

LIVING ON THE DOWN-LOW: STORIES  
FROM AFRICAN AMERICAN MEN

by

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A DISSERTATION

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## ABSTRACT

This study examined the lived experiences of African American men who publicly identified as heterosexual, but privately engaged in intimate relationships with other men. These men are identified by several terminologies including Down Low (DL) and men who have sex with men (MSM). Seven men participated in the study which consisted of three audiotaped phone interviews over the course of three months. One of the participants withdrew from the study before his last interview. The participants identified themselves as being African American, over the age of 19, and having lived, or are currently living, on the DL. The participants were interviewed about their experiences including family of origin beliefs about people who were gay, influences in the African American community that shaped their sexual identity construction, their lives on the DL, mental health issues that they may have experienced, and disclosure and non-disclosure of their sexual identity. Phenomenological research methods were used to collect and analyze data along with the theoretical methodological framework of Critical Race Theory (CRT), which was used as a tool to identify how factors of race, gender, and sexuality play roles in the construction of African American DL and MSM. QSR NVIVO qualitative research software was also used to code categories and identify relationships that resulted from coding the transcripts. Themes that resulted from the data analysis included how the African American family and community (including the church) influenced the construction of sexual identity of African American men. Other themes included masculinity, mental health issues and the issue of disclosure and non disclosure of sexual identity among African American DL and MSM. The CRT concept of counterstories allowed the men to discuss pivotal stories that

marked a defining moment in their lived experiences. Research is still needed to further explore sexual behavior of African Americans. Counselors and mental health providers are encouraged to educate themselves about the sexual identity construction of African Americans, and how factors in the African American family and community continue to shape the sexual identity of its members.

## DEDICATION

I dedicate my dissertation to my father, Reverend Clarence Wilson. Rev. Wilson was the epitome of what a father, husband, teacher, minister, and friend should be. He dedicated his life to education, and instilled a love for God and learning in his seven children, his grandchildren, his students, and in his friends. He was a wonderful father who taught me so much, especially during a sermon he gave at Flint Hill Baptist Church in Randolph County, Alabama one Saturday night; that is, in order to know a man, you have to sit down at the table where he lives. Only then can you understand his experiences in the world. Daddy, I love you and I miss you dearly.

*A good name is rather to be chosen than great riches,  
and loving favour rather than silver and gold.  
(Proverbs 22:1)*

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## CHAPTER I

### INTRODUCTION

Edwards (2001) described a discreet group of African American men who are publicly a part of the heteronormative community, but engage in sexual relationships with other men. This phenomenon is known as living on the *down low* (DL). Ford, Whetten, Hall, Kaufman, and Thrasher (2007) noted, “This [DL] term has been part of Black vernacular connoting secrecy of some sort since the early 1990s; for example, someone might say, ‘I will tell you why I am upset if you keep it on the DL’” (p. 209).

Ford et al. continues that currently, the DL term has been used to identify African American men who are presumed to be heterosexual, but who have sexual relationships with other men; African American men whose main personal relationships are with women; and African American men whose HIV positive status is the result of having intimate relationships with other men.

Edwards (2001) noted that the DL defines men who believe that, “Women are for relationships; men are for sex, only” (p. 2). Bleich and Taylor-Clark (2005) described the DL as, “Black men who have sex with men and women” (p. 13) or BMSM/W, or men who consider themselves heterosexual but engage in same-sex behaviors, which are typically not openly discussed or acknowledged. Millett, Malebranche, Mason, and Spikes (2005) indicated that African American men who have discreet sexual relationships with men may also identify themselves under the term, “Men who have sex with men” (p. 52S) or MSM. Men on the DL shun labels that refer to a gay identity and refuse to disclose their dual lives to their wives,

girlfriends, or female partners (King, 2001). Edwards (2001) stated that the refusal of a gay or bisexual label by African American men could be boiled down to semantics. To African American men, the terms gay and bisexual conjure up undesirable images of effeminate White men (Denizet-Lewis, 2003). For the purpose of this research study, the terms DL, men who have sex with men (MSM), and Black men who have sex with men and women (BMSM/W) will be used. Some of the language used during interviews to accurately convey the participants' message may be considered as graphic, derogatory, and offensive to some readers. To offend with explicitness of the language is neither the intention nor the purpose of this study.

According to the Centers for Disease Control (CDC, 2002), HIV/AIDS has spread among the DL population due to men engaging in unprotected sex. Denizet-Lewis (2003) noted that not only are DL men being infected, but also their wives and girlfriends are being infected. One reason that men on the DL have received attention pertains to the rising rates of HIV/AIDS among African American women (Edwards, 2001). The DL man's shame and fear of being gay and being ridiculed and ostracized by a homophobic African American community has resulted in a secret sex life. This secret of being on the DL has assumedly resulted in the highest number of new HIV/AIDS cases in females among African American women. In the CDC's 2002 report, *HIV/AIDS Among African Americans*, although African Americans constitute 12.3% of the United States population, they account for over 50% of the HIV/AIDS cases diagnosed among American adults. The CDC indicated that many factors in the African American community contribute to the risk of HIV/AIDS including poverty, substance abuse, and the denial of some African American men to acknowledge the same-sex context of their relationships with other men.

Lack of knowledge of how the DL sexual identity is constructed prevents health care workers and counselors from developing interventions that will be effective in helping men with disclosure of their sexuality. The male's disclosure of his same-gender preferences becomes pertinent in the reduction of HIV/AIDS infection in African American women who appear to be statistically included in the DL, MSM, or BMSM/W culture (Bleich & Taylor-Clark, 2005; Millett et al., 2005).

#### Definition of the Problem

DL in this study included men who self-identified as (a) heterosexual, (b) being an African American man, (c) having sexual relationships with other men, and (d) having a want or need to keep his sexual activities with men secret. This study will not include men who self-identify as gay, bisexual, or transgendered. Men who consider themselves heterosexual, but not currently in a sexual relationship with a woman will not be considered on the DL. Males in prison or in similar gender segregated confinement will not be considered on the DL.

J. L. King's book, *On the Down Low* (2004) shared narratives of African American men on the DL with the African American community, explained the dismay and intolerance of traditional African American churches, and highlighted the frustration and indignation of African American women. In reaction to King's book, Boykin called the existence of men on the DL a "pseudo-phenomenon" (King, p. 78, 2005). Boykin's book, *Beyond the Down Low: Sex, Lies, and Denial in Black America* (2005) criticized King's definition of the DL, his denial of being gay, and his derogatory comments about gay men. Boykin has attributed the DL media attention to the concern about HIV/AIDS being transmitted to heterosexual relationships.

What has not occurred pertaining to studying the DL lifestyle is the collection of qualitative research that would help counselors gain an "in-depth understanding of sexual

identity, perceived risk, and needed interventions” (Bleich & Taylor-Clark, 2005, p. 16) targeted to BMSM/W or DL men. A better understanding of the sexual identity construction and lived experiences of the DL would assist counselors and other health care providers to work with this population’s non-disclosure issues, or issues of remaining in the closet. Millett et al., (2005) found that sexual identity disclosure is less likely among African American men who have sex with men than with White men who have same sex with men. Although the end of the HIV-AIDS’ crisis is not within sight, increased research and interventions by counselors and other health care providers targeted to BMSM/W may reduce HIV/AIDS in heterosexual contact in African American women (Bleich & Taylor-Clark, 2005).

#### Research on the Problem

Current research on the phenomenon of men on the DL and their dual lifestyles in the professional literature is limited. Lee (2005) commented that the research and data pertaining to the down low or African American sexuality in general is incomplete or “sparse” (Para. 3). Bleich and Taylor-Clark (2005) noted that the lack of empirical research on the subject of BMSM/W has made it difficult to fully understand the problem and offer useful solutions. Bleich and Taylor-Clark further noted that what is available has been conducted in larger cities and the findings are not often “generalizable” (p. 15) to the broader public.

