. Cut it out. And like, c'mon. Social media is like the media tool and gateway. Social media ... you can pretend to be ... you can lead one completely different lifestyle on social media. And it's the easiest gateway to gain people who are strictly interested based on your attraction or your ideas. Like oh, they like your swag, or whatever your status or you persona, whatever it is about you that draws people to you. It's the best way to pick up on that. (Talor)

Aside from feeling their partners were seeking other women using social media, these forums also provided women with insight about their partners' lives that could easily be hidden, otherwise. For example, men were often caught in situations they were trying to hide from their partners as a result of

their friends or family members posting pictures. Women used these pictures, or other “evidence” found on social media, as springboards when initiating conversations about their partners’ concurrency.

Oh, lord. So um I was home ... I went home for Christmas and my birthday is in the beginning of the month and his birthday is towards the end. So I wasn’t there for his birthday but I was always at his house every afternoon, everyday pretty much. I seen my best friend post a picture on Instagram of him and this other female so I was like, okay? So he tagged and I was like, “The fuck?!” So then I was looking and I went on his mom’s page. I’m mad. I investigate before ... I need to know the truth before I ask you. Before I’m going to ask you a question – I know the truth way before I even ask you because I’m not going to ask you if I don’t know the truth. So I was investigating, and I ask one my friends like, “Go follow her.” Because, I’m not going to do it because she going to ask, “Well who is this?” And then he going be like, “Umm...” So she followed and she accepted so I’m scrolling. I’m like oh ... you got a girlfriend? Okay, you didn’t tell me you had a girlfriend. (Riley)

Tony had a similar situation:

He has an off and on girlfriend and I ... and he was lying to me. Eventually at one point he was lying and he was like no we’re not together and then I don’t know how but I just like I think I... oh ‘Woman Crush Wednesday’ picture went up and my sister text me like, “Uh uhn. What is this? Who is this big handed hoe? Who is this girl?” It was the girlfriend. And then I just didn’t talk to him for a while. (Tony)

Riley and Tony learned of wrongdoing on behalf of their partners while passively using social media. Some women sought information more actively by logging into their partners’ private social media accounts to gain access to information.

So I had his ... ‘cause we had exchanged Instagram passwords. I had his and he had mine. Yea, so I guess when he had got locked up his mom tagged him ... I mean she posted his mug shot or whatever and she also tagged some female. So I was like let me see who. The girl was like, “My love for ...” or something, so you know I had to get on her page ... Oh I went off. The mom didn’t know about me, she thought some female hacked his page and she didn’t know about me. And the only female that she knew he was with was her. (Angel)

This type of privacy intrusion was widely used by women to gain information about whether their partner was having sex with others, and was not limited to surveillance of online activity. Many of the women also used these same techniques with their partners’ belongings.

**Investigating.** Women actively sought information about their partners’ behavior by intruding on their partner’s privacy in other ways. One practice that was common among the women was probing

a partner's phones to gather information about whether he was having sex with other women. Some women did this in secret and others were transparent about their intrusive behavior. For Michelle, the type of partnership she was in determined how forthcoming she was with her partner about this practice.

I go through phones (laughs). I... if you're my boyfriend I go through your phone and you know it, but if you're not my boyfriend like him I would go through it just to see what he's about. And he's actually not talking to anyone. There's girls who text and stuff but it was nothing too serious. I was pretty shocked. I went pretty far back too. I went back to June. (Michelle)

For Michelle, looking through her partner's phone convinced her that he was not engaging in concurrency. LisaK, however, found evidence that there was another woman.

I see a missed FaceTime call and then I see a message from a 478. It was a number and it was the girl he used to talk to. I'm like, "Who is this?!" I go in the bathroom, I read it, I see what he said. He was like, "Can I have your number? How you doing?" Blah, blah, blah. I'm like, 'Who is this? What is this?' And I was going to see if he was going to lie to me because ... I guess I'm the type of woman if you tell me something I'm going to remember it. Bruh. He lied to me. Like I remember all the girls, their names, all of that. So I'm like oh you want to lie. So I put down his phone, go outside. Something told me, like, Lisa check that damn phone. Look in them messages because he used to do it with you, shawty. I go in the bathroom. Took his phone went outside read like what he ... the whole ... like she was sending him pictures like, "You still ain't send me no pictures" like blah, blah. (LisaK)

Partners' private belongings were not off limits, and were also explored to assess whether there were other sexual partners. Michelle explained what drove her to stop dating a previous partner, even though she still continued to have sex with him occasionally.

And then one day he left me at his apartment. This was like maybe the second month. And I went to the guest bedroom and there was women's clothing like everywhere. Like everywhere! Then I went in the bathroom and checked under the sink and there was hella women's shit in his bathroom, too. I had never looked under the sink. So once I saw those women's clothes I was like, "Let me snoop around." So, I started snooping and there was girl's stuff like damn near everywhere. Yeah, and I knew it because I did a condom count. You know what I mean? Like, the last time we had sex ... check the package ... yea and the package was dead. He had like one condom left and it was a big ass box of them. So after that I really stopped talking to him. But every now and then I'll see him and we'll fuck. (Michelle)

Michelle's decision to stop seeing her partner regularly, but to continue having sex with him, was protective, emotionally, but not physically. Women's various responses to learning their partners were engaging in concurrency are discussed later (see Theme 4).

**Observing behavior, including inconsistent behavior and changes in habits.** Not all of the women were interested in "snooping" through every partner's social media accounts, phone, or belongings. Some women were content in making a judgment about their partner's concurrency based on their partner's behavior, alone. LunaBelle did not need to go through her friend's belongings while at his home to determine whether he had other partners. She could tell by the way he treated the items she left at his house that he sometimes had other female guests when she was not with him.

It's so obvious when like someone has been over. It's like insanely obvious. And the fact that I know him so well, it's like insanely obvious. I have a toothbrush over there. So it'll be moved (laughs) in a different location. Stuff like that. Little stuff. Or like I'll ask him, "Did you wash your sheets?" And he'll give me a look like, 'How did you know?' (LunaBelle)

Tiffany's casual partner received phone calls late at night. This, along with the fact that she and her partner never discussed being exclusive made her feel there was someone else.

We never spoke about other people and us being exclusive or anything like that that's why I felt like he maybe did have other females. Then, because too, his phone always went off (laughs). Like, it was always ringing! I always noticed that, like why is your phone ringing so much? Like, it's 10 o'clock at night? (Tiffany)

Talor believed her boyfriend was canceling plans with her because he was juggling more than one relationship. His inconsistent behavior signaled to her that he was spreading himself thin.

And then it'll be that half-assed consistency. Oh, I'm consistent for two weeks, and then ... it's that weekend we planned to go to the movies and I'm just not answering. That feels like you're balancing things to me. Like, okay, I have this relationship with you sometimes, and I'm pursuing another relationship. (Talor)

Talor also judged her partner concurrency by his reaction to a male friend's concurrency. When this friend's girlfriend discovered his concurrency, Talor scrutinized the advice her partner offered the woman:

... And then like, his views just, what he was saying about this situation. He was like, "Man, nah, he going to get it right. Man, don't worry about that. Don't sweat. Don't go nowhere, he need you. You should stay. Man that's small. You shouldn't leave that man." I'm like, you're telling her basically that him cheating isn't valid, and why are you supporting? Like, it says a lot. Like, to how you feel. (Talor)

Likewise, Michelle had a broader perspective on behavior. She observed her boyfriend's friends' behaviors when their female partners were not around and reasoned that her boyfriend likely behaved in the same way when she was absent:

I just know. The way his friends even act, you know? His friends they have girls ... not girlfriends but they'll have main girls. Even one of them ... one of his friends, he talked to my friend and I would see him. When I'd come around he would talk to other girls and I would see how they are. So when I'm not around I know he did the same thing. (Michelle)

All of the aforementioned methods of judgment left women with what they felt were unfounded suspicions. Women then sometimes convinced themselves that they had no reason to worry by considering their partner's positive behavior. This, again, resulted in cognitive dissonance – women were able to convince themselves that their partners both were, and were not engaging concurrency:

It was all so circumstantial that I wouldn't be able to just be like, oh, you did it. And he's smart enough to know that about me after having spent so much time with me. Like, he begins to pick up on little habits that I do notice. I tend to notice a lot. So I wasn't oblivious to the fact. I just didn't want to believe it initially, especially because I'm like, "Well what kind of person just sacrifices every afternoon of their life to take somebody back and forth just for sex." Like, it didn't make sense, so I didn't believe it. I don't know. Maybe that is kind of foolish. I don't know. I didn't believe it at the time. At the time, I just genuinely felt like, okay, maybe he cared about me, maybe there is a situation and you're trying to end possibly. Or maybe there is something you're coming out of, and he didn't tell me what was going on because he had asked me to be patient with him. (Talor)

Indeed, suspicions often led to questions, which sometimes elicited confessions from male partners. However, unless there was a confession, women sometimes ignored their instincts. Michelle also struggled with "knowing" her partner was having sex with other women and still needing him to confirm:

And I'm like you talk to other girls. Stop. When I say that he'll think I'm crazy. He always says that, but I know he's talking ... like I know for a fact that ... that's why it's really

annoying to me, because it's like I know just tell me! I'd rather him tell me just because I go a lot of places he's at so I don't wanna be all over him with a girl watching. And that could put me in drama. (Michelle)

Only certain circumstances left women without a doubt that their partner was engaging in concurrency. Those circumstances are discussed going forward.

**Encountering a concrete 'other woman'**. Finding one's partner on social media with another woman or finding texts to another woman was enough to make a woman suspect her partner was engaging in concurrency. However, catching him with, being contacted by, or being told by him about the other woman were more concrete forms of evidence that he was having sex with others. Kelly came across her partner with another woman in his car and when she attempted to confront him, he first avoided her, and then lied:

I was driving one day leaving my house, and I recognized his car. Usually we will send a text message, 'good morning baby,' you know all that stuff. I say good morning, he didn't reply to my text message. Okay, I'm driving. I drove right past him. He has a female in his car. I call him. He doesn't answer my phone. He looked at the phone and declined it. I send him a text, 'So who is that bitch in your front seat?' Later I receive like fifty million phone calls. He didn't want to talk to me then, I don't want to hear it now. I let it go. I was like whatever. I ignored his phone calls. He showed up at the house. I was like yeah, whatever. He was like "Oh, that was my cousin. That was my sister." He couldn't keep up with his lies. (Kelly)

Tony was confronted in person, at a party by a woman who claimed her boyfriend was pursuing her. When she asked her partner whether the other woman was telling the truth, he admitted that he pursued her, but emphasized that he was only pursuing her to have sex with her:

She was like, "Oh yea what's-his-name, he was trying to talk to me and I was like, 'No, 'cause I got a boyfriend.'" I thought: first of all you're a hoe so I know that's not even your reaction; you acted that way because you was with your boyfriend at the time. But he said that he didn't know she had a boyfriend. He was like, "I mean when she gave me her number she wasn't like, 'Oh I got a boyfriend' or anything. I didn't know, and I know she's a hoe so when I hit her up I hit her up with the jug like, 'Are we gonna fuck or nah?' type deal. I never hit her up trying to be anything more." He was like, "She was trying to fuck with me. I knew it. And that was all that it was." (Tony)

Tony's partner admitted to soliciting sex from another woman and downplayed his actions by de-emphasizing the importance of seeking sex, alone – as if it would have been worse had he sought a

relationship, or “anything more” from the woman. His response provides evidence that supports women’s beliefs (discussed later in Theme 6) that men trivialized sex with outside partners. Yonce’s partner would not confess even after she told him she spoke with the other woman. However, for her, the other woman’s word was all the proof she needed.

I was like, “So did you have sex with her when we broke up?” He was like, “Yes.” And I was like, “But we were broken up for two days. That’s kind of fast.” But he was like, “No, but it only happened while we broke up.” I didn’t even ask him that. Anyways, he came out and said that, and I was like, “Okay.” And she was telling me, she was like, “We had been having sex the whole time y’all were together AND we had sex when y’all broke up.” It was just like ... to me, I don’t believe that women just say stuff. You know? I mean I know sometimes we over exaggerate, but it’s never just to lie. They might not have been having sex the whole time we were together, but they had sex while we were together. So I always believe what someone tells me. (Yonce)

While “the other woman’s” word was enough to convince her, it was not enough to convince her to stop having sex with her partner. Yonce continued her sexual relationship with this partner for some time, until they were forced to end their relationship because of physical separation.

**Receiving an STI diagnosis.** Finally, almost half of the women who participated in this portion of the research recounted receiving an STI diagnosis from a doctor and were, therefore, certain a partner had sex with another woman. Prior to receiving her diagnosis, Kelly believed her relationship was progressing toward marriage. She had just moved in with her partner when she learned he was engaging in multiple sexual relationships.

(My child’s) father gave me an STD. I found out he was living a double life. At first, I was going through that stage of being in shock. I was like, I cried so much. When I found out I had an STD, I found out I was pregnant at the same time. So you know, I was still in shock, I had an STD, this dude didn’t ... Really?! And then I’m pregnant! (Kelly)

Riley was only having sex with her partner so she was sure that her STI diagnosis was due to his concurrency. She also knew he had a complicated relationship with the mother of his child, who he was still sexually involved with. However, confronting him about her diagnosis with Chlamydia is what lead him to explicitly acknowledgment his involvement with other women.

I cried. I didn't know what to do. I went to the clinic and that's when they came and told me I had ... they test me and they was like, "You have Chlamydia". And I was like ... when I told him, he was like "I don't know why because all these other people I be having sex with, they never had an issue and I don't know why it's you that's just having this." And I'm like ... I'm so over you. (Riley)

Despite Riley's frustration, she continued to have sex with this partner on occasion for some time. This is an example of how even when women knew for sure that their partner was engaging in concurrency, and even when they experienced the consequences first hand, they still struggled to discontinue sex in partner concurrent relationships.

**Theme 3 summary.** Various factors informed women's judgment of whether or not their partners were engaging in concurrency. These included factors related to their partners, such as social attractiveness and behavior, and factors related to the relationship, such as physical proximity and regularity of sex. Women also used specific techniques to actively gather information about whether their partners were having sex with other women, including scrutinizing his social media activity and 'snooping' through his personal belongings. While this theme doesn't necessarily address any of the research questions, it highlights cultural trends that informed the development of culturally-relevant messages. Further, this theme emphasizes how women's suspicions were often indicative of actual partner concurrency, and how, even still, many women doubted their suspicions and used their doubt to placate any notions to end their relationships.

**Theme 4: Women responded to concurrency in varying ways depending on their expectations from the relationship and the type or stage of the relationship.**

Once learning their partners were engaging concurrency, women responded in various ways. Responses were related to the type of relationship and the current stage of the relationship, and varied from pursuing the relationship more enthusiastically, to emotionally distancing themselves from their partner, and also temporarily discontinuing the sexual relationship.

**Approaching partner concurrency as a challenge.** Some women perceived their partner's concurrency as a challenge to get him to be monogamous. This occurred early in relationships, but only in relationships that women believed had the potential to be more than casual. When Michelle asked her partner about whether he was having sex with anyone else, his response did not deter her from continuing the sexual relationship. In fact, she took his concurrency as a challenge.

He said that he has sex with other girls, but he "doesn't like anyone seriously." So it's either I'm gonna take it as a challenge and make him buckle down but, most likely not, because he's probably gonna have sex with girls. But, I see that as a challenge, yea. That's how my ex-boyfriend was. Cause he was like a player. Never ever had a girlfriend. And I changed the whole game. (Michelle)

By recognizing her partner's concurrency as a challenge, Michelle positioned herself in competition with other women. She felt that by behaving in a certain way she could get her partner to "choose" her over those other women.

So I felt like I want to show him I'm fun. So, like, the terms 'main bitch' and 'side bitch,' I'm both of those (laughs). So I was hella fun. I was like the homie. We were like best friends. But then I was his girlfriend. (Michelle)

For Michelle, being more "fun" was a way to persuade a man to be monogamous. This same logic might cause women to be more passive or risky in order to keep partners interested or influence men to choose to be monogamous with them. This was apparent when Michelle later described being hesitant to ask a different partner questions about his other sexual partners or sexual history due to concerns that he would get frustrated and stop seeing her. (See Theme 7 for more about communication about concurrency.)

**Pursuing other relationships and/or having other sexual partners.** Michelle approached the concurrency of a partner with whom she saw no future differently. Earlier in her interview Michelle explained that, even though she liked one of her partners, and wanted to continue their sexual relationship, she knew it did not have a future because of the age difference between them. When she

learned this partner, who is 17 years her senior, was having sex with other women she reacted by removing any boundaries she had previously placed on her own behavior.

Now I know he's fucking a bunch of bitches so I'm not number one. I mean I'm not gonna NOT. I'm not gonna be tied down to no man that's not gonna be tied down for me. And it's not like I'm gonna go out pursuing men and just having sex, but it just if it comes around I'll do it. And if I'm interested and I want to I'ma do it. (Michelle)

Although both of these partners were casual for Michelle at the time she learned of their concurrency, the potential for a future that she assessed with each partner influenced how she responded to their concurrency. Michelle responded differently still to a "boyfriend" who was engaging in concurrency.

I feel like he started cheating towards the end. I never caught him but I just know. I would bet my life on it. So then after that I kinda started talking to others ... after that ... once he fucked up with me... my head... I always feel like you're making me look stupid. I feel like he was making me look stupid. So I'm not about to be looking stupid, that's just how I took it. Then when I'd go out, I would just ... like when guys would ask for my number I no longer said that I had a boyfriend. I'd be like, "Oh, I'm talking to somebody but, you know, you can get my number." I started being more loose with it (laughs). (Michelle)

Using multiple narratives from Michelle provides insight about how one woman does not respond in the same way to every partner's concurrency. Michelle's responses clearly varied depending on the type of partner she was with and her expectations from that partner. With a boyfriend, Michelle responded by being more open to getting to know other men. While she allowed men to pursue her, she did not have sex with these men while she was in a Mutually Titled and Defined Relationship. Kelly had the same response to a boyfriend who was having sex with other women:

It got to the point I was like, you know what? No, okay? Two can play this game. That's when I'm not going to lie, I started conversating outside of the relationship as far as the dudes that I called myself cutting off for this relationship. I started having conversations with them. After knowing: 'man, he cheating on you; you're not the only female' blah, blah. All these females come out the woodworks. He deleted and blocked me on Instagram. I deleted him off of Facebook. I finally broke it off with him, and then it was like an on and off thing. Eventually I said you know, fuck it. (Kelly)

Angel also explained how the way she viewed her relationship changed after she learned of her “boyfriend’s” concurrency while he was in jail. In her case, the separation they were experiencing may have also been a factor, but it was not until she learned of his previous concurrency that she started being receptive to other men’s advances. After learning of his other sexual partner, April told her partner she would still fulfill all of the emotional roles that a girlfriend does, but that she was going to start behaving like she was single, otherwise.

He supposed to be getting out. He been in jail for a month now. We together but we not. Well I’m single right now ‘cause I still like... I still think of the incident, the drama, and stuff. And I told him. I was like, “I mean, I love you and all that stuff and I’m gonna be there for you, but we gone need to talk when you get out”. That’s what I told him. But other than that, I’m gonna be single. (Angel)

She continued by explaining how she approached relationships with other men who were pursuing her. Even though Angel was entertaining these men, she did not take them seriously because she was still emotionally attached to her partner.

I don’t give them no chance. Like, I’ll talk to them but I just don’t give them no time. Cause I’m still... Cause if I’m still attached to that one person. Why waste their time? It’s pointless. (Angel)

Angel was hesitant to move forward in another sexual relationship because of her feelings for her partner. Findings related to emotional attachment and concurrency acceptance are discussed more in depth later (see Theme 5). However, many women, especially those in casual relationships, did engage in other sexual relationships in response to their partner’s concurrency and cited multiple reasons for doing so. Kelly describes being driven to engage in concurrency by her own feelings of sadness and also by a desire for sex.

I think about my feelings when I’m gonna have sex with more than one guy. Some, so this whole year, as I really look at it, this whole year, I’ve been hurt. And I feel like the more I jump into relationships or these “sex-ships,” yes (laughs), the more I hop into these the more I don’t seem to have feelings. I feel like I hop in them out of, I want to say remorse? Or, no, just feeling bad. Or, hey, I just might be horny. Look, you just might be my next victim. That’s what I tell dudes. (Kelly)

Tony, on the other hand, said she was driven to engage in concurrency by feelings of anger. When her partner made her angry by having sex with someone else, she justified her concurrency by telling herself she would probably not continue to have sex with him, anyway. She also rationalized that if she did continue to have sex with him, he would not find out about the other man.

I was thinking, "I'm mad at you, anyway. I'm already mad at you. I don't think the... I don't think we're gonna talk anymore anyway and (pauses) I'm mad at you, I'm not sure that I wanna talk to you anymore, anyways." And umm ... I... oh this so bad, like, I wasn't ... I'm so ashamed I can't believe I'm putting this in the atmosphere. I was thinking, like, okay even if we do start talking again you'll never know because you got a really big penis and (*other sexual partner's*) penis not even that big. But I honestly felt bad. I honestly did, but at the same time I was like ... I felt bad because I'm really invested in these guys as far as my friendships, so I don't want to hurt you. You're still my friend but I just came to the realization that you're not my nigga and you're never gonna get your shit together to my standards. So then I'm about to just treat you like the hoe, and it's cool! And that's what I did when we ended up linking back up again. (Tony)

While it was not uncommon for women in casual sexual relationships to seek or engage in other sexual relationships outside of their existing sexual relationship, none of the women described doing so before knowing or suspecting that their current partner was engaging in concurrency. However, this study may have only captured reactive concurrency as a result of the study design, which did not necessitate in-depth dialogue about women's partners who were not engaging in concurrency.

**Creating distance between partner and self, both sexually and emotionally.** Another common response to concurrency among the women was to adopt or discontinue behaviors in order to create distance between the woman and her partner. Michelle distanced herself from her partner sexually after learning about his concurrency by changing what she was willing to do during their sexual experiences.

We kept having sex, but he didn't get certain things during sex. It was more so for my pleasure. He was not getting head, or I don't put too much work in it. You can tell when I'm into it and when I'm not into it. He'll know. (Michelle)

This was a common practice among women, who often described having sex less often in response to partner concurrency. Michelle also discussed changing risk reduction habits such as condom use. This response was rarely cited among the women, and is discussed in detail later (see Theme 8).

LunaBelle prioritized the friendship between herself and her partner over their sexual relationship. She adopted habits like being purposely unavailable in order to maintain the friendship and ensure she did not become emotionally attached to her partner.

I would say I operate differently knowing there are other women. Just because, again, that friendship ... and then I'm in a place where I'm like ... things are kind of changing a lot. And so I feel like I'm in a vulnerable place right now. So I don't want to need him too much. Yeah so I'll like ignore him sometimes just to give myself that like distance from him. I know he's not in a place where he wants to pursue a relationship right now ... and to be honest neither am I. I wanna travel you know. So yeah I definitely distance myself every now and then when it feels too much like a relationship. (LunaBelle)

Kelly's emotional response to her partner's concurrency was to adjust her expectations related to the future of the relationship.

I think there's a female that he's messing with. He says there isn't, but I think. I have no proof, but I think it is. Knowing that keeps me from catching feelings. Knowing that keeps me from thinking well, maybe there will be a future. I mean, if it happens, it happens. That's the way I think about it. (Kelly)

Talor, however, considered her past when responding to partners' concurrency. As more of a general response to having concurrent partners in the past, Talor describes being more willing to end relationships once learning of concurrency.

I believe that a lot of times we don't accept that people are who they are. You know. And what they give you is what you should probably expect of them. Like I said, this is something I'm only recently learning with that (laughs). I am proud of myself that it ended quickly at least. Because I've been known to like, continue to try. I've been that person to where, I'm down, or I'm wheeled over or whatever. But I've been loyal to a fault (laughs). And it ended up to a point where I realized I'm not even being loyal to myself. At this point who do I love more, me or you? And that's where that becomes an issue. (Talor)

Talor said her relationship ended quickly in comparison to other previous relationships in which the partner engaged in concurrency. While that may be so, sex did continue for some time after learning

of this particular partner's concurrency. This means that Talor was still at risk for acquiring HIV or STIs in the interim, as she and her partner made a mutual decision not to use condoms.

**Immediate, but temporary, discontinuation of the sexual relationship.** One response to concurrency that was common among women in the study was to temporarily discontinue the sexual relationship with their partner. Many of the women were angry and hurt upon learning of their partner's concurrency, and those emotions informed their initial response. Riley cut all communication with her partner, not just the sex.

When I found out I was like, "I don't want to talk." For a whole week I put him on my reject list. I had calls go to the answer machine, like I don't want to be bothered, I just ... you lied to me. And I felt like when you lie to me I'm just going to not talk to you because you lied to me. And he was like, "You know she lives far away" ... so he was saying ... "but we been on and off for five months." But you didn't tell me you had a girlfriend?! It was a lot. But as you can see I'm still dealing with him. I don't understand. I'm just ... (Riley)

Riley's disappointment in herself for having resumed the relationship with her partner was palpable. Unfortunately, this temporary response to concurrency and resulting disappointment from a partner was common among the women. April suspected her partner was engaging in concurrency after he would not let her come to his house one night. Still, she did not discontinue their sexual relationship until her suspicions were confirmed by friends who informed her that her partner was having sex with a mutual friend. Although April took immediate action by discontinuing sex with this partner, their separation was only temporary, and when she started to have sex with him again their relationship grew more serious.

I was really upset actually, so I stopped talking to him for a minute 'cause I felt like really dumb, but we ended up talking again. And then eventually we got like, I would say it's kind of premature exclusivity and closeness like I would say it was driven on sex a lot and looks, but then again when we got on campus for the actual school year we spent more time together than like rush time. Like I'll have to say he really got to know me and like now I can trust him with a lot. We started really talking like giving up real information about stuff and ourselves. He ended up telling the whole story and how he was sleeping with her but it was purely sex and like she is crazy. He admitted sleeping with her while we were talking and that he had slept with someone else and that just made me feel more.... I have never been in a position ... I have with that one guy ... with

my ex-ex. I just don't like being in messy situations. I really don't like being in a messy ... I hate being hate in messy situations and I hate ummm ... I don't like sharing, I don't like ... Like if you're mine you're mine, and if I am yours I am yours. It was just a hot mess of a situation. (April)

April's experience exemplifies what many women believed would happen if they continued a relationship with a partner who was engaging in concurrency – that he would eventually be monogamous. However, Michelle's experience was more representative of what actually occurred. After choosing to continue such a relationship, Michelle found her trust in her partner was jeopardized and she eventually felt that he was having sex with other women again.

I cussed his ass out. And then I broke up with him for a minute. And he threatened to commit suicide. He did hella crazy shit. He's not even like that either, (laughs) so that was random. It was random as hell. I was super shocked he did that. So he threatened to commit suicide and he was talking about how sorry he was and this and that. Still didn't take him back. Then he went to Baltimore for a business trip. Came back and he made it up to me I guess. But it just never changed. I love him to death but I can't... I don't trust him anymore. I feel like he started cheating again towards the end. I never caught him but I just know. I would bet my life on it. (Michelle)

Michelle went on to explain that she knew this partner was engaging in concurrency because she found evidence in his phone that he had been pursuing another woman. Going through his phone was not new for Michelle. As she explained earlier in her interview, she openly went through a man's phone if it is her boyfriend. However, Angel saw such intrusions as necessary only once her boyfriend lost her trust. Her response to concurrency was to be less trusting, and demand more transparency from her partner.

Like I don't... I don't trust him. No. I don't. I'm like I'ma need to see your phone every time I'm over there AND I'm about to block that girl on your phone. And I'm gonna say you better not have her number on your phone or you gonna get cussed out. (Angel)

Often there was no interruption (even temporary) in sex until concurrency was either confirmed by the partner or definitive evidence was gathered in some other way. This overlaps the previous three themes – judgment of concurrency, response to concurrency, and reason for concurrency acceptance – as, women responded to concurrency by continuing to accept a concurrent partner *because* they had no

real proof of his concurrency. Further, for many women there was no interruption at all after learning of a partner's concurrency. Especially in very casual relationships, women often continued the sexual relationship until they found another partner.

Sex was discontinued immediately and permanently after learning a partner was concurrent in only two relationships.

And then that was it. And I just stopped talking to him. Yeah, I can't really say that I was really hurt or surprised. I mean I was kind of surprised because he didn't mention it to me before but I wasn't surprised that he would be having sex with me while he has girlfriend, because that's his ... personality. That's just something that he would do. But it really hurt that he had kids. Not because of me, but because I was like, you know... that's kind of dirty. It didn't really hurt me, I wasn't... I was kind of hurt. I felt disrespected more than anything. But at the same time, it didn't hurt to stop talking to him. It was just like okay. But I felt really bad. I felt like a bad person. (Yonce)

We spoke about other partners but he kept saying it as in past terms like, "my ex-wife." But I always ask questions. I always wanted to know who, what, when, where and how. He was just straight out with it: "yeah, it was such and such." And you know, he would never say their names, but he would describe them. And he was just like, "Yeah, we had sex." One of my chicks went crazy. And I was like, hold on, one of them? How many you got? He would never give me a set number. So that, I saw, kind of held us off as far as sex. We finally did have sex. And that was it. We had sex, and after he told me all this stuff, we had sex no more. I was like, that's unattractive. That's a turn off to me. Especially after you have so many. I know, me as a woman, I'm not married though. Like, you're married. You're getting it in, like. Couldn't you get it from your wife? He made it seem like they were in the past at first. But once I found out they were current that was it. (Kelly)

It is concerning that only two sexual relationships ended immediately after the woman learned of her partner's concurrency. Continuing these sexual relationships places a woman at immediate risk of being infected with STIs or HIV if a condom was not used or if the partner had not gotten tested in the interim. (See Theme 8 for condom use). Despite the risk, there were a number of competing factors that informed women's decisions to accept partners who engaged in concurrency. These factors are discussed in the next section.

**Theme 4 summary.** Relationship type and relationship expectations directly influenced women's responses to their partners' concurrency. Because women in very casual Sex Only partnerships (such as

“friends with benefits” or “fuck buddies”) had very few expectations or boundaries in their relationships, they often had no response to their partners’ concurrency. Women in Casual, with Expectations relationships, who had casual partners with whom they wanted a future relationship, viewed their partners’ concurrency as a challenge. These women believed they were in competition with other women, and viewed their partner’s monogamy as a prize. However, for women who did not have any expectations of a future with their partner, partner concurrency was viewed as a green light to engage in concurrency, themselves. While women may not have gone actively searching for other sexual partners in response to partner concurrency, they described eliminating boundaries they placed on their own behavior, and were more willing to follow through with any urges.

Women in Mutually Titled and Defined relationships also responded to partner concurrency by being more open to exploring other partnerships. However, because of emotional attachment to their boyfriends, women in these relationships did not engage or plan to engage in concurrency with these men. In fact, while receptive to men who were pursuing them, women did not devote time or energy into developing these secondary partnerships.

Finally, certain responses to concurrency were shared among all women in the study. Women described taking measures to decrease the emotional attachment between themselves and their partners. Also, women responses related to sex included: limiting their sexual performance; decreasing the frequency of sexual experiences with their partner; and immediately (but temporarily) discontinuing sex.

**Theme 5: Women described various reasons for continuing or discontinuing sex with partners who were engaging in concurrency. These were related to sex, emotions, expectations, and fears.**

This theme is centered on physical acceptance of concurrency, as displayed by continuing sex with a partner – even just one time – after knowing or suspecting that he has had sex with another woman. Thus, women were considered to have physically accepted a partner who engaged in

concurrency if they did not discontinue sex immediately and permanently after learning of the sex with another partner. Four main factors influenced women's acceptance of these partners: (1) sex, (2) emotions toward the partner, (3) relationship type and related expectations, and (4) fears of ending the relationship. Women's reasons for discontinuing sexual relationships were less consistent, but the two most common reasons were if the man's other partner was serious (such as a girlfriend or wife) or if the woman had already found another potential partner.

**Influence of Sex.** Many women were driven to accept concurrency by the pleasure they experienced during the unique sexual experiences they shared with their partner. Pleasure was, indeed, a factor for LunaBelle, who described continuing a sexual relationship with a partner despite trying to create emotional distance between them in response to his concurrency. When asked to elaborate on the factors she considered when continuing their sexual relationship she replied simply: "The sex is *really good*." She continued later in the interview:

Good sex honestly will make your mind do freaky things. Like, um ... man ... again, I look at some of my friends and I'm like, "why are they still there?" You know? What is it?! And it's like good sex is the only ... it's still illogical ... but it's the only thing that makes sense. And I know I've been in situations longer than necessary ... longer than I should have been, really ... because the sex is really good. (LunaBelle)

LunaBelle believed her experiences with accepting a partner's concurrency in order to continue a pleasurable sexual relationship were shared by other women she knew. Indeed, Michelle and Tiffany also continued to have sex with a partner because they found their sexual experiences to be pleasurable.

