Methods

Background

The topic of this thesis grew out of concerns that struck me during earlier research I had done on sexual practice and condom use, starting with the Condom Project (1988–1990). Funded by the Commonwealth AIDS Research Grants Committee, the Condom Project consisted of a market survey (Donovan et al. 1991), a product-testing study (Choice 1989), interviews with sex workers on condom use, a prospective study of condom breakage in brothels (Richters et al. 1988), interviews with condom users, a multi-stage self-complete questionnaire study of male condom users with an embedded prospective study of condom use and breakage (Richters et al. 1993, 1995a) and just for good measure a pilot anthropometric study of penis size (Richters et al. 1995b). The questionnaire study was written up for my MPH treatise in 1991.

In 1997, with the assistance of a small ARC grant while a research fellow in the National Centre in HIV Social Research (NCHSR), I did a project called ‘Withdrawal and safe sex: countering risk behaviour among gay men’. This investigation of the relationship between gay men’s use of condoms and their practice of unprotected anal intercourse without ejaculation (Richters et al. 2000) was based on questionnaire data from the Sydney Men and Sexual Health cohort study. Attempts to explore through in-depth interviews the more elusive questions about the reasons (such as individuals’ possible erection difficulties, dislike of condoms, etc.) for men’s choice of withdrawal as a sexual practice, or the ways in which ‘withdrawal’ came about unchosen or unacknowledged (Richters et al. 1998a), led to the development of the Negotiating Sex project.

It struck me when the condom campaigns first began in the mid-1980s that very little was known about the situations into which these condoms were to be
introduced. Condom instructions seemed to refer to very limited circumstances, where there was an erect penis, firm as a wooden rod (as shown in some leaflets), and two pairs of willing hands to apply it. Setting aside wider issues about motivation for safe sex and the meaning of condom use in a relationship, even my own limited experience with condoms had taught me that the reality of using a condom was more complex, and included difficulties with trying to unroll the condom inside out, or tangling it with the foreskin, or catching hairs. Timing the moment of application takes tact as well as technical skill. Putting a condom on blind in the dark takes experience. Remembering to take it off takes care and alertness, at a time when one is more likely to feel wildly excited, euphoric or blissfully calm and languid rather than careful and alert. These situational realities of condom use were largely absent from the 1980s literature on condom promotion and acceptability.

The most gaping omission in the early work on condom use and attitudes was that it ignored erection altogether. Respondents’ claims that condoms ‘broke the mood’ or were ‘unromantic’ or ‘interrupted the flow’ were taken at face value. Later work explored these feelings and unpacked people’s notion of oneness with the partner during sex, a notion which was interfered with by the condom as a physical and symbolic barrier. Unsurprisingly, sex workers were not worried by these issues. Whatever fantasies the clients may entertain, sex workers rarely wish to bond emotionally with their clients, and are generally happy to have a symbolic and physical barrier. This barrier can even come to stand for the difference between sex and work, making the choice of unprotected sex with non-work partner(s) even more important and attractive.

The Condom Project’s main aim was to isolate the physical acts or circumstances that were correlated with physical failure of the condom—ripping or coming off. Apart from attempting to ascertain whether non- or ex-users were more likely than users to have negative attitudes towards condoms, we focused on practices rather than attitudes and emotions. But our suspicion that the common complaint of ‘interruption’ or ‘breaking the mood’ was linked to loss of erection was confirmed when we found that about 60 per cent of questionnaire respondents said they sometimes or always lost their erection during application of a condom, and a similar proportion said they sometimes lost their erection during sex with a condom. We did not ask how many men lost their erection during sex without a condom;
perhaps occasional or intermittent loss of erection is a common occurrence that is simply made more problematic if a condom is being used.

But if the meaning of a condom as a symbolic barrier has been well examined, the meaning of ‘breaking the flow’ has not been fully explored. What do people do when they have sex? How do they move from one sexual act to another? How is it that they can change positions, move from one sexual practice to another, even sometimes answer the telephone, without loss of arousal, yet the introduction of a condom is so fatal to many people’s pattern of sexual interaction that they would rather take the risk of getting pregnant or contracting an STD than use one? Why do so many people say ‘oh we meant to use one but there it was on the bedside table afterwards, still in its packet’? As I asked after the end of the Condom Project,

