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Bottom Shaming, Shame Anxiety, and Sexual Wellbeing

ABSTRACT

'Bottom shaming' refers to the way in which men experience shame due to engaging in receptive anal intercourse, or 'bottoming'. While regularly discussed in an array of online and offline LGBTQ+ media, bottom shaming has seldom been explored academically, as a concept and in relation to the sexual wellbeing of gay, bisexual, and men who have sex with men (GBMSM). This article explores what is meant by 'bottom shaming', how it developed historically and transculturally, and draws on the concept of shame anxiety to theorise ways in which GBMSM can experience shame in relation to bottoming. It argues that shame can be anticipated in both clinical and non-clinical contexts, and that the anticipation of shame due to bottoming can cause a range of anxieties that can impede sexual wellbeing.

Keywords: Bottom shaming, gay bottom, shame anxiety, sexual wellbeing

Introduction

BOTTOMS, OR MEN who prefer to have receptive anal intercourse with other men, who may be gay, bisexual, or men who have sex with men (GBMSM), are routinely stigmatised within and beyond LGBTQ+ communities (Brookes et al. 2017; Ravenhill & de Visser 2017).[1] The major reason for this stigmatisation is usually attributed to a perceived

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deficit in social and cultural standards of masculinity (Reilly 2022, 2016). Bottoms are typically stereotyped as being effeminate and lacking in visible markers of masculinity such as: voice, mannerisms, muscularity, penis size, body hair, and height (Ravenhill & de Visser 2018; Glick et al. 2007).[2] Moreover, this is a trend that has been observed cross-culturally in countries such as the US, Italy, Brazil, and India (Callahan & Loscocco 2021; Silva 2020; Rios et al. 2018; Stief 2017). These stereotypes can have a negative impact on bottoms' sexual wellbeing (Swift-Gallant et al. 2021; Kutner et al. 2021; Taywaditep 2002).

'Bottom shaming' is used to describe the process whereby bottoms are made to feel ashamed for being, or desiring to be, anally penetrated, and is frequently intertwined with concerns about masculinity, sexual performance, and self-confidence (Brooks et al. 2017). While bottom shaming is routinely discussed in LGBTQ+ media and addressed fictionally, such as in the HBO series *Looking* (Series One, Episode Five), there is a paucity of academic research and theorising into what bottom shaming is, how it may be experienced by GBMSM, and how it might impact GBMSM sexual wellbeing more generally (Reid & Abad-Santos 2014).

In contrast to a narrow view of sexual health focused on risk prevention and disease treatment, there is a growing body of research that demands broader, more holistic perceptions of sex in public health. Within these, sexual wellbeing considers elements such as self-esteem, resilience, self-determination, and comfort with one's sexuality (Mitchell et al. 2021). The notion of sexual wellbeing becomes particularly useful to think about how bottom shaming has a direct bearing on the sexual wellbeing of bottoms, who are more likely to experience bottom shaming. As a concept, however, sexual wellbeing is notoriously difficult to define. First mooted in 2007 at a WHO-UN Population Fund meeting, sexual wellbeing has been discussed as a way of moving beyond what some see as the confinements of a sexual health paradigm (Mitchell et al. 2021; Lorimer et al. 2019). The key element behind the impetus of sexual wellbeing is: what is missed or overlooked by focusing narrowly on sexual health as risk?

Scholars have begun to explore the ways in which stigma associated with anal sex impacts GBMSM sexual wellbeing in clinical settings, especially for bottoms (Kutner et al. 2021; Quinn et al. 2019). This may be conceptualised in a number of ways: stigma related to anal sex in general, stigma related to anal sex among gay men, and stigma related to bottom identities. GBMSM often conceal what they perceive to be stigmatised identities and sexual practices, such as bottoming or being a bottom, which can impede health-seeking behaviour and can complicate access to relevant health interventions such as access to condoms, lubricants, and medications (Kutner et al. 2021, 1651; Ayala et al. 2013; Herek 2009). While these insights are useful for healthcare professionals to recognise the prevalence and role of stigma in impacting GBMSM in the clinical encounter, it is important to consider the impact of bottom shaming on bottoms' sexual wellbeing both within and beyond the clinical encounter. Mitchell et al. (2021) have theorised that sexual wellbeing encompasses eight domains, including – and most relevant for this work – an individual's sexual self-esteem (positive feelings about one's sexual being), comfort with one's own sexuality, sexual respect (one's sexual being is accepted and positively regarded by others), and sexual self-determination (ability to freely choose partners, practices, and contexts) (Mitchell et al. 2021, 610).

In this article, we theoretically explore the concept of bottom shaming and its potential role in shaping GBMSM sexual wellbeing. Firstly, we begin by exploring how the concept of bottom shaming is defined and represented by LGBTQ+ media and social media users posting on the internet. We then contextualise these contemporary Anglo-American voices with reference to the way in which bottom shaming is born of historical fears around masculinity, effeminacy, and male homosexuality. At this point we also broaden the focus to consider how the figure of the bottom has been, and still is, theorised outside Anglo-American contexts, highlighting the intersections of ethnic background, class, and geographic location in shaping perceptions of bottoms and bottoming. We then draw on the concept of shame anxiety to theorise ways in which bottoms might anticipate shame in different situations, clini-

cal and non-clinical, and how this might impact their sexual wellbeing. We acknowledge that bottoms do not experience shame all the time, but may still relate to shame in the form of anxiety about anticipated shaming. By offering a theoretical exploration of the intersections of bottom shaming, shame anxiety, and sexual wellbeing, we aim to lay the groundwork for further theoretical and empirical work highlighting the extent and importance of these intersections among the sexual experiences of GBMSM.

What is bottom shaming?

Bottom shaming has seldom been addressed explicitly in the academic literature, although in LGBTQ+ media and on social media the term has a wider currency (Reilly 2022; see also Gössl 2022). The concept of bottom shaming demonstrates the salience and value of synthesising academic and non-academic discourses around gay sexual identities (Vytniorgu 2023). Media representations and discussions, which often utilise creative or artistic methods and can encourage different voices due to the anonymity afforded by the internet, help shape LGBTQ+ identities and perspectives as much as, if not more than, strictly 'academic' voices, and it is for this reason that both this section and the following one foreground media voices shaping cultural discourses of bottoming and bottom shaming (Wignall 2022; Garcia-Iglesias 2020; Cavalcante 2016; Plummer 1995).