We were so sexually active already. That was all who I was having sex with. And it was good. Just didn't want anyone else. It was like the best sex I ever had. (Michelle)

I think we kept having sex because we did have a high sexual chemistry. Like we were very sexually attracted to each other. (Tiffany)

Some women accepted concurrency, not because the sex was good, but because they wanted to have sex in general and did not want to have sex with a new partner. April felt she could no longer

ignore a growing sexual desire, but was not comfortable finding a new partner. Since she did not have a current sexual partner, she contacted an old boyfriend.

So in my head I'm like: I haven't had sex in a minute, like since the beginning of freshmen year and I was really feeling like I needed it. It's been a minute. I was like geez. And I am just not going to go out and have sex with someone new or random. I have to have sex with one of my exes. One ex is in Virginia, and the other, I knew he goes to Georgia Southern and I knew he would be in town so I am going to finesse this so I can have sex with him. I was on a mission. I didn't really care about what was going on in his life at the time. I just wanted what I wanted, and wanted to keep it moving. (April)

For April and others, sexual desire and familiarity of partner played a role in acceptance. April's desire to have unattached sex with someone also influenced her lack of communication with this partner about "what was going on in his life at the time," which was an allusion to his girlfriend. Not communicating with a partner about his sexual partners, or looking the other way, was one way that women accepted partner concurrency.

Like April, LisaK was also concerned about having sex with new partners, but not because they were unfamiliar to her. Rather:

Because I don't like getting new numbers ... I don't like expanding on ... I'm on one hand, and I'm sticking on one hand until I'm like ... I don't know when. Not saying, hey ... I'm 19 years old and I'm on one hand, some people would view that as being a hoe but ... I don't like getting new numbers. (LisaK)

Participants used terms like "numbers" and "body count" to describe how many men they had sex with, or, in public health terms, their "lifetime sexual partners." So when LisaK described being on one hand, she was referring to having sex with five men in her lifetime. When LisaK continued, she described feeling like her "number" would be less important to her as she got older. However, at the time, she did not feel comfortable adding to that number.

This finding is significant in more ways than one. First, historically women have been shamed for behaviors that society deems "promiscuous" (D'Emilio & Freedman, 1988). Having multiple sexual partners and having an extensive sexual history have been included among these behaviors for women. Stereotypes about African American women, specifically, also overemphasize, while simultaneously

demonizing sexuality (Hill Collins, 1999). Therefore, social norms regarding women's sexuality may be encouraging women to remain in risky sexual relationships. Further, from a public health perspective, women deciding between remaining in partner concurrent sexual relationships adding new partners are in a quandary. A woman's risk is, indeed, increased with greater lifetime sexual partners (Moreno et al., 2007). However, monogamy only protects her if both partners practice it; if she is having sex with one partner who is having sex with other women, she is still at risk for STIs and HIV.

**Emotional attachment and emotional dependence.** Women evaluated their emotions when negotiating relationships with partners who were engaging in concurrency. Emotions like love and guilt were considered when deciding whether to end sexual relationships with partners. In the following narrative from April, she describes why she stayed in a partner-concurrent relationship for so long even though she knew she was not being treated the way that she deserved.

I have to say, my ex, I cared for him. Like I loved him a lot. I gave a lot. It takes a lot for me to give. Once you earn that trust and that loyalty, I give a lot, even though he wasn't like treating me the way I deserve. And kept messing up, messing up because I loved him so much and I cared I will just continue, like, being; he cheated all the time and like in the end it just, it was just time to walk away I guess because I just realize no matter how much I cared he just doesn't get it and it's not going to work out. (April)

"Love" was the emotion used most often by women to justify continuing sexual relationships with partners. While, in that way, April's response was representative of the responses given by all women, she also represents how women had unique situations that informed their emotions.

I think, I know for myself: I love to care for someone. I like to care for someone outside of myself. So I felt like at that time, I really felt like I needed him. Like in spite of what he was doing I needed him. He was like my best friend. So I needed to tell him about my dad, I needed to tell him my progresses in life, things that went wrong and like I just leaned on him a lot. So in spite of like all the things he was doing wrong, there were still like those things I could depend on him for. And we were together so long ... I needed him in my life and when we broke up, it took some time to be like I need to be independent. I don't need to depend on someone that much, so I think it was like my dependency on him kind of like an addiction or a drug ... but I definitely needed him. (April)

Further, April represents how one woman can have several emotional responses that range from love to emotional dependence and encourage concurrency acceptance. April's emotional attachment grew from the friendship she shared with her partner. Her dependence on her partner was related to the fact that he was her boyfriend when her father died. She felt this previous partner was the only one she could talk to about her father, and soon developed a closeness with her current partner (from whom she also accepted concurrency) for similar reasons.

With (*current sexual partner*) I feel like we have kind of formed a connection because both of his parents have died, and my dad died. So, I feel like when he told me that and I told him about my dad – because I don't tell a lot of people about my dad – I feel like we really formed this connection. And I felt like with the other guys I talk to they can't relate to that. There is something with me and him, I feel ... I feel safe about, because I feel like he understands. Amidst my crazy and my emotions he understands what it feels like to lose somebody like a parent. That's something. Like (*previous sexual partner*) cheated a lot of times. He knew my dad, and my dad was his mentor at one point and that's my struggle, was that he is the last guy that will ever have met my dad. That was my attachment to him after my dad passed that kept me there. He knew my dad and no one else I meet will ever know him, so I think it's a connection. (April)

April's testimony reflects how women had unique motives for being drawn to their partners, and that many of these reasons encouraged an emotional attachment or dependence. It is this dependence that informed women's acceptance of concurrency. Feelings of guilt or obligation also informed women's decisions about continuing sex with their partners. Women expressed feeling "bad" or "guilty" if they did not try to make relationships work in spite of their partners' concurrency.

Whenever he texts me ... sometimes I go back to ... I really be like, "I love this dude!" I just be like ... yeah. But why am I on this boy? Because when I went home this past October he was texting me and I was like, I do feel bad because maybe I could've tried ... but then after a while I was like ... because his name in my phone right now is "Lost." He just lost. And I don't have time to be a part of anybody like ... if you lost, just stay lost, don't take me along for the ride. (Riley)

LisaK also had feelings of guilt that were apparent even before she explicitly expressed feeling guilty. In the midst of discussing her partner's concurrency, LisaK stopped and offered the following rationalization for her partner's behavior:

He's a great guy ... He is a beautiful man ... He's a great guy. He just not ready for something with me yet. Does that make sense? He's such a loving, caring, kind-hearted, greathearted person. He has great intentions he never wants to hurt anyone. But that's his flaw because he likes to put stuff ... like he just wants to please everyone. (LisaK)

LisaK seemed to hold very positive feelings toward her partner. She was able to overlook his transgressions because of how he treated her, otherwise. LisaK, like April, had also depended on her partner in the past. However, instead of emotional dependence, LisaK had depended on her partner for financial support, living with him when her parents kicked her out.

He was going to Macon. He was going back home, and he was like ... it use to be like 10 pictures of girls naked (in his phone) that they were hoes. So I'm like, "Huh? Who you? Hello? I'm right here?" So I broke up with him and we broke up for like two days and he was like, "Lisa, I'm so sorry" blah, blah. I was like, fo sho'. It's not like I had anywhere else to go. Who was I going to stay with? You know, who was I going to live with? So, I went with my brothers for like two days because I didn't want to be with him. But I know my brother. I couldn't, you know ... My brother had no problem with me being there, but like come on now ... my brother is 21 years old. He's handsome. He's doing his thing. I'm not finna block him like that, you know.

However, even when LisaK was no longer dependent on her partner, his previous support affected how she felt about ending the relationship after she learned he was pursuing other sexual relationships. She described experiencing feelings of guilt as she transitioned out of their relationship.

I told him I needed a break. But, like, this is for real. We were together but we weren't, because at the end of the day, like, you can't be a wing man and getting girls Instagrams and numbers and trying to get with them and stuff. So, I'm talking to (*potential new partner*). You feel me. And I would just break up with him all the time, because I really didn't want to be with him. I wanted (*potential new partner*). I didn't want to be with him anymore, but I loved him so much. I'm like, this man has done a lot for me. I can't do him like that. I felt bad. I felt unloyal. I felt guilty for feeling the way I felt. But I did it, so ... (LisaK)

Riley and LisaK believed ending their relationships made them disloyal, or meant they did not try hard enough to maintain the relationship. On one hand this could be because the women felt they owed their partner their loyalty, but in a bigger picture this could relate to an idea LunaBelle offered about black women having an "allegiance" to black men in general. (See Theme 6 for social influences affecting concurrency acceptance).

**Expectations related to the future and current status of the relationship.** Women weighed the current status and future potential of their relationships when deciding whether or not to continue a relationship in which the man was engaging in concurrency. Further, even aside from the relationship she was in, the value a woman placed on being in a relationship *in general* affected whether she accepted such partners. Tiffany gave her anecdote about why she felt women stay with men who have other sexual partners. These included sex and expectations regarding the current status and future potential of the relationship.

They like the sex (laughs) (pause) they don't see the relationship as serious. Or maybe they just feel real confident in their relationship that maybe one day it will just be an exclusive thing. (Tiffany)

Tony spoke generally about the emotions and expectations she felt drove African American women to accept partners who engaged in concurrency, and cited emotions towards the partner, expectations influenced by the status of the relationship, and beliefs about the future. However, she also clarified that she believed a man who wants to be with a woman would be monogamous.

Ummm ... because they think it's love. They think it's ... they think like oh we not together so there's not much that I can say, cause I mean we not together so there's nothing I can tell you. Because they think you know, if he loves me blah, blah ... But, like if somebody truly loves you they're not about to do no stupid shit and I just feel like girls think like 'oh he loves me and he just getting it out his system.' But I feel like any guy that ever been truly interested in me, even my ex-boyfriend that went to Morehouse started with the 'we not together so I can't say nothing type deal' but he still was like only fucking with me and that's how we got to where we were. (Tony)

Tiffany and Tony provided insight by offering both their personal experiences, and the observations they made of other African American women in their age group. Many of the women also described either personal experiences or friends' experiences with thinking or hoping a partner was "getting it out of his system" – or as Riley put it earlier, hoping he would "shape up." In other words, women hoped that if they stayed long enough the man would change and the relationship would be monogamous. Tiffany personally accepted concurrency because of other hopes about the future with her partner:

He did seem like a decent guy outside of the fact that he just wanted to have sex. He did ... just as a person ... seem like a good person (long pause). Okay and is it weird that I've thought about the idea of, if I did somehow end up pregnant would he be a good father for my children, pretty much? And I did think that ... because he had talked about his little sister and things like that and how he loves them so much and you know he just ... generally kids seemed really ... yeah. Not that I wanted to have kids but, you know just the possibility. So you know, hope for the future. (Tiffany)

However, while women romanticized the future potential of their partnerships, in reality women often described relationships that were not exclusive or clearly and mutually titled. These types of relationships were common among the women, with each woman recounting at least one casual relationship. Additionally, all but three of the women were currently college students. Tiffany's narrative highlighted how being young and in college influenced concurrency and concurrency acceptance by way of normalizing casual sexual relationships.

When I first had sex it was with a boyfriend of a year and a half, so I've just really been like that kind of girl. I've only had sex in relationships. It's never been like, oh we have sex first then we go into a relationship, or I just had sex with a dude that was with a friend – can I say cuss – (laughs) you know, like a fuck buddy type of situation until coming to college. But yeah so it was new for me I wasn't really comfortable with it. I'm like: does that make you a whore to be just having sex with a dude that you're not in a relationship with? I don't know. Like coming from where I'm from that's not ok. But I guess in college you guys are in these concentrated areas together. There's no parents around to tell you no. You know, you're kinda out of your elements, of your cities mindset. So it's just new for me, but I feel like I'm transforming. I'm a little bit more comfortable with that concept of having sex as just sex. I think I'm struggling with figuring out like, "Tiffany grow up, we're grown here" versus "is that really not okay" (laughs). I'm trying to figure that out now because I don't know and it's kind of hard with my mom too because I don't talk to her about that. I could never talk to her about that. And then me and my friends are all the same age and we're all just talking to each other like we don't know either. And everybody's telling everybody "it's okay, it's alright" (laughs) and you know that's also what guys try to say to girls to just have sex with them, "like we're in college!!!" And I'm just like, "This is true we ARE in college." But like is this what college students do? I don't know who got this idea, who bought it, who developed it. (Tiffany)

Tiffany was struggling with holding contradicting beliefs about whether engaging in casual relationships was acceptable, while also acknowledging the normative nature of these relationships in her social environment. This is significant because women in the study had more accepting attitudes towards casual partners who engaged in concurrency. Thus, if Tiffany is more accepting of casual

partners she may be more accepting of partners who engage in concurrency. In the same fashion, if her sexual network has more casual sexual relationships, it likely has more concurrency and concurrency acceptance.

As such, many women accepted concurrency because of the casual nature of their relationships. Tony described contradicting ideas about whether or not her partner's concurrency was acceptable. On one hand, she reflected on the fact that she made the choice to continue their sexual relationship after learning he had an on-and-off girlfriend. However, she also blamed him for not recognizing the fact that her emotions would develop over time.

I felt like I already knew what was up, so how could I be that mad? But at the same time I was upset. I feel like you like built this in me and now that I'm starting to react the way that a person that you built this up with acts you're trying to act like, 'What I do? What did I do?' But it's like, how could you not know that this is how it was gonna be eventually, over time? And that was just my deciding factor, and those are like some things that I thought about like (no) I know that I can't do this for him anymore, so that's how I know like it's dead. I'm just not ... like I can't deal with him. I couldn't do it with him no more. (Tony)

Like Tony, Michelle and Yonce both believed they could not fault their respective casual partners for engaging in concurrency because of their relationship types. Michelle, again, exhibited a fatalistic attitude toward partner concurrency. She felt as a casual partner, even if she tried to ask him to be monogamous, it would not influence the outcome.

I just feel like they're gonna do it anyways and I have no say-so until I'm actually a girlfriend. (Michelle)

I was okay with it because we're not in a relationship. And because, I don't know. I really don't know. I guess it's the ... I don't know. Mostly because we're not in a relationship, and I can't tell him ... well, I can if I wanted to, but I didn't really mind at the time. If when we talked about it he would have named more than one other girl, I would feel uncomfortable, but just one other girl. I don't know, it doesn't make me feel uncomfortable. (Yonce)

Despite Yonce's acceptance of concurrency from a casual partner, she still placed limits on what she would accept. Although she continued to have sex with him while knowing he had another partner,

she would have discontinued sex if she thought he had multiple other partners. Further, Yonce had different reasons for accepting a boyfriend's concurrency

... Especially at that point, because like I said I was kind of needy and I really just wanted to be in a relationship, so I was looking past a lot of stuff. Like, I even let him break up with me and get with her, and the fact that I even took him back after he broke up with me. That was just... different. I never did anything like that before. So I was looking past a lot of stuff. (Yonce)

Yonce accepted concurrency because of the value she placed on being in a relationship. Some women placed the same emphasis on having any type of partner. For Riley, being in a partnership with a man was routine. She said, "It would be times I would be thinking, 'I'm not trying to talk to you anymore.' But, it just feels weird not talking to *anybody*." Still other women remain in relationships because they are intimidated by being alone.

**Fears related to ending the relationship.** Many of the women experienced a need to be in some type of relationship that was driven by fears of not being wanted by other men, concerns about finding someone new, or being lonely. Kelly had insecurities about herself and whether other men (besides her partner) would want to be with her.

I feel like, sometimes, we basically get stuck. Stuck into a mind frame that we have to do this. We have to stay where we are. We can't move on. There's nobody else that wants us. It's a mean menace to get out of that. After I had my son, I felt like I was doomed. Like, nobody will want me. I felt like, nobody will want to be with me, that I couldn't do anything. (Kelly)

Tiffany felt these insecurities were common among African American women:

Some women stay for security. Just having someone you could call your man even though not on that level but still like, that's mine and I'm his on some level. And I feel like black women tend to be often insecure at times even though we don't want to admit to ourselves. (Tiffany)

Based on Tiffany's experiences, insecurity led African American women to believe having a partner, regardless of exclusivity, was better than not having a partner at all. Contrarily, April's doubts were not about her value, but about the quality of men she felt were available if she left the partner she already had.

And at least for me, I don't know why, but I am very picky so I think it's really hard. I can get a lot of ain't-shit niggas, like, all the time. I meet a lot of guys who just aren't worth my time. They don't know how to speak to women; they don't know how to speak, in general. It's just like ... I think it's hard, in my opinion. But I am really picky, so ... (April)

April was also concerned about starting over:

I have a fear of like finding someone else and starting over. I think that is a big one with my friends. It's like ugh if I leave "Jamel," I have to start completely over. You have to start everything over. You have to: find someone, figure out if you like them, go out. You have to slowly dish out personal information. Whereas, with this guy, he knows everything about you and your family already. With someone new you have to reintroduce, it's just a lot of work dating and I think people fear starting over at our age. Even if we are young, it's a lot of work. (April)

Riley echoed April's sentiments about having to start over with someone new. She preferred to stay with a partner who she was comfortable with – even if he was engaging in concurrency – rather than taking another partner and having to familiarize herself with his concurrency.

It's just being used to someone, just knowing what he is about. Comfort. So, you know what to expect out of him. So you probably don't get disappointed ... because you know what to expect out of the person. You already know what's going to happen, who he is going to deal with, what girl he is going to deal with. So you kinda know what to ... how to handle yourself accordingly if he does screw up. Whereas, if you starting with somebody new, you got to adjust to this whole different person, whole different lifestyle, whole different type of women, then train them. You got to get use to all this stuff and adjust yourself accordingly. (Riley)

This idea of staying with a partner because of comfort was familiar among the women. LisaK referred to it as "sticking with what you know:"

Long story short, I hated him when I found out. I wanted to have sex with someone else but that didn't follow through. I don't want to have sex with guys on campus because that's messy. You know how the (*consortium of colleges*) is! You know all of that! I'm too smart for that. I was like ugh stick with what you know. Gotta do what you gotta do. Use what you have, do what you do. (LisaK)

In this way, women were more accepting of concurrency from a partner who they already accepted concurrency from, since they were familiar with what to expect from that partner. Riley also offered another reason women stay: feeling like they have invested into a man.

African American women stay because fear of starting over. A lot of people I see ... a lot of situations ... I have a lot of friends who feel like they are scared of starting over with

somebody or even scared they put time into a person who they go let somebody else have them and then along with that person they get right. And it's just like, if I would've held on for just two months longer, we could've got it right. But what they don't understand is that that person is totally different from you, you know. So, fear of starting over or fear of letting somebody else have what they could've had. (Riley)

Loneliness drove women to develop emotional dependence with their partners. Women did not want to end relationships and find different partners. They also did not want to spend periods of time by themselves, without partners. Yonce felt this dependence was so strong that she let her partner mistreat her. She also explained what she felt it would take for women to discontinue partner concurrent relationships: another partner who was immediately available.

I really think it's an emotional thing, really. I think it's an emotional thing. Like sometimes we're just really lonely and we just allow somebody to mistreat us thinking that in the end they're going to come back and change for us. And umm ... I don't know. I don't think it's as easy as ... well ... at the time, we don't think it's easy. We want this to happen right then. We want to break up with him and then find somebody better. We don't want to take the time to be with ourselves first. So I think it's the fact that you don't really want to break up because you don't know if you're going to find somebody better. (Yonce)

Women's reasons for accepting partners who engaged in concurrency would theoretically be weighed against the risks of continuing partner concurrent relationships. However, despite the seriousness of consequences such as STIs and HIV, these consequences were not cited among the reasons women chose to reject partners who engaged in concurrency.

**Concurrency rejection.** The women in this study accepted concurrency in order to avoid being without a partner. Rather than be alone, they preferred to transition immediately into another partnership. Having another partner or potential partner was, indeed, one reason women rejected partners who were engaging in concurrency. Tiffany's experience reinforced the finding that women feel more comfortable leaving a partner who is engaging in concurrency when they know they have someone else.

I think it made it easier for me because I felt like I had a safety net to fall back on and I felt like I found what I was looking for, you know. Someone I can ... I don't want to say build with, because that relationship – he was the one who was older than me and

everything – but I feel like I had someone who wants to be my boyfriend and someone who wants me to be his girlfriend, yeah had what I was looking for with (*previous partner*) but didn't quite go that way (laughs). (Tiffany)

After learning her partner was courting other women for the third time, LisaK also ended their relationship. The difference the third time was that she had found another partner, which made it easier for her to leave.

I blocked him and then he told my brother to text me. So umm he's like I'm so sorry blah blah and I'm like okay fa sho', fa sho', fa sho'. And then I found someone new, honestly. Not trying to be mean or weird or just random. I found someone new who like ... he wasn't giving me what I wanted, and I'm 19 I have no obligations to any man. You know what I mean? (LisaK)

LisaK previously attempted to move immediately from this partner to another partner, but explained that her plans "didn't follow through." She was not currently having sex with her new possible partner, so this is not an example of mutual concurrency. Rather, LisaK's new partner was someone who could possibly provide her with "what she wanted."

Tiffany and LisaK eventually ended sexual relationships in which their partners engaged in concurrency because they found other partners. However, Kelly and Yonce were the only two women who offered experiences of immediately ending such relationships. For them, it was not finding another partner that influenced this decision, but rather learning that the man's other partner was serious. Kelly rejected concurrency because she learned her sexual partner was married. It was common for women to discontinue sex with their male partner if his other sexual relationship was serious – for example, a wife or live-in girlfriend.

I withdrew. I just withdrew. I didn't want to be a home wrecker. Not wanting to be a home wrecker. I'm not one to break up a home. I understand what people go through. If I had known he had a wife, I would have never messed with him. Because I wouldn't want anybody to do that to me. It was the MARRIAGE. (Kelly)

Likewise, Yonce ended her sexual relationship with a casual partner after finding out he had a live-in girlfriend with whom he was co-parenting. She did not know he had any other partners prior to

finding out, but explained that she would have been ok with it if he had another casual partner. Her primary issue was with the exclusivity of his relationship with the other partner:

It would have been okay as long as it's not his girlfriend! If it's exclusive, like that's the girl that you're with, then no. I can't do that. But if you're not in a relationship with either one of us ... I just felt like I was stepping in their zone. (Yonce)

However, there are a couple of exceptions to this theme. When a woman is dealing with a partner who previously engaged in concurrency during their sexual relationship, she might be more likely to accept his concurrency, even if the other woman is a girlfriend. April's partner was an old boyfriend who she stopped having sex with because of his concurrency, and who she knew had a current sexual relationship.

He is with this little high school-er. So I knew he was with this girl but honestly I could care less at that point in time. After all the stuff he put me through, I could really care less about this little girl. (April)

Finally, for one woman, rejection of a partner who was engaging in concurrency occurred because he had a girlfriend and because of some of the same reasons other women in the study were *accepting* partners. Tony's partner had a girlfriend who she learned about early in their sexual relationship. After temporarily ending their sexual relationship, she eventually resumed having sex with him, despite her knowledge of the other woman. It was when she started to feel emotionally attached to him, and when the sex became very passionate, that she felt the need to create distance between them. Essentially, Tony accepted her partner's concurrency at first because she saw the relationship as casual, and eventually when her feelings for him outgrew what she felt was appropriate for a casual relationship, she rejected him because of these feelings.

It was scaring me to be like emotionally invested in him. I just think that's why we fell off. He just was like, "I feel like she's routine." And I wasn't, and that was throwing him off cause he was like I don't let no girls talk to my mama. Like, I talk to her! Everything that you say that you don't do, we do it. "Girls don't do that" blah, blah, blah. If you leave something over here you don't even come over here to get it, you're just like, "Oh I'll get it next time." You got a towel. If you go to Morehouse gym and you know I'm not at home but you need my key to shower you know that you can get it. We're those type of friends. Sex was ruining us because it would be like passionate sex; it would be like

making love. Ew, that sounds so gross. Ew, I hate him. But it would just be that way. And then after I know that you're going home to her, and that you're not doing the right things so that was just like the it factor for me... nah it's not for me no more. Because... well when I really started liking him I think like that's when the cut off began for him.  
(Tony)

Another way to think about this is that Tony was willing to accept concurrency – even from a partner who had a girlfriend – as long as her relationship with her partner was based on sex alone. But once there was an emotional attachment, she was no longer comfortable with his concurrency and ended the relationship. Tony's narrative is a great example of how emotions, sex, and relationship type together influence women's decision-making, and also of how one woman can experience these factors differently than others.

**Theme 5 summary.** Women in casual partnerships and women who had defined boyfriends both accepted concurrency, but for different reasons. Women in casual partnerships felt their partner was entitled to have sex with other women, or did not feel they had the right to ask their partner to be monogamous. Women in more serious relationships accepted concurrency because of emotional attachment, either driven by guilt or love, comfort, and emotional or financial dependence.

Women also discussed general factors related to being in a relationship that influenced concurrency acceptance. Women who valued being in a relationship or feared being alone accepted concurrency for the sake of remaining in these relationships. Further, women in mutually titled and defined relationships also discussed accepting concurrency due to doubts that were better available men to choose from.

Finally, women in all types of relationships cited sex as a reason they continued the relationship with their partner – whether because they enjoyed the sexual experiences with that partner or because they did not want to be without a sexual partner, in general. In fact, women who valued having a sexual partner or having fewer lifetime sexual partners also accepted concurrency.

Women described ending partner concurrent relationships eventually due to finding another partner or immediately due to learning their partner's other sexual relationship was more serious. Otherwise, reasons for ending partner concurrent relationships were usually not related to the male partner's concurrency, at all. Instead these relationships were often ended because the relationship was dysfunctional in some other way. For example, even after acknowledging their partners' concurrency: Kelly ended a relationship because her partner did not accept her child; Tiffany ended a relationship because she felt the age difference between her partner and herself was taking a toll; and LunaBelle ended a relationship with her partner because she was only using the relationship to rebound from a previous partner. These are all reasons that likely would have occurred on an individual basis even without the occurrence of concurrency on behalf of the male partner.

**Theme 6: Women's attitudes, beliefs, and behaviors related to concurrency and concurrency acceptance were also impacted by specific social influences.**

Women expressed opinions about various social conditions that they believed influenced concurrency and concurrency acceptance. Most commonly, the women discussed African American relationship and gender norms, the sex ratio imbalance among African Americans, and boundaries related to dating men in other ethnic/racial groups.

**African American relationship and gender norms.** Many of the women spoke at length about the reasons they believed men engaged in concurrency. It is important to explore women's beliefs about why men engage in concurrency because the way a woman understands or justifies a man's behavior may inform whether or not she empathizes with him and accepts his concurrency. For example, women in this study who believed men engaged in concurrency because it was in their nature cited the same reasons for accepting concurrency from their partner.

LisaK believed men's concurrency was, in some ways, driven by historical conditions that have affected the African American family unit. She proposed that African American men view sex as an

escape from their everyday realities and that women have accepted concurrency because they understand the significance African American men place on sex. LisaK also believed that African American men have degraded and rejected African American women so much that women have adopted their relationship ideals due to fear of not finding a man if they do not conform.

There's always a reason for women to stay. I feel that it has a lot to do with the slave man mentality. You know, they say sex is a poor man vacation or escape. So, it's you knowing that your man likes sex. And Black men have a history of not really appreciating their women. They tear us down in their music videos and they kind of make us feel like we really have to conform to their beliefs of what a woman should be or is. And a lot of men right now aren't loyal. Some women are like, "I want a man. I want a husband." And a lot of times they sacrifice. It all depends on the woman, but I feel like black women, especially, conform to the black man's ideal because we feel like they don't want black women anymore, we are not going to find a good man. (LisaK)

Tony offered another perspective on why African American men might engage in concurrency, although her rationalization similarly involved men's sexual desire. She believed men had no motivation to stop, since they received pleasure from having various sexual experiences, and had the ability to continue doing so with multiple partners.

Guys do it because it's easy. It's honestly easy. As a guy you don't owe nobody nothing, and it's different experiences, and it's different girls, and you bout to see different bodies, and all that type of stuff. And they're getting away with it. For a dude that really wants to stop, it don't take nothing but the right female for him to stop. I don't know no man that's about to stop hoeing just because, "Oh I don't love these hoes no more." Like every nigga loves these hoes, 'til the day they die. That's just being realistic ... you have to just be realistic with yourself. Guys these days that's why my dad thinks my mom is like the shit with no smell. He just thinks, "I got the cream of the crop. My wife hella bad, she hella smart, she a natural boss." He just thinks so highly of her, and like, this is the type of woman that the guys want ... the hoes that the guys be messing with just be the hoes. That's all they be, so guys are like, "Why do I have to stop myself from messing with you... you ain't nothing but no pussy." (Tony)

Tony expounded on the nonchalant attitudes she believed men held about engaging in concurrency. She believed men had women who they respected, and "other" women who they had sex with but did not value or respect. This, again, represents the "main chick," "side chick" arrangement that is frequently portrayed in Hip Hop/rap media and commonly discussed among the women. Tony believed men approached relationships with these "side" women only as avenues for additional sexual

experiences. Thus, she believed men, in some ways, trivialized concurrency and saw it as harmless, even when they were in a mutually titled and defined relationship. Tony's beliefs might provide additional insight on why women accept partners who engage in concurrency: these women may adopt their partner's attitude that the "side" women are not important to him, and therefore do not threaten their standing in their relationship. This mentality, however, diminishes the risk a woman is at when her partner is engaging in concurrency.

Talor cited some well-known gender norms as rationales for men's attitudes toward concurrency. She believed men gain social status and express masculinity by having multiple partners, and that having greater social status further contributes to having more partners among men. This belief is actually supported by evidence that concurrency is highest among African American men with the highest incomes (Adimora et al., 2007).

I feel like men do it as a right to say, like, a right of passage almost. It's like, "Oh, I'm the man BECAUSE I have these multiple women." And I feel like it's only Black men, or, no... I would probably say all men. Men of power (laughs), maybe? Maybe men of power. Men who are coming on to power, or money. I feel like men who do have that certain level of clout, I feel like they don't necessarily feel like they're fulfilled with one person, unless that one person is just like, stellar. And there are those times where you do have, you know, where you do have that, but I feel like that's kind of rare, versus your man of money or power who probably goes out and steps out and keeps stepping out. (Talor)

Talor, however, did not place all the blame for concurrency and concurrency acceptance on African American men. She offered two factors related to African American relationships that she believed contributed to concurrency: (1) a lack of love and respect in African American sexual relationships and (2) low marriage rates among young adult African Americans.

It seems like, you know. When I deal with other cultures as far as their relationships, like I said, they genuinely tend to respect one another. Like my Hispanic friends, most of them are married (laughs) at 24, you know, 25 and stuff. With us, I know a lot of women that are like, "Why do I have to have sex with people and get attached to them?" I don't understand that. It doesn't make sense but they're like, you know, "Sex can be casual, no feelings, no love." That's also another thing that I feel like is in our culture. Like, and maybe, this can come from you, you would know: like, are other cultures like really like that where they're like you know, no, we can't show no love, we don't love these bitches, we don't love anybody, it's ex out on the love, ain't no love over here? (Talor)

Norms and patterns relating to the timing of marriage indeed affect rates of concurrency in a sexual network, and men who are unmarried are more likely to engage in concurrency (Adimora & Schoenbach, 2005; Adimora et al., 2007). If individuals in a network are getting married at lower rates or at a later age, then there are more casual relationships in that network. According to Michelle's experience, monogamy is not normative in these casual relationships. She further explained how expectations and boundaries in modern casual, undefined relationships might be different than they were in earlier years. Finally, Michelle saw the progression of African American relationships, specifically, as being less fluid and more categorical, as they do not become exclusive until they are explicitly defined and only at that point is monogamy expected.

