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implications for sex education and sexual health services
in England**

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A qualitative exploration of perceptions of anal sex: implications for sex education and sexual health services in England

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ABSTRACT

Existing research into anal sex has centred on androcentric, medicalised parameters that focus on risk and health implications, leading to a lack of focus on women's experiences. Research that has focused on women's experiences has centred on concern around young women's anal sex practices, with little exploration of why people participate in anal sex and neglect of its relational and pleasure-based dimensions. The present study sought to explore these concerns via data gathered using focus groups and individual interviews with a range of individuals including sexual health practitioners and young people. Data were thematically coded, with results centred on three themes: anal sex as deviance, anal sex as phallocentric, and anal sex as agentic. Results suggest a pattern of perceptions and narratives that has potential to undermine honest education, advice-giving and safer sex if they are not addressed and questioned in safe spaces, prior to work with young people. The implications of these findings for sexual health education are discussed.

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Anal sex; sex education; sexual health; young women; pleasure; homophobia; heteronormativity

Introduction

In sexual health research, anal sex is frequently framed using medicalised parameters focused on health implications, risk, STIs and HIV (e.g. Ybarra, Price-Feeney, and Mwaba 2018; Cáceres et al. 2008). Much of this work is quantitatively driven and focuses on men who have sex with men (e.g. Chow et al. 2016; Macapagal et al. 2018), providing little understanding of anal sexual practices in heterosexual relationships (McBride and Fortenberry 2010). This research lies within a wider corpus of research that can reinforce dysfunction, heteronormativity, binary constructions of gender, and negate pleasure (Jones 2019).

The present study was motivated by these observations and findings from Wood et al. (2019) that highlighted concern about young women having anal sex and

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neglect of anal sex in sexual health provision for women and girls in the UK. We wanted to interrogate these concerns and develop a deeper understanding from the perspectives of sexual health and education practitioners and young people. Alongside this original intention, we have noted unhelpful assumptions and limited constructions within the literature and popular discourses about what constitutes anal sex, who participates in and instigates anal sex, and what occurs during anal sex. We sought to unpick these issues via an exploratory, qualitative study of perceptions of anal sex, and specifically views and concerns regarding how women and girls engage in anal activity.

We argue that deconstructing understandings of anal sex, which are often underpinned by misinformation and judgements (Wood et al. 2019), can invigorate policy and practices in sexual health and education. Ultimately, effective sexual health services and education rests on advice that is accurate, inclusive and comprehensive (SEF 2015) and informed by research based on 'lived life'. We proceed by summarising some key of the literature on anal sex.

Background literature

Our literature search initially focused on research examining young women's participation in anal sex and found it limited due to the lack of qualitative work in this area, despite national surveys in both the UK and USA showing notable increases in self-reported heterosexual anal sex participation amongst young people (e.g. Mercer et al. 2013). Rates of anal sex participation are hard to estimate in the UK given the cultural, social and historic stigma associated with non-vaginal sex (Kutner et al. 2021; Hashemi et al. 2013) which reinforces Plummer's (2012, n.p.) 'notions of good (or insider) sexualities, and bad (or outsider/transgressive) sexualities' and sexual practices.

In the available international data, most of which is quantitatively driven, there are variations in reported rates of engagement, particularly in heterosexual contexts (McBride and Fortenberry 2010). For example, in a study of 718 heterosexual Congolese participants (58% women and 42% men) 22% reported engaging in anal sex (Carlos et al. 2019); among a sample of 386 17–18-year-old Tanzanian women, only 1% reported anal sex (Francis et al. 2019); in the USA estimates suggest more than 75% of adolescents and adults have had male-female penile-anal intercourse (see Habel et al. 2018), with McBride (2019) reporting approximately 40% of heterosexual women engage in anal sex at some point, and 8% practice anal sex on a monthly basis. This variance highlights an unclear picture regarding prevalence and/or practices. Notably, however, the central premise within much of this research frames anal sex as problematic or high risk (Baldwin and Baldwin 2000), linking anal sex to HIV and other STIs (Baggaley, White, and Boily 2010; Gross et al. 2000; Woodman-Maynard et al. 2019) and much of the research focuses on Central and Southern African regions (Brody and Potterat 2003; Duby 2019; Duby and Colvin 2014; Karim 2003; Priddy et al. 2011). While a focus on specific regions with high rates of HIV and co-morbidities is understandable, there has been little exploration of why people participate in anal sex, and neglect of its relational and pleasure-based dimensions (Jones 2019; McBride and Fortenberry 2010).