#### Statement of the Problem

The subject of the DL has been a popular media topic with few scholarly investigations of the social phenomenon. The *New York Times Magazine* published an article by writer Denizet-Lewis (2003) who researched the DL subculture of African American men by accompanying them to bars and private sex clubs. Wolitski, Jones, Wasserman, and Smith (2006) conducted subsequent research on how African American men who have sex with men

identified themselves (as being on the down low or not). While examining how African American MSM in Atlanta defined their sexual identity, Brown (2005) noted that the DL term was problematic because of the dual meanings the word conveys- one meaning defining the DL as men who have sex with men and, and the other meaning defining DL men as professing a heterosexual identity.

In discussing sexuality with three college students, Clark (2005) expanded the meaning of the DL to include other men of color (e.g., Latino American and Asian American). In reviewing the current DL literature as it pertains to African American and Latino DL men, González (2007) defined being on the DL in terms of (a) African American men being conflicted about the tension between their “non-normative sexualities and their otherwise conventional Black and Latino working-class identities” (p. 26), (b) African American and Latino men being deterred by their socio-cultural environment of sexual expression, and (c) refusing to “politicize their intimacy, that is, to adopt a public gay identity” (p. 26).

Bleich and Taylor-Clark (2005) examined the existing empirical literature on HIV prevalence and HIV risk factors in the BMSM/W population. Bleich and Taylor-Clark commented on the shortcomings of research about African American DL men, noting that, “Broader research focused on the BMSM/W population will allow [us] to better understand HIV trends and risk factors as they pertain to this subgroup in the United States” (p. 15).

### *Sexual Minority Development*

Akerlund and Cheung (2000) noted that few studies of sexual orientation have been conducted with gay and lesbian minority groups, finding that most studies have been conducted with White subjects. Racial and ethnic minority groups share some common experiences in the United States. Minority group members share beliefs and misconceptions about the gay and

lesbian community. Akerlund and Cheung discovered five common experiences shared by African Americans, Asian Americans, and Latino Americans who are gay or lesbian: (a) discrimination, (b) oppression, (c) choosing between the gay/lesbian and racial/ethnic cultural identity (d) rejection, and (e) social support.

Akerlund and Cheung (2000) described a strong anti-gay sentiment in the African American community. The traditional African American culture has strong family ties involving the nuclear and extended family. The culture places emphasis on family, marriage, procreation, and community commitment. The culture views the African American male as being strong, masculine, and heterosexual. Being gay threatens this balance and the continuation of the culture. Lisotta (2004a) wrote that for a culture that has suffered from a history of racism and emasculation, being a gay African American male is “too troubling” (p. 16). Putre (2002) added that many African Americans view being a gay African American male as just another negative burden placed upon a community overburdened with social ills.

#### *The African American Church*

The African American church has a profound influence on African American community as a whole. Putre (2002) wrote that the African American church has been a haven and life-blood for African American “culture, liberation, and civilization” (p. 22). The African American church served as the meeting place during the civil rights’ movement and also served its parishioners as a lyceum, political forum, social service center, and financial institution. With this influence, Hudson and Robinson (2001) found that this institution has a strong intolerance towards homosexuality, resulting in many African American gays and lesbians not disclosing their sexuality. According to Putre, homosexuality and HIV/AIDS are two things that are not discussed or that are negatively characterized in the African American church.

### *The DL Culture*

Denizet-Lewis (2003) researched and wrote about the down low experience. Denizet-Lewis noted that DL men do not identify as being gay or bisexual. He interviewed men in the Cleveland, New York City, Atlanta, and Boston. He reported that these DL men construed their roles to be strong fathers and providers. To African American men, “homosexuality is White man’s perversion” (p. 30). The DL culture appeals to these men who reject being called gay and who link the term gay to being effeminate.

According to Denizet-Lewis (2003), the DL culture can be found in any large or small city, bar, shopping center, or church. Internet sites are dedicated to adult personals and groups for African American men who seek other men for sex. Smith (2004) noted in her article, “Deadly Deception,” that there have always been men on the DL, but the HIV/AIDS threat makes the deception of these men “disturbing, deadly--and just lowdown” (p. 148). Smith added that her e-mail was filled with letters from African American women who were afraid, angry, and suspicious about the DL phenomenon and feared the possibility that their boyfriends and husbands could be closeted homosexuals carrying HIV. Smith (2004) quoted:

I am now terrified after reading the *Times* article, and my fear manifests itself in curious ways... I spend hours scrolling through my internal directory of past boyfriends, frantically trying to pick out the closeted bisexuals... In a word, I am obsessed. (p. 150)

### *Books Written About the DL*

Of the books written about African American men on the DL, author and activist J. L. King wrote *On the Down Low* (2004), in which he discussed his own personal experiences on the DL. As a result of his book and his appearance on the Oprah Winfrey Show, King brought national attention to the topic. King followed-up his best-selling book with the sequel, *Coming Up From the Down Low* (2005) in which he described how his life has changed since the

publishing of his first book. According to an article by Lisotta (2004b), *On the Down Low* has stirred up controversy among African Americans because most people see African American men in very specific ways, including images that have been portrayed in the media (e.g., athletes, entertainers) and images that have been cultivated by hip-hop stars and rap videos. Fearful of being shunned by their families, friends, and churches, men who sexually desire other men maintain their secret life.

In a review of King's book, Wade (2004) expressed some reservations about some of King's recommendations, but she agreed that as a community, African Americans are not being honest with themselves. She urged the community to face and embrace the reality of same-gender orientation and relationships. Martorano and Savka (2004) criticized King's claim that he is not gay because King does not identify with the gay community. Martorano and Savka stated, "If it walks like a duck, quacks like a duck, but (has sex) like a gay man, it's probably a gay man, not a duck" (p. 10). They further criticized King for using homophobic terms such as *faggot* and *sissy* to associate homosexuality with effeminate men. Martorano stated that African American DL men are fooling themselves while they spread HIV/AIDS to their wives and girlfriends. Martorano and Savka rebuked King by stating, "I'm sorry, but I have no sympathy for J.L. King or the men he labels as being on the 'down low.' It's pretty obvious that he is afraid of his own sexuality and in admitting that he is indeed a gay man" (p. 11).

#### *HIV/AIDS and the DL*

The Centers for Disease Control and Prevention (CDC, 2005) have conducted studies focusing on the HIV/AIDS epidemic's impact on African American MSM. The CDC is researching the role DL men have in the spread of HIV/AIDS in the African American community. In investigating and synthesizing the existing literature on HIV/AIDS research,

Bleich and Taylor-Clark (2005) noted that studies targeting DL men and the AIDS crisis in the African American community are limited and recommended the need for further research and intervention strategies focusing on this community.

Life on the DL continues to be a controversial topic in the African American and gay community, although discreet, same-sex relationships have existed for years. Lisotta (2004) wrote that the African American community is slow to confront the issue of homophobia and refuses to accept gays and lesbians within their culture. Even with the rising rates of HIV/AIDS among African American women, the African American community, including the church, continues its refusal to proactively address these issues. Putre (2002) stated that from the pulpit, the sermon continues to be that homosexuals are doomed or possess “evil spirits” (p. 22). With such negativity aimed towards the gay community, African American men who are attracted to other men are reluctant to explore same-sex relationships, disclose their sexual preferences, or identify as being gay.

### Significance of the Problem

Scholarly investigation of the DL phenomena has been limited to a few studies (Bleich & Taylor-Clark, 2005; Clark, 2005; Millet et al., 2005). Popular media has emphasized the importance and impact of men on the DL in the African American community. Research of African American men on the down low is needed because of the following factors.

#### *Limited Information on the DL*

In researching the number of African American men affected with HIV, Bleich and Taylor-Clark (2005) noted the limited professional literature and lack of research conducted on DL men. Although they acknowledged the challenges researchers might experience in conducting a study with DL men (e.g., assuring confidentiality, the various sexual identities

African American men may choose besides down low), Bleich and Taylor-Clark stressed that, “Researchers who engage in this field of study have the potential to make profound contributions to an area of investigation about which little is known or understood” (p. 17).