A lot of my white friends, their boyfriends are super loyal to them. Even out here in Atlanta. They're super loyal. Even when going out, they don't look at other girls. They don't see, it's like tunnel vision. I don't see that loyalty with Black guys and I think it's partly because girls are hoes out here. I think that's why. I also think 'cause there's a lot of us. Guys know they can get somebody else. So, why not have my cake and eat it, too? And I think women take it 'cause I don't know. I would say... it's not that they don't know. I would say women don't know their worth, 'cause I accept it, but I wouldn't accept it with my boyfriend. Talking is talking. Maybe like back in the day when you were talking to someone you didn't want them fucking with anyone else, but in this day and age they're going to, until you're actually together. That's how I feel. I feel like white people also ... not even just white people but Asians, Hispanics ... whenever they're hooking up with someone they kind of consider them "with" them. But Black men are like, "You are not actually with me until I actually say that you're my girlfriend."  
(Michelle)

Michelle also believed concurrency was influenced by the behavior of some African American women who she later explained were "hoes" because of their willingness to have sex with men in relationships. She believed the overabundance of African American women and this willingness to have sex with men in relationships created to disloyalty among African American men. For some of the same reasons, Talor described dating in African American communities as vicious. In her experience, women do not respect each other's family units and relationships.

Unfortunately, that's kind of the way like Black females work. And I say Black in particular because other cultures deal with relationships just completely differently than

we do. I won't say that other races don't cheat or whatever, but for the women there's a genuine respect for other women. Like, Hispanic women, there's more of a genuine respect for just – this is a female with HER relationship, with HER family – than it is with us. Like, I've heard plenty of Black girls say, "I don't care if he got a girl, that's not my problem, not my issue. And if he do leave her for me, then bitch, you stupid. You should leave him alone." Like, I've heard that (laughs). And I'm like, oh my god. I can't believe there are these types of women out there. And there are. And there are many of them. And I just, I think it's just unfortunate. And I feel like with us, like we do that to each other a lot. Like, it's almost vicious in the African American communities, there just seems like there's something catty. And I believe, oh my gosh, I believe the man orchestrates it all (laughs). But, I feel like we (women) should take blame because we don't address it. We don't acknowledge it. (Talor)

Like Michelle, Talor also believed African American women hold nonchalant attitudes towards being the "other woman" when a man is engaging in concurrency. This might reflect the competitive nature of African American sexual networks that is created by sex ratio imbalance. Because there are fewer men than women, women who are in competition for men in the same sexual network may be more likely to accept men who are already in partnerships.

**Sex ratio imbalance.** While some women in the study were aware of an apparent mismatch in the number of African American men to women, they interestingly believed the sex ratio imbalance was "an Atlanta thing." Further, there was a trend among the women to interpret the imbalance as 'an overabundance of African American women' rather than a 'shortage of available African American men.' Michelle explained how she felt men benefited from the sex ratio imbalance.

I feel like Atlanta is so different from everywhere else because I feel like everyone's young and the ratio from women to men is crazy, because I feel like there are so many more women. So, I feel like a lot of guys ... if they have something going for themselves, like especially if they have money, like it's the number one thing with girls. So if they have that then that's already killing the game, and then if they have that AND looks, then they feel like, "I can get you I can get you. I can get someone else; if you won't do it, someone else will, type thing. I feel like that's all guys think about out here. (Michelle)

Michelle went on to further explain how she felt the gender imbalance was affecting both women's behavior and the way men treated women. Based on her experiences, the African American sex ratio imbalance causes women to be more committed than men to making relationships work. Further, men did not "treasure" their female partners.

'Cause a lot of girls out here they don't make you put in work. Like, I have friends and they'll do more work for a man than the man will do for them. And these guys are so cocky out here, and I think it's just Atlanta. My friends in California are not like this. And I feel like my boyfriends back in Cali, they treated me like (pause) special. You know what I mean? I feel like out here you don't feel special really. You know what I mean? You know, I've met so many guys who they treasure females. They have a good girl they treasure. Out here they just, they don't care. And I think it's 'cause the ratio. They know the ratio, they do. 'Cause they know when they go out they see so many girls, and then they know that even out here the friend's girlfriends are shady. So, like, I know I've seen like a guy try to talk to me, and I'll just have an attitude and tell them I'm not gonna have sex and I've seen them get at my friend and have sex with her. Ya know, it's like even the girls out here are so thirsty so ... I don't know. I think it's that new life now, ya know? Like I don't know, cheating. I don't know but everyone is having sex with everyone, it's gross. (Michelle)

When Michelle asserted "everyone is having sex with everyone," she was making a keen observation. Michelle was able to recognize the high connectivity that is characteristic of African American sexual networks, and was not the only one to do so. Angel reverberated her observation, saying, "Well it's Atlanta, everybody talk to everybody, basically."

High rates of concurrency within a sexual network increase the connectivity of that network. When men (or women) in that network have multiple partners, they are connected to each other through fewer partners. Connectivity is also increased when people in that network only have sex with others within within network. For an African American sexual network this can mean that African Americans are only having sex with other African Americans (which is often the case.)

**Interracial Dating.** Women in the study mostly described dating and sexual experiences with African American men. LunaBelle believed the relationship partner concurrency acceptance was influenced by African American women's refusal to be open to partners with different racial/ethnic backgrounds.

I think for Black women ... I guess I'll draw more on Atlanta Black women, because you know the ratio is not equal here. And then on top of that ratio you have tons of homosexual men. And so I think there's that scramble to ... especially when you confine yourself to "oh I need a black man." When you confine yourself to that there's this automatic scramble to get one and keep one no matter what's going on. Um you can have all these ... you can have your intuition telling you that he's having sex with 20

other people and if you feel like you need to have a black man then it's like "I'm gonna stay here." (LunaBelle)

LunaBelle was the only woman to have a relationship with a non-African American man in the previous year. When asked if she felt it is easy for African American women to date men of other ethnicities, LunaBelle replied:

I mean, personally, it has been for me. But I'm super open-minded. I like trying new things. Especially when I was at (*college name*), a lot of the women there wouldn't even think about it. Or they'd say, "there's something about black men." You know it's like this devout allegiance or something to Black men where it's like ... I don't know if it's the fact that it's their comfort zone or what. But, yeah most of the black women I talk to are like "I need a black man." (LunaBelle)

It is interesting to note that of the three sexual partners LunaBelle listed on her timeline, her non-African American partner was the only one who she did not claim to know or suspect was engaging in concurrency during the time of their relationship. When asked what was different between this partner and others, she replied:

Ummm (laughs) (pauses) (laughs) the one that I didn't check ... he's like in love with me. Like, in love. And it's like I wish I felt the same way about him but I don't. So, I know that when we were having sex he wasn't doing anything. He assured me. He proposed to me. He was a sweetheart. But like, the feelings weren't there. But yeah, he told me and I believed him. (LunaBelle)

Indeed, some of the women did have a preference for African American men. In fact, every woman who was interviewed except for LunaBelle stated that they preferred African American men. Women's openness to dating other men ranged from curious and wanting to try it at least once, to not opposed, to not at all open to the idea. April fell in the middle:

I prefer African American guys. I don't know, it's just something about them to me that other races don't really have in my opinion, but I wouldn't be rejecting others, I guess. Kind of, I just prefer. (April)

While April seemed to confirm LunaBell's notion that African American women hold some allegiance to African American men, Tony offered a much deeper analysis of why she preferred not to date men of certain other races/ethnicities.

I don't think I could date a white man. 'Cause I feel like... like, I saw the girl from "Orange is the New Black," or whatever that show is... she was in California and her husband is White and she got pulled over – like they were walking down the street – and he was like, "You have to be a prostitute if you're with him." Just racial profiling and I'm just thinking like he don't get it. He doesn't get that... like he sees it, but you don't know how it feels to be a Black woman with a White man. People already automatically think you ain't shit 'cause you Black. And on top of that fact, they really think you not shit because they probably think you did something to this white man, you gotta be a hoe, you gotta be a prostitute. You can't be like a strong, independent woman. You gotta be like an angry Black, couldn't-stick-with-a-nigga Black woman. And I just don't think that a white man ... he'll never go through anything I would go through. And on top of that, I don't want my ... like I'm proud to be black. I don't mind being black, you know. I wouldn't wanna be anything else. And I don't want my kid to be ... it sounds bad, but the world we live in, it really is like a thing of color. And I don't want my kid to be unaccepted or not... or confused. I don't want him or her to feel like, "Well I'm not accepted by the Black people because I'm too White, and I'm not accepted by the white people because I'm too Black." And either, "I got this super curly hair or I got this kinky hair and I'm light skinned but my daddy white, and my mama brown but I still turned out this color." Like, I don't want them to just be confused. I think we would have so many disagreements ... 'cause I feel so passionate about it. So, I feel like me being passionate is gonna make you uncomfortable. And I'm not about to lose in this situation. I live this life every day. I live the life of a Black woman every day, and the fact that I'd have to live the life of a Black woman with a White man is like, I don't know, yeah. And I'm attracted to White men. It's not even like non-attraction. It's just... I've never even, like, I've had White guys hit on me, but I feel like White boys hit on you to see if Black coochie is really what they say it is, type deal. Not because I'm interested in a Black woman type deal, but I don't know. I just don't think like ... they just ... just White men. It's not even like any other race it'd just be white men. (Tony)

Tony was hesitant to consider White men as partners for three reasons. First, she did not feel like a White man would understand her experience as an African American woman. Second, she did not want to have biracial children who she felt would, one day, struggle with identity. Lastly, she was skeptical that White men who approached her were not truly interested in her, but only wanted to have sex with her as a result of stereotypes about African American women's sexuality. For Tony, confining herself to dating only African American men went deeper than preference, and was more reflective of attitudes resulting from social conditions like historical racial prejudice and modern social realities. The lack of diversity among the women's partners may also have been due to the study location. LunaBelle was from the northern United States and alluded to the segregated dating dynamic in the south.

Yeah it's interesting, the whole dynamic of Atlanta – the south in general. It's interesting because I did notice that coming down here. It's almost like off limits, so I don't know, it's weird. (LunaBelle)

Women's reluctance to consider relationships with men in other racial and ethnic groups was at times a matter of preference, and at others, deep-rooted in beliefs about African American experience and identity. Their decision to have sexual relationships only with African American men was self-limiting. Due to the African American sex ratio imbalance, women who preferred to only have sex with African American men were in competition with each other for the African American men in their network.

**Theme 6 summary.** Women's acceptance of concurrency was, in part, due to decreased "dating power". Dating power among women was influenced by: African American relationship and gender norms; the sex ratio imbalance among African Americans; and boundaries related to dating men in other ethnic and racial groups. African American relationship norms that influenced dating power and concurrency acceptance included the lower rates and later age of marriage. Also, women recognized gender norms in their social environment that rewarded men for having multiple sexual partners and degraded women. Women commonly discussed how media (mainly rap music and videos) that were commonly consumed by African American women furthered these gender norms. Men were also viewed as being so motivated by sex that they could not resist engaging in concurrency. Participants believed women who did not conform to these normative ideals that supported partner concurrent relationships were left without a partner.

Women also recognized the influence of the sex ratio imbalance on power in relationships. Many women believed that, because of the imbalance, men would inevitably engage in concurrency and were encouraged to do so by the overwhelming abundance of African American women. Further, participants believed women were willing to have sex with men who already had other sexual partners as a result of the competition created by the sex ratio imbalance.

Finally, in some ways, African American women contributed to their own decreased dating power by choosing to engage in relationships primarily with African American men. By doing so, women were confining themselves to a sexual network with higher rates of concurrency, and norms that support said concurrency.

***Risk Reductive Behaviors (RQ 2.1 – 2.2)***

While partner concurrency acceptance puts women at risk of STIs and HIV, there are certain harm reduction behaviors that could be adopted to decrease this risk. The first is communicating with a partner about his sexual history and current sexual partners. Doing so could allow women to make informed decisions about: whether to have sex with a potential partner or continue to have sex with a current partner; whether to use condoms with a partner; or whether they should be tested for STIs and/or HIV. Women can also decrease their risk in these relationships by using condoms during each and every sexual experience with a partner who is engaging in concurrency. This research explored women's adoption of these two risk reductive behaviors.

**Theme 7: Communication about concurrency is usually male-initiated, and is influenced by relationship type and expectations, and whether women want to know about their partner's concurrency.**

This theme refers mostly to proactive communication about concurrency rather than communication that occurs as a result of a woman learning her partner was engaging in concurrency (described throughout Theme 4: Responses to Concurrency). Overall, communication with a partner about concurrency was influenced by: women's approach to information that made them uncomfortable, type of partnership, and whether the male initiated concurrency communication.

**Influence of women's approach to information that caused discomfort.** Women struggled with wanting to know about their partners' concurrency while at the same time wanting to remain oblivious. While women claimed to want to remain in the dark about their partner's concurrency, they became angry if their partner engaged in concurrency and then lied about it (as described in Theme 4: Responses

to Concurrency). Michelle did not want to know whether her casual partner, who traveled for extended periods of time, was engaging in concurrency while he was away. She only wanted him to use condoms with other partners and to be monogamous while he was home.

He may have sex with other girls. Well he can't, but if he does I don't wanna know. And use a condom. Because we don't. But we were; we used to use condoms. And then we stopped. So my thing is (pause) I don't wanna know and I don't wanna be in the same category as her. Like I... if he were to have sex I would want it to be while he's on tour. Don't bring that around me. (Michelle)

Women's feelings about not wanting to know about a partner's concurrency prevented communication from occurring between partners. Yonce knew her partner had another sexual partner, but did not want to talk to him about it because she did not want to know the extent of his concurrency. She was willing to accept his concurrency, but not with more than one other partner. Yonce avoided communication about concurrency because she knew if she learned there was more than one other woman then she would feel the need to discontinue their relationship, which she did not want to do at the time. Thus learning this information would put her in an uncomfortable situation.

I didn't ask him about his sexual partners because I knew, and I didn't really want to get in that conversation because I knew it would change my mind if I knew how many or, you know. So I didn't really talk about that. But we talked about sex. I knew that if he said that he was having sex with more than like me and another girl, I would stop having sex with him. Because to me that's just a lot. I mean, even two people is a lot to me. But I could accept there being another girl, but for there to be like three other girls, I wouldn't put it past him. I never really want to know. (Yonce)

Likewise, Riley wanted to "spare" herself from learning about her partner's concurrency, so she avoided asking him questions about other partners.

I don't think I wanted to know. I mean I knew some things about him, but I don't think I would've wanted to know. I think I would try to spare myself. And I didn't want him to think that ... you know how some guys be like, "She trying to ask me all these questions!" But I mean if I would've asked him that he probably would've lied. So I feel like the asking-about-a-girl situation is a little different. I don't know. I don't think I really wanted to know. I didn't ask him. I know I asked (*previous partner*). But, I didn't really want to know with him. I think that it was more so after dealing with (*previous partner*), I had a hold on my feelings so I was like ... it's certain things I'm going to do and its certain things I'm not. But that's one thing, I didn't ask many question, unless I knew the answers to them. (Riley)

Many factors played into Riley's choice not to talk to her partner about concurrency. Aside from wanting to spare herself, she also felt that by not asking her partner about his concurrency she would be able to remain in a non-emotional place, or 'keep a hold on her feelings'. Riley's communication with her partner was also influenced by her outcome expectancies. She believed that if she had asked her partner questions about whether he had other partners, he would be annoyed with her and she would not have received a truthful answer. Lastly, Riley described not asking questions to which she knew the answers. This suggests two things. First, Riley was not comfortable asking her partner about his concurrency if she felt uncertainty regarding the answer. Secondly, Riley initiated communication about concurrency in order to confront her partner about concurrency that she had already confirmed, rather than to gather information she could use to inform her risk protective decision-making.

Avoidance of concurrency communication was also influenced by women's hesitation regarding how they would want a man to inform them that he was engaging in concurrency. Tiffany explained that concurrency was acceptable at the beginning of a relationship as long as her partner was honest.

It's okay if there are other women when we first meet, because I don't really know you that well we haven't in any way exchanged anything personal, you know. So it's understandable that you would have other girls that you were talking to. But just let me know (laughs). (Tiffany)

However, when asked how and at what point her partner should communicate to her that he has other sexual partners, she realized there was possibly no effective approach that would result in a continuation of the relationship and concluded there was never a good time for communication about concurrency.

Um (pause) (laughs) (pause) that is a good question. I guess there's no good way because either way I'm gonna be like "what?" Or I may back off of him and not be fully into it like, "Okay so you're talking to other girls." So maybe that's not such ... it's never a good time (laughs). Never a good time. (Tiffany)

Tiffany, like Yonce, suggested she would struggle with wanting, but also not wanting, to end the relationship. Her conclusion that there was never a good time for her partner to be honest with her

about his concurrency because she might abandon their relationship suggested that she did not want to abandon that relationship. This supports an earlier finding that women sometimes valued being in a relationship or having a partner more than monogamy.

**Concurrency communication is male-initiated.** Women often waited for men to initiate sexual communication, especially regarding topics such as sexual history and sexual concurrency. These conversations were often initiated when the man was inquiring about whether the woman had other partners. Just as Riley believed her partner would be annoyed when she inquired about his concurrency, Michelle was hesitant to initiate communication about her partner due to fears that he might stop talking to her. Her approach to communication was to wait until her partner inquired about her other possible sexual partners, and then address his.

It makes it hard. I mean I'm not his girlfriend so I can't be questioning him 24/7 or there's going to be a bunch of ... he could just cut me off. It would just be more so when he brings it up to me like, "Oh are you mine?" or "Oh, who you talkin' to?" and then I'll be like, "I know you talking to a bunch of girls." That's the only time I really would initiate it. For the most part he initiates it, and then I just come back and ask. (Michelle)

Michelle further explained why her concern that her partner would end their relationship served as a barrier to communication. She did not feel that she would be emotionally hurt, but, like Yonce and Tiffany, she was simply just not ready to end their relationship. Further, she believed communication about concurrency should be reserved for more serious (Mutually Titled and Defined) relationships, rather than casual relationships like theirs.

It's not something that I'm like, if he breaks it off I'm gonna be heartbroken, but I do wanna talk to him. I know if he questions me about certain things I'ma be like you're not my boyfriend. So, there's certain limitations that you're just gonna have. (Michelle)

Indeed, Michelle's fear that her partner might "cut her off" was legitimate. When Talor attempted to ask her partner questions about whether he was having sex with other women, he withdrew. Talor's experience may provide proof that, in some relationships, asking a partner about whether he is engaging in concurrency results in changes in relationship dynamics.

I suspected it was another woman then. And once I started asking those hard questions, the excuses got weaker and weaker. And then the grand, kind, gestures just got smaller and smaller. So umm... they got smaller and smaller, almost to the point they were nonexistent. And that's when I was like, okay – I feel like, you're trying to make this relationship only about sex, but you know damn well I'm not going to accept it. But you're trying. (Talor)

In order to circumvent her communication barrier, Michelle waited for opportune times to ask her partners about other women. For some partners, that meant waiting for them to inquire about her sexual partners or ask that she be monogamous.

Yea and he's honest. He was having sex with girls in every city they're near. He was saying that he wanted me to talk to him and just him, and I was like, "No cause you are probably having sex with so many girls." And then he was saying that he's not talking to anyone and so I asked him if he's not gonna have sex and then he said yeah, but I don't believe that shit. I don't believe that. I don't believe it. (Michelle)

Michelle also described how she sometimes had to use alternative approaches to conversations about concurrency. In another relationship, Michelle and her partner addressed concurrency when another person was intruding on the time they were spending together.

However, if someone would text me really late he'd be like, "Who the fuck is that?" Or like vice versa. But, I don't think he talks to anyone. I feel like he has shown me that he really doesn't talk to anyone I remember his phone rang really late and it was actually one of his guy friends. However, I found some sex toys in his drawer. Like a few days ago. So I don't know how to handle that. I wasn't gonna ask him, though. I was gonna like ask him if he had some when we were in the mood and see if he offers. (Michelle)

Michelle was in the process of devising a plan to gather information about the sex toys she found, rather than ask him directly. In this casual relationship, Michelle seemingly walked on eggshells while trying to manage, both, her expectations, which were minimal, and her longing for more information. Women who did actively seek information by initiating conversations (rather than waiting for their partners to initiate, or passively seeking information) valued honesty from their partners. When casual male partners were honest about engaging in concurrency, women felt at ease, knowing their partner would tell them the truth about other women, or even condom use in his other partnerships.

He's really chill. He'd always answer directly and truthfully. It makes me feel more at ease because he's like bluntfully honest. So I feel like I can trust him. If he didn't use a

condom with someone and I ask him ... he'll never just willingly give me information ... but if I ask him he'll be like "no" or "yes." (LunaBelle)

LunaBelle noted that her partner did not willingly give her information without her asking questions. Tiffany had a similar experience and further explained:

Okay as far as honesty goes, I know some people have this idea that 'if you don't ask me, I don't tell you.' Yeah, I think that's disrespectful. I feel like if its something that is related to ... that's like, okay, say you have a girl from back home. No, I don't ask you about a girl from back home, because I'm not thinking that you're gonna be talking with me while you have a girlfriend back home. So, I'm not gonna ask you that question but you still should tell me because that's disrespectful to talk to me and have a girlfriend back home. (Tiffany)

LunaBelle's experience of having to ask her partner questions to get the truth was common in partnerships, even if the women did not inquire until after the man inquired. This finding speaks to the importance of strengthening women's self-efficacy to initiate conversations about concurrency. If women's partners are being honest about concurrency when asked, but not offering information until asked, then it is important that women initiate conversations that will elicit honesty from male partners. Like LunaBelle, Tony's male partner was also honest about his concurrency once asked.

He'd be annoyed but he would still tell me the truth. Like, if he was doing it, he was doing it. If he wasn't, he wasn't. And like he wouldn't be... he'll be annoyed if I act up like if I'm in the car and I'm just like screaming and hollering at him he'd be like, "Girl no." But if I'm just like you know. Like when I had the situation with the girl I just text him like, "Why do your hoes think it's okay for them to ever say anything to me. 'Cause clearly you're making them feel comfortable." And he was like, "No, tell me what she said." And I would tell him and he would be like, "I mean this part is true, this part isn't. But that's just what it is." But we've had bigger arguments where it's like I don't get that same reaction. Sometimes he'd be like, "I'm not gonna talk to you about it 'cause you don't know how to act." So, it just depends. (Tony)

Tony also described a partner who became irritated with her questions about his concurrency. However, her experience provides evidence that even if a partner becomes annoyed, he still may be truthful about his concurrency. Tony's experience contradicts Talor's, whose partner became less present after she started asking questions. The difference between their two relationships was that Tony was the "main" partner, and in her relationship, Talor suspected that she was the "side" partner.

This suggests men may be more responsive to questions about their concurrency with women who they are prioritizing or in relationships they view as more serious.

**Communication is affected by the manner in which relationships progress.** Whether women embraced communication about concurrency was also influenced by their partnership. Women were not passive about sexual communication in every partnership, and communication changed throughout the duration of each partnership. For example, Kelly felt the need to approach concurrency communication carefully in the beginning of her relationship, and her partner was not open with her at first either. She described how this communication became more straightforward as the relationship progressed. The more routine this communication became within the relationship, the easier it was for Kelly to talk about his concurrency.

At first, he wouldn't be honest with me. It took him a minute. He wouldn't say too much about it. But the more I asked about it, like, now all I have to do is call him: "So you been with anybody? Who've you been with? Nobody? Okay, it's just me." But at first, I couldn't be direct with him. I felt like I had to beat around the bush. (Kelly)

However, communication in LisaK's relationship seemed to progress in the opposite direction. Her partner began withholding details once the relationship became more serious.

He would tell me everything I wanted to know when we first started talking. He's just a guy. And he thinks girls get mad over every single thing and he thinks because I'm Caribbean I'm crazy. I am crazy, but that's not because of the Caribbean. So then he would try to sugar coat stuff. Like, he would tell me, but he would like to leave out certain parts because he didn't want to get in trouble or feel I would get mad at him. But just tell me the truth! (LisaK)

With Kelly and LisaK's partners, concurrency communication was related to the progression of the relationship. Kelly's relationship went from very casual, or "friends with benefits" to casual, or "boo." Communication about concurrency increased and became more comfortable as the relationship progressed. LisaK was "friends" with her casual partner before he became her "boyfriend." Communication about concurrency became less transparent in their relationship. This suggests communication about concurrency across the relationship continuum can be understood as occurring in

the pattern of a normal distribution curve. Very casual relationships with few or no expectations have very little communication about concurrency. Casual relationships, like those described as “boo” or “friends,” had greater communication about concurrency, and partners who were in mutually titled and defined relationships had little concurrency communication until a woman determined that her partner had engaged in concurrency.

In some partnerships, women believed it was their right to have open and frank conversations with their partners. In others, there was usually little to no communication between partners about concurrency. This is partially because, in many of these same relationships, there was also very little communication about the relationship, in general. Thus, there was no reason to discuss concurrency, because expectations and boundaries were implied. Michelle explained how relationship type affected communication in her relationships. After looking through her partner’s phone and finding he had not been pursuing other sexual relationships, she decided there was no reason to initiate a discussion with him about other sexual partners. However, she clarified that due to their relationship type, she would have felt comfortable doing so, if necessary.

I feel comfortable talking to him in the situation. Now if we’re just fuck buddies I’m not gonna ask you that because I know the level of our relationship and severity of it. But I know for a fact I could confront him about some shit. (Michelle)

It is interesting to note that Michelle earlier discussed a different casual partner with whom she did not feel comfortable communicating about his concurrency. The difference between these two partners is the emotional attachment she felt with each. Michelle could envision a future with the partner with whom she communicated about concurrency and not the other. Similarly, Riley’s communication with her partner over the course of their relationship was influenced by her emotional attachment to him.

Now I don’t feel anything for him. So, I feel like before I would probably ask him, “Oh, you good?” Trying to make a joke out of it to see if he would tell me about other girls, but if he’d tell me I’d probably get mad but then I’d still just be like, “Oh.” But right now I’m pretty much over it. I don’t even want to ask him because I really don’t care. (Riley)

This suggests women might be more motivated to ask about a partner's concurrency in relationships in which they have greater expectations. LunaBelle's experience with her partner echoed this finding. Regarding a partner who fit the category of a "friend" from whom she had expectations, LunaBelle's expressed comfort with communication, in general, and also about concurrency.

I don't know what makes it so easy to talk to him. Um I think its just that friendship that we've had for so long, you know I think about the growth that I've had just since 18, fresh into college, and the gist of my growth has been in these last 3 years. Same for him. And we've been friends for that part, that portion, of our growth. So I think just the fact that we've talked so much about so many other topics that just kind of comes naturally. (LunaBelle)

LunaBelle demanded this partner talk about concurrency, despite her earlier explanation that a different partner's safety made such conversations unnecessary. While she had greater expectations from this partner, their relationship was not titled, or clearly defined. Thus, her relationship with this partner fell in the middle of the communication curve where communication is high, while her relationship with her pervious partner who she titled as a "friend with benefits" fell in the area of the curve with less communication.

With him it's never really a lie it's just omitting the truth. Which I guess in turn is a lie. Yeah, he's like "Well I don't really wanna talk about it." Well, we're going to because we're having sex! You know, there are lines that you cross and you can't cross back over them. You can't be like, "Well, NOW I don't want to talk about it." We've already crossed that line, been over that bridge, like we're gonna talk about this. (LunaBelle)

LunaBelle discussed "crossing that line." This idea could illustrate another fundamental difference between her relationship with this partner and others. This partnership transitioned from a platonic friendship to a sexual relationship. For LunaBelle, this transition meant that both partners needed to be transparent about other sexual partners. In her more casual relationship this transparency was not necessary. However, most women did not initiate such conversations before their relationships transitioned from platonic, or otherwise nonsexual, to sexual. April and her partner did not talk about sexual history or other partners before they had sex. In fact, it was not until after they were already

having sex that she even felt comfortable asking him about a girl she learned he was having sex with while they were dating.

I didn't ask before we started having sex, which is horrible too. I was like this boy could be a hoe all know. But we talked about it after we started. It was like uh, I asked... Finally I asked him I was so scared to know because I was already in it. I was like, "How many people have you slept with?" He was like, "How many people have you slept with?" I was like, "Well I asked you." And he was like, "No more than 10." I was like, "Okay." And he was like, "What about you?" I was like, "I haven't slept with more than five people." I only slept with four people. He was like, "Oh that's it?" I was like, "Yeah." And he was like, "Were they all your boyfriends?" And I was like, "Yeah." Well no. One wasn't. No, two weren't but I had commitment with the other guys. He didn't run through his history. Well he did actually. He was like 3 of them were girlfriends, maybe two were one night stands, then crazy girl he was with while we were dating. Then I asked about her, because I knew her. (April)

While LunaBelle and April adopted positive communication practices, they did not communicate with their partners until after the relationship became sexual. Both April and LunaBelle also discussed mostly regular condom use with their partners (see Theme 8 for condom use in partner concurrent relationships). It follows that condom use may deter women from communicating with partners about concurrency.

**Communication about condom use over concurrency communication.** Often, women focused more on whether their partners were using condoms with other women, versus whether they were having sex with other women. When LunaBelle inquired about her partner's concurrency it was strictly for her own protection.

The most communication there's been has been him asking me about my partners and me asking about his condom use situation. You know, it's just his ego. I know he doesn't want me to have sex with anyone else. But he doesn't have the right to tell me I can't. So he's like, "Well who else is it? Are they good?" – type of thing. You know his ego asking questions and for me its like I'm strictly asking for my own personal knowledge. Like, you know, I know you're having sex with other people and that is completely fine. You know, we're not together. But be careful because I don't want you putting me at risk ... and yourself at risk ... mostly me though. (LunaBelle)

Honesty amplified Michelle's trust for her partner as well. She trusted her partner because of his honesty about his concurrency and his claim that he used a condom with other women. However, communication about concurrency with this partner occurred late, when no condom was available.

We did not (talk about other partners) until we took the condom off. And that happened when we were drunk and he didn't have one. And I didn't have one. And he asked me who I been with and this and that and I was like, I knew I was good 'cause I got tested... I got tested like a week before that and that was when I was with my boyfriend. So we were having ... it was in the middle of foreplay. He was about to put the condom on and he was like, "Fuck I don't have any more condoms." And I was like, "Damn I don't have one on me." And then I actually started it and I was like, "Who you been with?" I was like, "You probably been fucking other girls." He was like, "If I fucked girls it was with a condom." So he didn't... he didn't say like no I don't talk to girls. He was like yea but I use condoms all the time. (Michelle)

When asked how she felt about his response, Michelle replied, "I liked that he used condoms." Communicating about condom use seemed to deem concurrency communication unnecessary. When women's partners emphasized their condom use behaviors with other women, or in general, women were less concerned about their partner's concurrency.

He's super into getting tested and making sure condoms are always used. So it was more about him asking me had I ever been tested – which I hadn't at the time. And he'd been tested. We'd never go into like how many partners have you had, type of thing. It's interesting. He knew I wasn't having sex with anyone else. I don't know if he was doing the same. I didn't ask. I really didn't care. Just because of how safe he was. (LunaBelle)

The communication between LunaBelle and her partner about condoms and testing made her feel safe. Because of this communication and also because they used condoms every time, she was comfortable not communicating with him about his other partners. Thus, condom use and communication about condom use were two reasons women de-prioritized concurrency communication with their partners.

**Theme 7 summary.** Communication about concurrency usually did not occur until after a woman learned her partner was engaging in concurrency. Though proactive communication about concurrency could be protective for women, women often avoided it in order to avoid learning of or confirming their partner's concurrency. Learning of a partner's concurrency placed women in the often-

uncomfortable position of having to make a decision about whether or not to continue a relationship with that partner. Because most women did not want to end relationships, they avoided information-seeking behaviors, like initiating communication or asking questions about their partner's sexual behaviors.

Women were also unsure about how and at what point they should initiate conversations about concurrency with their partners. Fears that asking too many questions might cause male partners to end the relationship often influenced women's communication practices. In more serious or established relationships, these fears were unfounded, but in some casual or new relationships, these fears were valid. Thus, communication about concurrency was mostly male-initiated. Women often waited for opportunities when their partner made inquiries about concurrency to make their own inquiries. When women's partners did not ask about their concurrency, they had to devise another way to determine whether their partner was being monogamous. Some of these ways are discussed in Theme 3: determination of concurrency, but regarding communication, this often meant asking indirect questions that produced information from which women could make informed conclusions. In general, women lacked self-efficacy to initiate conversations about their partner's concurrency. However, this self-efficacy was largely impacted by relationship type.

Communication patterns among the women in this research mimicked the shape of a normal distribution curve. Women in very casual relationships described very little or no communication about partner concurrency. These relationships were not expected to progress, and sometimes concurrency was implied for both partners, not only the man. Women in casual relationships that were more established, and with more expectations had greater self-efficacy to initiate conversations with their partners about concurrency, therefore these relationships had greater communication. Serious relationships that were clearly and mutually defined also had very little communication about

concurrency. Again, in these relationships it was implied that partners were monogamous, so communication about concurrency was deemed unnecessary until a partner's trust was breached.