Marston and Lewis (2014) offer a key qualitative paper in this debate. Drawing on findings from 130 UK men and women, the authors suggest that ‘young people’s narratives normalised coercive, painful and unsafe anal heterosex’ (Marston and Lewis 2014, 1) and recommend that ‘health promotion work’ needs to involve ‘harm reduction efforts *targeting anal sex*’ (ibid: 1, emphasis added). This focus on anal sex as a ‘problem’ reflects the way in which the practitioners interviewed in Wood et al. (2019) study appeared to assume anal sex is an unpleasant and unchosen activity for the young women they support. Assuming that anal sex is problematic, without considering the unequal and coercive heterosexual relations that shape some young people’s sexual experiences, risks reproducing notions of ‘normative’ sexual behaviour and stigma.

Importantly, Marston and Lewis’s (2014) findings have been drawn upon in some media coverage of this topic, with headlines such as *Is Porn to Blame For Young Women Being Coerced Into Having Anal Sex?* (Gander 2016). Such media coverage minimises the damaging nature of coercive heterosexual relationships in favour of sensationalist (and reductionist) headlines that seek to escalate levels of concern by emphasising the ‘disturbing’ and ‘shocking’ nature of young women’s anal sex participation (White cited in Gander 2016). Media furore around this topic was exacerbated by a *Teen Vogue* practical guide to anal sex (Engle 2019) which met with a sizeable backlash from conservative parent organisations (Spargo 2017) and feminist journalists who worried that anal sex for young women was not about their pleasure (Barnes 2017).

These adult-produced narratives of concern, worry, panic and outrage warrant further attention as they draw upon wider questions on the nature of consent, pleasure, sexual coercion, and heterosexual gender and sexual norms. The fear around anal sex bears discursive marks of contagion, both moral and physical, that emerged from public health and media panics surrounding HIV in the 1980s and 1990s (Parker and Aggleton 2003). At the same time, concern centring young women as the ‘victims’ of heterosexual anal sex reflects other moral/sex panics in which the bodies and sexual behaviours of young women become intense sites of concern and control with respect to sexuality. These concern/control discourses are as likely to emanate from conservative impulses as they are from feminists who position young girls as (impossible) symbols of what ‘feminist’ or equitable sex ‘should’ be (Lamb 2010). Thus, our research aimed to qualitatively explore concerns regarding anal sex participation and socio-logically deconstruct understandings of anal sex activity.

Methods

Given the potentially sensitive nature of our study, we aimed to recruit adults and young people who had an interest in the topic due to (i) their profession as a sexual health or education practitioner, or artist/performer, or (ii) their potential, as young people, to be the recipients of advice or education from professionals, as well as relevance to their own sexual practices. Having received approval from Sheffield Hallam University’s Research Ethics Committee, participants were invited to participate in a focus group discussion with 2–5 other people, and/or an individual interview (in

Table 1. List of participants (pseudonyms), and the constituents and demographics of focus groups and interviews.

Participant pseudonym	Demographics for whole group
Focus group 1 (FG1)	
Rosie, Laura, Paul, Tim	2 women, 2 men; 2 gay, 2 straight; all white; age range 35–56 years; located in metropolitan city A in Northern England; first language English; employed as local authority manager, university researcher, voluntary sector manager, sexual health worker.
Focus group 2 (FG2)	
Ann, Jane	2 women; both straight; both white; age range 50+; located in metropolitan city B in Northern England; first language English; both employed as a charity youth worker.
Focus group 3 (FG3)	
Martha, Jess, Ben, Holly, Jacob	3 women, 2 men; 2 bisexual, 3 straight; 1 Black, 4 white; age range 19–23; located in metropolitan city C in Northern England; 4 with English as first language, 1 Swedish as first language; 4 employed in retail and service industry, 1 on a higher education graduate scheme.
Focus group 4 (FG4)	
Julie, Cassie, Kate, Stevie, Olivia	5 women; sexuality not disclosed; 4 white British, 1 white European; age range 20–50; located in metropolitan city; 4 with English as first language; employed as a Public Health England team member for a local authority, sexual health outreach worker, HIV charity worker, youth charity worker, nurse
Interviews (IV)	
Jen (Face to Face Interview) Ellen (Telephone Interview 1) Rebecca (Telephone Interview 2) Bella (Telephone Interview 3)	4 women; 1 lesbian, 3 not disclosed; 1 white, 4 not disclosed; age range not disclosed; English spoken but unknown if this is first language; 3 located in a metropolitan city in Northern England, 1 located in a metropolitan city in Southern England; employed as burlesque artist and in the service industry, 1 previous role in delivering sex education, 1 sex educator and trainer, 1 non-client facing role in voluntary sector

person, telephone or skype) to discuss their views on anal sex generally, and specifically in relation to young women (Table 1).