### *Counseling*

According to King (2004), African American men with sexual feelings for other men strive for acceptance in a community that exhibits intolerance for gays and lesbians. Battle and Lemelle (2002) stated that being gay in the African American community equates to a loss of masculinity. Lisotta (2004a) added that the African American community has suffered various forms of emasculation and the concept of gay African American men is seen as another form of emasculation. When faced with the possibility of being rejected and abandoned by their own community, most men on the DL remain silent about their feelings and concerns.

Anderson (2004) noted that one problem that men on the DL face is the apprehension and fear pertaining to disclosing their sexual identity to another person. Anderson wrote, “Brothers on the DL feel that they can’t come out” (p. 46). Anderson stated of DL men, “Instead of addressing the pain, we act like we’re hard...we say, ‘Wassup’ and ‘Yo’ because our manhood is at stake” (p. 48). Most men struggle with their feelings in silence. After interviewing over 2,500 African American men across the United States, King (2004) noted that his participants wanted to disclose their personal feelings to the women in their lives, but because of fear, they remained silent. The fear, King explained, took on several scenarios including the DL man’s fear that his female partner might leave him if she knew her partner was sexually attracted to men. The DL man fears that the African American community will never accept him as a full member. The DL man fears that he might be mistreated or physically harmed if someone knew of his sexual identity. Barnett (2005) reported on a gay-bashing incident at Morehouse College where a young

man presumed to be gay was physically assaulted by another student who assumed the man made advances at him. The assailant yelled, “I hate these Morehouse faggots” while he beat the victim with a bat (Para.. 6). With such apprehension about being rejected, ostracized, and mistreated by their community, African American DL men conclude that telling others about their feelings is not an option.

Although counselors have been encouraged to become culturally competent and sensitive to the concerns of their clients, Smith (2003) found that African American men have continued to be hesitant about going to a counselor for assistance. Smith added that in most cases unless mandated by a third-party entity, African American men tend to avoid seeking counseling services. Madison-Colmore and Moore (2002) stressed that although there are general issues common to counseling men, the life experiences of African American men are markedly different from that of European American men. Madison-Colmore and Moore found that African American men may be apprehensive about counseling for a number of reasons including: (a) fear that the counselor might have negative, preconceived notions about Black men, (b) fear of being misdiagnosed, and (c) fear of being misunderstood or mistreated. Smith pointed out that these fears are compounded if the counselor is White, and that for some African American men, counselors, regardless of color, may be seen as agents of the establishment who simply should be avoided. Smith noted that being socialized in a culture of masculinity might discourage African American men from seeking counseling services.

Madison-Colmore and Moore (2002) believed that three factors should be taken in consideration when counseling African American men: (a) historical hostility, (b) the client's level of self-disclosure, and (c) trust issues. Many men on the DL feel they have no one to talk to about their feelings and no support network to rely on if they are rejected from family, friends, or

from the church. Battle and Lemelle (2002) found that there is a relationship between shame and internalized negative attitudes toward gay men that contributes to the African American man's avoidance of social supports and health resources in the community. When Jennings (2006) interviewed a group of HIV-positive, African American gay men about the fact that they did not disclose their sexual feelings to their family, partners, or friends, one of the respondents asked him, "Who can we go to [to] say we're having these feelings"?

#### *The Role of the African American Church*

Hudson and Robinson (2001) noted that African American churches often possess a strong intolerance towards gays and lesbians forcing their gay and lesbian parishioners to keep their sexual identity private. Ministers often preach that same-gender relationships are immoral. One bishop warned his congregation that, "Unless homosexuality is stopped, it will destroy us all" (Romney, 2004, Para. 6). Hudson and Robinson (2001) reported that African American church members believed that if gay men have HIV/AIDS, "they deserve it" and that it is "proof that God is punishing gay people" (p. 89). These attitudes force many gay, African American men to remain silent and to live a compartmental life, publicly living as heterosexual, but privately meeting and being intimate with other men.

#### *HIV/AIDS in the African American Community*

On an ABC News Special Report by Jennings (2006) titled *Out of Control: AIDS in the Black Community*, the CDC reported that more than one million U.S. citizens have been tested HIV positive. Of these newly reported cases, 50 % of the infected people are African American. The number of HIV/AIDS cases reported among African Americans is greater than any other racial or ethnic group (Bleich & Taylor-Clark, 2005). The Center for Disease Control and

Prevention (CDC, 2002) and Jennings (2006) attributed one reason for the increase of AIDS/HIV in the African American community to men engaging in sexual practices with other men.

African American women are the largest racial group of women in the United States who are being infected with HIV/AIDS (CDC, 2002). According to the CDC, empirical evidence indicated that 62% of HIV infections among African American women are the result of heterosexual contact. Although the evidence is not conclusive, researchers have hypothesized that most of these women might have been infected by men on the DL (Jennings, 2006; Bleich & Taylor-Clark, 2005; Denizet-Lewis, 2003)

Men being sexually active with men and with women who identify themselves as heterosexual is not a unique phenomenon to the African American community (Canavera, 2005). However, the media has attributed the large number of new HIV/AIDS cases to African American DL men and African American MSM. In an interview with Cathy Cohen, a professor at the University of Chicago and director of the Center for the Study of Race, Politics, and Culture, Canavera (2005) quoted Cohen (1999) as saying, “We will never really see progressive movement around the issue of HIV and AIDS until we fundamentally struggle around the issue of sex and sexuality” (p. 69).

Phillips (2005) addressed the same issue in her discourse about BMSM/W or DL men by stressing factors including (a) that the DL was not a new sexual behavior; (b) that the DL is not restricted to African American men; (c) that DL sexual behaviors contributes to the spread of HIV/AIDS; (d) that the discourse about DL sexual behavior feeds a neo-racist agenda; (e) that DL sexual behavior adds to the homophobia already present in the African American community; (f) that DL sexual behavior stresses a need to separate sexuality from gender; (g) and that DL sexual behavior may present an opportunity to reconsider sexual freedom and sexual

choices. However, Phillips' discourse does not support the statistical indicators from the CDC pertaining to the rising rates of HIV/AIDS in the African American community. As mental health care providers, counselors need to understand the construction of the DL sexual identity in order to develop interventions.

#### Purpose of the Study

The purpose of the proposed study is to examine the experiences of men who are on the DL and the factors that shape their sexual identity construction and compel these men to live a double life. The study will review the professional literature pertaining to the DL culture, the history of this population of men, and reasons why the DL phenomenon currently receives attention. Through discussions with African American men who are or have lived the DL lifestyle, the study will also describe the possible consequences of disclosure of these men's sexual orientation, mental health problems that are associated with living a compartmentalized life, and the reasons African American DL men seek or do not seek the help of counselors. The study will conclude with recommendations to counselors and others about how they can provide assistance to this population of men.

#### Significance of the Study

This study will provide information about why DL men have not sought counseling. The study will examine how cultural beliefs effect individual relationships and sexual preferences. How DL men identify themselves and why many of them categorize themselves as straight and not gay will be explored. This study is intended to give counselors insight and understanding into the ramifications of perceived intolerance of men having sex with men on the lives of African American families.

Several professional journals have devoted articles informing counselors about the importance of cultural sensitivity when working with minority groups and why they are reluctant to seek counseling services. This study will suggest what counselors can do to ensure the confidentiality and safety of clients who question their sexuality and seek their services for therapy.

While limited literature exists that addresses why African American men are on the DL, a major flaw in those texts is that DL men were not interviewed. The exceptions include Denizet-Lewis (2003), Manago and Solomon (2004), and Smith (2004). Although there are some current quantitative studies that discuss men on the DL, MSM, and BMSM/W as they relate to HIV/AIDS increased diagnosis in the African American community (CDC, 2002; Bleich & Taylor-Clark, 2005; Millett et al., 2005), qualitative research articles in the professional, peer-reviewed literature on DL men are limited. Finally, in September 2006, ABC presented a special report titled *Out of Control: AIDS in the Black Community* in which Peter Jennings discussed the problem of HIV/AIDS in the Black community and interviewed some HIV-positive, African American men as they discussed living life on the DL.