Finally, condom use and communication about condom use also impacted communication about concurrency. Women whose partners were honest about engaging in concurrency but expressed using condoms with other partners did not feel continued communication about concurrency was necessary. Likewise, women also did not communicate about concurrency with partners with whom they used condoms (even if only at the beginning of their relationship) or partners who they believed were "safe." Condom use in these partnerships is discussed in the next section.

**Theme 8: Condom use is influenced by risk assessment at first, but is later influenced by emotions and comfort. Also, once condoms are discontinued, they are rarely reinitiated.**

Condom use was not solely based on partner concurrency. Many individual- and interpersonal-level factors influenced whether women initiated, discontinued, or continued use of condoms.

**Individual-level influences.** There were a few women who had very unique reasons for using or not using condoms regularly. For example, Kelly initially used condoms with her partner who she knew engaged in concurrency, but discontinued use after they both became unemployed.

At first, he and I used protection. And it got to the point, both of us had lost jobs, we were both horny, couldn't afford condoms. So then it just became a distant thing as far as protection. So I can say August is when we stopped using protection. Because both of us lost our jobs in August. So that's when we stopped using protection as far as pregnancy wise, I was on birth control up until August. (Kelly)

April could not use birth control due to certain health conditions. Despite her partner wanting to discontinue condom use and use birth control, she made sure they used a condom every time in order to avoid pregnancy. This exemplifies another trend among women: women were more concerned about pregnancy than they were about acquiring an STI, even when they knew their partner was engaging in concurrency.

I am not trying to get pregnant. We talked about birth control but I have a lot of health problems, so I really cant be on ... like my mom doesn't know I have sex. No one in my

family does, so if I was to like go on birth control it would have to be ... like I would have to do it by myself, and stuff. I just have a lot of health problems: I have heart problems, asthma, blood pressure problems. With my heart problems, I just can't be on a lot of stuff, with my blood pressure and my heart problems. In the past couple months I have been in and out of Emory in the hospital and stuff. Yeah, so he knows. When he brought it up I was like, "You know I have to do like behind closed doors and I really don't know the side effects with my health. I am already not allowed to do certain things so it's just really not going to happen." So like, he doesn't understand, but it's never no use of condoms. (April)

For April, the possibility of serious health complications resulting from birth control use influenced condom use. LisaK also used condoms in order to avoid health problems resulting from unprotected sex. Although she did not initially use condoms with her partner, she introduced condoms after she started getting vaginal infections, and because she believed her partner was not practicing healthy hygiene.

When I started getting UTIs and bacterial vaginosis, yeah. I said we about to wrap this up. I don't have time. My parents don't have time. Like the second time I had an UTI, I had it for three months. And I had to go to the ER.

Yonce's previous sexual experiences were her primary reason for using condoms with her partner. Because she had always used condoms in the past with all of her previous partners, condom use was normative rather than something that needed to be discussed or negotiated. She felt so strongly about using condoms that she made it a point to carry condoms with her.

Well ... I guess I just use condoms really. I had never had sex without a condom, so to me that was just how it went you know. You put on a condom, and then we have sex. I didn't really... you know. In my last relationship, that's what I used to. I just thought it was just what everyone did. And even after that, he still tried to have sex without a condom. He said that's what him and his ex-girlfriend did. They "were together for four years," and his "pull out game was strong," or something like that. But I wasn't ... I didn't understand. So, I'd always have one, a condom, anyways. He'd be like, "Well I don't have one, so what you want to do?" And if I didn't have one, we didn't have sex. Because, at the time, I just didn't, I never had sex without a condom. (Yonce)

Aside from these individual-level factors that influenced condom use, women's condom behaviors shared many characteristics that were related to their partners or relationships.

**Assessing partner's risk.** Women assessed their partner's risk in various ways. Approaches used to determine whether unprotected sex with a partner was safe ranged from evaluating his social norms to asking about his concurrency (see Theme 7 for communication about concurrency). Three factors influenced Yonce's condom use: the type of relationship she had with her partner, her assessment of his risk, and her own condom use norms.

We weren't in an exclusive relationship, and I didn't really know anything about what he was doing sexually with other, you know, women. Which, I figured he was having sex with other women and I really didn't feel safe having unprotected sex with him like that. And plus, at that time, it was just like really normal for me. (Yonce)

Yonce did not feel safe having unprotected sex with her partner, specifically. Angel considered her partner's biological sex, alone, when assessing his risk. She believed all men engaged in risky, unprotected sexual behavior with multiple partners. She also believed rumors about the rates of HIV at her high school.

To me, I think boys will fuck anything that's walking. They'll get head from any bitch. Boys don't even use protection when they get head. And then its high school, people gonna have sex with everybody. And then it's like ... and then I heard ... I heard (*high school name*) got the highest ... I think (*high school name*) got more kids with AIDS. I think it's (*high school name*), or maybe some other school. (Angel)

LunaBelle assessed her partner's risk by evaluating his social norms. She already knew her partner was engaging in concurrency and her only expectation from him was that he used condoms with his other partners. While in a social setting, she learned his friends were not using condoms and confirmed that it was best for her to practice safe sex with him.

It's so interesting. Since he's a (*fraternity name*) now and all his friends are (*fraternity name*), it's kind of like ... ugh it makes my skin crawl to hear them talk about some ... like there's guys in his friends group that are like, "I won't have sex if I have to use a condom." And to know the rates of STDs ... especially in Atlanta, especially among African American people, to say that is like: oh my God, you have something. There's no way. And so yeah I'm like, alright let's condom it up because I don't know what's going on with you. (LunaBelle)

Tony and her partner had sex one time before she left the country for four months. She and her partner used a condom the first time they had sex. However, although she acknowledged that she

believed he was having sex while they were separated, Tony still did not demand condom use when they resumed their sexual relationship upon her return. Not using condoms despite her partner's activity during their separation put Tony at risk as she continued her relationship with this partner.

And it was just like ... we wasn't ... I wasn't messing with nobody else. And at the time, he said he wasn't either so that's all I could go off of, was when I got home until like after we got into the argument, after I threw the money at him, that's when, up until that time, I could believe that you might not have been messing with nobody else.  
(Tony)

After their separation, Tony judged whether condom use was necessary by communicating with her partner about his other sexual partners. At the time of the conversation, she was satisfied with his response that he had no other partners. She eventually learned that he was still having sex with other women, and at this time Tony still did not demand condom use. She continued to explain that her emotions largely influenced her safer sex decision-making with this partner.

**Assessing emotions, including comfort and doubt.** For many women, condom use behaviors were largely influenced by emotional feelings for their partners. Tony's feelings for her partner, specifically being in love, influenced her condom use. She described her actions as being driven by her feelings for him, but also stupid, in hindsight. Also, like other women in the study, Tony was not concerned about her risk of acquiring an STI or HIV, but did address her concerns with becoming pregnant if her partner did not withdraw.

So yea... like with my partner that I had from September to May we didn't use them because that's so ... 'cause like, you my man and your pull out game better be strong. We used them like once but I was so in love, I was stupid. (Tony)

LunaBelle only had unprotected sex with her partner once, and cited "comfort" as the reason she did so despite knowing of his concurrency. Interestingly, her comfort with this partner may have also been a protective quality of their relationship. Because she and her partner were comfortable with each other and the status of their relationship, LunaBelle had open discussions with her partner about

his other partners. Knowing more about her partner's behavior may have led to greater condom use, and also getting tested for STIs afterward.

Well I guess I shouldn't say 100% use. There's been one time that we didn't. But yeah I was scared afterward and I went home and got tested so ... and I was clean. So I was like okay I don't wanna do that ... we're good, let's not do that again (laughs). Yeah. I was just really comfortable with him at that point. Like since we been friends for so long it's like I can fart in front of him. It's just that comfort level. Yeah I guess emotions started flying because it's been ... I wanna say like a month and a half into it. So yeah I guess the comfort level. (LunaBelle)

Women even considered their feelings for their partners when making preemptive decisions about their condom use. Michelle knew that her growing feelings for her partner would one day affect their condom use. While they were currently using condoms because of his concurrency, she knew that the more she started to like him the less they would use condoms.

Eventually I would wanna take the condom off but, we both gotta get tested. Which is crazy because I mean I've had one night stands and never used a condom, which sounds gross, but with him ... with him, he's probably ... I don't know, I just don't know, you know (laughs). I think that he's always having sex (laughs). I feel like, I think he's always having sex like I think when he's off stage he's having sex. So yeah, the feelings will definitely affect it 'cause the more feelings we get then most likely we're probably not gonna use a condom. (Michelle)

Like LunaBelle, having information about this partner's concurrency may have encouraged Michelle to engage in safer sex with him. While Michelle's plan to get tested before discontinuing condom use does decrease her risk of complications resulting from STIs, and of passing an STI to her partner, it does not decrease her risk of acquiring an STI. If her partner continues engaging in concurrency, getting tested will not protect Michelle in future sexual encounters with this partner.

Finally, women's condom use with partners who were engaging in concurrency was informed by the same doubts that informed acceptance of these partners' concurrency. Talor continued to have sex with her partner without a condom because she doubted her suspicions that he was engaging in concurrency.

I want to say after the first time, we didn't use condoms. But, it was still under the pretense, like even though I had these suspicions, it was still under the pretense that

we're being exclusive. And you can't trust somebody ... I wouldn't think you could put *yourself* at risk. I wouldn't think you want to put your own self out there considering the type of people we ... we're both very health conscious people. We jog, and we both like, eat healthy. Like, we're both those type of people. But I really did suspect that you're full blown trying to carry on another relationship. I just ended it all together rather than even like, try to like, use condoms. Because I know we both personally don't even care for it. We don't like condoms. It's just a personal decision. So we'd rather sleep with people we could trust. That was kind of like, the basis of you know, of us getting to know each other and him not pressuring me about sex. So the first time, we did use a condom. For whatever reason, the first time seemed like, "oh we should definitely use a condom. You still don't know this person." And then after that, it's like, "Oh, I know you. I trust you with my life (laughs)." I don't know what changed. I don't know a couple weeks. But still. (Talor)

Talor also held her relationship expectations in opposition to her suspicions about her partner's concurrency. Because she associated non-condom use with exclusive relationships, she had unprotected sex with her partner even despite believing he was engaging in other sexual relationships. She was so adamant about not using condoms, that she eventually broke up with him rather than discontinue condom use to accommodate for his concurrency. Talor's experience is an example of how hard it was for some women to reinstate condoms with a partner after condoms had been discontinued. As illustrated throughout this theme, condoms were often only used during the first sexual encounters. LisaK and her partner were intoxicated the first time they had sex. She did not remember the encounter, but her partner told her that they did not use a condom.

I was just really drunk ... I don't remember if we put on a condom or not. So he had.... I guess he said we didn't ... so I went with that. Because I don't really do that unprotected. You know ... because hey ... I had Chlamydia so I don't really play around with that and my parents would kill me if I got pregnant. But after that we just stopped using condoms altogether. (LisaK)

Whether used during the first sexual encounter, during the first portion of the relationship, or not at all, most women discussed not using condoms any more after they were discontinued. Despite the fact the LisaK considered herself to be a regular condom user, condoms were never introduced back into her sexual experiences with this partner.

**Males initiated condom use.** Initiating or reintroducing condoms was not cited often as a response to known or suspected concurrency with partner. This finding is not surprising, considering condom use was largely male-initiated. Men initiated condom use for a number of reasons. Riley's partner proposed condoms after assessing her risk. He believed she was at a greater risk of acquiring HIV, not because of his concurrency, but because of the place she lived.

I think we both had an understanding that there wasn't a move we were going to make, or even risk STDs, HIV, anything like that, or even children. He would always tell me, you know, talking crazy, he'd be like, "Bae, I know I heard that somebody that I knew got the gangsta from Atlanta." Talking about HIV. So that's why he was like, "You better be careful." He's always mindful. He would be like, "You need to be careful out there."  
(Riley)

While Riley and her partner discussed condoms outside of the context of the bedroom, this communication took place after they had already begun their sexual relationship. Talor was the only woman to describe discussing condoms with a partner before their first sexual encounter. Even still, her partner initiated the conversation by proposing condoms in order to avoid pregnancy rather than STIs.

We talked about it a couple times, and our first time we actually used protection. Yeah. We actually used it. We talked about it beforehand only briefly. And only because he said like, like I said, we flirted around with it before we actually ever had sex. So he would say things like, "I know the first time we probably have sex, I would probably get you pregnant. So we're going to make sure that you get on birth control and I would have to wrap up. Like I said, because I already know. I think the sex between us would be awesome. Our chemistry was awesome." And it was. And we had grown a really, really tight chemistry. (Talor)

Most women, however, did not discuss condom use with their partners, beforehand. Instead decisions about condom use were made at the beginning of the sexual encounter.

He took it out, but I think we both were on the same page because if he didn't take it out we would've had a problem. I would've been like, "Oh you don't have one?" Because some people get offended when a guy take out a condom. I don't get offended at all. I know females that be like, "What you got that for?" I'm like, "Why wouldn't he have it?" (Riley)

Like Riley, women described letting their partners lead condom initiation, and observing their partners to make sure condoms were actually used. Although condom use was usually male-initiated, women often made claims like, “we were on the same page.”

So I went over there. I was hanging out with like all his – he has two other roommates – we were hanging out and drinking. And then we just went back to his room and we were talking for like some hours. And we were really drunk (laughs). And then we just start kissing. And ... yeah. And then he pulls out a condom and I didn't say anything. So that's pretty much the go ahead. (LunaBelle)

He just put it on. There was no contact, thank god (laughs) and there was no conversation to be had. I didn't have to talk you into putting on a condom. (Tiffany)

We used a condom. I saw him pull it out his pocket, so I knew I didn't have to say anything. (Michelle)

While there has been a lot of research associating condom use with relationship power, the women in this study were not disempowered regarding condom use. Rather, male initiation was more of a norm that women were willing to challenge if necessary and when they wanted to. Further, all of these women were in casual relationships. In fact they were in three different types of casual relationships: LunaBelle's partner was a “friend”; Tiffany's partner was a “fuck buddy”; and Michelle's partner was a “boo”. It was typical for women to use condoms more regularly in these types of relationships, especially at the beginning. Though, as Michelle made apparent, women eventually began to think about discontinuing use.

**Condom initiation as a response to concurrency.** Although women were not disempowered regarding condom proposal or use, they did understand the power that could be asserted by demanding condom use or non-use. Michelle was the only woman to report using a condom in response to a partner's concurrency. However, she did not introduce condoms because she was concerned about being exposed to STIs or HIV. Rather, she demanded condom use to assert power over her partner and guilt him about his concurrency.

We used condoms. We used condoms in the beginning then... no we didn't. We didn't use condoms. Never used condoms. Every now and then we would, 'cause I would get a

yeast infection, you know, or something like that going on down there. Yea and if you have too much raw sex it can kinda fuck up down there, too. So every now and then we'll switch it up. But mostly we didn't use condoms until I found out. And I would always make fun of it too like, "Oh, you gotta put a condom on, I don't know where your dick been." And I used to never say that because that was my boyfriend. But now I say it, like "I don't know where your dick been put a condom on" (Michelle)

Once Michelle learned of her partner's concurrency, she demanded that he use condoms in order to shame him, and show him that she gets to make the decision about condom use solely. Riley made a similar correlation between power and condom use. She believed men demanded unprotected sex as an assertion of power.

I just feel like most females feel like a guy who doesn't use a condom means that he trust her not to be with anybody else, and I feel like its coming from a controlling stand point, because in my first relationship we didn't use condoms. I felt like he really trusted me, and he knew I wasn't dealing with somebody else. To me that wasn't a sense of love. Because like I said he knew I wasn't dealing with someone else so he will probably use condoms with people who he didn't know that with, but he wouldn't use them with me. Because he knew, "She better not be talking to anybody else. She not talking to anybody else, and I trust her enough not to not use protection with her." I felt like after a while it started to be a sense of control, because he would be like, "We ain't using condoms because you not messing with anybody else." See what I'm saying? (Riley)

Women recognized the power that they could assert by demanding a condom and the power that was taken away from them when their partner demanded non-condom use. This, again, supports findings that women were not disempowered or discouraged in condom negotiations with their partners.

**Testing used as a substitute for consistent condom use.** Despite being empowered to propose and use condoms, consistent condom use was not common among the women. As relationships progressed, condom use was discontinued or became more intermittent, even despite male partners' concurrency. Once condoms were discontinued in partner concurrent relationships, women's primary method of protection was STI testing. Women used STI testing as substitute for condoms. While STI testing is recommended, it does not protect women against STIs.

I go get tested faithfully. I go get a pap smear every year. First of all, I'm just the type of person, I like to go and just do like annual tests. Because you know, I'm sexually active.

And I know like, sometimes I don't always use protected sex or whatever, especially if it's with a partner I trust. And I actually caught an STI from my baby father so I know don't trust anybody. Like, long term relationship or not. I was pregnant with your child and you cheated on me. Yeah. So it's like, after that, it's like, I don't need, you know. You can't say really completely a hundred percent that any human is without flaw. So I just, I would always you know, protect myself by doing things like going to get tested, making sure that I'm still okay. (Talor)

Talor's experience with being diagnosed with an STI increased her STI risk perception. However, for Talor, this did not encourage condom use. Rather her previous diagnosis influenced her to continue to receive further STI screening. Kelly also used STI testing as a form of "protection":

You should know that each one of those dudes, I go to the clinic with them. At the same time, I go with them. They laugh at first, but I'm ... look I need that protection. I don't care. Some of them will be like, well, I haven't had sex in such a, okay, well let's just go to the clinic. That's okay. Just go to the clinic. (Kelly)

Getting tested with a partner guarantees that each individual will be sure of their partner's results. However, getting tested with a partner does not offer a woman continued protection as her partner continues to engage in other sexual relationships. Kelly continued, explaining how her testing behavior was informed by her: distrust for her partner, past experience of receiving an STI from her child's father, individual concurrency, and condom use with her partner.

To be honest, I don't trust it. Ever since my kid's father, I don't trust it. So he and I go get tested at the same time. Because I don't want him to say, "Oh, I went." Well "Oh, I want those results. Where are they?" And then I suddenly get blocked. I personally go and get checked every 3 to 6 months just to be on the safe side. Because I've been with him, and I admit I've been someone else, but I use protection with them. And he's the only person I don't use protection with. It's just a trust thing. It's just an instinct thing telling me, yes, I will get tested just to be on the safe side. (Kelly)

Riley even used the STI status of her partner's other sexual partner as protection. Her partner frequently reported his other partner's STI status in order to assure Riley that unprotected sex was safe.

I think over time we stopped using condoms, though. I think it was because, like I said, he knew I wasn't dealing with nobody and I knew I wasn't, and he was like "I know I couldn't have anything" because you know his baby momma had to get checked since she was pregnant. You know? He was like, "Yeah she had to go get checked and she clean, and I'm the only one person she dealing with." So it was just like ... I don't know ... and I think it was what I was used to, because I was used to not dealing with condoms with my boyfriend so it was just like ... I was being young, I was still naïve. (Riley)

Further, like Yonce, Riley's previous experiences with condom use informed her condom use behaviors. Condom use was not normative for her because she did not use condoms in her earlier relationships.

**Condom use as a result of STI diagnosis.** Finally, condom use was often initiated after contracting an STI from a partner. Some women, like Riley, already knew their partners were engaging in concurrency when they were diagnosed with an STI. In this way, testing motivated some women to initiate condom use by reminding women of the possible consequences non-use. Riley talked about how getting an STI from this same partner finally motivated her to demand condom use.

But yeah that's when I start using condoms, like I just cannot. I would never want to go through that feeling ever again. I feel like I was putting myself in jeopardy. So yeah I wasn't playing with him. I initiated it. I'm like, "You got a condom?" He said, "no," and I told him I had one. (Riley)

Indeed these possible consequences are potentially serious and long-term, even if not HIV. LisaK described her experiences with being diagnosed with an STI that she received from a partner three years earlier. Due to this experience, LisaK tried to use condoms with her partners, though she was not using them with her current partner.

I've had Chlamydia once, because when I was 15 I made this guy wait 8 months to have sex with me, and he said he put on a condom, and I heard the condom wrapper, and then I'm having sex with him and I get up and I'm just about to give him oral. And I'm trying to find the condom. So I'm like "Where's the condom?" "Oh, I took it off." SO mad at him. Three years later I found out I had Chlamydia for three years. It's cool. I got rid of it, but I just hope (pats stomach) I'm not scarred by it. Yeah so I'm already like hesitant ... (pause) (LisaK)

Even still, some women continued to have unprotected sex with partners despite recognizing the risks. LisaK experienced these risks first hand, and although she was concerned about the long-term effects of her STI diagnosis, she still continued to have unprotected sex with her partner who was engaging in concurrency.

I'm gonna woman up. If I get something, I get something. But it's because ... when you think about it, people ... like, that was like my husband literally. Like that was mine, he

was me. Does that make sense? So I feel like the title stuff didn't matter. So it's like married people do it all the time and they still get burned. You can get burned anytime. The condom can rip, split, get stuck in you. You still get burned. (LisaK)

LisaK had a fatalistic attitude toward acquiring an STI. This attitude affected her attitudes toward condom use with partners who were engaging in concurrency. LisaK compared her "boyfriend-girlfriend" relationship to a marriage, and reasoned that because the relationship was serious, and condoms are not used in serious relationships (like marriages), acquiring an STI is just an unavoidable risk that she had to take.

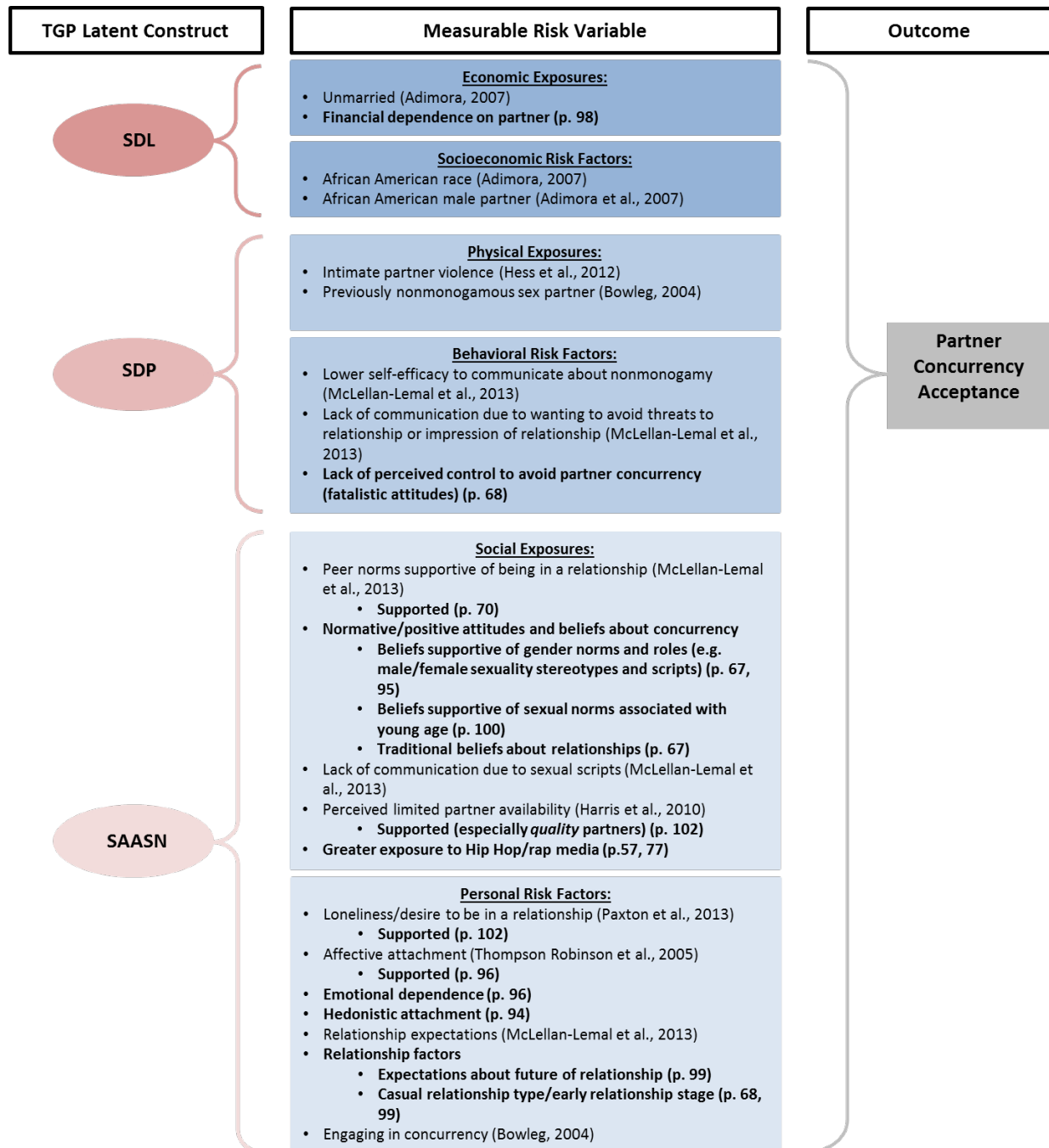
**Theme 8 summary.** Women's condom use in partner concurrent relationships was affected by individual- and relationship-level factors. On an individual level, condom use was negatively impacted by women's economic situations and hedonistic attitudes, and positively affected by health complications that either occurred as a result of non-use, or that would be exacerbated by pregnancy. On an interpersonal level, women were motivated to use condoms when they assessed their partner to be risky because, for example, he was not using condoms in his other relationships. Non-use was encouraged by feelings of love and other emotional attachment. Feelings of comfort discouraged condom use by promoting closeness, and also encouraged condom use by promoting greater communication between partners about concurrency. Women also experienced feelings of doubt regarding their suspicions about their partners' concurrency, often leading to continuation of unprotected sex. In fact, once condoms were discontinued, they were usually not reinitiated.

Condom use was not necessarily associated with any specific relationship type, with one exception. Women in serious relationships believed condoms were unnecessary because of factors they believed were inherent to their relationship type – commitment and monogamy. Overall, regardless of relationship type, women reported using condoms more at the beginning of relationships and less with partners who they had sex with often.

Men usually proposed and initiated condom use, and mostly did so during sexual experiences; partners rarely planned condom use before beginning a sexual relationship and also rarely discussed condom use in relation to concurrency. Women reported getting tested for STIs and HIV as a replacement for condom use, often making statements like, “We don’t use condoms, but I get tested all the time.” Finally, while women did not initiate condom use after learning a partner was engaging in concurrency, women did report using condoms after receiving an STI from a partner. In fact, women who had been previously diagnosed with an STI described more consistent condom use behaviors, in general.

#### ***Final Partner Concurrency Acceptance Model***

Based on the qualitative findings discussed in previous sections, a final version of the concurrency acceptance model is proposed here (see Figure 6).



**Figure 6.** Final Partner Concurrency Acceptance Model. SDL = Sexual Division of Labor; SDP = Sexual Division of Power; SAASN = Structure of Affective Attachment and Social Norms.

## Phase II: Scale and Material Development

### Scale Development

Two scales were developed based on the literature review and the qualitative findings from this research. Table 2 provides an overview of these scales:

MEASURE	DESCRIPTION	PROPERTIES	SCORING	RANGE
Concurrency-Related Knowledge	Knowledge related to concurrency and the African American gender ratio imbalance.	7 items	1 = True 0 = False 0 = I Don't Know	0 – 7
Attitudes and Beliefs Partner Concurrency	Attitudes and beliefs related to concurrency, partner concurrency, and risk reduction.	9 items	1 = Strongly Disagree 2 = Disagree 3 = Disagree 4 = Somewhat Disagree 5 = Somewhat Agree 6 = Agree 7 = Strongly Agree	9 – 54

**Table 2.** Developed scale properties

**The Concurrency Related Knowledge Scale.** This 7-item scale was developed based on the literature review performed for the research. When using this scale, participants should be asked to respond to the following items with True, False, or I Don't Know:

ITEM #	ITEM
1	Who my sexual partner has sex with outside of our sexual relationship can affect my sexual health.
2	When a person has more than one sex partner it can increase the spread of sexually transmitted diseases (STDs) and HIV/AIDS.
3	Men are more likely than women to have more than one sexual partner at a time.
4	There are more available Black men than there are available Black women.
5	Black women are more likely to have a partner who is having sex with other women.
6	Having more than one sexual relationship at a time is more common among Black men than among men of other races.
7	A woman who talks to her sexual partner about things like who he's had sex with, condoms, and STDs and HIV is less likely to get an STD than a woman who doesn't.

**Table 3.** Concurrency Related Knowledge Scale

When scoring, responses of “False” and “I Don't Know” should be given a score of 0, and “True” is given a score of 1. Item 4 is negatively directed and should be reverse scored. To create a single summary score, response scores for the individual items should be summed. The possible range of scores is between 0 and 7, with higher scores indicating greater knowledge.

**The Attitudes and Beliefs about Partner Concurrency Scale.** This 9-item scale was developed using on the qualitative findings of this research. The items in Table 4 were created based on attitudes and beliefs about concurrency common to the women in the study who accepted partner concurrency:

ITEM #	ITEM
1	It is in men’s nature to have more than one sexual partner at a time.
2	If a Black woman demands her Black, male sex partner does not have sex with other women, he will probably just leave and find someone else.
3	It is ok if a woman’s partner has sex with someone else if he is not her boyfriend.
4	It is better to stay with sexual partner who is having sex with another woman than to have no sexual partner at all.
5	If a woman is having sex with more than one person then it is okay if her sexual partner does as well.
6	If a man supports a woman who he is having sex with (through paying bills or providing a place to live) then it is okay if he also has sex with other women.
7	A woman should stick with a man who is having sex with more than one person; he’s just “getting it out of his system.”
8	As long as a woman uses condoms with her partner it is okay if he has sex with more than one woman.
9	Even if a woman asks her partner not to, he will probably have sex with other women, anyway.

**Table 4.** Attitudes and Beliefs about Partner Concurrency Scale

When using this scale, participants should be asked to respond by stating how much they agreed or disagreed with each item using a 6-point Likert scale. When scoring, responses are given a score of between 1 (Strongly Disagree) and 6 (Strongly Agree). To create a single summary score, response scores for the individual items should be summed. The possible range of scored is between 9 and 54, with higher scores indicating more positive attitudes toward partner concurrency.

**Material Development**

Narrative messages were developed based on the qualitative findings from this research. The main qualitative findings that informed narrative message development were related to relationship type, attitudes toward concurrency, reasons for concurrency acceptance, partner communication, and condom use. Three different narrative messages were developed and included in three different fact sheets. These materials also include syndicated facts about concurrency and STI risk among African

Americans as well as behavioral recommendations that reduce STI risk. Each fact sheet features a different image of African American woman performing one of the three recommended behaviors, in accordance with the CDC Clear Communication Index. Also in agreement with the Index, the fact sheets explain the nature of the risk related to partner concurrency, as well as the importance of performing and consequences of not performing the behavioral recommendations. The featured narratives and other differences between materials are explained in each of the following sections.