The study sample comprised 20 participants, aged 19–56 years, employed in a variety of sectors, located in metropolitan cities (two in Northern and one in Southern England). Given the small sample size, demographics for individuals are not included and pseudonyms are used to safeguard anonymity. In summary, the sample included 16 women and 4 men, 1 lesbian, 2 bisexuals, 2 gay, 7 straight, and 8 undisclosed; 1 Black person, 1 White European, 17 White and 2 undisclosed. All spoke English in the focus groups/interviews though Swedish was the first language of one participant. Our overall sample was largely racially homogenous consisting primarily of White, anglophone women. Intersectional analysis is therefore limited. We do, however, discuss the gender dimensions of anal sex perceptions across our sample.

As researchers, we are not free of biases and subjectivities. The framing of sexual acts, and the cultures, contexts, languages and scripts that define and give meaning to sexual practices (Simon and Gagnon 1986) can influence how research participants articulate their perceptions, understandings and attitudes towards practices and identities. Given the assumptions about anal sex in some literature, we attempted to ensure our research facilitated critical and reflexive discussions. To avoid phallogentric and heteronormative positions that assume anal sex involves penile-anal intercourse, the semi-structured format for our focus groups and interviews was designed to

encourage exploratory conversations between participants and researchers with ample space for a latitude of responses. For instance, as an opening exercise we asked participants to write down the words they associated with the phrase ‘anal sex’ (as opposed to entering into dialogue with the researchers) to minimise influence or prompting. We emphasised that all contributions were valid with no requirement to share personal experience/preference. Participants often distinguished their references to public discourses and/or service users’ views from personal viewpoints and were critical and analytical.

We could not assume shared understandings, definitions or perceptions of anal sex and thus designed focus groups and interviews to begin as broadly as possible and stressed there was no such thing as a ‘wrong answer’. This also minimised, as much as was feasible, the impact of social desirability bias. By providing space to explore anal sex in participants’ own terms, the researchers avoided implicit or explicit suggestions that there was a ‘right way’ to define and discuss anal sex. Given the resultant ease, freedom and latitude with which participants shared their thoughts and views, we felt we minimised tendencies to bias in participants’ responses. Activities within focus groups were designed to provide space for discussion that did not centralise the researcher as the agentic driving force (e.g. small group discussions, responses collected on flip chart paper).

Participants discussed answers to open questions and related discussions in small groups and/or wrote down their responses on a shared flip chart. Interviews and focus groups were audio recorded, lasted between 60 and 90 min and closed with debriefing on sources of support, an invitation to log anonymous comments, concerns or queries, and an invitation to a future dissemination event. Transcripts were coded and thematically analysed using Braun and Clarke (2006) six-phase thematic framework by a team of researchers who identified three core themes: anal sex as deviance, anal sex as phallogentric, and anal sex as agentic.

Findings

Before discussing the findings, we reiterate that the views expressed by participants were not necessarily their own and do not frame our analysis as reflecting personal views. Rather, they offer powerful stories drawn from professional and peer group encounters, media observations, and education narratives that highlight some significant discourses and meanings associated with anal sex.