#### Research Questions

1. How have the lived experiences of DL men been shaped by
  - a. Their family?
  - b. The African American church?
  - c. The African American community?
2. How have the lived experiences of DL men shaped
  - a. Their sexual identity construction?

- b. Their understanding of masculinity?
  - c. Their mental health disposition?
3. What is the mental health impact that African American men experience being on the DL?
  4. What reasons do African American men who struggle with their same-sex attraction give in considering whether or not to seek counseling or mental health services as an option?

### Hypothesis Testing in Qualitative Research

According to Palmquist (2006), a hypothesis is not needed to begin research in a qualitative study. Giacomini and Cook (2000) stated that qualitative research generates theories and hypotheses. Thorne (2000) defined the process of qualitative data generating the hypothesis as *inductive reasoning*, as opposed to *deductive reasoning*, in which the study begins with a hypothesis and data are tested to support or negate the hypothesis. Giacomini and Cook (2000) further noted that qualitative studies pursue a variety of theory-generating objectives, including the exploration and discussion of social phenomena, the identification of potentially important variables or concepts, the recognition of patterns and relationships, and the generation of coherent theories and hypotheses. Giacomini and Cook determined that qualitative studies offered a viable alternative to "armchair hypothesizing" (Para. 2) for areas where insight may not have been discovered, or where conventional theories seem inadequate.

Silverman (2001) noted that in many qualitative research studies, there are no specific hypotheses at the onset. Instead, hypotheses are produced early during the beginnings of research. Spradley (1979) explained that social scientists set out to either describe a culture or phenomenon, or to test a hypothesis. Spradley found that ethnographies in qualitative studies can

generate hypothesis for later testing by other research techniques. Therefore, hypotheses in qualitative research are outcome-based, driven by the analyzed data.

According to Quimby (2006), the ethnographic findings of a qualitative study can generate information useful for developing or shaping hypotheses, theories, and intervention models. Such findings uncover social patterns and individually unique forms of expression and relationships. The findings are valuable for illustrating and explaining various types and significance of social interaction.

### Definitions of Terms

The following terms were defined for this study:

*Bisexual*- Millet et al. (2005) used the term bisexual to indicate an individual who is sexually attracted to and intimate with both men and women. This term does not necessarily imply that the person is *equally* attracted to both sexes.

*Bottom*- A sexual participant who usually engages in the submissive role or is penetrated during anal sex. King (2004) described this person as the “passive or receptive partner in anal sex. Some men consider themselves total bottoms preferring only to be penetrated” (p. 119).

*Boyz*- A young man. Boyz is used as a term of commendation among young, African American men (King, 2004). The term was popularized by the movie *Boyz in the Hood*.

*Cruising*- A particular method by which DL men seek sexual partners. DL men cruise in different ways. One avenue is visiting nightclubs. DL men in Denizet-Lewis’ (2003) article stated that they do not cruise gay clubs, but do frequent straight clubs, often with their girlfriends. DL men may also cruise bathhouses that cater to their sexual interests. They also scan Internet websites for sexual partners. Denizet-Lewis (2003) and King (2004) interviewed DL men who stated that they have met men in grocery stores, in the park, and at church.

*Down Low (DL)*- Down low refers to men whose public identification is straight, but who have discreet sex with other men outside of their primary relationship. The Center of Disease Control (CDC, 2002) described the term as “the phenomenon of men (usually but not always of color) who secretly have sex with other men while publicly identifying as heterosexuals and maintaining sexual relationships with women.”

*Fag/Faggot*- A term used as a derogative in the DL community to describe a man who is emasculated (i.e., feminine, weak, submissive). King (2004) used the term in the following excerpt:

If they (down low men) tell the truth and say they’re gay or bisexual, they will be called a ‘fag.’ That is the worst word you can call a Black man...it strips away your manhood. You’re saying I’m less than a man...I’m soft...or that I act like a woman. (pp. 21-22)

*Gay*- Edwards (2001) noted that DL men equate the term gay with a White identity separate from the African American gay and lesbian experience. The reason for this perception partially originated from African American gay and lesbians feeling rejected by the White, mainstream gay and lesbian community. Some African American men on the DL adamantly reject being labeled as gay. Edwards explained that the term gay conjures up images of effeminate White men to the African American DL community.

*Hip-Hop*- A culture and form of ground breaking music and self-expression with elements that consist of the relationship between urban youth and their environment. Thames-Copeland (2007) described hip-hop as a vehicle to creatively broadcast to the world the injustices of African Americans or the displaced people in the United States in order to give voice to their frustration and to create a change in their circumstances. Thames-Copeland lamented about the present state and images of hip-hop:

The art form that we created (from our spoken word traditions in Africa) to help us get out of an oppressed state [has] become one of the most suppressive forces within our

community and we support it, maintain it, and spread this divisive message of inferior behaviors and value's throughout the world. (p. 17)

*Homo Thug*- A slang term used to describe an African American man who is influenced by the hip-hop culture and who has attractions for other men. Homo thugs have relationships with women and keep their sexual relationships with men on the DL. King (2001) stated that homo thugs “desperately try to look tough” (p. 38). Manago and Solomon (2004) noted that homo thugs display an “overly masculine persona” (p. 29) in order to not be perceived as feminine. King (2004) added that homo thugs “dress in urban gear and associate everything with their sexuality” (p. 138).

*MSM*- The National Alliance of State and Territorial AIDS Directors (NASTAD, 2006) defined MSM as an abbreviation for "men who have sex with men."

*Majoritarian*- Pertaining to the majority population that is in control of a society and whose group greatly influences the institutions of that society. Werbner (2002) used majoritarian to describe ethnic minority tribes who attempted to emulate the majority culture:

Some legitimise homogeneity; they [the minority tribes] conform to majoritarian expectations and are attracted to opportunities for upward mobility by concealing what might be denigrated as their minority origins. (p. 673)

*Masculinity*- A term utilized in the DL community to describe an African American man who is strong, confident, and unwavering. Bowleg (2004) gave a brief narrative of masculinity and the reason African American men value its importance:

Like many other aspects of Black men’s lives, masculinity cannot be isolated from its sociohistorical context. Slavery in the United States fostered the link between economic potential (for wealthy White slave owners) and idealized masculinity. Denied access to this idealized masculinity initially via slavery and later through institutionalized racism, many Black men (particularly those who are low income and young) have constructed alternative expressions of masculinity which are frequently characterized by sexual promiscuity, aggressiveness, violence, and thrill seeking as well as the suppression of emotions other than anger, mistrust of authority, disdain for “feminine” qualities, pronounced heterosexuality, and denial of vulnerability. (p. 170)

*Nigga*- A derivative of the term "nigger." An amiable slang word used by some African American men to describe a friend or peer. Keith (2007) noted that the term is used among some African Americans to connote camaraderie and affection.

*Passing*- Leary (1999) described passing a "cultural performance in which a member of one defined social group masquerades as another" (p. 85). DL men pass by appearing heterosexual in public while maintaining private, sexual encounters with men.

*Same-Gender-Loving* (SGL)- According to Manago and Solomon (2004), same-gender-loving is a term created by a group of African American men to describe their identity, as oppose to being labeled as "gay." SGL men accept their same-gender orientation and state that they are concerned about the problems that plague African Americans within their community, such as homophobia and HIV/AIDS.

*Top*- A man who penetrates his male partner during anal intercourse, as opposed to a bottom who is penetrated (King, 2004).

#### Assumptions of the Study

1. The prospective participants who volunteer for the research study are African American men, are (or were) on the DL, and are at least age 19 years of age or older.
2. The prospective participants will be solicited and selected for the interviews via the Internet. To protect their privacy, men who want to participate in the study will give their consent through a secure, password-protected website ([www.surveymonkey.com](http://www.surveymonkey.com)).
3. Since the participants will be selected from Internet groups that cater to the DL population, the participants should have basic knowledge about using a computer, how to gain Internet access, how to set up and use an e-mail account, and how to input and retrieve information off the computer and the Internet.