The effectiveness of condom use as a contraceptive or STD preventive rests not so much on the physical adequacy of the condom, as on the human difficulty of responsibly considering the consequences of our actions while in a state of high sexual excitement and possibly emotionally transported and undifferentiated from our partners. How are people to perform the emotional feat of achieving at least momentary loss of self-consciousness—necessary for orgasm for some people—while at the same time continuing to regard the partner’s body fluids as ‘other’ and potentially dangerous? (Richters 1994, p. 61)

Existing ways of conceptualising sexual arousal as a physiological response (Masters and Johnson 1966) seemed inadequate to addressing these questions about the flow of a sexual interaction. As I argued in Chapter 1, conceptualising what is going on in a sexual encounter requires a social approach: the sexual interaction needs to be seen as a special kind of (usually) dyadic interpersonal encounter or ‘play’ of a game. Understanding the difficulties people have in introducing a condom into that game requires us to understand how the game is constructed in the first place, what the script is for ‘doing’ sex. Although it is a very special kind of game revolving around particular physiological reactions and performances, it is not unique in this. Other social situations involve physiological processes, and social conventions for such situations are conducive to accommodation with those physiological requirements. For example, during meals it is customary to avoid outside interruptions or sudden alarms that might disrupt the participants’ calm digestion.
Just as in sex, these conventions operate with symbolic meanings as well as with the practical physical realities of chewing and digestion involved in eating (Visser 1991).

In the analysis that follows in Chapters 5 to 7, the question underlying the interrogation of the data will be: ‘what is the script for doing sex in this particular social situation; what are the rules of this game?’. The key questions to be answered are:

- how do the physical surroundings affect what happens?
- what does sex mean to the men, and how does this seem to affect what they do?
- how do men’s sexual skills, tastes and preferences relate to their practice and their understandings of sex?
- how do men’s bodies and their understandings of the body affect their practice?
- what do men look for in casual partners?
- what do different sexual practices mean and how are they organised and negotiated within the encounter?
- how (if at all) do men integrate considerations of safe sex into their practice?

To ask ‘what is the script?’ or ‘what are the rules?’ is of course to ask ‘what do men do when they have sex?’. The question ‘what do men do?’ is an empirical question. However, although this is in part an empirical investigation, it is not one that aims to produce results such as ‘80 per cent perform oral-genital sex in casual encounters’ or ‘20 per cent say they are looking for a long-term partner when they go to a sex venue’. Rather it aims to explore the process by which sexual contact is achieved, what men count as sex and how they conceptualise the practices that constitute sex for them. As my title indicates, the themes I will be exploring involve the role of the sexual setting as a physical and interactional space, and the role of the sexual culture in which the men move. As the inclusion of the word ‘body’ in the title indicates, I also wish to seek ways to rephysicalise our discussion of sexual interactions, to address the problem raised by Carol Vance in 1987 (quoted in Dowsett 1996, p. 8):

To the extent that social construction theory grants that sexual acts, identities and even desire are mediated by cultural and historical factors, the object of the study—sexuality—becomes evanescent and threatens to disappear.
‘Sexuality’ here refers to the doing of sex, the meeting of bodies. Disembodied or autoerotic sex such as phone sex, cyber sex and the consumption of pornography are in a sense also sex although bodies do not meet. However, my analysis here is concerned only with sex that involves bodily contact between men.

Why ‘casual or new’ partners? Because a protracted dyadic personal relationship—sexual or otherwise—can be seen as a miniature social system, to some extent insulated from the wider social setting. Understanding what happens sexually in an extended sexual relationship certainly involves being aware of the physical setting in which it takes place, the sexual culture of the participants and their experience of their own and each other’s bodies, but it also involves being aware of the ongoing relationship between the partners—emotional, legal, economic, familial. The partners are operating within a shared reality that is not entirely shared with the wider culture. Whether a relationship is a wildly romantic folie à deux or a marriage of convenience, it is still an interactional setting in which everything one person does is affected by their experience of what the partner as an individual likes and dislikes, and by their shared history. If we are to investigate the expectations and understandings that each individual has acquired from the wider culture that he or she brings into a sexual encounter, we should be able to see these more clearly in first or casual encounters than during ongoing relationships.

Choice of method

The questions raised above require a method of investigation that reveals what things mean to the participants in casual sex between men, not just what they do. Even if investigators could be ‘flies on the wall’ in a sex venue or beat, and observe and record everything that happened (like Humphreys), they could not find out what the men are thinking and feeling. This study, therefore, is based on analysing what people say in interviews about their sexual practices and the meanings, intentions and understanding surrounding those practices. Making sense of what people say in interviews is not straightforward, and the relationship between what they say they do and what they do is not transparent. I reflect on the advantages and disadvantages of this method, and what it can and cannot tell us, in Chapter 8.
The three data sets

The interviews come from three sources. All three were studies involving open-ended in-depth interviews designed to collect detailed narratives of sexual encounters.