**Narratives.** Based on the themes that were interpreted from the interview data, three relationship types with related approaches to partner concurrency were identified. The relationship types are explained in Table 5:

CHARACTERISTIC	RELATIONSHIP TYPE I	RELATIONSHIP TYPE II	RELATIONSHIP TYPE III
<b>Brief Description</b>	<ul style="list-style-type: none"> <li>Casual, sex only</li> </ul>	<ul style="list-style-type: none"> <li>Casual, with expectations.</li> <li>More than just sex, but not as serious as boyfriend-girlfriend relationships.</li> </ul>	<ul style="list-style-type: none"> <li>Mutually titled and defined</li> </ul>
<b>Titles Used</b>	<ul style="list-style-type: none"> <li>“Just Sex”</li> <li>“Fuck Buddies”</li> <li>“Friends with Benefits”</li> </ul>	<ul style="list-style-type: none"> <li>“Talking”</li> <li>“Dating”</li> <li>“Boo”</li> <li>“Friends”</li> </ul>	<ul style="list-style-type: none"> <li>“Boyfriend-Girlfriend”</li> </ul>
<b>Progression of Relationship</b>	Relationship often becomes sexual quickly (in comparison to relationship type II)	Relationship often progresses slowly over time. Either moving from platonic friends or dating without sex, to sexual.	No recognizable trends in relationship progression.
<b>Boundaries Regarding Concurrency</b>	<ul style="list-style-type: none"> <li>Partner can have sex with other women.</li> <li>Sometimes there are boundaries regarding how many other women male partner can have sex with</li> </ul>	<ul style="list-style-type: none"> <li>Partner can have sex with other women, but should use condoms with other partners and be honest when approached about concurrency.</li> <li>Rationalization used to support lack of boundaries is: “He’s not my boyfriend.”</li> </ul>	<ul style="list-style-type: none"> <li>Partner cannot have sex with other women, except in the context of “threesomes.”</li> </ul>
<b>Expectations</b>	<ul style="list-style-type: none"> <li>Relationship is based on sex, usually with no expectations of spending time together, otherwise.</li> <li>Women sometimes enter</li> </ul>	<ul style="list-style-type: none"> <li>Woman expects honesty from partners about concurrency when confronted.</li> <li>Woman expects to spend leisure time together, be</li> </ul>	<ul style="list-style-type: none"> <li>Expectations consistent with relationship norms.</li> </ul>

	relationship wanting more than “just sex,” but then adjust expectations.	prioritized over other women, and to be respected by the partner.	
<b>Woman’s Responses to Concurrency</b>		<ul style="list-style-type: none"> <li>• Immediately, but temporarily discontinuing sex</li> </ul>	
	<ul style="list-style-type: none"> <li>• Taking measures to maintain or decrease emotional attachment</li> <li>• Having sex less frequently, and/or being more reserved during sex</li> </ul>		
	<ul style="list-style-type: none"> <li>• Since concurrency is expected, sometimes no response, at all.</li> </ul>	<ul style="list-style-type: none"> <li>• Responses depend on whether or not a future is expected with the male partner.</li> <li>• If future sought or anticipated: women approached concurrency as a challenge.</li> <li>• If not: women reconsider self-limiting boundaries and are more open to engaging in concurrency.</li> </ul>	<ul style="list-style-type: none"> <li>• Being more open to exploring other relationships on a surface level; little/no time devoted to developing these relationships</li> <li>• No actual sexual concurrency</li> </ul>
<b>Woman’s Reasons for Concurrency Acceptance</b>		<ul style="list-style-type: none"> <li>• Doubts about quality of other available men</li> </ul>	
	<ul style="list-style-type: none"> <li>• Fatalistic attitudes</li> <li>• Sexual desire or “sexual attachment” to specific partner</li> <li>• Value placed on being in a relationship or having a partner</li> <li>• Value placed on maintaining low number of lifetime sex partners</li> <li>• Acceptance of gender and relationship norms (men are driven by sex, need multiple partners)</li> </ul>		
	<ul style="list-style-type: none"> <li>• Relationship status and related expectations and boundaries; “He’s not my boyfriend.”</li> </ul>	<ul style="list-style-type: none"> <li>• Emotional attachment (driven by guilt or love)</li> <li>• Emotional or financial dependence</li> <li>• Comfort</li> </ul>	
<b>Concurrency Communication in Relationship</b>	<ul style="list-style-type: none"> <li>• Little or no communication about concurrency because concurrency is assumed</li> </ul>	<ul style="list-style-type: none"> <li>• Communication is male initiated; women ask back</li> <li>• If no opportunity to “ask back” directly, women sought information that would inform their beliefs about partner’s concurrency</li> <li>• Women have greater self-efficacy to initiate communication about concurrency</li> <li>• Women ask about partners condom use with other partners before concurrency</li> </ul>	<ul style="list-style-type: none"> <li>• Little or no communication about concurrency because monogamy is assumed</li> <li>• Communication about concurrency is initiated once there is a suspicion or proof of concurrency</li> </ul>
<b>Condom Use in Relationship</b>	<ul style="list-style-type: none"> <li>• Greater condom use if sexual relationship is new and/or short-lived</li> </ul>	<ul style="list-style-type: none"> <li>• Condom use sometimes encouraged by greater communication</li> </ul>	<ul style="list-style-type: none"> <li>• No condom use due to beliefs about relationship type</li> </ul>

- Condom use based on individual factors (hedonistic, pregnancy avoidance, health complications, past condom use), rather than relationship factors
- Condom used at beginning of relationship but often discontinued; once discontinued, rarely reinitiated
- Condom use in response to STI diagnosis

**Table 5.** Relationship type explication. These relationship types and accompanying characteristics extracted from the qualitative analysis. Each relationship type is featured in a different message.

Three narrative messages were developed to highlight the three identified relationship types and associated characteristics. These messages emphasize: boundaries and expectations; reasons for concurrency acceptance; communication; and condom use. Each narrative highlights a different protagonist who learns she has an STI and reflects on what factors in her relationship may have contributed to her current situation. These factors were interpreted from the interview data. Featuring a protagonist who acquires an STI from a partner who was engaging in concurrency was another way to incorporate threat in the materials. The fact sheets were as follows:

- Fact Sheet A: Relationship Type I – Casual, Sex Only.
- Fact Sheet B: Relationship type II – Casual, with Expectations.
- Fact Sheet C: Relationship Type III – Mutually Titled and Defined.

The narratives are told in the voice of an omniscient narrator and also include the voices of the protagonists and a doctor. The voice of the doctor was added to provide an informed source of medical information.

**Behavioral recommendations.** This research initially intended to only address partner communication self-efficacy by encouraging communication about partner concurrency. However, it is apparent from the qualitative findings that women in the study were not using condoms consistently and correctly. Thus, the condom use behavioral recommendation was added to the fact sheet. Further, about half of the women discussed being diagnosed with an STI, and those who had been previously diagnosed with an STI discussed greater STI risk perception and more frequent testing habits. Since being diagnosed with an STI seemed to have an impact on women’s STI risk perception, a diagnosis was included in each narrative, and testing was added as a behavioral recommendation.

**Threat and efficacy.** Each fact sheet contained the same risk messages that conveyed threat. These messages: compared young African American women's STI risk to women of other racial/ethnic background; explained why a woman can still be at risk even if she only has one partner; and described components of African American sexual networks that contributed to African American women's increased risk. Likewise, each message contained the same efficacy messages which described: women's ability to make safe decisions by communicating with a partner; the effectiveness of condoms to prevent STIs; and the ability of women to prevent long-term consequences of STIs by getting tested.

**Images.** Images of African American women performing one of the three recommended behaviors were added to each fact sheet. The recommended behavior displayed in the fact sheet was carefully matched to the relationship type. Fact Sheet A (Relationship Type I) featured a woman in bed with her partner with a condom in her hand. This image aligned with the behavioral recommendation to use condoms. Women were most likely to use condoms in the most casual stages of their relationships, so this image would likely be the most relatable for a woman in a Casual, Sex Only relationship. The couple is also smiling and only wearing underwear, which supports the non-serious and sexual nature of this relationship type.

Fact Sheet B (Relationship Type II) featured an image of a fully clothed woman and man talking in bed. This image aligned with the behavioral recommendation to talk with partners about concurrency. Women in Casual, with Expectations relationship types discussed greater communication with their partners about concurrency and also appeared to have the most self-efficacy to initiate such conversations. Additionally, the clothed appearance of the couple in the picture supported the finding that many women in this relationship type had platonic friendships with their partners before the relationship became sexual.

Finally, Fact Sheet C (Relationship Type III) featured an image of a woman receiving test results from a doctor. Women in the study who were in Mutually Titled and Defined relationships did not use

condoms or talk to their partners about concurrency due to their relationship type. Further many women in more serious relationships discussed getting tested, *rather than* using condoms. For this reason, it was also important that the recommendations clarified STI testing was not a form of prevention.

**Language and informational design.** The fact sheets were written in accordance with FDA's Plain Language Guidelines (PLAIN, 2011), using words the audience would understand and relate to. The main message and calls to action were emphasized using font size and color. The most important information was summarized in a text box at the top of the document. Ethnically-relatable (but not stereotypical) names were used for the characters and each message was designed using a different color scheme. Participants in the advisory board were asked to pick the most and least attractive design and were also asked to specifically comment on whether the character names were relatable.

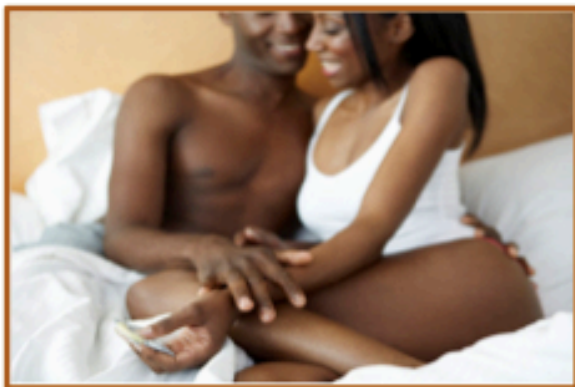
**Fact sheets.** Images of the fact sheets described above are featured here. The pre-advisory board fact sheets can also be found in Appendix E.

## If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

### "Buddies": Reagan's story

Reagan thought about Xavier as her doctor explained her STD (sexually transmitted disease) test results. She met him at a party a few months ago. It wasn't anything serious; they usually just met up after partying to have sex. He was her 'sex buddy,' like friends with benefits, minus the friendship. Most of the time they used a condom. "Well, there was that one time. But just once!" Reagan remembered. He didn't put one on and she didn't say anything. She knew Xavier was sleeping with other girls, but before now she didn't care. The sex was just that great! Even now, she thought, "How could I be mad? Xavier isn't my boyfriend; we're just having fun. Both of us are single. He can do what he wants."



Use a condom every time you have sex.

But now, Reagan had an STD. Her doctor continued, "It's easily treated, but if you've had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV – the virus that causes AIDS. So we should get you an HIV test. Would you like us to notify your partner?" Reagan wondered if that would be best. Since her relationship with Xavier is just based on sex, they hadn't talked much about anything like STDs, getting tested, or other partners. They just do it. She thought she liked it that way so that she wouldn't catch feelings. But now Reagan knew it was time to talk to Xavier about his other sexual partners.

Figure 7. Fact Sheet A – pre-pilot test. (Relationship Type I – Casual, Sex Only)

### Reagan's dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Reagan only had one partner, she was still at risk of getting an STD. Why?

Women share their partners' STD risk. Even if a woman is only having sex with one man, she is still at risk of getting an STD if he is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case.

Black women are especially at risk because:

There are **more available Black women than Black men**. So Black men have more choice and power when dating. This affects how many sexual partners Black men can have without committing to just one.

Black men are **more likely to have more than one sexual partner at a time than men of other races**, and young adult men between ages 18 – 24 years are most likely to have more than one sexual partner.

Black women's sexual partners are usually **Black men, rather than men of other racial groups**. This means Black women usually have partners who are more likely to have more than one sexual partner.

### How you can protect yourself

Casual sexual relationships can be safe if both partners are honest and use condoms. In these relationships, you can decrease your risk of getting an STD and having related complications by taking the following actions:

Talk to your partner about who he's had sex with since the two of you have been having sex.

By talking to him about his other sexual partners you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

#### Use condoms with your partner every time

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner's risk.

#### Get tested for STDs regularly

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

# If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

## “He’s not my man”: Brielle’s story

Amir sat with Brielle explaining that he had an STD (sexually transmitted disease). While he offered his apologies she reflected on their “situation.” They’d been friends for three years now and had only been having sex for a few months. Their relationship was comfortable, and he respected her, so she was okay with him having sex with other women. “He’s not my man,” Brielle reasoned, “and all men sleep around. It’s in their nature.” Plus, Brielle knew Amir had other partners when she decided to have sex with him. And now, Brielle knew if Amir had an STD, she did, too; they stopped using condoms over a month ago. She had trusted him because he agreed to always use condoms with other girls. They’d been friends for so long, and he was always honest with her about other partners, but he never told her he had had unprotected sex with someone else.



Talk to your partner about who he is having sex with.

Later, at the clinic Brielle’s doctor explained: “It’s easily treated, but if you’ve had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV. So we should get you an HIV test.” At that point, Brielle realized the importance of communication. She’d always waited for Amir to ask questions about whether she was having sex with anyone else, and then she asked back. Now she realized she should have been more straightforward, and asked more specific questions about his condom use.

Figure 8. Fact Sheet B – pre-pilot test. (Relationship type II – Casual, with Expectations)

## Brielle’s dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Brielle only had one partner, she was still at risk of getting an STD. Why?

Women share their partners’ STD risk. So even if a woman has only one partner, she is still at risk of getting an STD if her partner is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case. Black women are especially at risk because:

There are **more available Black women than Black men**. So Black men have more choice and power when dating. This affects how many sexual partners Black men can have without committing to just one.

Black men are **more likely to have more than one sexual partner at a time than men of other races**, and young adult men between ages 18 – 24 years are most likely to have more than one sexual partner.

Black women’s sexual partners are usually **Black men, rather than men of other racial groups**. This means Black women usually have partners who are more likely to have more than one sexual partner.

## How you can protect yourself

Sexual relationships can be complicated, and ending a sexual relationship with someone you like might be hard. You can at least decrease your risk of getting an STD and related complications by taking the following actions:

**Talk to your partner about who he’s had sex with since the two of you have been having sex.**

By talking to him about his other sexual partners you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

**Use condoms with your partner every time**

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner’s risk.

**Get tested for STDs regularly**

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

# If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

## When it's too late to talk to him: Kiana's story

Kiana thought about her relationship as her doctor explained her STD (sexually transmitted disease) test results. She'd been with her boyfriend Kareem for over two years now, since she was 20. Still, she thought to herself, "I should have cut him off when I caught him cheating the first time." And she did, but not for long. Besides, he'd been with her through a lot of hard times – like when her mom died. And she'd been living with him. Where would she have gone if she broke up with him? Plus, while they were apart she met a few other guys, but they weren't any better than Kareem. At least she knew what to expect from him. "And he's young," Kiana thought, "he'll grow out of it." So Kiana took Kareem back. They didn't use condoms, because he was her *boyfriend*. Now, a year later, after finding texts and pictures from another woman in his phone, she felt Kareem was cheating again.



Get tested regularly to avoid complications from possible STDs

And Kiana's doctor confirmed her suspicions. She had an STD. Her doctor continued, "I'm going to write you prescriptions for both you and your partner. It's easily treated, but if you've had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV. So we should get you an HIV test." Since she hadn't had sex with anyone else since they'd been together, Kiana knew it was time to talk to Kareem about his other sexual partners.

## Kiana's dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Kiana only had one partner, she was still at risk of getting an STD. Why?

Women share their partners' STD risk. Even if a woman is only having sex with one man, she is still at risk of getting an STD if he is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case.

Black women are especially at risk because:

There are **more available Black women than Black men**. So Black men have more choice and power when dating. This affects how many sexual partners Black men can have without committing to just one.

Black men are **more likely** to have more than one sexual partner at a time than men of other races, and young adult men between ages 18 – 24 years are most likely to have more than one sexual partner.

Black women's sexual partners are usually Black men, rather than men of other racial groups. This means Black women usually have partners who are more likely to have more than one sexual partner.

## How you can protect yourself

Relationships are complicated, and ending a sexual relationship with an unfaithful boyfriend might be hard. However, you can decrease your risk of getting an STD and related complications by taking the following actions:

**Talk to your partner about who he's had sex with since the two of you have been having sex.**

By talking to him about his other sexual partners you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

**Use condoms with your partner every time**

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner's risk.

**Get tested for STDs regularly**

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

Figure 9. Fact Sheet C – pre-pilot test. (Relationship Type III – Mutually Titled and Defined)

### ***Advisory Board: Material Pilot Testing Findings***

Ten women agreed to attend the advisory board group, however only 4 women attended the group, including 2 women who participated in individual interviews and 2 women who had not. Of the women who had not participated in interviews, 2 had children, 2 were currently enrolled in college, and one was not sexually active. Participants ranged from 20 to 23 years of age and all identified as African American.

After the focus group, women's individual and dyad responses to the focus group guide prompts were compiled and recorded into an electronic file. The group discussion was transcribed and responses were also added to the file. Participants' feedback on the developed materials is summarized in the following sections.

**Information and informational design.** Participants found the materials to be informative and easy to follow. The women believed that by providing information, the materials increased knowledge, and were therefore empowering.

Anything that really gets you informed ... like Thailynn was saying earlier... knowledge is power. Anything that gets you informed really is definitely helpful. (Talor)

Jody highlighted the importance of women receiving all three behavioral recommendations and also added that communication messages should focus not only on talking about concurrency but also on talking about condom use and testing.

I think that, on the same page ... because I feel like you need to have that conversation about condom use and prevention like STD testing at the same time ... about sexual history. So I feel like they're all important. So I feel like if you're going to be involved with someone then you need to know his history first of all. Make sure that you're going to use a condom. Then like testing should be next. (Jody)

Talor also found the informational design to be effective. She commented on the facts provided about African American women's risk of being in a partner concurrent relationship and also easily recalled the other sections of the fact sheet.

I already know the people I know have short attention spans so the facts right here in the box would definitely stand out. So that was something that I read immediately and read the whole thing immediately. The facts jump out at you. Her story, whenever you read it ... the story. I actually read the whole story. And the How Can You Protect Yourself, I liked that, too. (Talor)

Overall, the materials were well received among the advisory board members. Aesthetically, they found Fact Sheet C to be the most appealing. Thus, the other fact sheets were altered to match the same color scheme.

**Cultural relevance and relatability.** The advisory board also discussed whether the materials were realistic and culturally appropriate. Participants expressed that the fact sheets were culturally relevant and the narratives were relatable. Specifically, they appreciated that the protagonists in the narratives had culturally appropriate names and found the images to be relevant and representative of the narratives.

Riley: I told that to Jody! I was like, "I'm so glad that they have Black people names."

All: Yeah! (laughs)

Thailynn: Reagan, Brielle ... yeah (laughs)

When asked to comment on the images, Jody and Riley wrote that each picture was relevant and fit the scenario in the respective narrative. Regarding the image paired with Factsheet C, they wrote: "Yes it's very relevant and fits because it shows frustration."

Participants also found the scenarios in the narratives to be familiar and relatable to their personal experiences. Riley, Thailynn, and Talor expressed experiencing one or more of the women's relationship scenarios at some point during their relationship history.

Riley: I felt like they were all relatable in certain areas or aspects ... and I'm just going to say me, I feel like each one ... even if not all the way ... still was relatable to a certain phase in my life.

Thailynn: Yes!

Talor: Yeah I was just about to say that. I've definitely been a Brielle and a Kiana.

The necessity for the materials was also exhibited by discussion among advisory board members that was in agreement with the qualitative findings. In discussing the narratives, participants echoed the qualitative findings. For example, Riley and Talor reiterated the finding that communication may not always be prioritized in very casual relationships and emphasized the importance of condom use in these relationships – a line of thinking that was common among individual interview participants.

Riley: I feel like even if you feel like you don't want to talk to the person. Especially with Reagan ... with Reagan, even if she didn't feel comfortable because the only time they did communicate was during sexual encounters, then definitely a condom should've been present, just because you're not speaking to him, or you already know what his lifestyle is like outside of y'all having sex with each other, then a condom should definitely be in place because you don't know him from ...

Talor: ... a can of paint.

Riley: Right. So you definitely need to make sure that in order to protect yourself ... because you really don't know about him going about his day, about his lifestyle ... so you have no way of tracking him. That might not even be his real name, because I always give a fake name (laughs). So, um, just making sure that you use a condom just to protect *yourself* – just to make sure that *you're* okay. So even if y'all do stop talking, you know that you always protected yourself at all times.

However, despite acknowledging the norms around very casual relationships that were reflected in the narratives, Riley and Talor still recognized the importance of communication in these types of relationships.

Riley: Well ... what I was telling Jody outside, was that most people feel like whenever a condom is not being used ... say you start off as just like sex buddies or whatever, and later, whenever you don't use a condom, you think that makes a step up in the relationship. And it's just like, "Oh now we furthering it," and most of the time that's not even the case. So I believe that just making sure that ...

Talor: ... having that open communication, yeah. Not being afraid to have that because you realizing that you're putting yourself at risk regardless of if you have the conversation or not so it's better for everybody to be informed and be aware.

Participants were clearly conflicted about communication in very casual relationships. This discussion consumed a disproportionate amount of group discussion time. However in the end,

participants agreed that even though condom use was the easiest and most effective way to protect one's self in a very casual relationship, communication was still important and necessary.

**Message familiarity and narrative appeal.** The advisory board found the narratives to be interesting, and could relate the main message of the materials to other messages they received around HIV and STI prevention. All of the participants said they understood the title of the fact sheet and would understand the main message it carried even if they did not continue to read the fact sheet. Riley, Talor, and Jody said the message was familiar to them and they had heard similar messages elsewhere. Riley shared her experience with previously receiving a similar message.

Yeah, because I know when I was doing something in the clinic – I was a volunteer at the clinic last summer. And the doctors would always tell people ... I'm from a small town in Louisiana ... and the doctors would always tell people that you're having sex with everybody else that your sexual partner has sex with. So eventually you'd be like, "Damn I'm having sex with the whole town because this dude, he's *known* for having sex with everybody. So pretty much I could walk in a store and I probably done had sex with 5 people standing in line." Yeah they'd always be like, "You have sex with everybody your sexual partner has sex with." And it keeps going and it keeps trickling. (Riley)

Participants also found the messages to be engaging. When asked how their peers might receive the materials, Riley and Thailynn expressed a curiosity about the scenario that went beyond the narrative – specifically, wanting to know more about the story.

Riley: Yeah my friends really would read everything. See I'm like ... they like drama. So they would read this like "What happened? Did she stay? What happened?" Like yeah that's how I feel, too. I just want to know what happened after.

Thailynn: Right!!

These findings related to participants' previous experiences with concurrency messages and their reaction to the narratives put forth by this research inspired suggestions about possible uses of these materials that are discussed further in Chapter 5.

**Overall message appraisal and suggestions.** Participants processed each fact sheet and discussed what they took away from each with a partner. In the partner discussion, the dyads offered the following feedback about how they interpreted the "take-home message" for each fact sheet:

<b>Fact Sheet A: Reagan's Story</b>	Talor & Thailynn: Never sleep with a partner you know nothing about. Be aware in any relationship, and make sure you at least talk.  Jody & Riley: Even if it's a buddy, you should be responsible and communicate about your history and about other partners
<b>Fact Sheet B: Brielle's Story</b>	Talor & Thailynn: Do not be careless; ask questions.  Jody & Riley: Even if you're sexually active with someone that's a friend, it is still your responsibility to use condoms get tested and know who your partner is with other than you
<b>Fact Sheet C: Kiana's Story</b>	Talor & Thailynn: Kiana had emotional insecurities that made her keep messing with the same type of man  Jody & Riley: Follow your gut. Use condoms. Don't settle for less.

Afterwards everyone came together and discussed the most salient points in a group. Fact Sheet A generated the most dialogue in the group discussion, followed by Fact Sheet C. This outcome was not surprising, as these two materials portrayed the two relationship types (I and II, respectively) in which women were most likely to follow scripts and avoid initiating communication. Riley and Talor discussed what they felt was necessary when engaging in very casual relationships and the difficulties they experienced while talking to very casual partners about concurrency.

Riley: Often times though in the situation that Reagan is involved, there needs to be a ... I feel like anyone you having sex with repeatedly that there needs to be some type of understanding ... that you need to make sure that we are ... that we have an understanding. But then I wouldn't say that more so because guys get offended ... not offended but ...

Talor: Yeah, they do!

Riley: More, defensive ...

Talor: Yeah, defensive.

Riley: ... whenever you ask them who else they're having sex with, and they think that you "worried about the wrong thing," "doesn't matter," you know. And its not more so – with me, personally – not that I'm worried about who you are having relations with, not the person, just more so that you're being careful. Because I know that things do happen and slip ups do happen and sometimes in the heat of the moment there may not be a condom – some people just don't carry them, I carry them all the time – but um (laughs) people may not have those precautions so you know you have communication with that person saying, okay I may come over but if there's no condom present I need to leave because I don't even know what you have going on and so I don't want to have

the heat of the moment something happen and then I go to the doctor and it's something totally different from what ...

Talor: ... it's something serious.

Again, while discussing Fact Sheet A, there seemed to be an understanding among participants that communication was important, but also some doubt that it was possible in this relationship type. So again, the discussion circled back around to condom use. This finding supports the decision made in this research to include condom use and testing recommendations rather than only communication recommendations (as initially planned). Indeed, the emphasis on all three recommendations was not lost on participants. In her individual response worksheet to Fact Sheet A, Jody wrote:

Even if you're just buddies, this fact sheet shows the importance of communication. Condom use is very important and the fact sheet also emphasizes the need for it. The fact sheet also shows although testing doesn't prevent STDs it can help prevent things from getting worse. (Jody)

However, the advisory board still easily recognized the intended emphasis on partner communication about concurrency in all of the materials, but also highlighted the need for more guidance on how to start such conversations with a partner.

Talor: Talking seems to be the biggest message in these. But it says talking ... but it's also showing reactive things, like reactive conversations. It's not really showing a way to bring up, you know saying ...

Thailynn: ... like a more proactive side

Talor: Yeah, like it's not really saying like "How can we stop this beforehand?" Or even like a way to get somebody to be honest beforehand. Because in the last story, in Kiana's story, she said it was about her being deceived. In the first story it was about maybe not opening up and having that conversation ahead of time, not feeling the need to because there was no relationship. You know. And the middle story, she just seemed to be careless about that. So it seemed like conversation is something that's important but it doesn't show you how.

It is indeed important to provide women with the tools to initiate partner communication. However, it's difficult to provide women with generic conversation-starters for relationships that may be unique. When asked how they think these types of messages should be incorporated into the fact

sheets, the participants agreed that how these conversations should be initiated is highly dependent on the woman's relationship. Based on this feedback, unique conversation starters were added to Fact Sheets A and B that emphasized each respective relationship type. A suggestion for how to initiate a conversation (rather than a script) was added to Fact Sheet C based on qualitative findings that suggested any communication about concurrency in a mutually titled and defined relationship would imply distrust.

Participants went on to again echo the qualitative findings in highlighting the importance of condom use in very casual relationships and testing in committed relationships.

Talor: No you should have the conversation based on *your* relationship

Thailynn: I mean if it's sex, it's just sex ...

Talor: ... but there should always be condoms involved

Thailynn: Exactly. And you should at least have that whole thing that, "I don't know what you're doing. Let's go ahead and wrap it up. Click it or ticket."

Talor: If it's a partner then you should go get tested together, or you know things of that nature. See and that is where the difference is. When it's a casual relationship it should definitely be about condoms and just safety and knowing the person as far as their sexual habits so *you* can feel comfortable regardless. You just know certain things to protect yourself. Because there are things that condoms can't prevent, so you know, it's nice to just have those conversations regardless. And as far as a relationship, those should be conversations where you should have more so about like getting tested together, knowing each other's status, each other's sexual patterns, you know having those honest genuine non-judgmental conversations.

However, Thailynn still believed that concurrency communication messages were important for women in committed relationships, as well. Further, regarding Fact Sheet C, she and other women also believed women should receive messages about trusting gut instincts or feelings, and letting those feelings influence conversations with partners.

Thailynn: Um you have to be honest with yourself first, because intuition goes a long way. If you feel like it's going on, then 9 times out of 10 your intuition is going to be right. Like my guts telling me something's not right, my Spidey senses are tingling. Like go for it! And that's when the discussion and the trust like "Hey what do you have going on with ... you know ... what you got? Who you with?"

Riley: Yeah you have to talk, and you can't wait for proof. By then it's too late because you wait until you get proof and you don't even know how long it's going on. You wait until you get proof and it could be like you were married to this person and hey had an affair going on before y'all got married and 7 years later you found out he's been cheating on you for 7 years and you only got proof 7 years later (laughs).

Likewise, in her individual response worksheet to Fact Sheet C, Riley wrote: "I do believe that if in a relationship and there is suspicion then one should feel comfortable talking this matter over. I believe if you decide to stay then a compromise should be made in order to protect yourself. Also, whether in a relationship or not, for health reasons always know your status." Based on these findings, a comment about trusting instincts was included in the narrative of Fact Sheet C.

Talor emphasized another qualitative finding: that with serious, committed relationships, women "protected" themselves by getting tested. Further, she believed communication in these relationships should focus mainly on getting tested and HIV and STI status. She also highlighted that in Fact Sheet C, it was unclear whether the protagonist contracted the STI from her partner the first time he cheated or whether it was new.

So this is another great example of just getting tested regularly. It's always one of your best and safest bets. The only reason I say that is because in Kiana's story it said okay he cheated like a year ago and now she has an STD. So yes that possibly means that he could be cheating but there are possibilities that you didn't get that seen about then! (Laughs) yeah so I didn't know. And it says like the longer it is the worse it can be the more damage it can cause and stuff like that. And things do lie dormant and you don't know unless you are getting tested you and your partner and I know that's a lot, especially in Black men. I know a lot of Black men who do not get tested regularly. Like wow. (Talor)

Based on this finding, Fact Sheet C was changed to clarify that the STI the protagonist was diagnosed with was new so as to make clear the implication that he partner had recently engaged in concurrency.

Fact Sheet B generated the least group discussion. However, advisory board members had favorable comments in their individual and partner worksheets. Regarding the fact sheets' biggest

strength, Jody and Riley wrote, “the tips on how to protect yourself.” Regarding the biggest weakness the dyad wrote, “none, because of how relatable it is.” Other comments were as follows:

This fact sheet could help women lower risk because knowledge is power! :) (Thailynn)

It makes it obvious that sleeping with a partner who sleeps around increases your odds of getting a STD. (Talor)

This fact sheet makes me feel getting an STD would be serious, because I have been in similar situations related to the fact sheet, especially saying the phrase “he’s not my man” where alertness is necessary (Riley)

The fact sheet showed the importance of testing and if caught early. (Jody)

One worrisome comment was found in Talor and Thailynn’s partner response worksheet in response to the question “How do you think your peers might misinterpret this message?” The dyad responded, “They will easily blame the problem on men.” This was a concern when developing the materials for this study – that is, that: (1) including facts about concurrency among African American men would take the ownership and empowerment to avoid HIV and STIs out of the hands of African American women, and (2) that including such facts might stigmatize African American men. In order to challenge these possibilities, the threat messages were edited to remove any statements that blamed African American men. Instead a statement about lower rates and later age of marriage among African Americans (a possible cause of higher rates of concurrency among men) was added to the threat message addressing African American’s risk of experiencing partner concurrency. Further, two statements (one to the threat messages and one to the call to action) were added to empower women: “However, this does not mean that women are powerless in protecting themselves;” “You have the power! By talking to him you can.” These additions place responsibility back in the hands of the audience – African American women – and also serve as response efficacy messages.

**Final Materials.** The materials pilot tested with the advisory board were edited to include the following aesthetic and content changes:

1. Color schemes were changed to match that of the original Fact Sheet C

2. A statement was added to clarify that the protagonist in Fact Sheet C acquired a new STI
3. A statement was added to Fact Sheet C about trusting instincts
4. Messages that empowered women to reduce risk were added to the threat messages and call to action in each Fact Sheet
5. Potentially stigmatizing statements were removed from all Fact Sheets
6. Unique conversation starters and suggestions were added

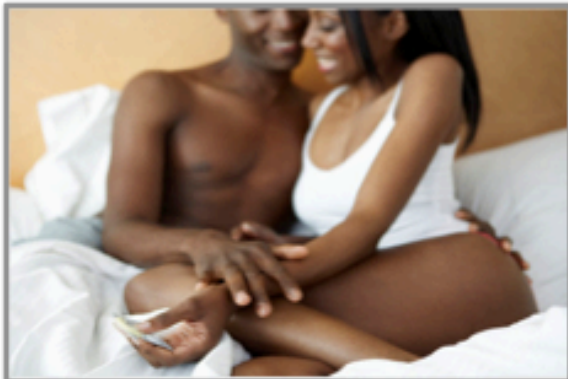
Images of the final fact sheets described above are featured here. The final fact sheets can also be found in Appendix F.

# If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

## 'Buddies': Reagan's story

Reagan thought about Xavier as her doctor explained her STD (sexually transmitted disease) test results. She met him at a party a few months ago. It wasn't anything serious; they usually just met up after partying to have sex. He was her 'sex buddy,' like friends with benefits, minus the friendship. Most of the time they used a condom. "Well, there was that one time. But just once!" Reagan remembered. He didn't put one on and she didn't say anything. She knew Xavier was sleeping with other girls, but before now she didn't care. The sex was just that great! Even now, she thought, "How could I be mad? Xavier isn't my boyfriend; we're just having fun. Both of us are single. He can do what he wants."



Use a condom every time you have sex.

But now, Reagan had an STD. Her doctor continued, "It's easily treated, but if you've had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV – the virus that causes AIDS. So we should get you an HIV test. Would you like us to notify your partner?" Reagan wondered if that would be best. Since her relationship with Xavier is just based on sex, they hadn't talked much about anything like STDs, getting tested, or other partners. They just do it. She thought she liked it that way so that she wouldn't catch feelings. But now Reagan knew it was time to talk to Xavier about his other sexual partners.