4. The participants will be given a copy of the interview questions prior to being interviewed. The remarks given during the interviews by the participants will be truthful and reflect their personal experiences on the down low.

#### Organization of the Study

This study is presented in six chapters. The first chapter will provide an introduction to the problem, statement of the problem, purpose of the study, various research questions and hypotheses, definition of terms, limitations of the study, assumptions of the study, and organization of the study. Chapter II will provide a review of the related literature. Chapter III will present the procedures for data collection and analysis. Chapter IV is devoted to presenting the phenomenological findings of the study. Chapter V provides the pivotal stories of three of the research participants from a Critical Race Theory framework. In chapter six, a summary of the study, discussion, empirical implications, and recommendations for further study are provided.

## CHAPTER II

### REVIEW OF THE LITERATURE

Within the scope of information addressed in the first chapter, the research questions of this dissertation study center around (a) the lived experiences of African American men on the DL and the social and cultural factors that shape their personal identity and sexual identity construction, (b) the mental health problems that develop from the DL man's attempt to maintain sexual identities that are mutually exclusive, (c) the issue of disclosure or non-disclosure of sexual identity, and (d) the role counseling plays in the lives of this particular population of African American men. In order for counselors and social service professionals other than counselors to adequately serve this population and to provide the best standards of care to their clients, these questions must be explored and must effectively draw from an interdisciplinary research foundation in constructing best practices within the scope of counseling.

Understanding the DL phenomenon requires an approach that is holistic and that draws on an integration of knowledge from various social service and healthcare disciplines, including counseling, psychology, epidemiology, and public health. Unfortunately, there are no examples of scholarly, research articles that address the topic of the DL or of African American men who sleep with men (MSM) within the counseling field.

Within this literature review, I will:

1. Give a broad overview of the development of the DL phenomenon in the mainstream media and in the professional community. Examples of the mainstream media include

popular culture books and magazine articles. Professional community examples include scholarly, academic, and peer-review journals.

2. Demonstrate how a synergy between the literature in popular culture and in social science research has resulted in a preponderance of knowledge in particular areas within the topic of the DL, and how this preponderance has shaped the overall research focus agenda within the topic. In this review, I will outline the various definitions of the DL topic among African American men and will discuss the ways these definitions have framed how this subject has been studied. Specifically, I will discuss ways that the DL has been shaped by the focus on HIV/AIDS within certain subsets of the research literature, and will indicate whether or not the emergence of knowledge that has been framed on this topic is a sufficient base by which to proceed.
3. Address, through referencing published scholarly research, why a focus on the research questions are needed. Specifically, I will reference several key research articles that are exemplars of the approach needed to understand and apply research to counseling practices and explain the analogies and the disparities that exists in these approaches.

### Origins and Development of the DL

This section of the literature review will examine the DL phenomenon as it has been researched in various disciplines (e.g., epidemiology, public health) and media forums (e.g., magazines, on-line magazines, periodicals). This section will examine (a) how the DL term has been defined in the scholarly literature and in the popular culture literature, and (b) through an integration of the literature, what particular aspects of these definitions have shaped research about the DL. The aim is to examine what factors about the DL topic are researched, and how researchers conceptualize African American DL men.

### *The Scholarly Literature*

In a review of the scholarly literature, the DL topic pertaining to African American men has been defined in terms of a behavior, an identity, and an attitude or outlook. In terms of behavior, the Centers for Disease Control (CDC, 2003) defined the DL as the behavior of men who have sex with other men as well as women and who do not identify as gay or bisexual. In terms of identity (sexual) and behavior, Bleich and Taylor-Clark (2005) described the DL as a term used for Black men who have sex with men and women (BMSM/W) or men who identify themselves as heterosexual but engage in same-sex behaviors, which are not typically discussed or acknowledged. Pertaining to attitude or outlook as well as behavior, Ford et al. (2007) noted that the term is used to refer African American men who “publicly present as heterosexual while secretly having sex with other men” (p. 209). In addition, Phillips (2005) wrote that the DL term referred to African American men who secretly have sex with other men while maintaining heterosexual relationships with women and presenting themselves with a hypermasculine persona. Wolitski et al. (2006) found that there are five characteristic that the various definitions for the DL share: (a) DL men are defined as African American, (b) DL men do not identify as gay, (c) DL men have intimate relationships with both men and women, (d) DL men do not disclose their sexual behavior with men to female partners, and (e) DL men “never, or inconsistently, use condoms with male and female [partners]” (p. 519).

### *Origins of the DL Term in the Scholarly Literature*

Pertaining to articles in the scholarly literature, the origins of the DL occurred in the last decade. Ford et al. (2007) noted that the DL term came into being in the 1990s, and that earlier definitions of the DL connoted secrecy or discretion. Ford et al. used the example, “I will tell you why I am upset if you keep it on the DL” (p. 209). Phillips (2006) commented that the origins of

the DL term emerged from African American popular culture. Phillips stated that, “The term ‘down low’ appeared in numerous R & B and rap songs about infidelity in relationships” (p. 6). González (2007) commented that the DL term began with urban youths “of color” who associated life on the DL with “Hip-Hop culture’s hypermasculine stance” (p. 27). Ford et al. (2007) found that earlier definitions of the DL as it pertained to intimate liaisons referred to heterosexual relationships. Ford et al. also determined that the shift to same-gender relationships occurred with the emergence of the DL phenomenon in the popular media with the publications of Denizet-Lewis’ (2003) article and King’s (2004) book about his personal accounts on living on the DL. Later designations of the DL term, according to Ford et al., included African American men who (a) presumed themselves to be heterosexual, (b) are in primary relationships with women, (c) secretly have sex with other men, and (d) are presumed HIV-positive as the result of male-to-male sexual contact.

### *The Popular Culture Literature*

Johnson (2004) mentioned that the definition of DL depends on who defines it. In the popular culture literature, the DL is also defined in terms of behavior and identity or rejection of an identity. The phenomenon is also described in terms of an outlook or a persona. Barnett (2005) defined the DL as a behavior of men who engage in intimate relationships with other men, but are secretive about their sexual preferences and their behavior. She added that while it may include men who are gay, it also includes men who prefer not to identify themselves sexually. Edwards (2001), a journalist for *Essence* magazine, defined African American men on the DL as men who consign women to conventional, public relationships and men to intimate, sexual relationships. Author J. L. King (2004) described the term as an expression that describes African American men who are “masculine, unreadable, unclockable...it means that I’ve got a

girlfriend or a wife. It means I can't tell you I'm having sex with men" (p. 33). According to Wright (2001), DL men are offended over attempts by gay Black men to force them to accept what they perceive as a White concept (identifying as gay). While *New York Times Magazine* writer and author Benoit Denizet-Lewis (2003) stated that the DL term originated within the African American male subculture, the behaviors associated with the term are not new and are not exclusive to African American men who have sex with men. Denizet-Lewis (personal communication, July 11, 2006) observed that, "Now, the interesting thing is that everyone has started using the [down low] expression. You have White guys saying, 'I'm on the down low.'"

#### *Origins of the DL Term in the Popular Culture Literature*

In literature from the popular culture arena, Johnson (2004) wrote that the DL term originated from the world of hip-hop and R&B music, where it meant an illicit relationship. As adapted by a subculture of African American men, being on the DL described (a) men who have sex with other men but appear heterosexual, (b) men who have relationships with women, and (c) men who do not acknowledge being gay or even bisexual. Denizet-Lewis (2003) added that the DL term came to be associated with African American men during the 1990s. This double life, according to Denizet-Lewis, started in the inner city with young African American men who lived in the "hypermasculine 'thug' culture" (p. 30). Denizet-Lewis continued that the DL culture came into the public forum through Internet sites, chat rooms, private parties, and clubs that catered to this population. With the spread of HIV/AIDS in the African American community, Denizet-Lewis noted that the DL culture also came to the attention of public health officials. Smith (2004) recognized that there have always been gay men and lesbians in the African American community, and those gay and bisexual African American men married and continued their secretive relationships with other men. Wright (2001) discussed the fact that

African American DL men have created a “cult of masculinity” (p. 23) that personifies African American manhood. Wright explained that African Americans have a difficult time discussing their sexuality, let alone discussing same-gender relationships.