Anal sex as deviance

The construction of anal sex as an act of deviance or perversion has a complex history, regulated by theological and ecclesiastic frameworks of prohibition (Hardy 2011). Early medical, psychological and psychiatric work (see, for example, Freud 1977) also framed anal sex as a deviation from ‘normal’ sexual development. Some participants acknowledged this history in response to our opening questions on words and phrases associated with anal sex. Anal sex as a deviant activity was illustrated in expressions of dirtiness, disgust, amorality, disapproval and damage:

It's a bit urghh, because faeces come out of the back, the anus, I think a lot of people think, therefore, it's something dirty and hidden. It's a bit yuck. (Dawn FG2)

Filthy, unhygienic, unhealthy, dirty, spreads disease, painful, ouch, immoral, abomination, risk of infection, fears about damage and discomfort, painful, rude. (Words written on flipchart by participants in group exercise FG2)

These framings of anal sex echo Fitzgerald and Grossman's (2018, 36) definition of sexual deviance as 'behaviours of individuals seeking erotic gratification through means that are considered odd, different, or unacceptable to mainstream society'. Like those in McBride's (2019) focus groups, participants in this study framed anal sex as stigmatised:

I don't think the anus, the rectum, is seen as a valid part of the body to explore pleasure. (Tim FG1)

Discourses of body parts (anus and rectum) as invalid and incommensurate with pleasure highlight the powerful and harmful potential of inaccurate or misinformed educational input and services. This was overscored by perceptions of anal sex as deviant acts linked to men as sexually 'rampant'. For example:

It's what men do, they're animals, can't help themselves. (Paul FG1)

Resonating with McBride's (2019) findings, the more prevalent default association was specific to gay and other men who have sex with men, often with derogatory language to add emphasis:

First thought is gay men. A bum chum. (Rosie FG1)

[it's a] queer thing ... [anal sex] refers to gay men ... it's what gay men do. (Tim FG1)

Such examples underscore views and assumptions in discourses of anal sex as a central feature of male same-sex practices and gay male identity. Indeed, Paul spoke of a commonplace perception that 'becoming' gay required a rite of passage that involved anal sex:

You become a gay man by having anal sex; I'm not a gay man until I've had anal sex. (Paul FG1)

Whereas participants expressed that anal sex was often perceived as the default sexual act for gay men, when heterosexual women were mentioned by a participant, a little more explanation and the context of the relationship was described:

I don't know much about gay men, but for woman, I think it [anal sex] feels right in some relationships and doesn't in others. (Laura FG1)

The conflation of anal sex as a gay sexual practice both normalises the androcentrism associated with anal sex and bypasses the need for further contextual understanding. Several reasons were offered to explain why anal sex might occur in opposite-sex relationships. Anal sex in this context was seen as less normative and more complex. For instance, anal sex could form part of a possible repertoire or hierarchy of practice:

it's the next rung in the ladder of practices. (Laura FG1)

You might be in an established relationship but wanting to try new things, and explore [anal sex] as another dimension so that's the next thing. (Rosie FG1)

When I was younger, it used to be referred to as "getting your brown wings." So, people would work their way up. You know, so ... you got your red wings if you shagged someone on their period and you got your brown wings if you took her up the arse. (Cassie FG4).

Both a sexual health practitioner (Laura, embodying a young person's voice) and a young person (Ben) suggested that anal sex might also be instigated by viewing pornography:

That's what my boyfriend is expecting me to do next—we've done vaginal sex, so anal sex and oral sex, that's the next thing. I've seen it on porn, so that's the next stage. (Laura FG1)

I think sometimes, if the guy sees porn, sees anal sex, he's like, "I want to try that." One of his mates has tried it [so] "Let's do this." She doesn't feel that comfortable with it, but because she's in this new relationship it's like, "I want to please you." (Ben FG2)

Pornography as a mediator of anal sex reflects normative binaries positioning such practices as deviant and thus beyond more 'valid' and justified practices within relationships (Rubin 2006).

Another explanation viewed heterosexual anal sex as a pragmatic option—if vaginal penetration was unfeasible:

It might be heterosexual couples where there's FGM, stitching, cutting ... because vaginal penetration isn't possible. (Dawn FG2)

Or, as mentioned by several participants, anal sex might be practised to avoid menstrual blood or conception, 'if she's on her period' and 'to avoid pregnancy'. These notions of anal sex as an 'alternative' suggest a degree of agency in overcoming practical 'barriers' to vaginal intercourse. But practitioners shared examples from work with young people of less agentic practices in situations where anal sex was an outcome of being drunk or not in control:

... in a situation where you're under the influence of alcohol or substances, and not really that aware of what's happening, and not really able to decide whether it's what you want or not, or resist. (Rosie FG1)

This sense of young people's lack of control dovetailed into discussion of young people as particularly vulnerable to 'feel[ing] forced into that position' (Tim FG1). Others shared anecdotes from practitioners who had concerns about young women's participation in anal sex, but their concerns neglected issues of consent, coercion and heterosexual gender and sexual norms:

One of the sexual health advisors [said to me] "Young women these days, they're just lost, and I want to save them. They're having anal sex, and I don't think they want to have anal sex." But she didn't really know whether they did or didn't [want anal sex], she was sort of putting her own values on that, because she could see they weren't happy ... but she was attributing it to them having anal sex, as opposed to everything else not being right for them. (Rosie FG1)

Anal sex as challenging gender and sex norms (Mosher 2017) was reflected in extracts positioning anal sex on a continuum of sexual practices which individuals may 'work up to'. Here, anal sex occupies an interesting space as both a rite of passage for men (both heterosexual and same sex attracted) and something imposed on young women, either for the pleasure of men or for practical reasons as an alternative to vaginal sex.

Anal sex as phallocentric

When asked who might engage in anal sex, participants shared a common-place refrain:

It's only something that gay men do and ... all gay men have anal sex, which is another assumption. (Paul FG1)

While initial discussions around anal sex were notably androcentric and acknowledged that the association of anal sex with homosexuality carried notions of deviancy, participants also referenced perceptions that assumed anal sex was both a 'normal' and a phallocentric practice for gay men. This was evidenced in responses to our subsequent question, 'what is anal sex?' where responses centred on 'male penetration with a penis to the anus' (Paul FG1) largely in relation to gay men. Subsequent discussion revealed more nuanced perspectives that included oral-anal rimming, fingering and genital stimulation. Despite this, the dominant narrative was one that remained focused on penile penetration. Such phallocentricity was also evident in constructions of what constitutes 'real sex' in which non-penetrative practices share a 'normalised absence' in sex education curricula (Alldred and David 2007, 4).

When theorising phallocentricity, Bradbury (cited in Tiefer 1994, 363) argues the penis is 'the physical organ represented as continuously erect; it is the inexhaustibility of male desire; it is a dominant element of our culture'. Thus, to specify sex as penis-led penetration, privileges the penis as the source of pleasure over the vagina, or in this case anus, and consequently male pleasure. Phallocentric constructions of sex establish scripts for sexual roles that primarily portray men as the dominant, active, penetrative actor and women as submissive, passive, receivers of penetration; with the climax of male ejaculation being the central focus that eventually brings about the finale/endpoint of 'real' sex.

It is important to acknowledge that normativity occurs within subjective, cultural, medical and statistical contexts and is an ongoing process of negotiation within differing cultural realities (Worthen 2021). In our findings, anal sex was recognised as largely normative for gay men. This contrasts with heterosexual anal sex which was said to involve more phallocentric power roles—of men as 'giver' and women as 'receiver':

anal sex with *genuine penetration* and stuff is more the man to the woman ... I think also, guys getting, yes, by a girl with a strap-on is quite emasculating ... I don't think many guys would be up for feeling that, feeling that vulnerable as well. (Ben FG3; emphasis added)

Hardy (2011, 107–8) has argued that anal sex, specifically unprotected anal sex, 'is often experienced as a daring and adventurous form of transgression that provides the insertive individual with a sense of being carried away by an overwhelming male

sex-drive, and thus provides a powerful affirmation of masculine identity'. Notably however, the owner of the penetrating penis is seen as the dominant or superior partner with the male anus being largely absent from images of masculinity. Thus, female-on-male anal sex (e.g. pegging) was viewed by participants as deviating from phallogentric scripts that centre the dominant male penis as penetrating a submissive woman. However, one participant acknowledged that

softer anal sex, things like fingers and tongues and stuff like that, I think both sides (female-on-male and male-on-female) is pretty common. But strap-ons and dildos ... I think that's more taboo, and less regular. (Ben FG3)

This was reinforced by a participant with a previous role as a sex educator:

I think they'd (young people) probably see it as mostly penetrative anal sex, probably with a penis, potentially with a sex toy, but I don't think they'd think about fingers or rimming or anything like that. (Ellen, Telephone interview 1)

Participants felt that some of the young men they had worked with valued penetrating a woman anally as a signifier of masculinity:

rather than doing it because you want to, you have to get the bragging rights by saying, "yes, I've done it." (Julie FG4)