Moreover, as cultural theorist Raymond Williams originally argued in relation to television, engagement with any kind of media must recognise the affective and sequential states in which this material can be encountered, encouraging a sense of flow that is open to surprises and serendipity (Williams 2003; Arroyo 2016). Similarly, literary theorist, Andy Mousley, has emphasised the value of 'purposeful wandering' to describe the activity of using media to theorise concepts that are deeply felt human experiences (2013, 10). Rhetoric scholar, Timothy Oleksiak, has imagined what 'purposeful wandering' might mean specifically for work on bottoming and bottom identities, adopting what he calls 'the bottom's stance', which demonstrates 'openness to the pleasures that are found in

what is offered' by way of texts, images, and media (2022, 360). In this article, we draw on these traditions and approaches to synthesise academic and non-academic voices that combine to create sexual discourses around bottom shaming, shame anxiety, and their impact on sexual wellbeing. Specifically, we found that the websites, Reddit and Quora, which both enable users to ask questions and receive answers from other users on almost any conceivable topic, to be especially prominent in hosting topic discussions around bottom shaming. Reddit and Quora typically host discussions in English and because of their anonymity functions, enable a diversity of voices to emerge around sexually sensitive topics.

Where we quote from anonymous social media users on platforms such as Reddit or Quora, we omit URLs in line with guidance from media researchers on maintaining privacy and anonymity for those using social media (Fiesler & Proferes 2018). Indeed, there is sometimes a trade-off when conducting internet research using social media: the willingness of users to talk openly about their concerns and experiences may come at the cost of researchers' knowledge of demographic information concerning ethnic background, age, and user location. However, while the identities of the users remain anonymous, the language and cultural/social tropes they use indicate a strong Anglo-American tendency. We acknowledge that by employing this methodology and relying on arguably anonymous online users, we are unable on this occasion to generate a dataset that comprehensively reflects the multiple and intersectional identities that shape bottoming.

Unsurprisingly, media commentators and social media users frequently suggest that misogyny, fear of effeminacy in men (termed 'effeminophobia'), and 'internalised homophobia' are at the root of bottom shaming (Richardson 2009; Sedgwick 1991). Madison Moore (2014) has argued that "the problem with bottom-shaming is when gay sex taps into misogynistic shit around male dominance". "All too often", writes Brian Moylan (2016), "we accuse each other of being bottoms by way of criticizing perceived feminine traits within other gay men". One user on the Q&A website, Quora, suggests that negative treatment of bottoms in the gay community is due to internalised homophobia, which

"is based upon the recognition that the unspoken stigma about bottoming still prevails". This "recognition" also surfaces in a Reddit user's thread disclosing their own shame about bottoming and its connection to internalised homophobia: "I just really hate hearing and feeling all this misogyny and subtle homophobia everywhere". These invocations of effeminophobia, misogyny, and internalised homophobia are also evidenced in the academic literature about negative attitudes towards bottoms, in which discussions about deficits in masculinity dominate the conversation (Sánchez & Vilain 2012; Underwood 2003). For many, bottom shaming is primarily an issue of negative affect directed towards that which is perceived to be effeminate, which can also be internalised and directed against those within one's own community (Taywaditep 2002).

However, other dimensions of bottom shaming are also significant. Some argue that bottoms are not necessarily shamed because they are bottoms, but only if they are perceived to be 'slutty' – that is, have what others perceive to be 'too much' sex or with 'too many' partners. Jorge Rodriguez-Jimenez (2014) has argued that his own shame as a bottom was tied up with fears about STI transmission and promiscuity, and notes that the discourse around HIV-AIDS in the 1980s and 1990s denigrated bottoms as vectors of the virus. This has been tied to the fact that bottoming (and especially receiving ejaculate in the rectum without a condom) is significantly riskier in terms of HIV transmission that 'topping' (or being the penetrative partner) (Sax, Cohen & Kuritzkes 2014). This does not account, obviously, for the use of HIV prophylaxis, such as condoms or PrEP.[3]

Accusations of being a bottom and being promiscuous can go hand in hand: whereas a 'top' may be praised for having multiple partners or vigorously engaging in sex, a bottom may be 'slut shamed' for these same reasons (Brennan 2016b). However, some Reddit users have argued that within the gay community, bottoms are just as much responsible for shaming each other as are non-bottoms or those outside the gay community entirely. One user has suggested that "bottom shaming is something that other bottoms do to each other mainly in jest", whereas another user puts it more vehemently by stating that "the only people

who are going to shame someone for being a bottom are the unattractive weird bottoms who miss out on all the hot dick". A Quora respondent suggests, in a similar vein, that it is bottoms "who don't get laid" – "bitchy queens" – who do the main damage in terms of slut shaming other bottoms, especially when this shame is paradoxically directed at "hotter masculine bottoms". Here, there are two dimensions of bottom shaming working simultaneously: anxiety about perceived effeminacy, which in turn drives animosity to those who, while also a bottom, nevertheless appear to possess the masculinity which the "bitchy queens" feel they lack, or are told they lack by others. The masculine bottoms are thus slut shamed by other bottoms because not only do they possess socially acceptable gender traits, but they also appear to have the kind of sexual 'success' which these ostensibly unattractive bottoms covet.

A further dimension of bottom shaming is due to the perceived pressure to be sexually versatile (engage in both penetrative and receptive anal intercourse) as a gay man, and a subsequent sense of shame directed at, and experienced by, bottoms who do not wish to be versatile (Vytniorgu 2024a). James Woods (2019) has argued that gay men are more likely to say they are sexually versatile than admit they are a bottom due to negative stereotypes associated with this sexual position identity. As one Quora respondent noted:

> people will not freely share that they are bottom, so they hide behind 'versatile' or other similar phrases. That stating freely that you are a bottom is a shameful thing, somehow to be hidden and alluded to in different ways – 'not a top,' etc.

Users of the subreddit r/TopsAndBottoms sometimes express anxiety about pressure to declare oneself versatile as opposed to admitting to being a bottom (Vytniorgu 2024a). One user reflected:

> I feel like there's a lot of pressure in the gay community to be versatile instead of purely a bottom. Some even say it should be obligatory for gay men to be vers, and if they're not they're being selfish.