#### Synthesizing the Scholarly and Popular Culture Literature

Pertaining to the DL term and how it is described, a synthesis of the scholarly and popular culture literature reveals three distinct definitions for the DL. These include (a) one of several sexual identities pertaining to African American men, (b) a behavior pertaining to African American men who engage in intimate relationships with other men, and who also maintain a primary, public relationship with women, and (c) an attitude or mind-set pertaining to African American MSM that compartmentalizes men, whom they are intimate with, and women, whom are identified as girlfriends or wives, into mutually-exclusive relationships.

#### How Literature Shaped the DL Research Agenda

A review of both the scholarly and popular culture literature indicated that the DL phenomenon has created a media storm based on controversy, pathology, fear, sensationalism, and that the research focus on the DL has followed these patterns. Ford et al. (2007) reported that the DL phenomenon has garnered considerable notoriety from the media pertaining to the publication of books (e.g., *On the Down Low. A Journey into the Lives of “Straight” Black Men Who Sleep with Men*; King, 2004) and news articles (e.g., “Double Lives on the Down Low;” Denizet-Lewis, 2003). During an interview conducted by Canavera (2005), Cathy Cohen, a political science professor, reported that the labeling of African American MSM as down low represented a pattern in history of labeling Black sexuality as “abnormal” and “undisciplined” (p. 64) without corresponding research that would prove or disprove such an assumption. Ford et al. (2007) found that most of the literature they reviewed framed the DL in terms of African

American men engaging in deviant, immoral sexual behavior, and portrayed African American men as predators of unsuspecting African American women. Ford et al. also noted that the literature on the DL focused on the rise of HIV/AIDS among African American women as related to White women, and emphasize the DL as a public health emergency. Public reactions to the existence of the DL phenomenon consisted of widespread fear, scapegoating of minorities (viz., African American men), and attributing infection to sexual immorality. Ford et al. determined that this negative response of the DL has also framed the way researchers view African American DL men (e.g., irresponsible, deviant) and framed the way researchers select their focus of study (e.g., pathology, risky or non-normative sexual behavior). Ford et al. commented:

By its very nature, research linking HIV/AIDS disparities to Black men on the DL relies on social constructions of Black sexuality in ways that may influence both individuals' attitudes and behaviors as well as how researchers conceptualize, measure, and strive to address disparities. (p. 210)

González (2007), a cultural anthropologist, also observed the sensationalism of the DL phenomenon in popular literature, noting in particular how the DL was originally depicted as a combination of aggressive African American (male) sexuality, hip-hop culture, misogyny, and homophobia among Black men. Other articles, according to González, linked the rise of HIV/AIDS in African American women to DL men. González (2007) indicated that aspects of the DL topic the media appeared to have emphasized included:

Concealed, non-normative sexuality, a subaltern genre of expressive culture (viz., hip-hop), a pandemic caused by a sexually transmitted agent, innocent victims (African American women), and a population often accused of misbehavior (African American men) (p. 27).

Pitt (2006) studied the popular media's description of the DL and noted that most articles focused on the DL as a pathology in terms of behavior, and characterized the African American

men who engage in intimate relationships with other men as predators. Phillips (2005) noted that some aspects of the DL discourse in both the scholarly literature and popular culture literature (and media) have portrayed the DL phenomenon as one of “spectacle, hype, and mass hysteria” (p. 4). Phillips determined that a convergence of the popular culture and scholarly discourses about the DL occurred when demographers and public healthcare officials noticed the emerging rates of HIV/AIDS in the African American community, thus creating a “Bridge theory” (p. 6) to link African American DL men to the rise in HIV/AIDS in African American women. The public health sector used the DL as a blanket term designation for African American MSM who also engaged in intimate relationships with women. Phillips believed that the DL discourse fostered (more by media representation than by research data) a “neo-racist agenda” (p. 9), notably, by emphasizing the stereotype of African American men as hypersexual and narcissistic. Phillips concluded that there is an opportunity to acknowledge discrepancies in the DL discourse, to address the problems of race and sexual identity that the DL discourse has created, and to reframe issues related to sexual freedom and choice. Phillips (2007) asked:

...what is society’s responsibility with regard to the promotion of an environment that promotes and protects freedom and choice with regard to sexuality and gender? Insofar as the “down low” could compel us to address these questions squarely and with integrity, it contains liberatory potential. (p. 13)

In summary, with a synergy of the popular culture and scholarly literature, the DL discourse has framed research about the phenomenon in terms of (a) focusing on infectious disease and DL men; (b) determining why DL men engage in sexual behavior that is risky, secretive, and non-normative; (c) questioning the discrepancy between sexual behavior and sexual identification; and (d) pathologizing a population of African American men as predatory as the rates of HIV/AIDS increase among African American women. The next section of the

literature review will address research (and the lack of research) studies that have been conducted on African American DL men and related aspects of African American MSM.

### Research Conducted on the DL and MSM

Most of the research relevant to African American DL men has examined the relationship between the DL and (a) HIV/AIDS in the African American community (in particular, African American women), (b) disclosure of sexual identity and of HIV seropositive status, or (c) risky sexual behaviors among African American DL men or African American MSM. This section of the literature review will examine research that has been conducted on the DL phenomenon in various disciplines. Some of the scholarly literature centers on the DL topic. When the principal investigator was not able to locate research articles that specifically pertained to the DL subject, other articles that were associated with the DL (e.g., gay African American men, identity issues among African American men, or African American MSM) were located. This section will address the research purposes, the methods of data collection and analyses, and the research findings of the literature. Specific related foci among the articles pertaining to the DL phenomenon, how these foci reflect back to factors mentioned in the popular media literature, and issues about the DL that research (and researchers) have failed to address will also be discussed.

### *Counseling Research*

Although studies have been conducted in the counseling field that focused on gay, African American men who have not disclosed their sexual identity to others, there remains no published research studies in the counseling field that explored the DL phenomenon among African American men. Research has also been conducted that examined racial identity and gender role conflict of African American men within their community and within society. Clark

(2004) conducted a study to examine whether or not a relationship exists between (a) young African American men who had not disclosed their HIV positive status and (b) African American HIV positive men who engaged in unprotected sex within the previous six months. The premise for Clark's study was that African American men who are HIV positive seldom used condoms, resulting in their being at a significantly higher risk for infecting other men. Clark used a modified version of the Young Men's Survey (MacKellar, Valleroy, Karon, Lemp, & Janssen, 1996) to determine the specific factors that present a challenge to African American HIV positive men disclosing their seropositive status and using safe sex practices. The modified version of the Young Men's Study produced results that were generalizable only to African American men receiving HIV/AIDS services from related agencies in rural southwest Alabama. Clark surveyed 37 HIV/AIDS positive African American men living in this region of Alabama between the ages of 25 and 44.

Clark (2005) noted that (a) 41% of the men reported that they had not told anyone that they were HIV/AIDS positive and (b) 62% of the men reported having a sexual relationship within the past six months without using a condom. Clark used Pearson chi-square and reported a significance level of .042. As a result, Clark found that African American men who were HIV positive and living in rural southwest Alabama who did not disclose their HIV status to others were more likely to engage in unprotected sexual relationships with men *and* women. Clark added that the topic of same-gender relationships is still "taboo" (p. 20) in the African American community, and the stigma that is attached to having HIV/AIDS further challenges the mental health community's efforts to provide interventions and other preventative strategies.