Negotiating Sex

This is the core study on which the thinking of this thesis is based. Its aim was to explore the norms and expectations of sexual encounters, especially first encounters between new or casual male partners. It centred on how men conceptualised particular sexual practices, what they liked, how they got (or failed to get) what they liked in sexual encounters, and their perception of what was expected of them by others in terms of sexual ‘performance’ or other criteria.

Volunteer participants were recruited to ‘talk about sex’ through advertisements placed in AIDS organisations, gay publications and the SMASH newsletter [1] and through email appeals and snowballing. [2]

The project was approved by the Ethics Review Committee (Human Research) at Macquarie University for 1997 and 1998 and the Committee on Experimental Procedures Involving Human Subjects (CEPIHS) at the University of New South Wales for 1999. Interviewees signed a consent form that included the statement that the deidentified transcript data could be used for other research. According to NCHSR practice at the time for SMASH and other research projects with gay men, respondents in 1997 and 1998 were not paid for participating. However, respondents to studies on injecting drug use were paid $20 to cover their expenses in attending an interview. The CEPIHS considered that it was discriminatory to pay some research participants and not others, so all respondents from 1999 onwards were paid $20 per interview to cover notional expenses.

The men were interviewed by me or, if they indicated they would prefer to be

1. SMASH (Sydney Men and Sexual Health) was a cohort study of gay men; see p. 74.
2. The initial conception of the project also included women and heterosexual men; interviews with female and heterosexual respondents are not discussed here.
interviewed by a man, by a gay male interviewer. Two different male interviewers were used. Both had experience in interviews eliciting detailed sexual narratives, and were aware of the themes that I was interested in.

Interviews did not follow a strict schedule; rather they were designed to allow men to talk freely about the issues and events that particularly interested them. A question schedule (see box) was used as a guide rather than a script and was adapted according to the answers given. For example, men who said they never practised anal intercourse, or never practised it without ejaculation, were not asked the questions about withdrawal.

Interviews took between 45 and 90 minutes and were held at the interviewee’s home or office, at the National Centre in HIV Social Research, or at a mutually convenient location such as the AIDS Council of NSW or the University of Sydney. They were tape recorded and transcribed by professional transcribers not connected with the gay community. Draft transcripts were checked by the interviewer, corrected where necessary (e.g. where the transcriber misspelt a word or misheard a sub-cultural expression) and edited and deidentified by me to remove references to identifiable places and persons. After the transcripts were edited the tapes were destroyed. This unfortunately prevented their being used in the future, for example for linguistic analysis, but was a condition of the anonymity guaranteed to the participants.

Negotiating Sex was originally planned to continue recruiting respondents until ‘saturation’ occurred; I hoped this would happen at about 20 or 30 interviews. However, several things became clear during the data collection phase.

Several of the respondents were part of or connected to the AIDS industry. Recruitment did not seem to be engaging ‘average’ gay men, let alone other homosexually active men. There are many possible reasons for this, including research fatigue in the gay community. Perhaps the topic ‘Talking about sex’ was too general or vague for non-experts to see the point of it as a worthy health-related cause. Switching to recruitment ‘on site’ to engage people who might not think of responding to an advertisement or community announcement was not an option for me as a woman.
Negotiating Sex