However, there are voices on Reddit which are trying to resist being shamed as an exclusive bottom. One user put this rejection of shame strongly:

> I'm a total bottom – I am not versatile at all. I refuse to feel shame for loving a dick in my ass. You like what you like, and it doesn't make you a better or worse person because of that. There are guys out there who are total tops and want a total bottom boyfriend. People who shame you into being versatile are idiots.

The reasons for this apparent pressure to be versatile are complex, but may be embedded into the very meaning of what it means to be *gay*, as opposed to a *faggot*, *fairy*, or *queen* – older Anglophone terms which have often denoted an effeminate bottom (Murray 2000). For example, in his analysis of American gay shame, Walt Odets aligns an idealised gay sexual politics with sexual versatility. For Odets, some exclusive tops and bottoms might be in accord with their "entire conscious internal sensibilities", but others – perhaps even most – are containing "aspects of their unconscious sensibilities that might, if recognized and allowed expression, nurture a broader, a more authentic experience" (2019, 54). For Odets, "polarized" relationships "fortunately […] do not describe all Americans, particularly today's younger, educated, urban adults" (ibid., 39). Authentic sexual experience for gay men is here aligned to sexual versatility which is couched in the language of "broad". By contrast, being an exclusive bottom (or top) is "unconscious" and "polarized".

Bottom shaming is a multifaceted phenomenon and when a bottom says they are experiencing bottom shame, it is important to question what this specifically means for them in any given situation. To initiate discussion, we have identified a few possible ways in which bottom shaming can be used in contemporary LGBTQ+ discourse. Fear of effeminacy in men and 'internalised homophobia' may dominate discussions of bottom shaming, but they are not the only ways in which bottom shame is experienced. Bottoms can be slut shamed, they can shame each other, and GBMSM can inculcate a culture of bottom shame by reifying

specific gendered and sexual practices that may marginalise bottoms. However, these contemporary media voices are in fact emerging from historical and culturally sensitive conversations around masculinity, gay sex roles, and even what it means to be truly gay – conversations that are specific to Anglo-American contexts and can be contextualised by reference to non-Anglo-American settings that highlight different intersections between ethnic background, class, and GBMSM sex roles.

A brief history of bottom shaming

Bottom shaming does not operate in a cultural or historical vacuum. In Anglo-American sexual discourses, bottoming and bottom identities have been at the forefront of intense debates about gay masculinities (Vytniorgu 2024b; Reilly 2022; Hoppe 2011; Kippax & Smith 2001). Critiquing some of the key historical and cultural themes associated with contemporary bottom shaming – especially from an Anglo-American standpoint – helps to highlight its pivotal role in the formation and consolidation of gay identities and sexual practices, especially in societies that have witnessed some form of gay liberation, such as Britain and North America (Murray 1996).

"Throughout history", writes a blogger who uses the name, The Closet Professor (2021), "the receptive/penetrated partner in male same-sex relationships has often been seen as the lesser person in the relationship". In fact, The Closet Professor argues that masculinity as a whole has been measured in relation to males who enact an anally receptive role with other men. This echoes George Chauncey's (1994) argument that the New York *fairy* of the interwar years became the yardstick by which *all* men came to understand their masculinity (see also Houlbrook 2005; Smaal 2015; Almaguer 1998). As such, bottoms, and especially those whose gender expression was deemed to be effeminate or unmasculine, became whipping boys for other men's anxieties around the feminine more generally.

In a recent potted history of bottoming for Pink News, Josh Milton (2022) has suggested that the historical roots of bottom shame can be linked to misogyny, but that since the 1970s, gay men have resisted the

equivalence of bottoming and effeminacy and now revel in the identity of the 'power bottom' – a bottom associated with dominance, skill, and a rapacious sexual appetite (see also Brennan 2016a). Writing for Vice, James Grieg (2020) has offered a similar history, focusing especially on the role of Ancient Greece and its apparent rejection, on the basis of fear of effeminacy, of the possibility that a male citizen could be anally penetrated. However, Grieg errs when, drawing on Alan Sinfield, he pinpoints the marriage of effeminacy and homosexuality to the trial of Oscar Wilde in the 1890s: "it wasn't until the trial of 'celebrity pedophile' Oscar Wilde that we began to see a widespread conflation of homosexuality itself and femininity". This conflation, argues Grieg, helped solidify the negative, misogynistic association of bottoming with effeminacy.

While it is true that effeminacy has often meant different things depending on the context and has also been applied to men believed to be attracted to the opposite sex (Hennen 2001), it is also the case that ideas about effeminacy have been linked to same-sex behaviour and especially sexual 'passivity' for centuries (Norton 2016; Young 1999; Murray 2000). For example, the early modern *sodomite*, at least until the early eighteenth century, was primarily an insertor, whose counterpart was the passive *catamite*, *ganymede*, *ingle*, or *pathic* (Murray 1989, 462). These terms indicate early modern awareness of specific types that synergised androphilic attraction (oriented from males to males), specific penetrative sex roles (insertor/insertee), and possible gendered connotations. Historian Rictor Norton has argued, for instance, that the passive *catamite* was perceived as effeminate across several Romance cultures in the early modern period (Norton 2016, 105). In other words, the elements of bottom shame that relate to effeminacy and perceived deficit in masculinity have a long lineage and have been observed in multiple time periods and cultures (Murray 2000).

However, it would also be erroneous to suggest that bottoms have always been marginalised because of their stigmatised sexual practices and/or feminised identities. In the UK, there are instances of more accepting attitudes towards effeminate males. For example, in interwar

south and east London, as Matt Houlbrook has deftly shown, working-class *queans* (effeminate bottoms) were "acknowledged, precariously accepted, and often welcomed" by the rest of the local community (2005, 160). Even as late as the 1980s on British cruise ships, working-class *queens* were integrated into the ship's community and their preferences to be the bottom in anal sex were well known, tolerated, and even welcomed by men who felt the strain of not having sexual access to women (Baker & Stanley 2003). Yorick Smaal (2015) has also shown how effeminate bottoms – *cissies* and *queens* – found themselves integrated into Australian working-class urban cultures in the 1940s in ways that parallel, to some degree, Houlbrook's analysis of early twentieth-century London and Chauncey's exploration of gay New York of the same period. By contrast, middle-class *queers* and those who identified as more 'neutral' *homosexuals* or *inverts*, often sought to decouple effeminacy and sexual 'passivity' from public images of the homosexual, to align themselves as masculine professionals with heterosexual middle-class men (Chauncey 1994; Stines 2017).