## Reagan's dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Reagan only had one partner, she was still at risk of getting an STD. Why?

Women share their partners' STD risk. Even if a woman is only having sex with one man, she is still at risk of getting an STD if he is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case.

Black women are especially at risk because:

There are **more available Black women than Black men**. So Black men have more choice when dating. This affects how many sexual partners Black men can have without committing to just one. This also makes some Black women feel they have less power when selecting men and communicating with sex partners.

Black women are **more likely to have a sexual partner who is having sex with more than one person**. This is mainly because Black men and women get married less and at older ages than other groups. However, this does not mean that women are powerless in protecting themselves.

## How you can protect yourself

Casual sexual relationships can be safe if both partners are honest and use condoms. In these relationships, you can decrease your risk of getting an STD and having related complications by taking the following actions:

**Talk to your partner about who he's had sex with since the two of you have been having sex.**

**TRY IT!** "I know we're both single, but I want to make sure we're safe. Let's talk about our other sex partners."

You have the power! By talking to him you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

## Use condoms with your partner every time

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner's risk.

## Get tested for STDs regularly

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

Figure 10. Fact Sheet A – post-pilot test. (Relationship Type I – Casual, Sex Only)

# If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

## "He's not my man": Brielle's story

Amir sat with Brielle explaining that he had an STD (sexually transmitted disease). While he offered his apologies she reflected on their "situation." They'd been friends for three years now and had only been having sex for a few months. Their relationship was comfortable, and he respected her, so she was okay with him having sex with other women. "He's not my man," Brielle reasoned, "and all men sleep around. It's in their nature." Plus, Brielle knew Amir had other partners when she decided to have sex with him. And now, Brielle knew if Amir had an STD, she did, too; they stopped using condoms over a month ago. She had trusted him because he agreed to always use condoms with other girls. They'd been friends for so long, and he was always honest with her about other partners, but he never told her he had had unprotected sex with someone else.



Talk to your partner about who he is having sex with.

Later, at the clinic Brielle's doctor explained: "It's easily treated, but if you've had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV. So we should get you an HIV test." At that point, Brielle realized the importance of communication. She'd always waited for Amir to ask questions about whether she was having sex with anyone else, and then she asked back. Now she realized she should have been more straightforward, and asked more specific questions about his condom use.

## Brielle's dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Brielle only had one partner, she was still at risk of getting an STD. Why?

Women share their partners' STD risk. So even if a woman has only one partner, she is still at risk of getting an STD if her partner is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case. Black women are especially at risk because:

There are **more available Black women than Black men, so Black men have more choice when dating**. This affects how many sexual partners Black men can have without committing to just one. This also makes some Black women feel they have less power when selecting men and communicating with sex partners.

Black women are **more likely to have a sexual partner who is having sex with more than one person**. This is mainly because Black men and women get married less and at older ages than other groups. However, this does not mean that women are powerless in protecting themselves.

## How you can protect yourself

Sexual relationships can be complicated, and ending a sexual relationship with someone you like might be hard. You can at least decrease your risk of getting an STD and related complications by taking the following actions:

**Talk to your partner about who he's had sex with since the two of you have been having sex.**

**TRY IT!** "Our friendship is important to me. I want to make sure we stay honest about our other sex partners."

You have the power! By talking to him you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

## Use condoms with your partner every time

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner's risk.

## Get tested for STDs regularly

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

Figure 11. Fact Sheet B – post-pilot test. (Relationship type II – Casual, with Expectations)

# If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

## When it's too late to talk to him: Kiana's story

Kiana thought about her relationship as her doctor explained her STD (sexually transmitted disease) test results. She'd been with her boyfriend Kareem for over two years now, since she was 20. Still, she thought to herself, "I should have cut him off when I caught him cheating the first time." And she did, but not for long. Besides, he'd been with her through a lot of hard times – like when her mom died. And she'd been living with him. Where would she have gone if she broke up with him? Plus, while they were apart she met a few other guys, but they weren't any better than Kareem. At least she knew what to expect from him. "And he's young," Kiana thought, "he'll grow out of it." So Kiana took Kareem back. They didn't use condoms because he was her *boyfriend*. Now, a year later, after finding texts and pictures from another woman in his phone, she felt Kareem was cheating again.



Get tested regularly to avoid complications from possible STDs

And Kiana's doctor confirmed her suspicions. She had an STD. Her doctor continued, "I'm going to write you prescriptions for both you and your partner. It's easily treated, but if you've had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV. So we should get you an HIV test." She got tested a year ago and hadn't had sex with anyone else since they'd been together. Kiana knew it was time to talk to Kareem about his other sexual partners.

## Kiana's dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Kiana only had one partner, she was still at risk of getting an STD. Why?

Women share their partners' STD risk. Even if a woman is only having sex with one man, she is still at risk of getting an STD if he is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case.

Black women are especially at risk because:

There are more available Black women than Black men, so **Black men have more choice when dating**. This affects how many sexual partners Black men can have without committing to just one. This also makes some Black women feel they have less power when selecting men and communicating with sex partners.

**Black women are more likely to have a sexual partner who is having sex with more than one person**. This is mainly because Black men and women get married less and at older ages than other groups. However, this does not mean that women are powerless in protecting themselves.

## How you can protect yourself

When you love your partner it can be hard to trust your instincts. Relationships are complicated, and ending a sexual relationship with an unfaithful boyfriend might be hard. You can decrease your risk of getting an STD and related complications by taking the following actions:

**Talk to your partner about who he's had sex with since the two of you have been having sex.**

**TRY IT!** Set regular check-ins with him about other partners so no one is offended or suspicious of the timing.

You have the power! By talking to him you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

## Use condoms with your partner every time

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner's risk.

## Get tested for STDs regularly

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

Figure 12. Fact Sheet C – post-pilot test. (Relationship Type III – Mutually Titled and Defined)

## CHAPTER 5: DISCUSSION

### Summary

HIV and STIs disproportionately affect African American women despite evidence that disparities are not caused by increased behavioral risk-taking among the population (Hallfors et al., 2007). Instead, more recent research has blamed population-level characteristics for the disparity, namely: (1) African American network characteristics, (2) the African American sex ratio imbalance, and (3) rates of concurrency (Adimora et al., 2013; E. O. Laumann & Youm, 1999; Morris et al., 2009). HIV and STI risk reduction communication efforts targeting African American women often focus on increasing condom use and HIV testing behaviors, but do not address relationship factors that might result from population-level conditions (Noar et al., 2009). While messages encouraging condom use and HIV testing are necessary, public health communicators should also consider the unique shared lived experience of young adult African American women when crafting messages. This research sought to do so by first exploring young adult African American women's sexual relationships using qualitative interviews, and then integrating these findings into the development of targeted messages promoting partner communication, condom use, and testing.

This research informed the development of the Partner Concurrency Acceptance Model – a model predicting African American women's acceptance of partners who they know or suspect are engaging in concurrency. This model combines findings related to women's acceptance of partner concurrency from previous research with findings from this research. Together, the predictors in the model represent findings among women age 18 to 65 years.

The most salient finding from this research was that women's relationships could be categorized into three types to which they ascribed meaning. This meaning then informed the reasons women cited for accepting concurrency, their responses to concurrency, the extent to which they were comfortable

communicating with a partner about concurrency, and their condom use with a partner engaging in concurrency. Based on these findings, it was apparent that communication materials should target women based on their relationship type. Thus, three narratives reflecting the findings were featured in three targeted factsheets. Further, two scales were developed that could be used to test the effectiveness of these fact sheets in changing knowledge and attitudes related to partner concurrency.

The qualitative findings from this research reflect the unique shared experience of young adult African American women navigating dynamic sexual relationships, and inspire recommendations for future research and practice. Future research should test the model, materials, and scales developed from this research quantitatively among a large, diverse sample of African American women. Further, researchers should continue to explore how population-level conditions specifically affect African American HIV and STI risk in general, and by way of influencing interpersonal relationships and individual behavior. Finally, public health communicators should consider said conditions when developing and targeting HIV and STI messages for African American women.

## **Discussion**

### ***Relationship Dynamics***

Women in this study described their ideal relationships before recounting their recent past and current sexual relationships. Just as McLellan and colleagues (2013) found, women had specific relationship ideals that were rarely met. Instead, participants described relationships in which titles and boundaries were sometimes blurred and expectations were sometimes mismatched. Still, these relationships fit into three clearly identifiable categories: (1) Casual, Sex Only, (2) Casual, with Expectations, and (3) Mutually Titled and Defined. As the name suggests, relationships in the Casual, Sex Only category are primarily based on sex. Women in these relationships sometimes enter the relationship with expectations of more but adjust their expectations to better fit their male partners'. Relationships in the Casual, with Expectations category progress slowly, over time and often mimicked

more serious relationships but lacked a mutually defined title. This enabled men to continue having sex with other women, and was women's excuse for accepting such behavior. Finally, women in relationships in the Mutually Titled and Defined category expected monogamy from their partners, and had partners who recognized the boundaries and expectations in the relationship though they did not always follow them.

This finding suggests partner concurrent relationships are described differently than individual concurrency among women. Previous research describes much more nuanced categories of relationships in which concurrency occurs (Gorbach et al., 2002). This research found only three categories, and also specifically foregoes any relationship category for which exchange of sex for money or goods is the primary basis as described by Gorbach et al. (2002). The women in this research did not describe such nuanced differences in their relationship types as reasons for their acceptance of concurrency. That is, for example, even if a partner engaged in separational concurrency, the women still reacted based on meaning they ascribed to whichever of the relationship categories they were in. Further, while women described social status (e.g. wealth) as a reason a partner might be attractive to other women, none of the women described accepting a partner's concurrency because of this social status.

### ***Partner Concurrency Acceptance***

This research explored women's acceptance of partner concurrency as displayed by both their attitudes and beliefs (cognitive acceptance) and their behavior (physical acceptance). Women's attitudes toward concurrency varied and ranged from negative to accepting, including passive, nonchalant, and forgiving. These attitudes were heavily informed by women's beliefs and values. Women held contradicting attitudes and beliefs about partner concurrency. In general, women believed it was okay for women to accept partners who were having sex with other women, but held negative

attitudes toward such behavior from their own partner. These negative attitudes were not informed by concerns about HIV or STI risk, but rather by women's pride, ego, and desire for respect.

Accepting attitudes among the women were informed by related values, such as placing importance on being in relationship or having a partner, or placing importance on honesty. The former finding aligned with Paxton et al.'s (2013) finding that women's loneliness and desire to be in a relationship drove them to accept partner concurrency. Indeed, in this research women's behaviors followed suit. Women in this study often waited until they had another potential partner before ending a relationship with a partner engaging in concurrency. While this could be dismissed as a result of the fluid nature of the participants' sexual relationships, it was in fact done purposefully among the women. Women accepted partners engaging in concurrency in order to avoid spending time alone before finding another partner.

Accepting attitudes toward concurrency were also informed by beliefs that partner concurrency was: inevitable, normative among men, and a result of men's carnal nature. Physical acceptance of concurrency due to beliefs about social norms was common among women. Women related concurrency acceptance to their "Black, female" identity, and felt disempowered by social conditions (like the sex ratio imbalance) that they believed made it acceptable for African American men to engage in concurrency, and left them without a partner if they refused to accept such behavior. Thus, cultural norms and sexual network dynamics contributed to relational control framing among women (Solomon & McLaren, 2008). Women who were accepting of gender norms felt powerless with respect to entering and maintaining mutually monogamous relationships and described "giving in" to or being "won over" by partners who engaged in concurrency, or fulfilling a woman's duty (playing a woman's role) until her partner grew out of such behavior. Likewise, women described accepting partners who they knew had other partners when entering the relationship, and waiting around for these partnerships to dissolve. These findings align with those from Gorbach et al. (2002).

Women in relationships in the two casual categories also directly associated their acceptance of partners' concurrency to their relationship type, expressing a lack of control over their partners' behaviors attributable to the lack of clearly defined, and mutually agreed upon boundaries in the relationship. However, not all women used relational control framing in every relationship. Women also used relational affiliation framing in their relationships (Solomon & McLaren, 2008). Affiliative framing was more explicit in Mutually Titled and Defined relationships, in which women described accepting concurrency due to emotional attachment or dependence, and feelings of love and guilt. This finding aligned with those from study by Thompson-Robinson et al. (2005). However, even women in casual relationships discussed accepting concurrency because of emotional attachment or hopes for some type of future relationship with a partner, and thus still used relational affiliation framing.

Overall, the reasons women described for accepting concurrency – or predictors of concurrency acceptance – could mostly be assigned to the Structure of Affective Attachment and Social Norms construct of the Partner Concurrency Acceptance Model. Women's reasons for accepting partner concurrency were largely driven by social exposures (a component of the Structure of Affective Attachment and Social Norms) such as sexual and relationship scripts that determined appropriate sexual, and gender norms that dictated appropriate gender behavior.

However, social exposures also influenced personal risk factors (another component of the Structure of Affective Attachments and Social Norms) among participants. These predictors, such as having a desire to be in a relationship, affective attachment or emotional dependence on a partner, or having fears related to being alone, could be driven by social exposures such as peer norms, sexual scripts, and gender norms, which provide a framework of expected behavior for women. With respect to sexual partnerships, this framework traditionally tells women to validate themselves in terms of their ability to maintain a relationship and to have limited lifetime sexual partners – both of which might

influence a woman to continue a relationship with her partner despite his concurrency. Further, the framework also normalizes concurrency as appropriate male behavior.

These social exposures and personal risk factors also influenced women's comfort with initiating risk reductive behaviors such as communication and condom use. Despite general discomfort among the women with respect to initiating communication or condom use, women expressed being comfortable with getting tested – further evidence of the influence of a power imbalance, as HIV and STI testing is done individually and does not require negotiation with a male partner.

### ***Risk Reductive Behaviors***

Forna et al. (2006) compared women who were HIV-positive and HIV-negative and found women who were HIV-positive were less likely to discuss various HIV risk factors with their partner. These risk factors included: drug use history, incarceration history, STI history, current HIV status, number of past sexual partners, and most notably (with respect to this research), number of current sexual partners. These findings underscore the importance of concurrency communication in reducing HIV and STI risk. Unfortunately, many of the women in this study did not communicate with their partners about other current sexual partners, or only did so if the man initiated the discussion.

Relationship type influenced concurrency communication among women in this study. Women in the least serious and most serious relationships described the least communication with their partner about concurrency. This was due to the implications related to those relationship types. That is, for women in the least serious relationships (those that fit in the Casual, Sex Only category) concurrency was implied, thus there was no need to discuss it with their partner. Likewise, for women in the most serious relationship category (Mutually Titled and Defined), monogamy was expected by both parties, thus initiating a conversation about concurrency would imply distrust to non-monogamy on behalf of the initiator.

Women in relationships that fell in the middle of the relationship type spectrum (Casual, with Expectations) described having the greatest self-efficacy to communicate about concurrency, and therefore discussed doing so more frequently. These women felt they had the right to inquire about other partners (unlike those in Casual, Sex Only relationships) and were not deterred from doing so due to concerns about being perceived as distrustful. Michelle's distinction regarding the perceived appropriateness of initiating such conversations were exemplary of participant's beliefs and are included again here:

I feel comfortable talking to him in the situation. Now if we're just fuck buddies I'm not gonna ask you that because I know the level of our relationship and severity of it. But I know for a fact I could confront him about some shit. (Michelle)

Further, in many relationships, women purposely avoided communication about concurrency. In previous research women described avoiding such communication so as not to "force a partner to lie" (Bowleg et al., 2004). Women in this study described doing so in order to avoid challenging any gender role expectations or relationship scripts. Women participating in this research also described avoiding communication in an attempt to actively avoid awareness of their partners' concurrency, which aligned with McLellan-Lemal et al.'s (2013) findings. Avoiding knowledge or confirmation of a partner's concurrency allowed women remain emotionally satisfied in their relationships without having to make any decisions regarding ending the relationship.

Sales et al. (2012) found greater frequency of partner communication encouraged greater condom use among African American women. Indeed, women in this study who communicated openly with their partners about concurrency reported greater condom use. Unfortunately, only few of the relationships had such communication. Condom use was most closely related to concurrency communication for women in relationships in the Casual, with Expectations category. Alternatively, women in other relationship types used other methods and cues to decide whether a condom was necessary.

Overall, condom use and non-use in partner concurrent relationships were not influenced by the STI risk perception. Rather, across participants, condom use and non-use were largely influenced by individual-level factors (i.e. hedonistic attitudes, frequent vaginal infections, etc.), instead. Women in Mutually Titled and Defined relationships were the only ones to correlate their condom use behaviors to their relationship type – mostly opting out of condoms use because their relationships were presumed to be monogamous. Condoms were still not used even when the partner was discovered to be engaging in concurrency, with one exception. One woman described reintroducing condoms in order to remind her partner of his infidelity. This could be interpreted as an act of empowerment, or as described by Bowleg and colleagues' (2004), an act of punishment. However, it was in no way described as an action taken with HIV or STI risk protection in mind.

Condom use was most often described in Casual, Sex Only relationships, but not necessarily because of any association with the meaning women ascribed to the relationships in this category. Rather, unprotected sex was mostly associated with longer duration of a sexual relationship, and thus, condoms were most often used in Casual, Sex Only relationships (as these were, more often than relationships in the other two categories, short-lived). This finding aligned with previous research that suggests condoms are used more and are perceived as being more acceptable with experimental partners (Gorbach et al., 2002).

Condoms were often discontinued after a period of time, even despite the risk posed by a partner's concurrency. Once discontinued, they were often not reintroduced in sexual relationships. Just because women discontinued condom did not mean they did not have concerns about their partner's safety. In order to "protect" themselves, many of the women described getting tested for HIV and STIs frequently or after learning of a partner's concurrency. In this way, women seemed to be primarily concerned with learning if their partner's behavior was going to result in an STI, rather than preventing an STI in the first place.

### ***Potential Impact of Partner Concurrency Messaging***

Overall, participants in the focus group found the message to be informative, easy to understand, culturally relevant, and relatable. The women found the narratives to be engaging and discussed wanting to know how the scenarios ended. This finding suggests these materials could potentially be used to initiate conversations in a group setting – such as an intervention – about sexual relationship norms in the African American community. Rather than providing an answer to the question “What happened next,” women could be asked about their norms and what they usually observe happening next in such scenarios. This approach would be similar to that of the SISTA (Sisters Informing Sisters about Topics on AIDS) intervention (DiClemente & Wingood, 1995). In this CDC evidence based intervention (EBI), women are provided narratives and asked to provide feedback in a group discussion about how assertive communication could have been implemented. With the messages developed in this study, women could similarly discuss how and why women accept concurrent partners, the dangers of accepting such partners, and harm reduction approaches in these types of relationships.

Most of the women also found the main message of the materials to be familiar. One participant shared her experience of hearing this message from a clinician in her hometown and discussed a desire to continue receiving such messages from doctors.

I would love to go to a doctor who can be transparent with me as opposed to a doctor who says, “Okay, you have this. I’ll give you this medication. Okay, you can go.” Because you really feel like – which most guys feel like too – “Okay I’ll go to a doctor she’ll give me a shot and I’ll be straight.” They don’t really talk to the person or see what’s going on because some doctors really feel like “I’m going to give you what you came here for I’m not getting paid to counsel you.” (Riley)

Riley’s sentiment reflects the realities of healthcare. Clinicians are often pressed for time and little attention is paid to women’s individualized sexual health needs. While some states are now allowing clinicians to prescribe two doses of treatment (one for the patient and one for her partner), there are still strides to be made with respect to doctor patient communication. Treating a patient’s partner is only effective if the relationship remains monogamous after treatment, thus it is important for

doctors to talk to patients about their relationships and potential risk. The suite of materials developed in this study might assist healthcare professionals in initiating efficient conversations with patients that are tailored to the women's relationship type and sexual health needs.

### **Conclusions**

Like their older counterparts, young African American women accepted partners who engaged in concurrency (Harris et al., 2010; McLellan-Lemal et al., 2013). Women in this population expressed various reasons for doing so, but the most salient were: emotional attachment (affiliative relationship framing), attitudes and beliefs supportive of social norms, and not wanting to be alone or lonely. This research also found women mostly were not communicating with their partners about concurrency, but rather using other ways to judge whether there were other sexual partners. This has implications, as once learning of concurrency, women then chose to continue relationships due to not having "concrete proof," which in many cases they could have gotten by initiating communication. Further, women in this study did not initiate or reinstate condom use as a result of their partners' concurrency. Instead, women got tested for HIV and STIs as a retroactive form of protection.

Three fact sheets containing three different narrative messages were developed and pilot tested with an advisory board. The fact sheets were found to be culturally appropriate and relatable. The most significant change proposed by the board was to include practical examples of how to initiate conversations about concurrency. These examples were developed based on the qualitative findings and included in the final versions of the fact sheets.

### **Limitations**

This study had a number of limitations. First, due to time and financial constraints the study was limited to qualitative approaches only. The research topic – partner concurrency acceptance – was previously mostly unexplored, thus the research warranted qualitative approaches. However, due to the nature of qualitative research, the findings cannot be generalized. Further, the interviews were limited

to 90 minutes. While some women were able to speak about all of their partners who engaged in concurrency over the past year in this amount of time, many did not have enough time to finish explaining their timeline. Women also were only asked to speak about their partners who they knew or suspected of engaging in concurrency over the past year. This did not allow for a thorough exploration of women's experiences in relationships in which their partner was monogamous for comparison. Exploring the qualitative findings quantitatively and conducting secondary interviews for clarification or further in-depth exploration would have resulted in more robust findings.

Further, most of the women – 8 out of 11 – who participated in qualitative interviews were traditional college students, and mainly attended two colleges in Atlanta. The lack of diversity in this respect was a result of the recruitment sites – one was near the campus of a predominantly White state institution and one was an event at a historically Black college/university. Thus, many of the participants attended one of these two schools. This could be problematic because the attitudes and beliefs among the women may be representative of the social norms at their respective colleges. However, this is likely not the case, as attitudes and beliefs did not differ between women attending the two schools and also were not different from the three women who were not in college at all. Still, this limits the generalizability of the findings.

In a similar vein, another limitation was the research setting. This research took place in Atlanta, Georgia. In Atlanta, the sex ratio favors men, with 1100 women for every 1000 men, without adjusting for specific racial groups (Carlson, 2015). Since the African American sex ratio imbalance fares worse than the general population's, this suggests a wider gap among African Americans. The exacerbated sex ratio imbalance in Atlanta provided an ideal environment to study the effects of such conditions, but also may have resulted in overstated findings. Further, the limited geographic reach of the research also limits the generalizability of the findings.

Finally, the last limitation is related to the advisory board. Recruitment for the advisory board occurred in May. At this time, many of the interview participants were preparing or had already departed the Atlanta metropolitan area to return to their home states for summer vacation. Thus, this part of the research only included four women and only some of the original participants and their friends. The quality of the focus group could have been improved if more women participated and by including all of the participants and an equal number of non-participants split into two mixed focus groups.

### ***Recommendations for Future Research***

This research developed a suite of materials related to partner concurrency that could be tested and used going forward. Future research should test the model, materials, and scales developed from this research quantitatively among a large, diverse sample of African American women. Especially due to the study's lack of generalizability, it is important that the model is tested quantitatively to ensure the predictors are valid.

Further, researchers should continue to explore how population-level conditions affect African American HIV and STI risk in general, and by way of influencing interpersonal relationships and individual behavior. In doing so, researchers can better target messaging (and interventions) that consider the everyday lived experiences of young African American women and how these experiences might complicate decision-making among the population. One finding from this research related to decision-making that could influence future population-based research involved participant's concerns about their number of lifetime sexual partners. Participants chose to stay with partners who were engaging in concurrency in order to avoid having sex with new partners. While public health research has documented that concurrency, partner concurrency, and greater number of lifetime sexual partners all affect HIV and STI risk, research that quantifies each risk behavior is lacking.

Researchers should also continue to explore individual-level behavior related to partner concurrency acceptance and concurrency communication – specifically exploring other populations involved. For example, this research did not collect or report data from women about relationships in which they *rejected* partner concurrency, although this data could also be helpful in developing messaging strategies about partner concurrency acceptance. Finally, many of the participants in the focus group expressed wanting tips and conversation starters that could facilitate in the initiation of communication with their partner about concurrency. Specifically, many questioned what approaches would result in successful conversations. Thus, future research should also include men and relationship dyads in order to explore what approaches to concurrency communication would be effective in stimulating honest responses, productive conversations, and healthy relationships.

#### ***Recommendations for Future Practice***

Finally, the results and materials developed from this research can be used in public health and communication practice. Public health practitioners can use the fact sheets in interventions to stimulate discussion among women about concurrency acceptance and risk reduction. Based on the findings of this research, clinicians should consider sexual network characteristics and conditions, as well as the importance of relationship type when talking to young African American women about their risk. Further, clinicians can use the fact sheets to supplement these conversations and provide women with a better understanding of their risk and how to protect themselves. Finally, public health communicators should consider the findings of this research when developing and targeting HIV and STI messages for African American women.

## REFERENCES

- Adefuye, A. S., Abiona, T. C., Balogun, J. A., & Lukobo-Durrell, M. (2009). HIV sexual risk behaviors and perception of risk among college students: Implications for planning interventions. *BMC Public Health, 9*, 281-292. doi: 10.1186/1471-2458-9-281
- Adimora, A. A., & Schoenbach, V. J. (2005). Social context, sexual networks, and racial disparities in rates of sexually transmitted infections. *Journal of Infectious Diseases, 191*, 115-122.
- Adimora, A. A., Schoenbach, V. J., & Doherty, I. A. (2007). Concurrent sexual partnerships among men in the United States. *American Journal of Public Health, 97*(12), 2230-2237.
- Adimora, A. A., Schoenbach, V. J., Martinson, F., Donaldson, K. H., Stancil, T. R., & Fullilove, R. E. (2003). Concurrent partnerships among rural African Americans with recently reported heterosexually transmitted HIV infection. *JAIDS Journal of Acquired Immune Deficiency Syndromes, 34*(4), 423-429.
- Adimora, A. A., Schoenbach, V. J., Martinson, F., Donaldson, K. H., Stancil, T. R., & Fullilove, R. E. (2004). Concurrent sexual partnerships among African Americans in the rural South. *Annals of Epidemiology, 14*(3), 155-160.
- Adimora, A. A., Schoenbach, V. J., Taylor, E. M., Khan, M. R., & Schwartz, R. J. (2011). Concurrent partnerships, nonmonogamous partners, and substance use among women in the United States. *American Journal of Public Health, 101*(1), 128-136. doi: 10.2105/ajph.2009.174292
- Adimora, A. A., Schoenbach, V. J., Taylor, E. M., Khan, M. R., Schwartz, R. J., & Miller, W. C. (2013). Sex ratio, poverty, and concurrent partnerships among men and women in the United States: A multilevel analysis. *Annals of Epidemiology, 23*(11), 716-719. doi: 10.1016/j.annepidem.2013.08.002

- Allen, M., & Preiss, R. W. (1997). Comparing the persuasiveness of narrative and statistical evidence using meta-analysis. *Communication Research Reports*, 14(2), 125-131.
- Anderson, R. M. (1999). Transmission dynamics of sexually transmitted infections. In K. K. Holmes, P.-A. Mardh, P. F. Sparling, S. M. Lemon, W. E. Stamm, P. Piot & J. N. Wasserheit (Eds.), *Sexually Transmitted Diseases* (3 ed.). New York, NY: McGraw-Hill.
- Anderson, R. M., Gupta, S., & Ng, W. (1990). The significance of sexual partner contact networks for the transmission dynamics of HIV. *Journal Of Acquired Immune Deficiency Syndromes*, 3(4), 417-429.
- Andrasik, M. P., Chapman, C. H., Clad, R., Murray, K., Foster, J., Morris, M., . . . Kurth, A. E. (2012). Developing concurrency messages for the Black community in Seattle, Washington. *AIDS Education & Prevention*, 24(6), 527-548. doi: 10.1521/aeap.2012.24.6.527
- Aral, S. O. (1999). Sexual network patterns as determinants of STD rates: Paradigm shift in the behavioral epidemiology of STDs made visible. *Sexually Transmitted Diseases*, 26(5), 262-264.
- Baesler, E. J., & Burgoon, J. K. (1994). The temporal effects of story and statistical evidence on belief change. *Communication Research*, 21(5), 582-602.
- Bazargan, M., Kelly, E. M., Stein, J. A., Husaini, B. A., & Bazargan, S. H. (2000). Correlates of HIV risk-taking behaviors among African-American college students: the effect of HIV knowledge, motivation, and behavioral skills. *Journal of the National Medical Association*, 92(8), 391-404.
- Bowleg, L., Lucas, K. J., & Tschann, J. M. (2004). "The ball was always in his court": An exploratory analysis of relationship scripts, sexual scripts, and condom use among African American women. *Psychology of Women Quarterly*, 28(1), 70-82. doi: 10.1111/j.1471-6402.2004.00124.x
- Carlson, A. (2015). Survey: 80,000 more single women than men in Atlanta. *AJC*. Retrieved from <http://www.ajc.com/news/news/map-80000-more-single-women-men-atlanta/nj9Mq/>
- Carnegie, N. B., & Morris, M. (2012). Size matters: concurrency and the epidemic potential of HIV in small networks. *Plos One*, 7(8), e43048-e43048. doi: 10.1371/journal.pone.0043048

- CDC. (2010). The role of STD detection and treatment in HIV prevention - CDC fact sheet. *Sexually Transmitted Diseases*. Retrieved November 20, 2013, from <http://www.cdc.gov/std/hiv/stdfact-std-hiv.htm>
- CDC. (2011a). 10 ways STDs impact women differently from men. Atlanta, GA: Centers for Disease Control and Prevention.
- CDC. (2011b). HIV among women. Retrieved from <http://www.cdc.gov/hiv/topics/women/pdf/women.pdf>
- CDC. (2011c). STD trends in the United States: 2010 national data for gonorrhea, Chlamydia, and syphilis. Retrieved April 14, 2014, from <http://www.cdc.gov/std/stats10/trends.htm>
- CDC. (2011d). STDs in adolescents and young adults. *2010 Sexually Transmitted Diseases Surveillance*. Retrieved November 15, 2013, from <http://www.cdc.gov/std/stats10/adol.htm>
- CDC. (2011e). STDs in women and infants. Retrieved March 15, 2012, from <http://www.cdc.gov/std/stats10/womenandinf.htm>
- CDC. (2012). STDs in racial and ethnic minorities. *2011 Sexually transmitted disease surveillance*. Retrieved March, 2014, from <http://www.cdc.gov/std/stats11/minorities.htm>
- CDC. (2013a). African Americans/Blacks. *Health disparities in HIV/AIDS, viral hepatitis, STD, and TB*. Retrieved March 5, 2014, from <http://www.cdc.gov/nchhstp/healthdisparities/AfricanAmericans.html>
- CDC. (2013b). HIV and AIDS among African American youth.
- CDC. (2013c). HIV and substance use in the united states. *HIV/AIDS*. from <http://www.cdc.gov/hiv/risk/behavior/substanceuse.html>
- CDC. (2013d). HPV and cancer. *Human papillomavirus (HPV)*. Retrieved November 16, 2013, from <http://www.cdc.gov/hpv/cancer.html>

- CDC. (2013e). Sexually Transmitted Disease Surveillance 2011. Atlanta, GA: Centers for Disease Control and Prevention.
- CDC. (2013f). STD Health Equity - Rates by Gender. Retrieved November 15, 2013, from <http://www.cdc.gov/std/health-disparities/gender.htm>
- CDC. (2014a). *CDC Clear Communication Index: A tool for developing and assessing CDC public communication products*. Atlanta, GA: Centers for Disease Control and Prevention.
- CDC. (2014b). HIV among African Americans. Atlanta, GA: Centers for Disease Control and Prevention.
- CDC. (2015). Act Against AIDS: Campaigns. Retrieved July 6, 2015, from <http://www.cdc.gov/actagainstaids/index.html>
- Cline, R. J. (2003). Everyday interpersonal communication and health. In T. L. Thompson, A. M. Dorsey, K. I. Miller & R. Parrott (Eds.), *Handbook of health communication* (pp. 285-318). Mahwah, NJ: Routledge.
- Connell, R. (1987). *Gender and power: Society, the person, and sexual politics*. Chicago: Stanford University Press.
- D'Emilio, J., & Freedman, E. B. (1988). *Intimate matters: A history of sexuality in America*: University of Chicago Press.
- Davis, K. C., Uhrig, J., Rupert, D., Frazee, J., Goetz, J., & Slater, M. (2011). Effectiveness of a mass media campaign in promoting HIV testing information seeking among African American women. *Journal of Health Communication, 16*(9), 1024-1039. doi: 10.1080/10810730.2011.571342
- deMarrais, K., & Tisdale, K. (2002). What happens when researchers inquire into difficult emotions?: Reflections on studying women's anger through qualitative interviews. *Educational Psychologist, 37*(2), 115-123.