Interview schedule

• How did you hear about the project?
• What made you want to be in it?
• Who do you have sex with? Men, women?
• Tell me about your last encounter with a casual partner or new partner.
• What do you expect to do in an encounter with a new/casual partner?
• Do you have a regular partner?
• Tell me about the first time with him/her.
• What practices do you mostly do with your regular partner?
• What are your favourites?
• What do manual/oral/vaginal/anal sex mean to you? What do you like/not like about them? (Talk about both insertive and receptive. Focus on moment of penetration, moment of consent/invitation, and erection.)
• What do you think makes a man/woman a good lover? Is that important to you, compared to, say, his/her appearance? (Explore any themes mentioned in answer, such as technique, consideration, gentleness, hotness/passion/vigour, romance, friendship, mutuality, intimacy, with stress on how you know the person feels the way they do.)
• Sexually speaking, do you think you are the same as most other people/gay men?
• Has someone ever asked you to do something sexually that you don’t/didn’t like? How did you feel? What did you do?
• What’s your approach to safe sex? What do you do if partner doesn’t agree (e.g. doesn’t like condoms, and you do)?
• What is your experience of condoms? How do you feel about them?
• If you are using condoms for fucking, does his/her penis ever touch the anus before the condom is put on?
• (If respondent has practised withdrawal) Where does ejaculation usually occur (e.g. on partner’s body immediately after withdrawal, or later during oral or manual sex)?
  How do you negotiate with a partner about using withdrawal? What do men call it (being careful, pulling out etc.)?
  What connotations does withdrawal have for you as a sexual practice, (e.g. an unfortunate necessity, or an erotic act as in video pornography)
  Has someone else wanted to use withdrawal instead of a condom with you? How do you feel about that?
  Have you ever had an accident or a misunderstanding with withdrawal? How did it happen?
  What are your views on the likelihood of and reasons for withdrawal failure?
• What counts as safe sex re HIV? (Explore respondent’s notion of what ‘exchange of body fluids’ means, if this phrase used.
• Did you see this campaign [show 1995 ACON ‘Pulling out before cumming’]? What was it telling people? Do you agree with it? How did you react to it? What do you think most gay men would make of it?
• Demographics: age, occupation, education, cultural/class/ethnic background, background of salient partners, attachment to gay community
Despite the nature of the sample, little evidence of convergence, let alone approaching saturation, was apparent after nine interviews had been done. (Interestingly, McInnes et al. (1999) report no ‘saturation’ after 20 interviews with sex venue users recruited from the SMASH cohort, having found that there were no repeating patterns and all the men were different.) Further, it was clear that the existing data sets from Sites and Seroconversion provided a rich source of data on precisely the issues being explored in Negotiating Sex. The Seroconversion transcripts were up to that point unanalysed, and the Sites data had been analysed for a different purpose and from a different point of view. It was therefore decided to cease recruitment for Negotiating Sex and use the sexual practice data from Sites and Seroconversion for this analysis.

Sites study

Respondents for this study were recruited through notices in gay newspapers, through a dedicated web page and posters at sex venues and by direct approach by the interviewer to men whom he met in the venues during fieldwork.

Interviews took place at the offices of the AIDS Council of New South Wales or sometimes at informants’ homes or in cafés. The interview tapes, usually two hours long, were then transcribed by accredited transcribers who were not members of the gay community. Once the interviews were transcribed they were made anonymous and the original tapes destroyed. There were also several conversations with venue staff and with clients who were happy to talk but did not wish to do formal interviews. These were recorded in the field notes.

Ethical permission for the study was given by the Ethics Review Committee (Human Research) at Macquarie University. Although the committee had serious misgivings about the Sites project and permission was delayed, the objections raised concerned the use of modified participant observation for the fieldwork component of the study, not the interview component. Subjects signed consent forms; information sheets included the information that the anonymised edited transcripts would be stored after the destruction of the cassette tapes.
The interview questions (see box) were structured to cover different aspects of the culture of casual sex in the sex venues. They were open-ended, so as to give the informants room to give complex answers based on their own experience in the venues. Usually among the first questions asked was ‘When was the last time you went to a sex venue and which one?’ followed by ‘Can you describe how it was?’. The subsequent questions would be related to the informants’ choices of venues. The informants were then asked to elaborate on the culture of sex venues and beats, and about their attitude towards sex in public spaces. They were then asked to relate those two environments to the sex they have at home in their bedrooms.

<table>
<thead>
<tr>
<th>Interview schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>About the venue</strong></td>
</tr>
<tr>
<td>Have you been here before?</td>
</tr>
<tr>
<td>When did you last come here?</td>
</tr>
<tr>
<td>What brought you here in the first place?</td>
</tr>
<tr>
<td>Did you plan to come here in advance?</td>
</tr>
<tr>
<td>Which other places do you usually go to find sexual partners?</td>
</tr>
<tr>
<td>Which similar places have you frequented in the last three to six months?</td>
</tr>
<tr>
<td>How often do you come here or to places like this?</td>
</tr>
<tr>
<td>What do you look for in places like this?</td>
</tr>
<tr>
<td>What else does the place offer, besides the opportunity for sex with other guys?</td>
</tr>
<tr>
<td>How would you rate the facilities, compared to other places you have been to?</td>
</tr>
</tbody>
</table>

In relation to the atmosphere, how friendly are the other patrons?
What about the staff/owners?
How would you describe the atmosphere, compared to other places you have been to?