Outside Anglo-American contexts, working-class bottoms have also found ways to feel accepted in some contexts, even if in others they experience shame due to their stigmatised sexual practices and identities. For example, in parts of South Africa, African isiZulu speakers who are sexually receptive and often adopt gender atypical behaviour and/or appearances call themselves *skesanas* and have developed an intricate language – isiNgqumo – to communicate among themselves (Msibi & Rudwick 2015). IsiNgqumo involves humour which *skesanas* utilise to counteract anticipated shame in certain contexts and to build a sense of community with other *skesanas* (Ntuli 2009, 185). Equally, in parts of India, *kothis* have formed ways of coping with their stigmatised identities which are linked to non-normative gender expression and bottom sexual practices (Stief 2017). These non-Anglo-American examples are by no means isolated, especially at the intersections of working-class culture and gender nonconforming homosexual subcultures (Cardoso 2008, 2005). Together, they indicate a complex, fluctuating situation in which bottoms who are aware that their stigmatised sexual practices and

identities can induce shame, also find ways to respond, often by building community with each other and searching for ways, however precarious and evolving, to belong within more mainstream communities.

So, while it is true that, historically, bottoms have often simply been seen as 'male receptacles for phallic discharges', some have also often found ways to counteract shame based on recognising and responding to contexts in which the activation of shame might occur (Murray 2000, 255). While LGBTQ+ media commentators are correct to pinpoint the origins of bottom shaming to fears around effeminacy, or femininity expressed in men, the situation is also more complicated – and is also peculiarly middle-class. In some cases, bottoms – especially those from the working classes – have historically harnessed prevailing attitudes towards masculine gender expectations and deliberately subverted them, co-creating with the wider society a place in which to belong as sexual and gender 'anomalies', albeit a place which is tinged with anxiety (Murray 2000). Indeed, conversations around bottom shaming need to take into account the role of anxiety much more vigorously than they have to date. Bottoms may not always consciously experience shame, although they might anticipate it, which can cause anxiety. To understand how bottoms negotiate their sexual and gendered practices and identities, it is crucial to theorise the ways in which shame anxiety might impact bottoms and their sexual wellbeing.

What is shame anxiety?

Philosopher Luna Dolezal has developed the concept of "shame anxiety" as a way to account for how people experience stigma "in its various forms" (2022, 855). While Dolezal focuses especially on the "chronic anticipation of shame" in clinical settings, we believe this concept has implications for anticipating shame in a variety of contexts, including but extending beyond the clinical (ibid., 855). Dolezal develops her concept of shame anxiety from the sociologist Graham Scambler, who coined the term "felt stigma" to articulate the lived experience of stigma. According to Scambler, felt stigma has two components: the shame associated with being reduced to a certain stigmatised practice,

condition, or identity (such as being a bottom), and the fear of encountering "enacted stigma", or shame associated with a stigmatised condition, behaviour, or practice (Scambler 2004; Dolezal 2022, 856). Dolezal focuses on the second aspect of Scambler's concept of felt stigma: the anticipation of experiencing shame because stigma may be felt to be enacted. As Dolezal writes, "living with stigma involves the experience of both *actual* and *anticipated* shame" (2022, 856, original emphasis).

As an experience, shame anxiety can have a deeply negative impact on someone's wellbeing:

> Shame anxiety appears in first-person experience as a corrosive, undermining and persistent anxiety about being objectified, judged, labelled and rejected by others. This shame anxiety ultimately can become connected to negative self-beliefs and self-conceptions; one can come to believe that the 'core of their being [is] flawed, useless, and despicable'. (Dolezal 2022, 856; Tangney & Dearing 2022).

One of the most insidious aspects of shame anxiety is that it can 'work' in undetected ways without someone being directly aware of its activity and impact on overall sense of wellbeing: "What this means", notes Dolezal, "is that shame may not present in experience, even when it is occurring. Instead, shame is anticipated and avoided, or bypassed altogether" (2022, 856). As such, someone who is experiencing shame anxiety may not be particularly conscious that their emotions or experience have anything to do with shame. Thus, they may not pay attention to those societal or cultural attempts to counter shame which may in fact help address their shame anxiety. In short, shame anxiety is often experienced as a form of avoidance

> that may include emotions such as fear, anxiety, stress or powerful impulses to hide, avoid or escape, along with negative feelings about the self, characterised by a sense of inadequacy, insecurity, defilement or deficiency in relation to others, particularly others who one feels may have the social power to pass judgement. (Dolezal 2022, 857)

Dolezal then proceeds to explore how shame anxiety can present in the clinical encounter, and offers some suggestions for healthcare practitioners to minimise shame anxiety in their clinical settings.

For GBMSM bottoms, shame anxiety seems an expansive way to conceptualise and express the gamut of emotions and complex experiences they may face as they embody, perform, and identify with a stigmatised sexual practice. Bottoms may not need to encounter overt instances of bottom shaming in order to experience shame anxiety about their sexual role and/or identity. As such, bottoms' shame anxiety may impact their sexual wellbeing on multiple levels, within and beyond the clinical encounter.

Shame anxiety and bottoms' sexual wellbeing

Bottom shaming, and anxiety about being bottom shamed, can influence sexual wellbeing, as developed through the framework offered by Mitchell et al. (2021). In the clinical setting, where Dolezal focused her own theoretical exploration of shame anxiety, bottoms may manifest shame anxiety by concealing their sexual and gendered preferences and bottom identity if they anticipate shame were they to disclose it. Bryan Kutner and colleagues have noted the way in which stigma towards anal sex may inhibit health-seeking behaviour among GBMSM (2021).

In the clinical encounter, GBMSM may delay disclosing relevant symptoms or avoid being explicit about discomfort for fear that a healthcare provider may judge them or jump to conclusions about their sex life and even their identity. Recent scoping research around shame and colorectal healthcare has evidenced how the very structures of healthcare systems and access may generate shame anxiety: bottoms seeking primary care in relation to receptive anal sex may be asked to disclose their concerns in public spaces (such as waiting rooms) or to non-clinical staff (such as receptionists) (Vytniorgu et al. 2022). Shame anxiety may be alleviated if GBMSM can discuss sexual health-related concerns connected to bottoming with specialist providers who are seen as being aware of the importance of sexual practices and identities, such as sexual health specialists. These providers are more likely to have a

better knowledge of GBMSM sexual practices and identities and, most importantly, they have developed the skills to provide compassionate, effective care in the face of societal stigma around sex. These skills have been gained from and are evidenced in responses to HIV (McGregor 2015; Eaton et al. 2015; Haire 2015), but also to specific sexual practices such as BDSM (Waldura et al. 2016).