Based on these findings, Clark (2005) recommended enhancing cultural sensitivity among mental health practitioners when offering preventative treatment efforts with HIV/AIDS

positive African American men in order to promote disclosure and reduce unsafe sexual practices. Counselors must educate and prepare themselves to address “complicated needs, concerns, and other issues” (p. 26) pertaining to HIV/AIDS positive young men including poverty, undereducation, and the problem of the scarcity of resources in the rural south. Clark recommended that culturally specific educational trainings be offered to counselors and other mental health practitioners working with HIV/AIDS positive African American men to be knowledgeable about the unique factors experienced by this population. Finally, Clark recommended that more research be conducted to identify and address the thought process and behavior patterns of African American men who are HIV/AIDS positive, including working with the African American community in order to better serve this population.

Wester, Vogel, Wei, and McLain (2006) conducted a study in which they examined the links between male gender role conflict (GRC), racial identity, and psychological distress among African American men. Wester et al. noted the lack of research in the understanding of the relationship between GRC, racial identity, and psychological distress. Wester et al. examined 130 college students who self-identified as Black ( $n=31$ ), African ( $n=6$ ), African American ( $n=41$ ), or a combination of the three groups ( $n=52$ ). The mean age of the students was 26.4 years. The students were recruited on the campus of a large, urban, Midwestern university. Those students who agreed to participate were given a questionnaire packet that included an informed consent form, the survey instruments (3), and a questionnaire. After completing the information, the students were given a postcard to fill out which entered them into a \$50 raffle.

Wester et al. (2006) measured GRC with the Gender Role Conflict Scale (GRCS) (O’Neil, Helms, Gable, David, & Wrightsman, 1986), which measures men’s reactions to the tensions between traditional socialized male gender roles and situational demands. The scale

consists of 37 items divided into four subscales: (a) Success, Power, and Competition, (b) Restrictive Emotionality, (c) Restrictive Affectionate Behavior Between Men, and (d) Conflict Between Work and Family Relations. Racial identity factors were measured using the Cross Racial Identity Scale (CRIS) (Worrel, Vandiver, & Cross, 2000), which measures Black racial identity attitudes based on the revised “Nigrescence” model proposed by Cross. Psychological distress was measured using the Brief Symptom Inventory (BSI) (Derogatis, 1993), which is a brief form of Derogatis’ Symptom Checklist. The BSI is designed to “reflect current, point-in-time, psychological symptom status” (p. 3). The BSI consists of 53 items that compile nine subscales (i.e., Somatization, Obsessive-Compulsive Problems, Depression, Anxiety, Interpersonal Sensitivity, Hostility, Phobic Anxiety, Paranoid Ideation, Psychoticism).

Conducting an independent sample *t* test (Bonferroni-corrected) for GRC, Wester et al. (2006) found that there were no statistically significant differences between the samples on any of the five subsets. Wester et al. determined that the findings strengthened their results in that they were able to generalize to the larger African American community.

Burlew and Serface (2006) conducted a study using a constructivist theoretical framework to examine the tricultural (i.e., African American, gay, Older American) experiences of older, African American gay men (defined as African American men age 55 or older). The purpose of Burlew and Serface’s study was to address the counseling needs of this population. Burlew and Serface sought to construct the life stories of older, African American gay men in an effort to examine (a) their psychological adjustment in older adulthood, and (b) counseling issues that are prevalent and that could be addressed from a gay-affirming, racially sensitive perspective. Although the study did not directly address African American DL men, Burlew and Serface mentioned the DL topic as a way that African American gay men “deny their

homosexual identity and buy into the more recently acknowledged behavior (of the down low)” (p. 82).

The assumption behind Burlew and Serface’s (2006) methodology was that men of color are reared and socialized within the context of racism, and they construct life stories that are based on surviving and functioning within the dominant, White culture as a minority culture. African American gay men construct their life stories within two distinct minority environments: (a) the racial minority environment (i.e., being African American within a majority, White society) and (b) the sexual minority environment (i.e., being gay in the mainstream heterosexual culture). In addition, older, African American gay men may also experience ageism in a culture that tends to be youth-oriented. Burlew and Serface noted that the constructivist theoretical framework helps people explain their life experiences because constructivism gives individuals the opportunity to participate as active builders of their internal and external experiences. Burlew and Serface stated that through a process of perceiving, internalizing, and eventually acting on externally derived experiences, the individual creates the stories (i.e., life scripts, narratives, or views of the world and self) that have become a part his or her reality.

For their research, Burlew and Serface (2006) reviewed four qualitative studies that focused on African American men. In each of these studies, the participants struggled with dual-identity development or integrating their identity in both the African American and the gay communities. Integrating their identity was challenging because of the racial bias in the gay community against African Americans, and the concern about "losing their status" if they identified as gay in the African American community. Burlew and Serface noted that older gay men felt inclined to remain closeted, which currently designates them as one of the most invisible older populations.

Pertaining to counseling strategies for older, African American gay men, Burlew and Serface recommended that counselors provide gay-affirming and culturally-sensitive counseling to this distinct population of men. Counselors must be sensitive to the strategies these men use to construct and deconstruct their identity. Burlew and Serface cautioned that counselors should also be aware that these client might be uncomfortable talking with them, and not interpret this apprehension as resistance; this apprehension may stem from the client's fear of disclosing their sexual identity and losing their status within the African American community. If the client prefers to remain closeted about his sexual identity, Burlew and Serface recommended that the counselor respect the client's choice and help them deal with the stress of, and the transition of being an older, African American gay man in this society.

#### *Psychology Research*

Currently, no articles exist in the field of psychology or counseling that specifically focus on African American DL men. Few articles make mention of the DL terminology and phenomenon while the main focus pertains to HIV/AIDS or African American MSM. Cochran, Mays, and Zamudio (2004) conducted a study in which they reviewed the existing literature for the purpose of developing a rationale for reframing the conceptualization of risk of HIV infection in Black MSM. Cochran et al. sought to focus the research agenda on answering questions that may help researchers to reduce the burden of HIV/AIDS disease among African American MSM. Cochran et al.'s objective was to reveal what was presently known about African American MSM and to provide guidance for future directions of data collection.

Cochran et al. (2004) reviewed the literature pertaining to HIV/AIDS and epidemiology (i.e., the article did not state the methods used to ascertain the information), and found that African American MSM consist of a diverse group not only in their socioeconomic status but

also in how they construct their relationships with men and women. Cochran et al., suggested research that can help identify how these constructions foster higher risk environments, vulnerabilities, or reduced access to HIV-preventative treatments is greatly needed if psychologists are to develop strategies in order to decrease the rate of new infections in African American MSM.

In their recommendations for future research, Cochran et al. (2004) noted that the *scientific* literature advised researchers that African American MSM should be a focus of HIV/AIDS prevention. However, Cochran et al. pointed out that the relationship between the risk of disease and the unique status of African American MSM is in its infancy. Definitions of identity, masculinity, manhood, sexuality, privilege, and position are potential areas for research exploration. Future studies that investigate the dyadic and social-level influences of African American MSM's relationships are also needed. This includes research exploring the diversity that exists within the various categories of African American MSM with respect to perceived identity (e.g., gay, bisexual, DL, homo thugz), constructions of masculinity, sexual scripts, sources of social support, and perceived norms and expectations.

### *Epidemiology Research*

Most research articles that focus on the DL phenomenon lie in the fields of medicine; specifically, in the areas of epidemiology and public health. Wolitski et al., (2006), a research team from the Centers for Disease Control (CDC), conducted a study in which they compared the racial identity, sexual identity, and sexual practices of MSM from 12 U. S. cities who considered themselves to be on the DL with MSM's who did not (non-DL MSM). The primary objective of the study focused on the necessity of public health agencies to be knowledgeable about the characteristics of DL-identified MSM, their risk of HIV infection and transmission,

and whether or not they use HIV prevention services. A second objective of the study was to assess the extent to which the DL identity influenced risk behavior and access to HIV prevention services.