In relation to comfort and hygiene, does this place meet your needs and expectations? Which other improvements would you suggest for this place?

What do you enjoy most about this place? Are there any turn-offs? What are they?

People always regard this as a safe place. Do you see any danger in coming to places like this? What kind of dangers do places like this offer? Is it possible to be completely anonymous around here? (What about the regulars?) Don’t you always meet people that you already know from somewhere else? Is it true that this place offers plenty of opportunities for sex? Which are the hottest areas one should look for? What actually happens there?

In relation to the price, is it affordable or too expensive?

**Closeness, intimacy, bonding and love**
Does one have the opportunity to get really close to someone? How close? Do people develop friendship ties with each other? Do you feel emotionally close to your partner(s)? Could you describe what sorts of emotionally intimate experiences take place with your partner(s)?
### About the patron

- How long have you been here today/tonight?
- How long do you often stay when you come here?
- Can you get complete satisfaction with the sex you have here?
- Is it emotionally satisfying? Why (not)?
- What would you describe as an emotionally satisfying sexual experience?
- How does this place affect your sexual performance?
- Do you believe you could find a lover here?
- How important is (this site) for you/men in general?
- What do you believe would happen if men had no more access to places like this?
- How would it affect you personally?
- How far from here do you live?
- Do you always come here by yourself?
- Do you have friends who frequent these places?
- Do you live by yourself?
- Can you pick up trade around here?
- Have you taken guys home?
- Have you met someone already today/tonight?
- How often do you fuck when you come here?
- Is it always with one guy or do you like group sex?

### Signifiers

- People usually say that in places like this, anyone is a potential partner. How would you define Mr Right?
- Do you always find him when you come here or do you sometimes get a bit disappointed?
- What do you do when he is not around?
- What do you usually expect from your partner(s)?
- How do you choose/select a partner?
- If you feel really hot for a guy, how do you let him know?
- How do you know if someone wants you?
- What kind of signs one has to read in order to understand that the guy is interested in you?
- How do people indicate what they like doing?
- If you are not really into the type, how do you refuse an advance?
- How do you recognise a turn-off?
- Do you get too upset about it?
- To what do you attribute his turn-off?
- Which sexual acts excite you most?
- Can you tell me what is exciting about them?
- Is that what you enjoy doing, mostly?
- How do you indicate to your partner(s) what you like doing?
- If you want a particular type of sex, how do you indicate that?
- Which sex act you find least exciting?
- What is wrong with that?
- What do you usually do when your partner introduces or suggests these activities?
- What excites you most about sex with guys?
- Can you describe what you regard as the best environment for having sex?
- Do you also frequent beats/public places?
- How safe is it?
- Does sex differ when you are having it somewhere else?

### Safe sex

- Have you had sex without condoms?
- How do you feel about not using them?
- What do you do if your partner wants to have sex without a condom?
At this point, the interviews would become more personal, and the informants were asked to discuss their experiences of sexual initiation, or rituals of coming out. They would then be asked to describe their initiation into sex venues. Once the topic of the conversation moved back to the culture of sex venues, the interviewer would ask informants to describe their experience of interpersonal relationships and negotiation of sexual activities in the venues. Informants were also asked about the then recently reported increase in unprotected anal intercourse between casual partners in Sydney (Van de Ven et al. 1998b) and their experiences with new HIV treatments.

_Seroconversion study_

The data discussed here is drawn from the Seroconversion study, which has run as a joint project of the National Centre in HIV Epidemiology and Clinical Research (NCHECR) and the National Centre in HIV Social Research since 1993, with the aim of (1) identifying the risk of HIV seroconversion in relation to different sexual practices and (2) exploring men’s perceptions and understandings of risk in the events thought to have led to infection. Ethics permission was granted by the UNSW CEPIIHS, and respondents signed consent forms.

Participants were recruited through a network of general practitioners and specialists with high HIV caseloads. And about a third of the men were already part of the SMASH cohort of Sydney gay men (Prestage et al. 1995, Kippax et al. 1997). All were men who had recently become HIV positive through homosexual contact and had seroconverted in the past few months. Criteria for enrolment were that they had either had a negative test no more than 12 months before the positive one or had had an earlier negative test and a recent conversion illness.

The 70 interviews analysed here were done between July 1993 and July 1997 by Olympia Hendry of NCHECR using a standardised interview schedule (see box) but inviting open-ended replies and personal narratives from the respondents. Interviews
were tape-recorded and later transcribed, with potentially identifying details removed.