In the clinical setting, shame anxiety negatively impacts bottom's sexual wellbeing in a multitude of ways. First, the clinical encounter may not even happen. Bottoms experiencing issues related to or which impact their sexual practices (such as acute or chronic colorectal conditions which cause pain when bottoming, such as haemorrhoids) may seek to avoid the potential shame anxiety of the clinical setting by avoiding seeking healthcare altogether. As mentioned above, bottoms may not want to disclose their concerns to non-clinical or non-specialist staff, for fear of experiencing effeminophobic or homophobic abuse. In this way, shame anxiety around the clinical setting directly impacts bottoms' wellbeing by limiting their resilience, one of the dimensions identified by Mitchell et al. (2021). Resilience, or bottoms' capacity to "maintain a sexual equilibrium in response to sexual stress, disfunction, adversity or trauma" (Mitchell et al. 2021, 610) oftentimes requires engaging in conversations with those who may offer help and support, such as clinicians. Avoiding clinical encounters for fear of experiencing shame anxiety directly diminishes resilience and may encourage behaviours outlined by some of the social media commentators above, such as claiming a sexually versatile sexual identity or practice rather than one as a bottom.

If the clinical encounter does happen, and shame anxiety is felt, the impact extends to other dimensions of sexual wellbeing. A negative clinical encounter may translate in reduced experiences of sexual self-esteem ("perceptions of positive regard by others for one's sexual personhood") or comfort with sexuality ("experience of ease in contemplation, communication, and enactment of sexuality") (ibid., 610). These two dimensions are ultimately relational and may be particularly vulnerable to perceived negative responses on the part of a clinician, who is often perceived as being the authority in the clinical setting. Furthermore,

a person's inability to obtain adequate, compassionate, and effective healthcare in relation to their sexual practices also has impacts in terms of sexual safety and security. This dimension, defined by Mitchell et al. (2021) as an "experience of reduced threat coupled with experience of actions taken to assuage vulnerability", relies on the person being able to identify unsafe situations or behaviours (such as coercion, violence, or risks). Clinical encounters play a key role in such behaviours, as they may be a source of information or support patients in identifying issues or problems. Shame anxiety in encounters, however, may prevent this potential from being fully realized. Indeed, the clinical encounter as a whole may reduce sexual self-esteem by completely ignoring the ways in which sexual practices for GBMSM help form sexual identities that provide sources of belonging, leading to a diminishing of the openness with which bottoming and bottom identities are discussed (Vytniorgu 2024b).

While the experience of shame anxiety in clinical settings and contexts seems to impact bottoms' sexual wellbeing as well as their sexual health, shame anxiety can also impact bottoms' sexual wellbeing outside clinical settings and contexts. For example, GBMSM may experience shame anxiety in relation to their close family and friends. Gay men often tell stories of bemused family members and straight friends who naively ask 'who is the woman?' when their gay relative or friend discloses a relationship or sexual/romantic encounter with another man. The implication here is that disclosing a bottom sexual practice or identity may, in the eyes of those you love, put you in an intolerable situation where one's masculinity is also held up to scrutiny. Better instead to focus on the difference of the sexual orientation itself, where being gay simply entails sexual and/or romantic attraction to the same sex. Such a manoeuvre is connected directly to the kind of historical and cultural developments outlined above, where tactics of emphasising sexual orientation and detaching this from gender expression and sex role preferences enable GBMSM – especially middle-class gay men – to feel more accepted among non-gay people. In terms of sexual wellbeing, shame anxiety which is experienced by bottoms in relation to anticipated negative reactions from family and friends corresponds to sexual respect

(Mitchell et al. 2021). Sexual respect encompasses a "perception of positive regard by others for one's sexual personhood" (Mitchell et al. 2021, 610). By focusing primarily or exclusively on one's sexual orientation as opposed to sexual practice preferences and identities, bottoms can better avoid situations in which they may be put to shame for disclosing a stigmatised sexual preference as a bottom.

However, their sexual wellbeing may be impaired if this happens at the expense of feeling able to disclose a preference or identity associated with bottoming. Craig McGill and Joshua Collins affirm that "identifying as a bottom can and often does affect every aspect of a gay man's life, going far beyond sexual practices and including how he operates and learns about the world around him" (2015, 30). While a bottom need not explicitly disclose their sexual preferences or role identity in non-sexual situations, it may be the case that others can infer such an identity or preference without disclosure (Ravenhill & de Visser 2018). For example, William Belli's song "Boy is a Bottom" (2013) plays on the popular idea that someone's sexual position identity or preferred sexual practice as a bottom can be detected through non-verbal signals which are often done unconsciously by the bottom in question.[4] While this can provide humour for others, it nevertheless highlights a bottom's shame anxiety associated with a perceived or anticipated lack of sexual respect from family, friends, and even others in the gay community – especially, as explored above, bottoms who 'slut shame' other bottoms.

One of the ways in which Belli's song indicates shame anxiety around identifying as a bottom is the way it caricatures bottoms' tendency to say they are 'versatile' in dating contexts in order to avoid shame at admitting to preferring a stigmatised sexual practice. As such, being pressured to adopt a versatile sexual identity and practice impedes sexual wellbeing because it violates self-determination in one's sex life. Self-determination is here defined as "free choice or rejection of sexual partner(s), behaviours, context and timing without pressure, force, or felt obligation" (Mitchell et al. 2021, 610). Feeling pressured to disclose sexual position as versatile does not constitute a free choice of sexual behaviour. As a Reddit user noted above

discussed: "I feel like there's a lot of pressure in the gay community to be versatile instead of purely a bottom". Moreover, if pressured to be versatile, shame anxiety may intersect with performance anxiety if encouraged to 'top' in a sexual encounter. If this sexual experience does not go well, then not only will a bottom feel ashamed because of their initial sexual preferences, they may also experience shame anxiety at anticipating other people belittling or misjudging their sexual expertise and competence as a whole.