Homosocial bonding could include men sharing sexual stories with other men to gain social status and mainstream porn which often depicts bonding 'stories' of two men sharing a woman through anal, vaginal and oral intercourse (Flood 2008). With regard to viewing men as receivers of anal sex, one participant remarked that among the young men she had worked with:

a lot of lads do know that their g-spot is up their bum, which they find hilarious ... they have a little wobble when anything like that is suggested. (Olivia FG 4)

Thus, the phallus retains a masculine quality that, when entering a woman's anus, gives young men a higher status above vaginal sex. Within such a heteronormative context, the phallus entering a man was viewed as emasculating. Despite participants' references to public discourses that position penetrative anal sex as 'real' sex above non-penetrative anal sex (e.g. rimming, prostate massage) few scholars have theorised the role of anal sex within typologies of coitus. For example, a sexual health worker said that, in her experience, young people:

wouldn't class it (non-vaginal sexual activity) as sex ... they can be having plenty of oral and anal sex but still saying that they're intact and virginal. (Kate FG4)

Such findings reflect previous research (Averett, Moore, and Price 2014) which found LGBT people are more likely than heterosexual people to classify anal sex—given the heteronormative scripts that reinforce the coital imperative—as 'real sex' that allows one to lose their virginity. This has both sexual health and sexual pleasure implications in relation to anal activity, as people may be having anal sex but not identifying their practices as 'sexual' in sexual screening services.

Concerns about anal sex from participants who were sexual health workers, were articulated using a medical model of sex, for example:

rimming is very ... unlikely to transmit [HIV] ... so when we often talk about anal sex, generally we talk about penetrative sex in the sexual health clinic. (Paul FG1)

Tiefer (1994) argues that such medical hegemony can pathologise all phallogentric sexual activity, ultimately creating a clinical deviancy in which non-vaginal sex is seen as deviant due to 'risk'. Further, sexual desire that deviates from heteronormative and homophobic sexual scripts—such as straight men being the receivers of anal sex through pegging—come to be associated with shame (Stewart 2018). During focus group discussions, participants explored their own views about anal sex and consciously critiqued their underlying biases and assumptions. But it was noticeable that these discussions, even when discussing anal sex in relation to women, were often framed within a heteronormative context, which did not include or discuss in depth, women having sex with women. Two participants acknowledged this omission, with one saying,

If there's any group that isn't really considered in terms of anal sex, I don't think you really hear a reference within lesbian sex. (Jess FG3)

Whilst Willis et al. (2018) found that women who have sex with women are 1.33% more likely to experience orgasms and overall sexual satisfaction than women who have sex with men, there is a paucity of data on anal sex practices between women. During focus groups with 23 lesbian and bisexual women, Marrazzo, Coffey, and Bingham (2005) found penetrative anal sex using sex toys was acknowledged by lesbian and bisexual women but viewed as less common than vaginal penetrative sex. However, oral-anal rimming and anal sex with fingers was viewed as a common sexual practice. Qualitatively, the assumptions conveyed by our participants underline the tendency to erase WSW from discussions of anal sex.

Anal sex as agentic

Discussion took place concerning why people engage in anal sex and who instigates it. This led to examples of anal sex being seen as a pleasurable choice:

It can be enjoyable for a lot of people. Point blank, that's why people do it. Why do people have sex in general? Because it's enjoyable. There's too many questions about why people do it, when the fact is that if it's consensual and people want to do it, you should just let people do it. (Jen, interview)

McBride (2019, 372) has reported pleasure as a pertinent motivation in both penile-anal intercourse and vaginal sex featuring anal play. Participants in this study similarly acknowledged pleasure as a key component in making agentic choices to engage in anal sex.

Because it's pleasurable. (Ellen, telephone interview 1)

Interviewer: And do you think that's the dominant conversation we have in society or in your own work?

No, I don't think it is. That's a personal opinion. (Ellen)

Sex-for-pleasure discourse is difficult to frame theoretically when positing sexual agency. Indeed, scholars have argued that normalising pleasure within sex education

can reinforce the imperative whereby sexual pleasure is given primacy in sexual decision-making (Wood et al. 2019). That said, given that much of the literature and public discourse tends to frame anal sex within risk-based, deficit constructs, it is important to explore the role of anal sex as a pleasurable activity.