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### Seroconversion study

**Outline of question schedule**

- Have you been tested for HIV on a regular basis?
- And how many negative tests have you had altogether?
- When did you first start testing, what year?
- And when was your last negative one?
- Why did you have that test?
- When did you have your (first) positive test result?
- And why did you have that one?
- Did you receive any counselling after the last negative one?

I wonder if you could tell me in your own words how you became infected, in as much detail as possible. (Themes to explore included: time of year, time of day, circumstances, relationship status, emotional mood/situation, setting and familiarity with surroundings, drug use, alcohol, sense of being in control, description of partner, detailed sexual practice, ejaculation, condom and lubricant use, any evidence of HIV status of partner, departures from usual safe sex practice, anything that may have led to physical damage, anal lesions etc.)

Can you tell me about another sexual occasion preferably before and as close to the unsafe episode, one when you practised safe sex?

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### The sample as a whole

The resultant data set consisted of 100 interviews, including the venue manager and worker. However, it is more helpful to see these as a core set of 30 interviews from Negotiating Sex and Sites and a supplementary set of 70 interviews from the Seroconversion study. Despite the fact that Michael Bartos (who initiated the Sites study) and I were working quite independently when the interview questions for the two studies were developed, there is a remarkable degree of correspondence in the questions and the theoretical issues they were intended to address. The two data sets thus work together seamlessly for my purposes here. The Seroconversion interviews contain some accounts of the circumstances of casual encounters, and these are useful to add to the core data. But the greatest strength of the interviews was in the detailed accounts of sexual practice: who did exactly what to whom and where the

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3. After completing the taped interviews the men were asked to complete a standardised tick-the-box questionnaire about their HIV risk practices in the six months prior to seroconversion. The results from these questionnaires are used by NCHECR to address question (1) above, but do not form part of the analysis in this thesis.
semen went. This is reflected in the following chapters, in which I draw on the Seroconversion interviews more heavily when discussing details of practice than other issues.

Analysis

The process for analysing the transcripts was that used by a back-of-the-book indexer producing a conceptual index (Knight 1979; AGPS 1994). This is in many ways analogous to the process of thematic coding based on grounded theory (Glaser and Strauss 1967) that is enabled by the NUDIST computer program for qualitative analysis (QSR 1997). However, my analysis was performed without such a program, simply using a word processor for recording themes and sorting them alphabetically.

Many of the themes identified in the data were pre-existing questions that prompted the carrying out of the Negotiating Sex study. Others emerged from the data and were added to the list of ‘headwords’ as they appeared. Particular attention was paid to linking similar concepts expressed in different terms. In this way conceptual indexing differs considerably from the more literal process of compiling an index of names or terms. The process was developed further by arranging the headwords conceptually into a hierarchy that explored the relationships between the themes. (See Appendix for a summary version of the headword list in alphabetical order.) Material in the Seroconversion study interviews relating solely to medical matters such as consultations, diagnoses and HIV tests was not indexed. Narratives about regular relationships and sexual interactions within them (apart from ‘first times’) are mentioned in analysis only when they are related to or contrasted with behaviour in casual sex.

The analysis for this thesis was done by me alone. However, the method used would have allowed for dual or multiple coding by independent raters to provide a check on the interpretation of the transcripts.

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4. The most famous such conceptual index is possibly Norman Kemp Smith’s analytical index to Kant’s Critique of Pure Reason (1956).
Presentation of results

In the presentation of the data in Chapters 5 to 7, I have used the words ‘some’, ‘many’ and ‘few’ when reporting how many men reported particular behaviour or views. However, these judgments, although based empirically on the rough counts of ‘mentions’ produced by the indexing process, would not stand up to significance testing, and no such claim should be inferred from the wording. Sometimes they depend heavily on what a few men said many other men did.

Interview transcription conventions

Square-bracketed words are editorial interpolations, either in explanation or made necessary by the process of deidentifying the transcript to preserve the respondent’s anonymity. ‘[…]’ indicates an editorial cut, usually made because the respondent repeated himself or said something irrelevant to the point for which the quotation is being cited. Ellipses without square brackets indicate a trailing off of speech or a short pause.

Transcripts have not been edited to make them artificially grammatical or make them flow smoothly like reported speech in a novel. Some respondents had a very disjointed speech style at all times, and their ums and ahs and y’knows were insignificant. However, sometimes a respondent who had been speaking fluently stumbled over a word or concept or found it hard to say, and the hesitations and repetitions in the transcript indicate this. It would have been unfaithful to the data to clean it up too much.