Conclusion

In this article we have begun to theorise the ways in which bottom shaming is represented in contemporary LGBTQ+ discourse, and how shame anxiety linked to bottom shaming might impact sexual well-being. Fear of effeminacy in men and 'internalised homophobia' may dominate discussions of bottom shaming, but they are not the only ways in which bottom shame is experienced or anticipated. Bottoms can be slut shamed, they can shame each other, and GBMSM can inculcate a culture of bottom shame by reifying specific gendered and sexual practices that may marginalise bottoms. These practices of bottom shaming also have a long historical context that has particular class and ethnic connotations. However, while it is true that, historically and across cultures, bottoms have often simply been seen as "male receptacles for phallic discharges" and have been stigmatised as a result, some have also often found ways to counteract shame based on recognising and responding to contexts in which the activation of shame might occur (Murray 2000, 255). In some cases, bottoms have historically harnessed prevailing attitudes towards masculine gender expectations and deliberately subverted them, co-creating with the wider society a place in which to belong as sexual and gender 'anomalies', albeit a place which is tinged with anxiety.

Yet bottoms may not always experience bottom shame directly: it can be anticipated and therefore cause anxiety, in clinical and non-clinical settings. In clinical settings, bottoms can experience shame anxiety due to anxieties around communicating sexual practices and identities

to staff who are perceived to lack awareness of these. Negative clinical encounters can result in reduced sexual self-esteem or comfort with sexuality. Furthermore, a person's inability to obtain adequate, compassionate, and effective healthcare in relation to their sexual practices also has impacts in terms of sexual safety and security. In non-clinical settings, bottoms may experience shame anxiety by feeling pressured to conceal their sexual self-label, or to adopt another, such as versatile, to avoid the possibility of being shamed as a bottom. Moreover, bottoms may choose to emphasise their sexual orientation over their sexual practice or self-label (if they have one). They may also develop anxieties around how they are perceived by others, particularly if their sexual position/identity can be inferred from non-verbal behaviour or clues which others use to construct a sexual persona.

Further research into GBMSM sexual wellbeing, sexual self-labelling, and identity, needs to situate bottom shame and bottom shaming in the wider context of sexual wellbeing. While men who bottom can directly experience shame in relation to bottom sexual practices or identities, they may in fact more commonly experience an array of anxieties in anticipation of this shame experience. Such anxieties are also historical and cultural, and cannot be isolated from these concerns. Furthermore, the relationship between clinical and non-clinical shame anxiety experience needs to be developed further: how does the experience of shame anxiety in one sphere impact wellbeing in the other? Finally, any research on GBMSM bottom shaming specifically may also have implications for addressing anticipated shame related to anal sex more generally.

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Conflict of Interest

None.

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REFERENCES

Almaguer, Tomás. 1998. Chicano Men: A Cartography of Homosexual Identity and Behavior. In: *The Lesbian and Gay Studies Reader*, edited by Peter M. Nardi & Beth E. Schneider. London: Routledge.

Arroyo, Brandon. 2016. From Flow to Float: Moving Through Porn Tube Sites. *Porn Studies* 3(3): 308–310.

Ayala, George, Keletso Makofane, Glenn-Milo Santos, Jack Beck, Tri D. Do, Pato Hebert, Patrick A. Wilson, Thomas Pyun & Sonya Arreola. 2013. Access To Basic HIV-Related Services and Prep Acceptability Among Men Who Have Sex With Men Worldwide: Barriers, Facilitators, and Implications For Combination Prevention. *Journal of Sexually Transmitted Diseases*: 1–11.

Parker & Jo Stanley. 2015. *Hello Sailor!: The Hidden History of Gay Life at Sea*. London: Routledge.

Brennan, Joseph. 2016a. 'Bare-backing spoils everything. He's spoiled goods': Disposal and Disgust, a Study of Retired Power Bottom Twink Jake Lyons. *Porn Studies* 3(1): 20–33.

—. 2016b. 'Shouldn't Tom Daley be a bottom?': Homosexual Stereotyping Online. *Sexualities* 19(7): 853–868. DOI: 10.1177/1363460716638089.

Brooks, Thomas R., Stephen Reysen & Jennifer Shaw. 2017. Smashing Back Doors In: Negative Attitudes Toward Bottoms Within the Gay Community. *World Journal of Social Science Research* 4(2): 129–139.

Callahan, Ian & Karen Loscocco. 2021. The Prevalence and Persistence of Homophobia in Italy. *Journal of Homosexuality* 1–22. DOI: https://doi.org/10.1080/00918369.2021.1945337.

Cardoso, Fernando L. 2008. Some Considerations on the Limitations Confronting the Cross-Cultural Field of Sex Research. *Sexuality & Culture* 12(1): 21–37.

—. 2005. Cultural Universals and Differences in Male Homosexuality: The Case of a Brazilian Fishing Village. *Archives of Sexual Behavior*, 34(1): 103–109. DOI: https://doi.org/10.1007/s10508-005-1004-x.

Cavalcante, Andre. 2016. 'I did it all online': Transgender Identity and The Management of Everyday Life. *Critical Studies in Media Communication* 33(1): 109–122.

Chauncey, George. 1994. *Gay New York: Gender, Urban Culture, and the Making of the Gay Male World, 1890–1940*. New York: Basic Books.

Closet Professor. 2021. The Problem With Bottom Shaming. The Closet Professor. https://closetprofessor.com/2021/03/25/bottom-shaming-shame-on-us/. Accessed 9 December, 2022.

Dolezal, Luna. 2022. Shame Anxiety, Stigma and Clinical Encounters. *Journal of Evaluation in Clinical Practice* 28(5): 854–860.

Eaton, Lisa A., Daniel D. Driffin, Christopher Kegler, Harlan Smith, Christopher Conway-Washington, Denise White & Chauncey Cherry 2015. The Role of Stigma and Medical Mistrust in the Routine Health Care Engagement of Black Men Who Have Sex With Men. *American Journal of Public Health* 105(2): 75–82. DOI: https://doi.org/10.2105/AJPH.2014.302322.

Fiesler, Casey & Nicholas Proferes. 2018. 'Participant' Perceptions of Twitter Research Ethics. *Social Media+ Society* 4(1): 2056305118763366.

Garcia-Iglesias, Jaime. 2020. Writing Bugchasing Ethnoperformance: Creative Representations of Online Interactions. *Sexualities* 24(1–2): 154–175.