Educational conversations about pleasure-based sexual activity were said to be rare and several participants lamented how education about anal sex specifically, with a focus on pleasure, would likely be rejected:

I can guarantee anal sex in a lot of school settings and around sex education and within school, will not be discussed. (Stevie FG4)

Such a lack of education can reproduce stigma and limit exploration of one's own and other people's bodies:

... what will be more damaging is forcing this idea onto your child that what they're doing is not okay. That it's not okay to explore your own body and other people's bodies. (Jen interview)

The potential consequences of ignorance about anal sex were illustrated by sexual health professionals who relayed stories from their practice:

I've had some really disturbing consultations, [with] 18 and 19-year-old boys where they're like "So, I can't just literally take it from the vagina and then just put it up her bum?" I was like "No. Not without asking." (Stevie FG4)

... Young people have no idea, honestly, I'm not exaggerating. I've probably been asked about 10 times if you get pregnant from anal sex. I think people just don't know, and that'll be from kids in year 9, so [aged] 14. I think people have a real lack of actual knowledge. It's just not discussed ... we see lots of young people who've got a genuine, like, not being funny, genuine questions because they just have never talked about it. (Cassie FG4)

These extracts highlight some young people's inadequate knowledge of sexual anatomy and practices, which is perhaps unsurprising given that reference to pleasure and desire is largely absent in sexual health (Jones 2019) and relationships and sex education (RSE) despite longstanding calls for its inclusion (Wood et al. 2019).

Such lack of discussion within RSE limits young people's sexual literacy. Educational discourses that include anal sex within their purview from both a sexual health and sexual pleasure perspective can inform individuals about their bodies, enable them to make fuller more agentic choices, provide a rationale with which to resist coercion, challenge heteronormative and phallocentric sexual scripts, and promote equality within relationships (McBride 2019; Hirst 2013).

Although anal sex is associated with deviance in traditional, heteronormative sexual scripts, some groups—such as gay men and some women—have reframed 'normative' sex to include anal sex. One participant remarked that this reframing linked anal sex to individual identity, in that participation in anal sex can become a catalyst to affirming being a gay man or a liberated woman:

... it's a rite of passage thing. So, for a gay man it might be, I'm not a gay man until I've had anal sex ... for a woman it might be, I'm not a liberated woman ... I'm not an adventurous woman. (Paul FG1)

It was perhaps unsurprising that some participants discussed anal sex in the context of ‘adventurous’ women, as Fahs and Gonzalez (2014, 512) also found that some women engaged in anal sex to try something that seemed “hip”.

Ultimately, there are many reasons why individuals engage in anal sex. Exploring agency in relation to anal sex, through *pleasure-informed* relationship and sex education, can therefore serve a twofold purpose. Firstly, the provision of accurate, empowering information about anatomy can aid in reduction of perceived physical risk. Secondly, a focus on pleasure and agentic engagement can provide a foundation to resist coercive mechanisms that may potentially influence engagement in anal sex.

Conclusion

This study aimed to qualitatively explore understandings of anal sex among a range of individuals including sexual health practitioners and young people in two Metropolitan cities in England. In developing our analysis, we have not sought to ignore evidence that anal sex can involve the more inconsistent use of condoms and/or more breakage than might be experienced with vaginal-penile penetration (Ybarra, Price-Feeney, and Mwaba 2018). Nor do not deny that anal sex without a lubricant can contribute to anorectal harm and that some anal sex may be non-consensual or coerced.

Rather, our argument is that the anus as a site for pleasure should be talked about for this potential, irrespective of the dominant constructs that define it, the opinions that condemn it, and the lack of information that mystifies and intrigues it. Open, frank and non-judgemental conversation about anatomy and safer sex practices should be a routine aspect of sex and relationships education and sexual health provision, regardless of the (sometimes assumed) identity and sexual practices of the recipient. The personal beliefs of educators and practitioners should play no part in these interventions.

We do not claim our data as conclusive or generalisable as our study is limited to a specific context. Importantly too, this analysis reflects our situatedness at the time of conducting the research. Regardless, the findings suggest a pattern of perceptions and narratives that has the potential to undermine honest education, advice-giving and safer sex if not addressed and questioned in safe spaces prior to work with young people. Adequate resources and capacity to allow space for such discussion, as articulated by participants, is pivotal in this respect.

As noted earlier, current concern surrounding young women and anal sex appears to focus on the act itself, rather than the wider context of coercive practices. For practitioners such as those involved in our research, it would be beneficial to share views about both of these issues and how best to support young people who might be involved in anal sex, so as to enhance professional practice and improve the breadth and quality of services for those requiring them.

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