- DePadilla, L., Windle, M., Wingood, G., Cooper, H., & DiClemente, R. (2011). Condom use among young women: Modeling the theory of gender and power. *Health Psychology, 30*(3), 310-319. doi: 10.1037/a0022871
- Devos-Comby, L., & Salovey, P. (2002). Applying persuasion strategies to alter HIV-relevant thoughts and behavior. *Review of General Psychology, 6*(3), 287-304. doi: 10.1037/1089-2680.6.3.287
- DiClemente, R. J., & Wingood, G. M. (1995). A randomized controlled trial of an HIV sexual risk-reduction intervention for young African-American women. *JAMA, 274*(16), 1271-1276.
- Doherty, I. A., Schoenbach, V. J., & Adimora, A. A. (2009). Condom use and duration of concurrent partnerships among men in the United States. *Sexually Transmitted Diseases, 36*(5), 265-272. doi: 10.1097/OLQ.0b013e318191ba2a
- Doherty, I. A., Shiboski, S., Ellen, J. M., Adimora, A. A., & Padian, N. S. (2006). Sexual bridging socially and over time: a simulation model exploring the relative effects of mixing and concurrency on viral sexually transmitted infection transmission. *Sexually Transmitted Diseases, 33*(6), 368-373.
- Edgar, T., Freimuth, V. S., Hammond, S. L., McDonald, D. A., & Fink, E. L. (1992). Strategic sexual communication: Condom use resistance and response. *Health Communication, 4*(2), 83-104. doi: 10.1207/s15327027hc0402\_1
- El Bcheraoui, C., Sutton, M. Y., Hardnett, F. P., & Jones, S. B. (2013). Patterns of condom use among students at historically Black colleges and universities: Implications for HIV prevention efforts among college-age young adults. *AIDS Care, 25*(2), 186-193. doi: 10.1080/09540121.2012.687864
- Ferguson, Y. O., Quinn, S. C., Eng, E., & Sandelowski, M. (2006). The gender ratio imbalance and its relationship to risk of HIV/AIDS among African American women at historically black colleges and universities. *AIDS Care, 18*(4), 323-331. doi: 10.1080/09540120500162122
- Festinger, L. (1962). *A theory of cognitive dissonance* (Vol. 2): Stanford university press.

- Finer, L. B., Darroch, J. E., & Singh, S. (1999). Sexual partnership patterns as a behavioral risk factor for sexually transmitted diseases. *Family Planning Perspectives, 31*(5), 228-236.
- Forna, F. M., Fitzpatrick, L., Adimora, A. A., McLellan-Lemal, E., Leone, P., Brooks, J. T., . . . Greenberg, A. (2006). A case-control study of factors associated with HIV infection among Black women. *Journal Of The National Medical Association, 98*(11), 1798-1804.
- Gorbach, P. M., Stoner, B. P., Aral, S. O., H Whittington, W. L., & Holmes, K. K. (2002). "It takes a village": Understanding concurrent sexual partnerships in Seattle, Washington. *Sexually Transmitted Diseases, 29*(8), 453-462.
- Greenwald, A. G., & Ronis, D. L. (1978). Twenty years of cognitive dissonance: Case study of the evolution of a theory. *Psychological Review, 85*(1), 53.
- Grieb, S. M. D., Davey-Rothwell, M., & Latkin, C. A. (2012a). Concurrent sexual partnerships among urban African American high-risk women with main sex partners. *AIDS And Behavior, 16*(2), 323-333. doi: 10.1007/s10461-011-9954-6
- Grieb, S. M. D., Davey-Rothwell, M., & Latkin, C. A. (2012b). Social and sexual network characteristics and concurrent sexual partnerships among urban African American high-risk women with main sex partners. *AIDS And Behavior, 16*(4), 882-889. doi: 10.1007/s10461-011-0030-z
- Guttentag, M., & Secord, P. F. (1983). Too many women? The sex ratio question.
- Hallfors, D. D., Iritani, B. J., Miller, W. C., & Bauer, D. J. (2007). Sexual and drug behavior patterns and HIV and STD racial disparities: The need for new directions. *American Journal of Public Health, 97*(1), 125-132. doi: 10.2105/ajph.2005.075747
- Harding, S. G. (1987). Introduction: Is there a feminist method *Feminism and methodology: Social science issues*. Bloomington: Indiana University Press.

- Harris, G., Mallory, C., & Stampley, C. (2010). A qualitative study of man-sharing and the implications for midlife African American women's risk for HIV infection. *Women & Health, 50*(7), 670-687. doi: 10.1080/03630242.2010.520253
- Hess, K. L., Javanbakht, M., Brown, J. M., Weiss, R. E., Hsu, P., & Gorbach, P. M. (2012). Intimate partner violence and sexually transmitted infections among young adult women. *Sexually Transmitted Diseases, 39*(5), 366-371.
- Hill Collins, P. (1989). The social construction of Black Feminist Thought. *Signs*(4), 745. doi: 10.2307/3174683
- Hill Collins, P. (1999). Mammies, matriarchs, and other controlling images *Black feminist thought: Knowledge, consciousness, and the politics of empowerment* (Second ed.). New York City, NY: Routledge.
- Hill Collins, P. (2000). *Black feminist thought: Knowledge, consciousness, and the politics of empowerment* (2 ed.). New York: Routledge.
- Hill Collins, P. (2009). *Black feminist thought: Knowledge, consciousness, and the politics of empowerment*. New York: Routledge.
- Hinyard, L. J., & Kreuter, M. W. (2007). Using narrative communication as a tool for health behavior change: A conceptual, theoretical, and empirical overview. *Health Education & Behavior, 34*(5), 777-792.
- hooks, b. (1989). *Talking back: Thinking feminist, thinking black*. Boston, MA: South End Press.
- Johnson, E. H., Jackson, L. A., Hinkle, Y., Gilbert, D., Hoopwood, T., Lollis, C. M., . . . Gant, L. (1994). What is the significance of Black-White differences in risky sexual behavior? *Journal Of The National Medical Association, 86*(10), 745-759.

- Kenney, J. W., Reinholtz, C., & Angelini, P. J. (1998). Sexual abuse, sex before age 16, and high-risk behaviors of young females with sexually transmitted diseases. *JOGNN: Journal of Obstetric, Gynecologic & Neonatal Nursing*, 27(1), 54-63. doi: 10.1111/j.1552-6909.1998.tb02591.x
- Kretzschmar, M., & Morris, M. (1996). Measures of concurrency in networks and the spread of infectious disease. *Mathematical Biosciences*, 133(2), 165-195.
- Kreuter, M. W., & Skinner, C. S. (2000). Tailoring: What's in a name? *Health Education Research*, 15, 1-4.
- Laumann, E. O., Ellingson, S., Mahay, J., Paik, A., & Youm, Y. (2004). *The sexual organization of the city*. Chicago: University of Chicago Press.
- Laumann, E. O., Gagnon, J. H., Michael, R. T., & Michaels, S. (1994). *Sexual networks The social organization of sexuality: Sexual practices in the United States* Chicago: University of Chicago Press.
- Laumann, E. O., & Youm, Y. (1999). Racial/ethnic group differences in the prevalence of sexually transmitted diseases in the United States: a network explanation. *Sexually Transmitted Diseases*, 26(5), 250-261.
- Lenoir, C. D., Adler, N. E., Borzekowski, D. L. G., Tschann, J. M., & Ellen, J. M. (2006). What you don't know can hurt you: Perceptions of sex-partner concurrency and partner-reported behavior. *Journal of Adolescent Health*, 38(3), 179-185.
- Maloney, E., Lapinski, M., & Witte, K. (2011). Fear appeals and persuasion: A review and update of the extended parallel process model. *Social and Personality Psychology Compass*, 5(4), 206-219.
- Manhart, L. E., Aral, S. O., Holmes, K. K., & Foxman, B. (2002). Sex partner concurrency: measurement, prevalence, and correlates among urban 18-39-year-olds. *Sexually Transmitted Diseases*, 29(3), 133-143.
- McLellan-Lemal, E., Toledo, L., O'Daniels, C., Villar-Loubet, O., Simpson, C., Adimora, A. A., & Marks, G. (2013). "A man's gonna do what a man wants to do": African American and Hispanic women's

- perceptions about heterosexual relationships: a qualitative study. *BMC Women's Health*, 13(27), (24 May 2013)-(2024 May 2013).
- Moreno, C. L., El-Bassel, N., & Morrill, A. C. (2007). Heterosexual women of color and HIV risk: Sexual risk factors for HIV among Latina and African American women. *Women & Health*, 45(3), 1-15.
- Morris, M., Kurth, A. E., Hamilton, D. T., Moody, J., & Wakefield, S. (2009). Concurrent partnerships and HIV prevalence disparities by race: Linking science and public health practice. *American Journal of Public Health*, 99(6), 1023-1031.
- Nelson, S. J., Manhart, L. E., Gorbach, P. M., Martin, D. H., Stoner, B. P., Aral, S. O., & Holmes, K. K. (2007). Measuring sex partner concurrency: it's what's missing that counts. *Sexually Transmitted Diseases*, 34(10), 801-807.
- Noar, S. M., Palmgreen, P., Chabot, M., Dobransky, N., & Zimmerman, R. S. (2009). A 10-year systematic review of HIV/AIDS mass communication campaigns: Have we made progress? *Journal of Health Communication*, 14(1), 15-42. doi: 10.1080/10810730802592239
- Nunn, A., Dickman, S., Cornwall, A., Rosengard, C., Kwakwa, H., Kim, D., . . . Mayer, K. H. (2011). Social, structural and behavioral drivers of concurrent partnerships among African American men in Philadelphia. *AIDS Care*, 23(11), 1392-1399. doi: 10.1080/09540121.2011.565030
- O'Donnell, L., O'Donnell, C. R., & Stueve, A. (2001). Early sexual initiation and subsequent sex-related risks among urban minority youth: The Reach for Health study. *Family Planning Perspectives*, 33(6), 268.
- Paxton, K. C., Williams, J. K., Bolden, S., Guzman, Y., & Harawa, N. T. (2013). HIV risk behaviors among African American women with at-risk male partners. *Journal of AIDS and Clinical Research*, 4(7), 221-221.
- PLAIN. (2011). *Federal Plain Language Guidelines*. Plain Language Action and Information Network (PLAIN).

- Polkinghorne, D. (1988). *Narrative knowing and the human sciences*. Albany: State University of New York Press.
- Polkinghorne, D. (1995). Narrative configuration in qualitative analysis. *International Journal of Qualitative Studies in Education (QSE)*, 8(1), 5.
- Poulson, R. L., Bradshaw, S. D., Huff, J. M., Peebles, L. L., & Hilton, D. B. (2008). Risky sex behaviors among African American college students: The influence of alcohol, marijuana, and religiosity. *North American Journal of Psychology*, 10(3), 529-542.
- Randolph, M. E., Torres, H., Gore-Felton, C., Lloyd, B., & McGarvey, E. L. (2009). Alcohol use and sexual risk behavior among college students: Understanding gender and ethnic differences. *American Journal of Drug & Alcohol Abuse*, 35(2), 80-84. doi: 10.1080/00952990802585422
- Romer, D., Sznitman, S., DiClemente, R., Salazar, L. F., Venable, P. A., Carey, M. P., . . . Juzang, I. (2009). Mass media as an HIV-prevention strategy: Using culturally sensitive messages to reduce HIV-associated sexual behavior of at-risk African American youth. *American Journal of Public Health*, 99(12), 2150-2159. doi: 10.2105/ajph.2008.155036
- Rosenthal, D., Gifford, S., & Moore, S. (1998). Safe sex or safe love: Competing discourses? *AIDS Care*, 10(1), 34.
- Ross, M. W., Chatterjee, N. S., & Leonard, L. (2004). A community level syphilis prevention programme: Outcome data from a controlled trial. *Sexually Transmitted Infections*, 80(2), 100-104.
- Sachdeva, R. K., & Wanchu, A. (2006). Women's issues in HIV infection. *JK science : Journal of medical education & research*, 8(3), 129-132.
- Sales, J. M., Lang, D. L., DiClemente, R. J., Latham, T. P., Wingood, G. M., Hardin, J. W., & Rose, E. S. (2012). The mediating role of partner communication frequency on condom use among African American adolescent females participating in an HIV prevention intervention. *Health Psychology*, 31(1), 63-69. doi: 10.1037/a0025073

- Satterwhite, C. L., Torrone, E., Meites, E., Dunne, E. F., Mahajan, R., Ocfemia, M. C. B., . . . Weinstock, H. (2013). Sexually transmitted infections among US women and men: prevalence and incidence estimates, 2008. *Sexually Transmitted Diseases, 40*(3), 187-193.
- Seth, P., Patel, S. N., Sales, J. M., DiClemente, R. J., Wingood, G. M., & Rose, E. S. (2011). The impact of depressive symptomatology on risky sexual behavior and sexual communication among African American female adolescents. *Psychology, Health & Medicine, 16*(3), 346-356.
- Seth, P., Wingood, G. M., DiClemente, R. J., & Robinson, L. S. (2011). Alcohol use as a marker for risky sexual behaviors and biologically confirmed sexually transmitted infections among young adult African-American women. *Women's Health Issues, 21*(2), 130-135. doi: 10.1016/j.whi.2010.10.005
- Small, E., Weinman, M., Buzi, R., & Smith, P. (2010). Explaining condom use disparity among Black and Hispanic female adolescents. *Child & Adolescent Social Work Journal, 27*(5), 365-376. doi: 10.1007/s10560-010-0207-8
- Solomon, D. H., Dillard, J. P., & Anderson, J. W. (2002). Episode type, attachment orientation, and frame salience: Evidence for a theory of relational framing. *Human Communication Research, 28*(1), 136.
- Solomon, D. H., & McLaren, R. M. (2008). Relational framing theory. In L. A. Baxter & D. O. Braithewaite (Eds.), *Engaging theories in interpersonal communication: Multiple perspectives*. (pp. 103-115). Thousand Oaks, CA US: Sage Publications, Inc.
- Stephens, D. P., & Phillips, L. (2005). Integrating Black feminist thought into conceptual frameworks of African American adolescent women's sexual scripting processes. *Sexualities, Evolution & Gender, 7*(1), 37-55.
- Taylor, S. E., & Thompson, S. C. (1982). Stalking the elusive 'vividness' effect. *Psychological Review, 89*(2), 155-181. doi: 10.1037/0033-295X.89.2.155

- Thomas, J. C., & Thomas, K. K. (1999). Things ain't what they ought to be: social forces underlying racial disparities in rates of sexually transmitted diseases in a rural North Carolina county. *Social Science & Medicine*, 49(8), 1075-1084.
- Thompson-Robinson, M. V., Richter, D. L., Shegog, M. L., Weaver, M., Trahan, L., Sellers, D. B., & Brown, V. L. (2005). Perceptions of partner risk and Influences on sexual decision-making for HIV prevention among students at Historically Black Colleges and Universities. *Journal of African American Studies*, 9(2), 16-28.
- U.S. Census Bureau. (2000). Male-female ratio by race alone or in combination and Hispanic or Latino origin for the United States: 2000 (PHC-T-11). from <http://www.census.gov/population/www/cen2000/briefs/phc-t11/index.html>
- Wertz, F. J., Charmaz, K., McMullen, L. M., Josselson, R., Anderson, R., & McSpadden, E. (2011). *Five ways of doing qualitative analysis: Phenomenological psychology, grounded theory, discourse analysis, narrative research, and intuitive inquiry*. New York, NY: Guilford Press.
- Whitmore, S. K., Kann, L., Prejean, J., Koenig, L. J., Branson, B. M., Hall, H. I., . . . Valleroy, L. A. (2012). Vital signs: HIV infection, testing, and risk behaviors among youths - United States. *Morbidity and Mortality Weekly Report*, 61(47), 971-976.
- Wingood, G. M., & DiClemente, R. J. (2000). Application of the theory of gender and power to examine HIV-related exposures, risk factors, and effective interventions for women. *Health Education & Behavior: The Official Publication Of The Society For Public Health Education*, 27(5), 539-565.
- Witte, K. (1994). Fear control and danger control: A test of the extended parallel process model (EPPM). *Communication Monographs*, 61, 113-134.
- Witte, K. (1998). Fear as motivator, fear as inhibitor: Using the extended parallel process model to explain fear appeal successes and failures. In P. A. A. L. K. Guerrero (Ed.), *Handbook of*

*communication and emotion: Research, theory, applications, and contexts* (pp. 423-450). San Diego, CA: Academic Press.

Witte, K., Cameron, K. A., McKeon, J., & Berkowitz, J. (1996). Predicting risk behaviors: Development and validation of a diagnostic scale. *Journal of Health Communication, 1*, 317 - 341.

## APPENDICES

### Appendix A. Lexicon of Participant Terms

1. **Boo:** an affectionate title used to by women to describe casual partners who they like and spent leisure time with, but with whom they do not always expect a long-term relationship
2. **Boyfriend (girlfriend):** titles used only when a commitment is made and recognized by both partners in a relationship
3. **Catching feelings:** becoming more emotionally attached or invested in a partner; starting to like a partner more in a romantic way
4. **Dating:** a title used to describe a casual relationship in which the partners spend time together doing leisure activities (such as eating at restaurants, going to the movies, etc)
5. **Friends:** a title used to describe a sexual relationship with a partner who was initially a platonic friend and who the woman still considers to be a good friend. These relationships develop slowly and are different from “friends with benefits” in that the friendship in these relationships existed before the relationship became sexual and is highly prioritized (over the sexual relationship).
6. **Friends with benefits:** a title used to describe a relationship in which partners have a sexual relationship but occasionally might spend time together without having sex (whether alone or in social circles/with mutual friends). These relationships differ from “friends” in that the sex is prioritized, but entail more interpersonal interaction than “fuck buddies” or “just sex” relationships.
7. **Fuck buddies:** a title used to describe relationships based solely on sex with no expectations or leisure time spent together and very little communication between partners

8. **Just sex:** see “fuck buddies”; also a title used by women to intentionally deny any friendship between a woman and her sexual partner
9. **Main chick:** a woman in a relationship who is prioritized by her male partner although he has additional sexual partners. Priority is given in the form of respect, time, and public acknowledgment.
10. **Number:** (also bodies, body count) the number of people one individual has ever had sex with; lifetime sexual partners
11. **Side chick:** a women in a relationship who is used for sex, or for “fun,” by a male partner that has other sexual partners of whom the woman is aware
12. **Situationship:** a bad relationship that is based primarily on sex and in which one or both partners has other sexual partners
13. **Talking:** a broadly used term that describes any relationship that is not mutually titled and defined; usually used to describe relationships that were more than just sex

## Appendix B. Study Consent Forms

**University of Georgia**  
**Individual Interview Consent Form**  
**Navigation of Partner Concurrent Relationships among African American Women:**  
**Developing Messages and Modeling Attitudes (Phase I)**

### Researcher's Statement

We are asking you to take part in a research study. Before you decide to participate in this study, it is important that you understand why the research is being done and what it will involve. This form is designed to give you the information about the study so you can decide whether to be in the study or not. Please take the time to read the following information carefully. Please ask the researcher if there is anything that is not clear or if you need more information. When all your questions have been answered, you can decide if you want to be in the study or not. This process is called "informed consent." A copy of this form will be given to you.

**Principal Investigator:** Jessica Muilenburg, PhD  
Department of Health Promotion and Behavior  
University of Georgia  
706-542-4365  
[jlm@uga.edu](mailto:jlm@uga.edu)

### Purpose of the Study

This study is part of a larger study exploring "partner concurrency," or when your sexual partner engages in sex with another person. The objective of this study is to identify factors that contribute to how African American women navigate partner concurrency and to develop effective messages about partner concurrency acceptance. The long-term goal of this research is to reduce HIV and STI incidence among young adult African American women by changing attitudes and expectations among these women. You are being asked to participate in this research because you meet eligibility criteria for the study.

### Study Procedures

If you agree to take part in the study, you will be asked to participate in one 60 to 90 minute interview. In this interview you will be asked questions about: your expectations in relationships, your attitudes about partner concurrency, your communication with your partner, and your STI and HIV prevention practices.

### Risks and Discomforts

There are minimal risks associated with your participation in this research. You may experience emotional stress, sadness, and/or discomfort discussing your current and past sexual relationships as well as your partner's sexual concurrency. In order to minimize this risk you are welcome to change the subject or stop the interview at any time if you become distressed. Further there is a risk of breach of confidentiality. To minimize this risk, your data and contact information will be stored, only temporarily, in separate unique-password protected files, and will only use pseudonyms.

**Benefits**

This study will not benefit you directly. However, your participation in this research will aid in the development of knowledge about the research topic. The findings from this project may be used to inform future studies of its kind. Further, participating in the study gives African American women a voice, and it provides insight into African American women's perspectives regarding relationship dynamics and sexual health.

**Incentives for Participation**

At the completion of this interview you will be compensated \$25 for your time and travel expenses.

**Audio Recording**

Your interview will be audio recorded so that the researcher will be able to transcribe your interview for later analysis. The audio recording of your interview will be discarded once your interview is transcribed.

**Privacy/Confidentiality**

The results of the research study may be published, but your name or any identifying information will not be used. Instead a pseudonym will be used. Interview transcripts will be stored in a password-protected file only accessible by the researchers and there will be no identifiers associated with the transcripts. In order to process the payment for your incentive, you will need to sign a receipt with your pseudonym and that receipt will be collected and submitted to the Department of Health Promotion and Behavior's business office. Otherwise, researchers will not release identifiable results of the study to anyone other than individuals working on the project without your written consent unless required by law. Additionally, you are entitled to a copy of your own data and it will be provided to you upon request.

**Taking Part is Voluntary**

Your participation, of course, is voluntary but would be greatly appreciated. You may choose not to participate or to withdraw your consent at any time without penalty or loss of benefits to which you are otherwise entitled. If you agree to the use of your information/data for this research project, please simply sign on the line below; if you don't agree, none of your data will be collected or included in the research. If you decide to stop or withdraw from the study, the information/data collected from or about you up to the point of your withdrawal will be kept as part of the study and may continue to be analyzed.

**If you have questions**

The researchers conducting this study are: Ashley Lima, a third year doctoral candidate and Jessica Muilenburg, a professor at the University of Georgia. You may ask any questions you have now. If you have questions later, you are encouraged to contact Ashley Lima at 240-377-6785 and [aclima@uga.edu](mailto:aclima@uga.edu) or Jessica Muilenburg at 706-542-4365 and [jlm@uga.edu](mailto:jlm@uga.edu). If you have any questions or concerns regarding your rights as a research participant in this study, you may contact the Institutional Review Board (IRB) Chairperson at 706.542.3199 or [irb@uga.edu](mailto:irb@uga.edu).

**Research Subject's Consent to Participate in Research:**

To voluntarily agree to take part in this study, you must sign on the line below. Your signature below indicates that you have read or had read to you this entire consent form, and have had all of your questions answered.

*(signature page)*

**University of Georgia**  
**Advisory Board Consent Form**  
**Navigation of Partner Concurrent Relationships among African American Women:**  
**Developing Messages and Modeling Attitudes (Phase II)**

**Researcher's Statement**

We are asking you to take part in a research study. Before you decide to participate in this study, it is important that you understand why the research is being done and what it will involve. This form is designed to give you the information about the study so you can decide whether to be in the study or not. Please take the time to read the following information carefully. Please ask the researcher if there is anything that is not clear or if you need more information. When all your questions have been answered, you can decide if you want to be in the study or not. This process is called "informed consent." A copy of this form will be given to you.

**Principal Investigator:** Jessica Muilenburg, PhD  
Department of Health Promotion and Behavior  
University of Georgia  
706-542-4365  
[jlm@uga.edu](mailto:jlm@uga.edu)

**Purpose of the Study**

This study is part of a larger study exploring "partner concurrency," or when your sexual partner engages in sex with another person. The objective of this study is to identify factors that contribute to how African American women navigate partner concurrency and to develop effective messages about partner concurrency acceptance. The long-term goal of this research is to reduce HIV and STI incidence among young adult African American women by changing attitudes and expectations among these women. You are being asked to participate in this research because you meet eligibility criteria for the study.

**Study Procedures**

If you agree to take part in the study, you will be asked to participate in one 120-minute focus group. In this focus group you will be asked questions about messages regarding partner concurrency. You will be asked to answer these questions first individually, then with a partner, and finally in a group discussion.

**Risks and Discomforts**

We do not anticipate any risks from participating in this phase of the research.

**Benefits**

This study will not benefit you directly. However, your participation in this research will aid in the development of knowledge about the research topic. The findings from this project may be used to inform future studies of its kind.

**Incentives for Participation**

At the completion of this interview you will be compensated with a \$25 gift card for your time and travel expenses. You will also receive lunch during the focus group.

**Audio Recording**

The group discussion will be audio recorded so that the researcher will be able to transcribe the group's feedback for later analysis. In order to capture the intricacies of focus group dialogue (i.e. turn taking, pauses, etc.), the audio recording of the focus group discussion will be archived for up to 2 years for future use (further analysis and publication) once it is transcribed.

**Privacy/Confidentiality**

Even though the investigator will emphasize to all participants that comments made during the focus group session should be kept confidential, it is possible that participants may repeat comments outside of the group at some time in the future. The results of the research study may be published, but names or any identifying information will not be used. Instead pseudonyms will be used. Focus group transcripts will be stored in a password-protected file only accessible by the researchers and there will be no identifiers associated with the transcripts. In order to process the payment for your incentive, you will need to sign a receipt with your pseudonym and that receipt will be collected and submitted to the Department of Health Promotion and Behavior's business office. Otherwise, researchers will not release identifiable results of the study to anyone other than individuals working on the project without your written consent unless required by law. Additionally, you are entitled to a copy of your own data and it will be provided to you upon request.

**Taking Part is Voluntary**

Your participation, of course, is voluntary but would be greatly appreciated. You may choose not to participate or to withdraw your consent at any time without penalty or loss of benefits to which you are otherwise entitled. If you agree to the use of your information/data for this research project, please simply sign on the line below; if you don't agree, none of your data will be collected or included in the research. If you decide to stop or withdraw from the study, the information/data collected from or about you up to the point of your withdrawal will be kept as part of the study and may continue to be analyzed.

**If You Have Questions**

The researchers conducting this study are: Ashley Lima, a third year doctoral candidate and Jessica Muilenburg, a professor at the University of Georgia. You may ask any questions you have now. If you have questions later, you are encouraged to contact Ashley Lima at 240-377-6785 and [aclima@uga.edu](mailto:aclima@uga.edu) or Jessica Muilenburg at 706-542-4365 and [jlm@uga.edu](mailto:jlm@uga.edu). If you have any questions or concerns regarding your rights as a research participant in this study, you may contact the Institutional Review Board (IRB) Chairperson at 706.542.3199 or [irb@uga.edu](mailto:irb@uga.edu).

**Research Subject's Consent to Participate in Research:**

To voluntarily agree to take part in this study, you must sign on the line below. Your signature below indicates that you have read or had read to you this entire consent form, and have had all of your questions answered.

*(signature page)*

## Appendix C. Individual Interview Guide

**Instruction:** I want to talk to you about what you expect from men who you have sex with and also what has actually happened with these men. While doing so we'll also talk about STIs and HIV and sexual communication. Do you have any questions about any of these topics? Okay please stop me if you have any question, anytime. I'm really interested in your stories.

1. Think about your ideal relationship and tell me what that would be like.

### Possible Prompts

- *About how old would he be? Would he be African American?*
- *How would he treat you?*
- *Would it be okay that he talked to others?*
- *Would you talk to others?*

**Instruction:** You indicated in your screening survey that you have had one or more partners in the past year who you knew or suspected of having another sexual partner. So together we're going to create a timeline of your current and past year sexual partners using initials or fake names for each partner and including age and race. I will start it for you: Who is the most current guy you had sex with? When did you start having sex with him? When did you stop? Think back and tell me who you were having sex with last October? When you're done place a check next to each person who you knew or suspected of having (an)other sexual partner(s). Make sure you include anyone who you had a one-night stand with or any guys who u just had sex with once.

2. Let's start with the most recent partner you checked on your timeline. Tell me about your relationship with \_\_\_\_\_. Start from the beginning – from when you met.

### Possible Prompts

- *How would you define this relationship with \_\_\_\_\_ (i.e. girlfriend-boyfriend, talking, etc)?*
- *Tell me more about how the status (i.e. girlfriend-boyfriend, talking, etc) and boundaries (i.e. what was allowed, not allowed, etc) of your relationship with \_\_\_\_\_ were defined.*
- *Tell me about your initial expectations from this partner. Was it okay, initially, that they talked to/had sex with others?*
- *Initially, AT THE VERY BEGINNING, what did you want from this relationship (to be boyfriend/girlfriend, casual, get married, etc)?*
  - *Did you get it?*

3. Think about the period **before** you and \_\_\_\_\_ had sex. Did you guys ever talk about sex?

### Possible Prompts

- *Tell me about what topics you talked about.*
  - *Before having sex did you talk about condom use?*
  - *Before having sex did you talk about sexual history or current other partners?*
  - *Before having sex did you talk about STIs or HIV?*
- *Who would initiate these conversations?*
- *When would they occur?*
- *What would be the outcome? (Fighting, anger, were they productive in getting you what you wanted?)*
- *Tell me (more) about how talking with \_\_\_\_\_ about sex before you guys had sex made you feel.*

4. Think about the first time you had sex with \_\_\_\_\_. Tell me about that time.

**Possible Prompts**

- Was a condom used?
- Was alcohol or drugs involved?
- At the point when you were making the decision to have sex with him, where did you think the relationship would go?
- How did your expectations about where you thought the relationship would go affect your decision to use or not use a condom?

5. Think about the period **after** you and \_\_\_\_\_ started having sex. Did you guys ever talk about sex? Tell me about your communication about sex after you started having sex.

**Possible Prompts**

- Tell me about what topics you talked about?
  - After you started having sex did you talk about condom use?
  - After you started having sex did you talk about sexual history or current other partners?
  - After you started having sex did you talk about STIs or HIV?
- Who would initiate these conversations?
- When would they occur?
- What would be the outcome? (Fighting, anger, were they productive in getting you what you wanted?)
- Tell me (more) about how talking with \_\_\_\_\_ about sex after you started having sex with him made you feel.

6. Overall, what are some things about \_\_\_\_\_ or about your relationship with him that made it harder or easier to talk to him about sex?

7. Think about how you came to the conclusion that \_\_\_\_\_ had sex with someone else. Tell me about that.

**Possible Prompts**

- Did you know for sure or only suspect that \_\_\_\_\_ was having sex with someone else?
  - If so: How did you find out?
  - If not: What made you suspect?

8. Tell me about how things changed after you knew/thought \_\_\_\_\_ was having sex with someone else.

**Possible Prompts**

- How did it make you feel?
- Did you continue to have sex with him?
- Tell me about things you considered in your decision to react in this way to your partner's concurrency

9. Now keep thinking about how things were after you knew he was having sex with someone else. Tell me about how you thought about your STI risk and protecting yourself.

**Possible Prompts**

- *Did condom use change when you found out this partner was having sex with someone else?*
- *Did you get tested after you found out?*
- *Did you think about asking him to get tested after you found out?*

10. **(Check Timeline)** Did you ever have sex with someone else while having sex with \_\_\_\_\_? Is it someone on the timeline? Tell me about him.

**Possible Prompts**

- *Was it before or after you started having sex with \_\_\_\_\_?*
- *Tell me about the other relationship? CYCLE BACK QUESTIONS*

---

**VERY LAST QUESTION SET (ask after all partners)**

11. Do you think women should remain with men who have sex with other women?
12. Overall, what are some reasons some women might remain with these men even though they want the man to themselves?
13. If you think about the last question with African American women, specifically, do you think there are any additional reasons?