Glaser, Barney & Anselm Strauss. 2017. *The Discovery of Grounded Theory: Strategies for Qualitative Research*. London: Routledge.

Glick, Peter, Candice Gangl, Samantha Gibb, Susan Klumpner & Emily Weinberg. 2007. Defensive Reactions to Masculinity Threat: More Negative Affect Toward

Effeminate (But Not Masculine) Gay Men. *Sex Roles: A Journal of Research* 57(1–2): 55–59. DOI: https://doi.org/10.1007/s11199-007-9195-3.

Gössl, Martin J. 2021. *Unbehaglich Queer: Das ernste Spiel mit der Anerkennung* (Vol. 33). transcript Verlag.

Grieg, James. A Brief history of Bottoming, *Vice*, March 16, 2020. https://www.vice.com/en/article/qjdnep/gay-bottom-history-lgbtq-culture. Accessed 9 December 2022.

Haire, Bridget G. 2015. Preexposure Prophylaxis-Related Stigma: Strategies to Improve Uptake and Adherence: A Narrative Review. *HIV/AIDS – Research and Palliative Care* 7: 241–249. DOI: https://doi.org/10.2147/HIV.S72419.

Hennen, Peter. 2001. Powder, Pomp, Power: Toward a Typology and Genealogy of Effeminacies. *Social Thought & Research* 24(1–2): 121–144.

Herek, Gregory M. & Kevin A. McLemore. 2013. Sexual Prejudice. *Annual Review of Psychology* 64: 309–333.

Hoppe, Trevor. 2011. Circuits of Power, Circuits of Pleasure: Sexual Scripting in Gay Men's Bottom Narratives. *Sexualities* 14(2): 193–217. DOI: 10.1177/1363460711399033.

Houlbrook, Matt. 2005. *Queer London: Perils and Pleasures in the Sexual Metropolis, 1918–1957*. Chicago: University of Chicago Press.

Kippax, Susan & Gary Smith. 2001. Anal Intercourse and Power in Sex Between Men. *Sexualities* 4(4): 413–434. DOI:10.1177/136346001004004002.

Kutner, Bryan A., Jane M. Simoni, Frances M. Aunon, Emma Creegan & Ivan C. 2021. How Stigma Toward Anal Sexuality Promotes Concealment and Impedes Health-Seeking Behavior in the US Among Cisgender Men Who Have Sex With Men. *Archives of Sexual Behavior* 50(4): 1651–1663.

Lorimer, Karen, Leyla DeAmicis, Jenny Dalrymple, Jamie Frankis, Louise Jackson, Paula Lorgelly, Lesley McMillan & Jonathan Ross. 2019. A Rapid Review of Sexual Wellbeing Definitions and Measures: Should We Now Include Sexual Wellbeing Freedom? *The Journal of Sex Research* 56(7): 843–853.

McGregor V. 2015. Sexual Health Promotion and STI Prevention on the Margins: Kink, BDSM, and Sexually Adventurous Women. *Sexually Transmitted Infections* 91: 200–201.

Milton, Josh. The Long, Deep, Surprisingly Versatile History of Bottoms: From Ancient Greece to Modern Misogyny. *Pink News*, February 8, 2022. https://www.thepinknews.com/2022/02/08/bottoming-history-gay-bottoms/. Accessed 9 December, 2022.

Mitchell, Kirstin R., Ruth Lewis, Lucia F. O'Sullivan & J. Dennis Fortenberry. 2021. What Is Sexual Wellbeing and Why Does It Matter For Public Health? *The Lancet Public Health* 6(8): e608–e613.

Moore, Madison. On Bottom Shaming: Is a Bottom Less of A Man? *Thought Catalog*. https://thoughtcatalog.com/madison-moore/2014/02/on-bottom-shaming-is-a-bottom-less-of-a-man/. Accessed 9 December, 2022.

Mousley, Andy. 2013. *Literature and the Human: Criticism, Theory, Practice*. London: Routledge.

Moylan, Brian. Why Are Gay Guys Convinced the World Is Full of Bottoms? *Vice*, November 9, 2016. https://www.vice.com/en/article/jmkjx4/why-are-gay-guys-convinced-the-world-is-full-of-bottoms. Accessed 9 December, 2022.

Msibi, Thabo & Stephanie Rudwick. 2015. Intersections of Two isiZulu Genderlects and the Construction of skesana Identities. *Stellenbosch Papers in Linguistics Plus* 46: 51–66.

Murray, Stephen O. 2000. *Homosexualities*. Chicago: University of Chicago Press.

—. 1996. *American Gay*. University of Chicago Press.

—. 1989. Homosexual Acts and Selves in Early Modern Europe. *Journal of Homosexuality* 16(1–2): 457–477.

Norton, Rictor. 2016. *The Myth of the Modern Homosexual: Queer History and the Search for Cultural Unity*. London: Bloomsbury Academic.

Ntuli, Praisegod Mduduzi. 2009. *IsiNgqumo: Exploring Origins, Growth and Sociolinguistics of an Nguni Urban-Township Homosexual Subculture* (Doctoral dissertation).

Odets, Walt. 2019. *Out of the Shadows: The Psychology of Gay Men's Lives*. Penguin UK.

Plummer, Ken. 1995. *Telling Sexual Stories: Power, Change and Social Worlds*. London: Routledge.

Quinn, Katherine, Julia Dickson-Gomez, Meagan Zarwell, Broderick Pearson & Matthew Lewis. 2019. 'A gay man and a doctor are just like, a recipe for destruction': How Racism and Homonegativity in Healthcare Settings Influence PrEP Uptake Among Young Black MSM. *AIDS and Behavior* 23: 1951–1963. DOI: https://doi.org/10.1007/s10461-018-2375-z.

Ravenhill, James P. & Richard O. de Visser. 2017. Perceptions of Gay Men's Masculinity Are Associated With Their Sexual Self-Label, Voice Quality and Physique. *Psychology & Sexuality* 8(3): 208–222. DOI: https://doi.org/10.1080/19419899.2017.1343746.

—. 2018. 'It takes a man to put me on the bottom': Gay Men's Experiences of Masculinity and Anal Intercourse. *The Journal of Sex Research* 55: 1033–1047.

Reid, Joe & Alexander Abdad-Santos. Looking: On Bottom Shame, *The Atlantic*, February 17, 2014. https://www.theatlantic.com/culture/archive/2014/02/looking-bottom-shame/358169/. Acessed 9 December, 2022.

Reilly, Andrew. 2022. The Rise of the Bottom. In: *Fashionable Masculinities: Queers, Pimp Daddies, and Lumbersexuals*, edited by Vicki Karaminas, Adam Geczy & Pamela Church Gibson. Rutgers: Rutgers University Press.

—. 2016. Top or Bottom: A Position Paper. *Psychology & Sexuality* 7(3): 167–176. DOI: 10.1080/19419899.2015.1135182.

Richardson, Niall. 2009. Effeminophobia, Misogyny and Queer Friendship: The Cultural Themes of Channel 4's Playing It Straight. *Sexualities* 12(4): 525–544. DOI: 10.1177/1363460709105718.

Rios, Luis Felipe, Vera Paiva & Sandra Brignol. 2019. Passivos, ativos and versáteis: Men Who Have Sex With Men, Sexual Positions and Vulnerability To HIV Infection In the Northeast of Brazil. *Culture, Health & Sexuality* 21(5): 510–525.

Rodriguez-Jimenez, Jorge. Op-ed: It Is Time to End Bottom-Shaming. *Advocate*, October 31, 2014. https://www.advocate.com/31-days-prep/2014/10/31/op-ed-it-time-end-bottom-shaming. Accessed 9 December, 2022.

Sánchez, Francisco J. & Eric Vilain. 2012. 'Straight-acting gays': The Relationship Between Masculine Consciousness, Anti-Effeminacy, and Negative Gay Identity. *Archives of Sexual Behavior* 41: 111–119. DOI: https://doi.org/10.1007/s10508-012-9912-z.

Sax, Paul E. & Melanie Berry. 2014. *HIV Essentials*. Burlington: Jones and Bartlett Learning.

Scambler, Graham. 2004. Re-Framing Stigma: Felt and Enacted Stigma and Challenges To the Sociology of Chronic and Disabling Conditions. *Social Theory & Health* 2(1): 29–46.

Sedgwick, Eve Kosofsky. 1991. How to Bring Your Kids Up Gay. *Social Text* 29(1): 18–27.

Silva, Tony. 2022. Subcultural Identification, Penetration Practices, Masculinity, and Gender Labels Within a Nationally Representative Sample of Three Cohorts of American Black, White, and Latina/O LGBQ People. *Archives of Sexual Behavior* 1–17.

Smaal, Yorick. 2005. *Sex, Soldiers and the South Pacific, 1939–45: Queer Identities in Australia in the Second World War.* London: Palgrave Macmillan.

Stief, Matthew. 2017. The Sexual Orientation and Gender Presentation of Hijra, Kothi, and Panthi in Mumbai, India. *Archives of Sexual Behavior* 46(1): 73 –85. DOI: 10.1007/s10508-016-0886-0.

Stines, Steven. 2017. Cloning Fashion: Uniform Gay Images in Male Apparel. *Critical Studies in Men's Fashion* 4(2): 129–151.

Swift-Gallant, Ashlyn, Lindsay A. Coome, D. Ashley Monks & Doug P. VanderLaan. 2021. Recalled Childhood Separation Anxiety Differs By Anal Sex Role Among Gay Men. *The Journal of Sex Research*: 59(5): 546–554. DOI: 10.1080/00224499.2021.1903378.

Taywaditep, Kittiwut Jod. 2002. Marginalization Among the Marginalized. *Journal of Homosexuality* 42(1): 1–28. DOI: 10.1300/J082v42n01_01.

Underwood, Steven G. 2003. *Gay Men and Anal Eroticism: Tops, Bottoms, and Versatiles*. London: Routledge. DOI: https://doi.org/10.4324/9780203057216.

Vytniorgu, Richard. 2023. Effeminate Gay Bottoms In the West: Narratives of Pussyboys and Boiwives on Tumblr. Journal of Homosexuality, 70(10): 2113–2134.

—. 2024a. Effeminate Belonging: Gender Nonconforming Experience and Gay Bottom Identities. Leeds: Emerald.

—. 2024b. Twinks, Fairies, and Queens: A Historical Inquiry into Effeminate Gay Bottom Identity. *Journal of Homosexuality* 71(7): 1605–1625.
—. 2024c. Coming to Voice as a 'Total Top' and 'Total Bottom': Autobiographical Acts and the Sexual Politics of Versatility on Reddit. *Journal of Homosexuality* 72(1): 89–106.
Vytniorgu, Richard, Jaime Garcia-Iglesias & Azeem Merchant. 2022. Shame, Stigma, and Colorectal Health for Bottoms. University of Edinburgh. https://books.ed.ac.uk/edinburgh-diamond/catalog/book/ed-9781912669363. Accessed 9 December 2022.
Waldura, Jessica F., Ishika Arora, Anna M. Randall, John Paul Farala & Richard A. Sprott. 2016. Fifty Shades of Stigma: Exploring the Health Care Experiences of Kink-Oriented Patients. *The Journal of Sexual Medicine* 13(12): 1918–1929. DOI: https://doi.org/10.1016/j.jsxm.2016.09.019.
Wignall, Liam. 2022. *Kinky in the Digital Age: Gay Men's Subcultures and Social Identities*. New York: Oxford University Press.
Williams, Raymond. 2003. *Television: Technology and Cultural Form*. London: Routledge.
Woods, James. 2019. Bottom Shaming Needs to Stop. *An Injustice Mag*, December 1, 2019. https://aninjusticemag.com/bottom-shaming-needs-to-stop-fb19ef30e302. Accessed 9 December, 2022.
Young, Michael B. 1999. *King James VI and I and the History of Homosexuality*. London: Palgrave Macmillan.

NOTES

1. For ease of language, we use the term *bottoms* to refer to men who engage in receptive anal intercourse, while recognising that some men who bottom do not identify as bottoms, and some men who identify as bottoms do not necessarily engage in receptive anal intercourse.
2. Bottoms are also typically placed on a binary with 'tops', or men who are insertive in anal sex.
3. PrEP stands for pre-exposure prophylaxis, is a medication regime taken before and after a potential exposure to HIV to prevent HIV infection among HIV negative people. https://www.cdc.gov/hiv/basics/prep/about-prep.html (accessed 7 December, 2022).
4. https://genius.com/Willam-boy-is-a-bottom-offical-kevinneon-remix-annotated