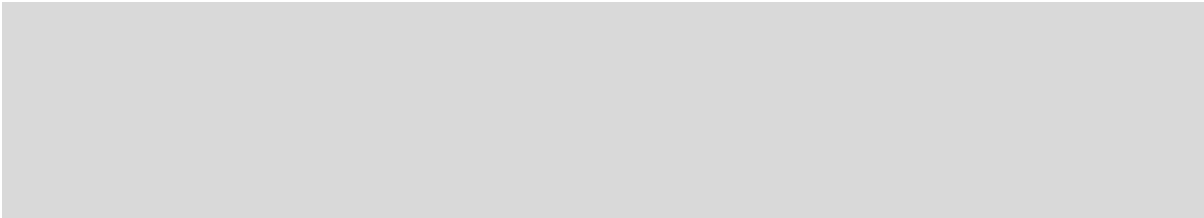
## Appendix D. Advisory Board Materials

### Individual Response Sheet

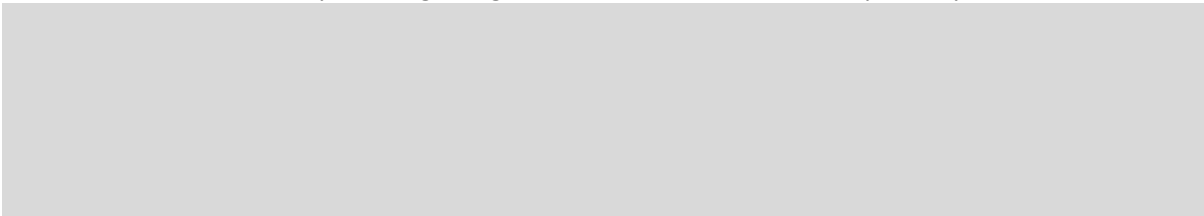
Please answer the following questions while working alone.

**Factsheet Name:** \_\_\_\_\_

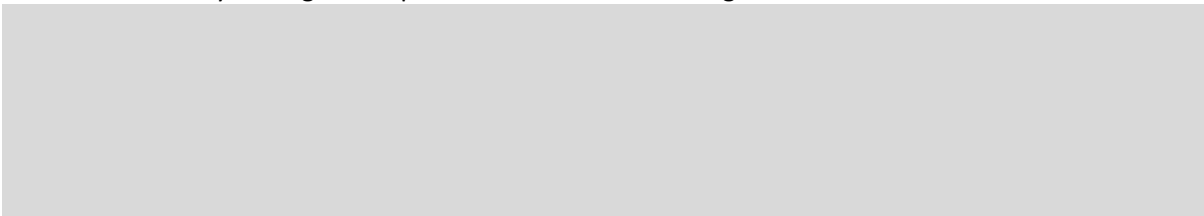
1. Does this fact sheet make you feel having a partner who is sleeping with other women might cause you to get an STD? Why or why not?



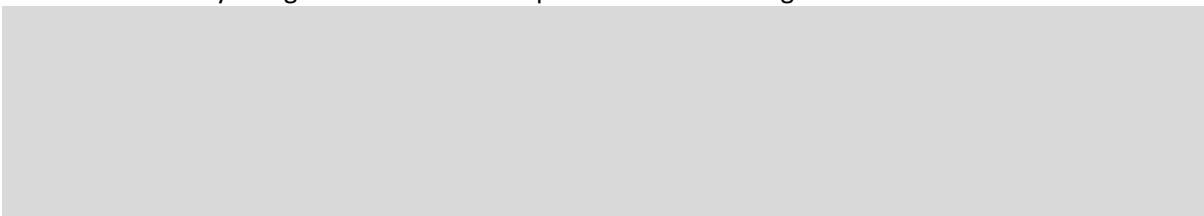
2. Does this fact sheet make you feel getting an STD would be serious? Why or why not?



3. Does this fact sheet make you feel a woman can decrease her chance of getting an STD or STD related sickness by talking to her partner about if he is having sex with other women?



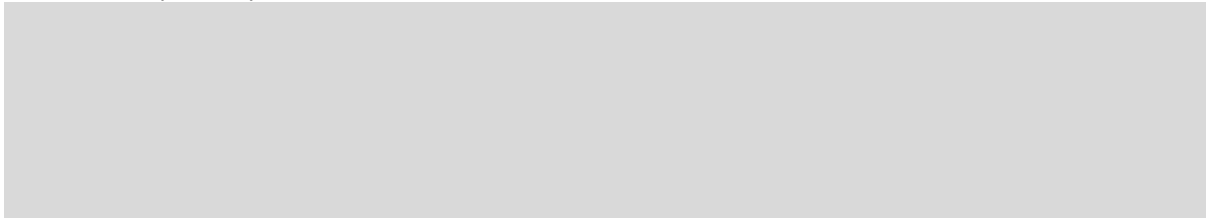
4. Does this fact sheet make you feel a woman can decrease her chance of getting an STD or STD related sickness by using a condom with her partner who is having sex with other women?



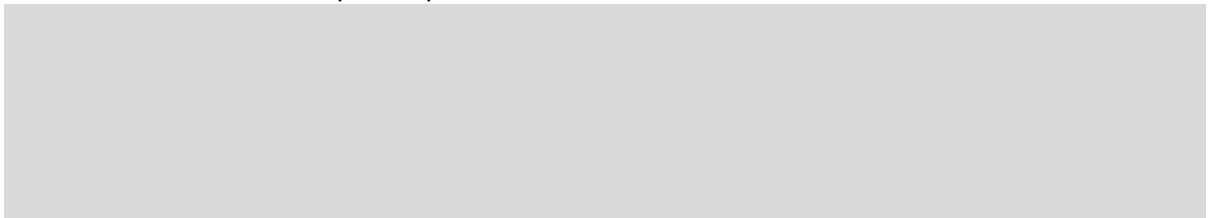
5. Does this fact sheet make you feel a woman can decrease her chance of getting an STD or STD related sickness by getting tested for STDs?



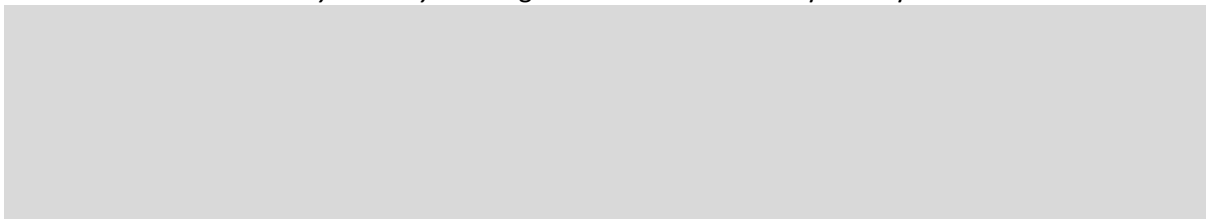
6. Does this fact sheet make *you* feel *you* can talk to your partner about if he is having sex with other women? Why or why not?



7. Does this fact sheet make *you* feel *you* can use a condom when you believe your partner is having sex with other women? Why or why not?



8. Does this fact sheet make *you* feel *you* can get tested for STDs? Why or why not?

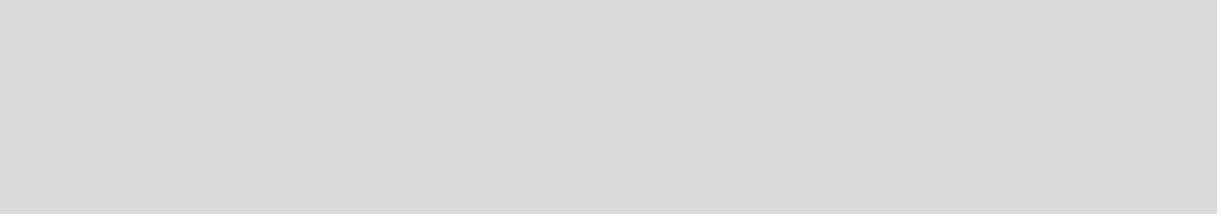


### Partner Response Sheet

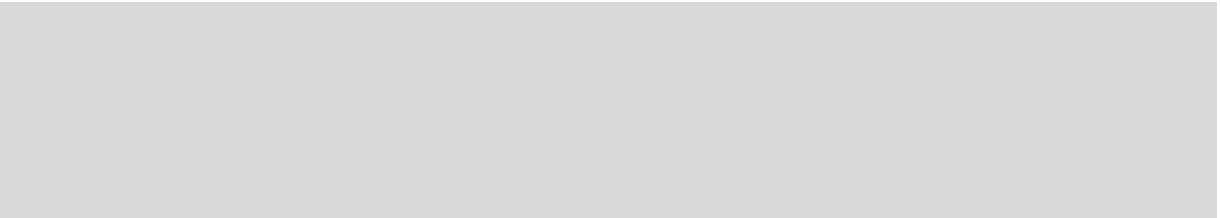
Please answer the following questions while working with a partner.

**Factsheet Name:** \_\_\_\_\_

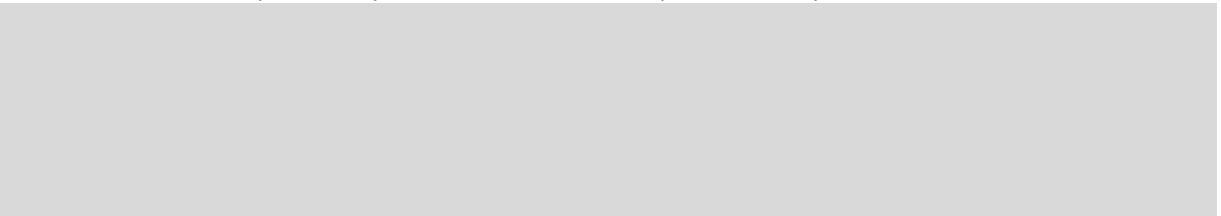
1. What do you “take away” from this fact sheet? What is it saying?



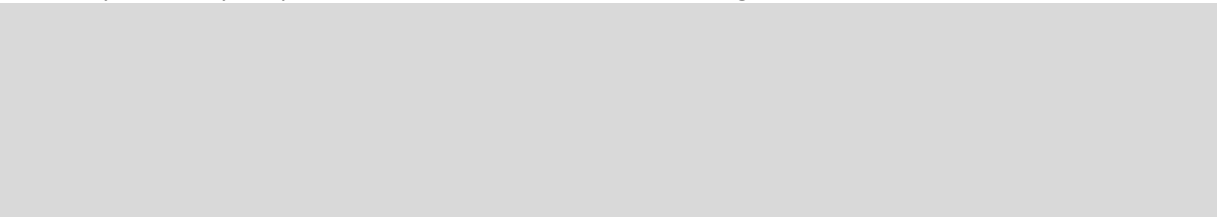
2. How do you respond to this fact sheet? How might your peers respond?



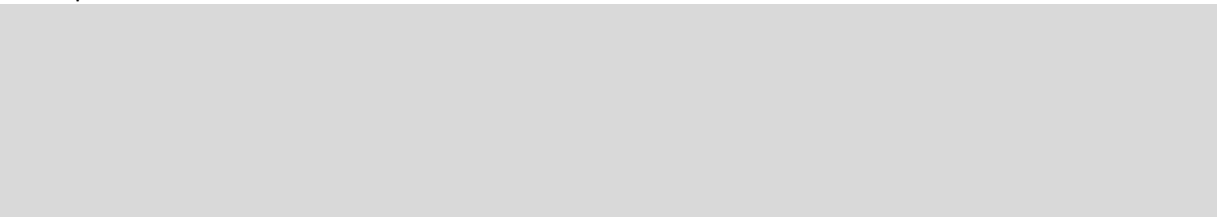
3. What words or concepts don't you understand? What questions do you have?



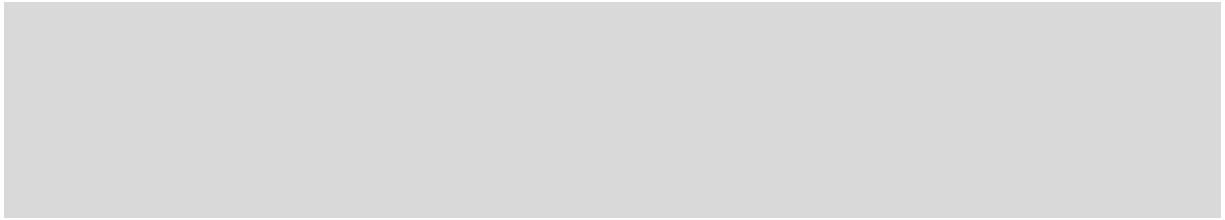
4. How do you think your peers could misunderstand this message?



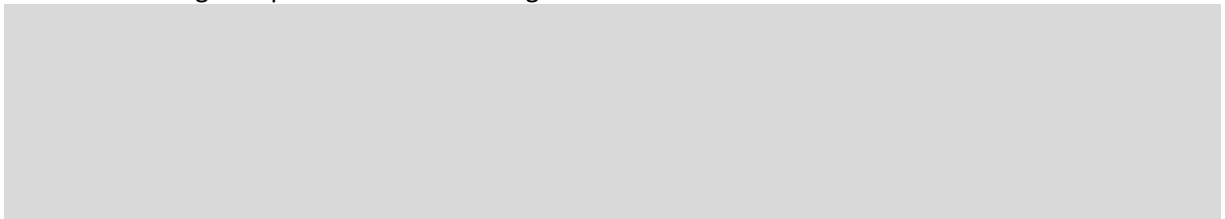
5. Is the picture relevant? Does it fit with the overall fact sheet?



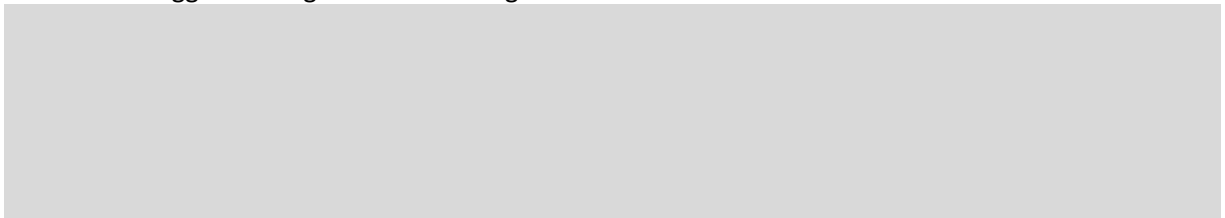
6. Of the three fact sheets, which color scheme is the best?



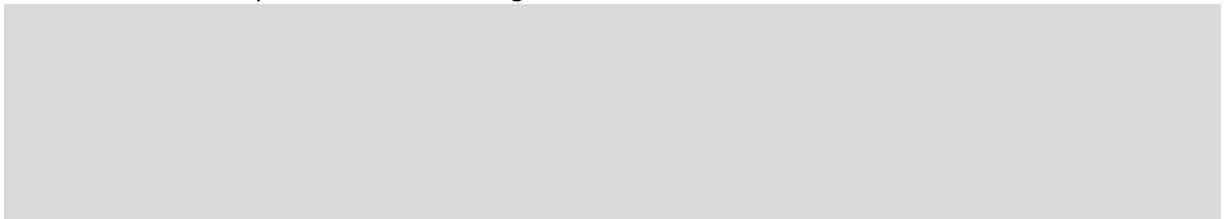
7. What are some good qualities of this message?



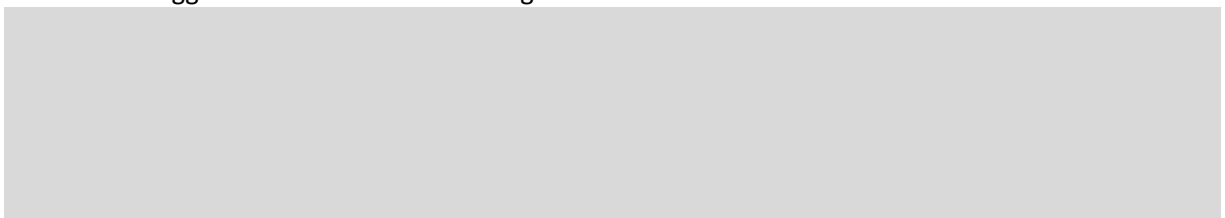
8. What is the biggest strength of this message?



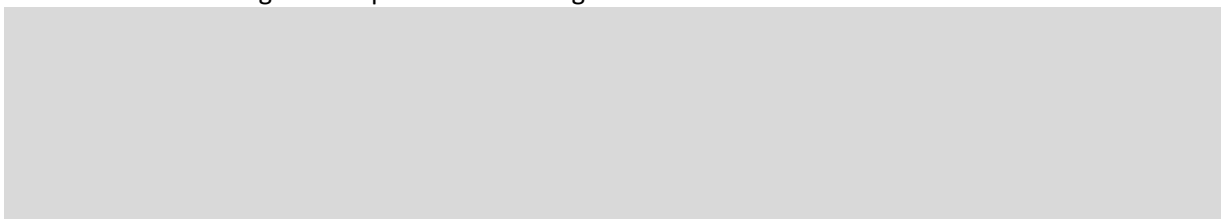
9. What are some bad qualities of this message?



10. What is the biggest weakness of this message?



11. What should be changed to improve this message?



## Appendix E. Pre-Pilot Test Fact Sheets

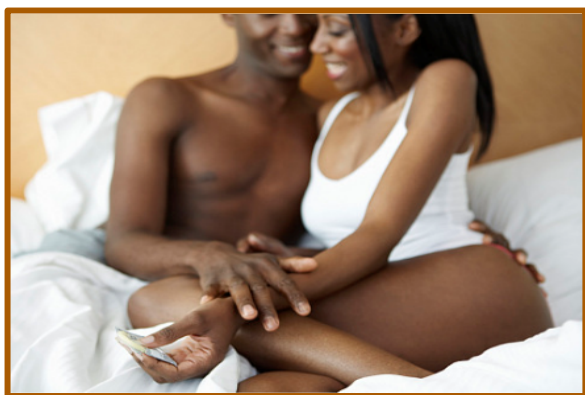
APPENDIX PAGE	FACT SHEET	FACT SHEET NAME	RELATIONSHIP TYPE	BRIEF DESCRIPTION
206	A	'Buddies': Reagan's story	I	Casual, Sex Only.
207	B	"He's not my man": Brielle's story	II	Casual, with Expectations.
208	C	When it's too late to talk to him: Kiana's story	III	Mutually Titled and Defined.

## If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

### “Buddies’: Reagan’s story

Reagan thought about Xavier as her doctor explained her STD (sexually transmitted disease) test results. She met him at a party a few months ago. It wasn’t anything serious; they usually just met up after partying to have sex. He was her ‘sex buddy,’ like friends with benefits, minus the friendship. Most of the time they used a condom. “Well, there was that *one* time. But just once!” Reagan remembered. He didn’t put one on and she didn’t say anything. She knew Xavier was sleeping with other girls, but before now she didn’t care. The sex was just that great! Even now, she thought, “How could I be mad? Xavier isn’t my boyfriend; we’re just having fun. Both of us are single. He can do what he wants.”



Use a condom every time you have sex.

But now, Reagan had an STD. Her doctor continued, “It’s easily treated, but if you’ve had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV – the virus that causes AIDS. So we should get you an HIV test. Would you like us to notify your partner?” Reagan wondered if that would be best. Since her relationship with Xavier is just based on sex, they hadn’t talked much about anything like STDs, getting tested, or other partners. They just *do it*. She thought she liked it that way so that she wouldn’t catch feelings. But now Reagan knew it was time to talk to Xavier about his other sexual partners.

### Reagan’s dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Reagan only had one partner, she was still at risk of getting an STD. Why?

Women share their partners’ STD risk. Even if a woman is only having sex with one man, she is still at risk of getting an STD if he is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case. Black women are especially at risk because:

There are **more available Black women than Black men**. So **Black men have more choice and power when dating**. This affects how many sexual partners Black men can have without committing to just one.

**Black men are more likely to have more than one sexual partner at a time than men of other races**, and young adult men between ages 18 – 24 years are most likely to have more than one sexual partner.

**Black women’s sexual partners are usually Black men, rather than men of other racial groups**. This means Black women usually have partners who are more likely to have more than one sexual partner.

### How you can protect yourself

Casual sexual relationships can be safe if both partners are honest and use condoms. In these relationships, you can decrease your risk of getting an STD and having related complications by taking the following actions:

#### Talk to your partner about who he’s had sex with since the two of you have been having sex.

By talking to him about his other sexual partners you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

#### Use condoms with your partner every time

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner’s risk.

#### Get tested for STDs regularly

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

## If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

### “He’s not my man”: Brielle’s story

Amir sat with Brielle explaining that he had an STD (sexually transmitted disease). While he offered his apologies she reflected on their “situation.” They’d been friends for three years now and had only been having sex for a few months. Their relationship was comfortable, and he respected her, so she was okay with him having sex with other women. “He’s not *my* man,” Brielle reasoned, “and all men sleep around. It’s in their nature.” Plus, Brielle knew Amir had other partners when she decided to have sex with him. And now, Brielle knew if Amir had an STD, she did, too; they stopped using condoms over a month ago. She had trusted him because he agreed to always use condoms with other girls. They’d been friends for so long, and he was always honest with her about other partners, but he never told her he had had unprotected sex with someone else.



Talk to your partner about who he is having sex with.

Later, at the clinic Brielle’s doctor explained: “It’s easily treated, but if you’ve had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV. So we should get you an HIV test.” At that point, Brielle realized the importance of communication. She’d always waited for Amir to ask questions about whether she was having sex with anyone else, and then she asked back. Now she realized she should have been more straightforward, and asked more specific questions about his condom use.

### Brielle’s dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Brielle only had one partner, she was still at risk of getting an STD. Why?

Women share their partners’ STD risk. So even if a woman has only one partner, she is still at risk of getting an STD if her partner is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case. Black women are especially at risk because:

There are **more available Black women than Black men**. So **Black men have more choice and power when dating**. This affects how many sexual partners Black men can have without committing to just one.

**Black men are more likely to have more than one sexual partner at a time than men of other races**, and young adult men between ages 18 – 24 years are most likely to have more than one sexual partner.

**Black women’s sexual partners are usually Black men, rather than men of other racial groups**. This means Black women usually have partners who are more likely to have more than one sexual partner.

### How you can protect yourself

Sexual relationships can be complicated, and ending a sexual relationship with someone you like might be hard. You can at least decrease your risk of getting an STD and related complications by taking the following actions:

#### Talk to your partner about who he’s had sex with since the two of you have been having sex.

By talking to him about his other sexual partners you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

#### Use condoms with your partner every time

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner’s risk.

#### Get tested for STDs regularly

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

# If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

## When it's too late to talk to him: Kiana's story

Kiana thought about her relationship as her doctor explained her STD (sexually transmitted disease) test results. She'd been with her boyfriend Kareem for over two years now, since she was 20. Still, she thought to herself, "I should have cut him off when I caught him cheating the first time." And she did, but not for long. Besides, he'd been with her through a lot of hard times – like when her mom died. And she'd been living with him. Where would she have gone if she broke up with him? Plus, while they were apart she met a few other guys, but they weren't any better than Kareem. At least she knew what to expect from him. "And he's young," Kiana thought, "he'll grow out of it." So Kiana took Kareem back. They didn't use condoms, because he was her *boyfriend*. Now, a year later, after finding texts and pictures from another woman in his phone, she felt Kareem was cheating again.



Get tested regularly to avoid complications from possible STDs

And Kiana's doctor confirmed her suspicions. She had an STD. Her doctor continued, "I'm going to write you prescriptions for both you and your partner. It's easily treated, but if you've had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV. So we should get you an HIV test." Since she hadn't had sex with anyone else since they'd been together, Kiana knew it was time to talk to Kareem about his other sexual partners.

## Kiana's dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Kiana only had one partner, she was still at risk of getting an STD. Why?

Women share their partners' STD risk. Even if a woman is only having sex with one man, she is still at risk of getting an STD if he is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case. Black women are especially at risk because:

There are **more available Black women than Black men**. So **Black men have more choice and power when dating**. This affects how many sexual partners Black men can have without committing to just one.

**Black men are more likely to have more than one sexual partner at a time than men of other races**, and young adult men between ages 18 – 24 years are most likely to have more than one sexual partner.

**Black women's sexual partners are usually Black men, rather than men of other racial groups**. This means Black women usually have partners who are more likely to have more than one sexual partner.

## How you can protect yourself

Relationships are complicated, and ending a sexual relationship with an unfaithful boyfriend might be hard. However, you can decrease your risk of getting an STD and related complications by taking the following actions:

### Talk to your partner about who he's had sex with since the two of you have been having sex.

By talking to him about his other sexual partners you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

### Use condoms with your partner every time

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner's risk.

### Get tested for STDs regularly

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

## Appendix F. Post-Pilot Test Fact Sheets

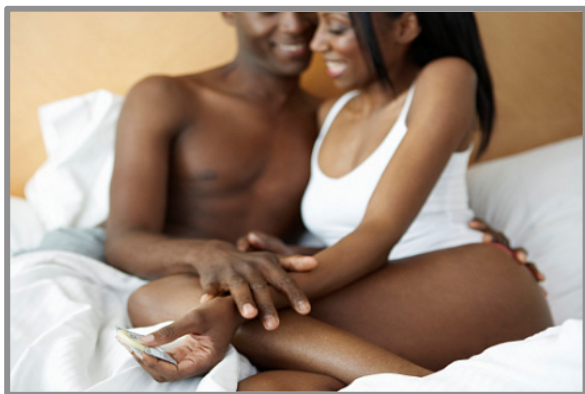
APPENDIX PAGE	FACT SHEET	FACT SHEET NAME	RELATIONSHIP TYPE	BRIEF DESCRIPTION
210	A	'Buddies': Reagan's story	I	Casual, Sex Only
211	B	"He's not my man": Brielle's story	II	Casual, with Expectations
212	C	When it's too late to talk to him: Kiana's story	III	Mutually Titled and Defined

# If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

## 'Buddies': Reagan's story

Reagan thought about Xavier as her doctor explained her STD (sexually transmitted disease) test results. She met him at a party a few months ago. It wasn't anything serious; they usually just met up after partying to have sex. He was her 'sex buddy,' like friends with benefits, minus the friendship. Most of the time they used a condom. "Well, there was that *one* time. But just once!" Reagan remembered. He didn't put one on and she didn't say anything. She knew Xavier was sleeping with other girls, but before now she didn't care. The sex was just that great! Even now, she thought, "How could I be mad? Xavier isn't my boyfriend; we're just having fun. Both of us are single. He can do what he wants."



Use a condom every time you have sex.

But now, Reagan had an STD. Her doctor continued, "It's easily treated, but if you've had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV – the virus that causes AIDS. So we should get you an HIV test. Would you like us to notify your partner?" Reagan wondered if that would be best. Since her relationship with Xavier is just based on sex, they hadn't talked much about anything like STDs, getting tested, or other partners. They just *do it*. She thought she liked it that way so that she wouldn't catch feelings. But now Reagan knew it was time to talk to Xavier about his other sexual partners.

## Reagan's dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Reagan only had one partner, she was still at risk of getting an STD. Why?

Women share their partners' STD risk. Even if a woman is only having sex with one man, she is still at risk of getting an STD if he is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case.

Black women are especially at risk because:

There are **more available Black women than Black men**. So **Black men have more choice when dating**. This affects how many sexual partners Black men can have without committing to just one. This also makes some Black women feel they have less power when selecting men and communicating with sex partners.

**Black women are more likely to have a sexual partner who is having sex with more than one person**. This is mainly because Black men and women get married less and at older ages than other groups. However, this does not mean that women are powerless in protecting themselves.

## How you can protect yourself

Casual sexual relationships can be safe if both partners are honest and use condoms. In these relationships, you can decrease your risk of getting an STD and having related complications by taking the following actions:

**Talk to your partner about who he's had sex with since the two of you have been having sex.**

**TRY IT!** "I know we're both single, but I want to make sure we're safe. Let's talk about our other sex partners."

You have the power! By talking to him you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

## Use condoms with your partner every time

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner's risk.

## Get tested for STDs regularly

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

# If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

## “He’s not my man”: Brielle’s story

Amir sat with Brielle explaining that he had an STD (sexually transmitted disease). While he offered his apologies she reflected on their “situation.” They’d been friends for three years now and had only been having sex for a few months. Their relationship was comfortable, and he respected her, so she was okay with him having sex with other women. “He’s not *my* man,” Brielle reasoned, “and all men sleep around. It’s in their nature.” Plus, Brielle knew Amir had other partners when she decided to have sex with him. And now, Brielle knew if Amir had an STD, she did, too; they stopped using condoms over a month ago. She had trusted him because he agreed to always use condoms with other girls. They’d been friends for so long, and he was always honest with her about other partners, but he never told her he had had unprotected sex with someone else.



Talk to your partner about who he is having sex with.

Later, at the clinic Brielle’s doctor explained: “It’s easily treated, but if you’ve had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV. So we should get you an HIV test.” At that point, Brielle realized the importance of communication. She’d always waited for Amir to ask questions about whether she was having sex with anyone else, and then she asked back. Now she realized she should have been more straightforward, and asked more specific questions about his condom use.

## Brielle’s dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Brielle only had one partner, she was still at risk of getting an STD. Why?

Women share their partners’ STD risk. So even if a woman has only one partner, she is still at risk of getting an STD if her partner is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case. Black women are especially at risk because:

There are **more available Black women than Black men, so Black men have more choice when dating**. This affects how many sexual partners Black men can have without committing to just one. This also makes some Black women feel they have less power when selecting men and communicating with sex partners.

**Black women are more likely to have a sexual partner who is having sex with more than one person**. This is mainly because Black men and women get married less and at older ages than other groups. However, this does not mean that women are powerless in protecting themselves.

## How you can protect yourself

Sexual relationships can be complicated, and ending a sexual relationship with someone you like might be hard. You can at least decrease your risk of getting an STD and related complications by taking the following actions:

**Talk to your partner about who he’s had sex with since the two of you have been having sex.**

**TRY IT!** “Our friendship is important to me. I want to make sure we stay honest about our other sex partners.”

You have the power! By talking to him you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

## Use condoms with your partner every time

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner’s risk.

## Get tested for STDs regularly

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.

# If Your Partner Has Other Sexual Partners, You Share His Risk

If your sexual partner is having unprotected sex with other women, you are at risk of getting an STD. Talking to your partner about whether he is having sex with others can allow you to make safer decisions. Using a condom every time you have sex protects you from STDs and HIV.

## When it's too late to talk to him: Kiana's story

Kiana thought about her relationship as her doctor explained her STD (sexually transmitted disease) test results. She'd been with her boyfriend Kareem for over two years now, since she was 20. Still, she thought to herself, "I should have cut him off when I caught him cheating the first time." And she did, but not for long. Besides, he'd been with her through a lot of hard times – like when her mom died. And she'd been living with him. Where would she have gone if she broke up with him? Plus, while they were apart she met a few other guys, but they weren't any better than Kareem. At least she knew what to expect from him. "And he's young," Kiana thought, "he'll grow out of it." So Kiana took Kareem back. They didn't use condoms because he was her *boyfriend*. Now, a year later, after finding texts and pictures from another woman in his phone, she felt Kareem was cheating again.



Get tested regularly to avoid complications from possible STDs

And Kiana's doctor confirmed her suspicions. She had an STD. Her doctor continued, "I'm going to write you prescriptions for both you and your partner. It's easily treated, but if you've had it for a long time it may have affected your ability to have kids. Also, it would have increased your chance of getting HIV. So we should get you an HIV test." She got tested a year ago and hadn't had sex with anyone else since they'd been together. Kiana knew it was time to talk to Kareem about his other sexual partners.

## Kiana's dilemma, your dilemma

Young Black women are diagnosed with STDs more than any other group of women. Even though Kiana only had one partner, she was still at risk of getting an STD. Why?

Women share their partners' STD risk. Even if a woman is only having sex with one man, she is still at risk of getting an STD if he is having unprotected sex with other women. Men are more likely than women to have more than one sexual partner at a time, so unfortunately this is often the case. Black women are especially at risk because:

There are **more available Black women than Black men, so Black men have more choice when dating**. This affects how many sexual partners Black men can have without committing to just one. This also makes some Black women feel they have less power when selecting men and communicating with sex partners.

Black women are **more likely to have a sexual partner who is having sex with more than one person**. This is mainly because Black men and women get married less and at older ages than other groups. However, this does not mean that women are powerless in protecting themselves.

## How you can protect yourself

When you love your partner it can be hard to trust your instincts. Relationships are complicated, and ending a sexual relationship with an unfaithful boyfriend might be hard. You can decrease your risk of getting an STD and related complications by taking the following actions:

**Talk to your partner about who he's had sex with since the two of you have been having sex.**

**TRY IT!** Set regular check-ins with him about other partners so no one is offended or suspicious of the timing.

You have the power! By talking to him you can:

- Make a more informed decision about whether to have sex with him and whether to use condoms
- Start a conversation about what you expect from your partner in terms of having other sexual partners

## Use condoms with your partner every time

Condoms are very effective at protecting women from STDs and HIV. You should use condoms with your partner, especially if you believe him to be having sex with other women. Remember, you share your partner's risk.

## Get tested for STDs regularly

Getting tested cannot prevent STDs. But it can prevent serious and long-term side effects like pelvic inflammatory disease and infertility if you get an STD from your partner.