In their methodology (Wolitski et al., 2006), convenience samples were recruited from the northeast (i.e., Baltimore, Boston, New York, Philadelphia, Washington, DC), south (i.e., Atlanta, Houston, Fort Lauderdale, Miami), mid-west (Chicago), and western (i.e., Los Angeles, San Diego) regions of the United States. The participants were recruited from June to September of 2004. Participants were recruited through advertisements in gay-oriented publications, flyers posted in organizations and venues frequented by MSM, and announcements on MSM Internet sites. Market research firms also contacted gay and bisexual men who had earlier agreed to be informed about future research opportunities.

The potential participants were screened over the phone to determine if they were eligible for the study using the criteria that (a) they were men, (b) they were unaware of their HIV/AIDS status, (c) they were involved in intimate same-gender relationships within the past six months, and (d) there was no condom use in their intimate relationships with other men. The men were given pretest and posttest assessments. Wolitski et al. determined that 584 men were eligible for the study; 552 men completed the pretest, wherein 97 men were deemed ineligible from the study. By design, one-third of participants ( $N=455$ ) were Black ( $n=150$ ), one-third were Hispanic ( $n=153$ ), and one-third were White ( $n=152$ ). The mean age of the participants was 35 years ( $SD=9.9$ ) and their ages ranged from 18 to 73 years. The data were collected using an audio computer-assisted self-interview (A-CASI). After all study activities were completed, participants received HIV information, local referrals (the article did not specify), and \$75 for their participation.

Wolitski et al. (2006) assessed the participants as being on the DL by asking them two questions (i.e., yes/no items). The first question was, “Have you heard of the terms ‘on the down low’ or ‘down low’ being used to describe some men who have sex with men”? The second question was, “Do you consider yourself to be on the down low”?

Wolitski et al. (2006) assessed the participants’ characteristics including age, education, employment status, and sexual identity (e.g., gay or homosexual, straight or heterosexual, bisexual, none of above or unsure). Those men who did not identify as gay or homosexual were classified as non-gay identified. The participants identified their race or ethnicity through a sample range of response categories (e.g., American Indian or Alaskan Native, Black or African American, Hispanic, Latino, or Chicano, Native Hawaiian or Other Pacific Islander, White, Other, or Refused to Answer)

Wolitski et al. (2006) measured the internalization of negative attitudes toward homosexuality using the sum of three items (Cronbach’s  $\alpha = 0.85$ ) measured on a 5-point Likert scale that ranged from 1 (*strongly disagree*) to 5 (*strongly agree*). Higher scores indicated greater internalized homophobia. The three items were: (a) “Whenever I think a lot about being gay or bisexual, I feel depressed;” (b) “I wish I were heterosexual;” and (c) “Whenever I think a lot about being gay or bisexual, I feel critical of myself.”

Wolitski et al. (2006) used Poisson regression methods (adjusted for overdispersion) to compare HIV information sources and participation in the gay community for DL-identified versus non-DL MSM. For all analyses, unadjusted bivariate models were performed first to test differences between DL-identified and non-DL MSM. Multivariate models were then used to assess the independent effects of DL identity when gay identity, race or ethnicity, education, employment, and geographic region were adjusted.

Wolitski et al. (2006) found that African American and Hispanic men were more likely than White men to self identify as DL (Black MSM were nearly 16 times more likely to identify as DL). MSM who did not identify as gay were more likely than gay-identified MSM to describe themselves as DL. Wolitski et al. noted that DL-identified MSM's were less likely to have several intimate male partners, but were more likely to have had an intimate female partner and to have had unprotected sex with that partner (25% had both male and female partners in the past six months). The majority of participants stated that they had been tested for HIV/AIDS. DL-identified MSM were less likely than non-DL MSM to have ever been tested, but the rates of recent testing (at the time of this study) were similar (i.e., there were no significant differences between the DL-identified and non-DL identified MSM ever having been tested in the multivariate analysis). DL-identified MSM's were less likely to state that they had any involvement with the gay community. Wolitski et al. determined that DL-identified MSM had higher levels of internalized homophobia, which may stem from shame, guilt, or other negative feelings that they associated with having a gay or bisexual identity. Finally, Wolitski et al. mentioned that the lack of qualitative information about the ways in which participants defined the DL limited their understanding about its meaning in these men's lives and needed to be addressed in future research. Wolitski et al. recommended that future research should attempt to identify common characteristics that are central to a person considering themselves to be DL so that the prevention needs of these men can be more fully understood, and improved strategies for reaching this subgroup of MSM can be developed.

Ford, et al. (2007) conducted a study to explore how sexual constructions of African American sexuality were relevant to research targeting African American sexual behavior and more specifically, the DL phenomenon. Ford et al. examined the relationship between racism and

what concepts constituted African American sexual behavior. Ford et al. also wanted to prove that the emphasis on behavioral determinants of HIV/AIDS among minorities necessitated a critique of how research is conducted. Ford et al. reviewed lay and public health-focused literature from 1998 through 2004 about the DL using the search engines Lexis/Nexis, Medline, CINAHL, Sociological Abstracts, and Google. Descriptors used in the searches included, HIV, HIV/AIDS, HIV infection, down low, MSM, bisexual, Blacks, African Americans, race, and racial disparities.

From their literature review, Ford et al. (2007) found that although the DL term is widely used to refer to various African American MSM populations, the DL is not a newly occurring phenomenon, for it has occurred throughout history. The DL behaviors are not limited to African American men. Ford et al. noted that these behaviors, which they described as a “discordance between sexual behavior and identity” (p. 212), exist in all racial and ethnic groups with the highest levels of discordance among White men and the lowest levels of discordance among Asian American men. Ford et al. also found that the linking of HIV/AIDS to African American DL men relied on the social construction of Black men as “hypersexual, deviant, diseased, and predatory” (p. 209). The researchers noted the “paucity of qualitative research” (p. 210) on the DL topic.

For future researchers addressing African American sexuality or the discordance between sexual behavior and identity, Ford et al. (2007) recommended (a) addressing sexuality as a fluid, rather than a static occurrence to account for compositional (physical proximity of behavior) and contextual (social context of behavior) factors, (b) involving individuals, whose subjective experiences are relevant to the study, in the formulation and direction of the research, (c) involving strategies in the research design to address any stigmatization that may result from the

research. Ford et al. found that “research sometimes traumatizes or further stigmatizes communities” (p. 213), and (d) examining the research process itself to understand how social contexts (e.g., the media referring to DL men as predators) help to influence the very research process that produces knowledge about the subject.

#### *Public Health and Health Science Research*

Bleich and Taylor-Clark (2005) studied and synthesized the existing empirical literature on HIV prevalence and risk factors in the African American community, looking specifically within the DL, or Black men who have sex with men and women (BMSM/W) population. Bleich and Taylor-Clark did not describe their methodology in detail, nor did they discuss how they searched and retrieved the literature.

From a synthesis of existing literature, Bleich and Taylor-Clark (2005) found that (a) the evolution of the DL culture may be associated with the rejection of same-gender relationships by the larger African American community, (b) the DL may be a reaction by African American MSM to avoid being labeled as gay in order to preserve their masculinity, and (c) the combination of race and behavior of African American MSM may have encouraged discrimination of MSM by healthcare professionals.

Bleich and Taylor-Clark (2005) noted that the dearth of literature on HIV/AIDS risk among African American men who sleep with men suggests further research on the topic is needed. Bleich and Taylor-Clark recommended that future research examine the media’s influence on the DL and how their messages have crafted this phenomenon. Future *qualitative* research should investigate the African American church’s role in shaping the behaviors of African American MSM. Researchers should be aware of the challenges involved in conducting a study with this population of men. Bleich and Taylor-Clark also recommended that, “as a

complement to quantitative survey research, it will also be important to conduct qualitative studies to gain an in-depth understanding of sexual identity, perceived risk, and needed interventions targeted to the BMSM/W population” (pp. 15-16).

Mamary, McCright, and Roe (2007) conducted a qualitative study with African American men who do not identify as gay (whom they described as “non-gay identified African American men,” p. 359) in order to explore the perceptions, challenges, and difficulties these men experience maintaining their sexual health in everyday life. Mamary et al. utilized a participatory action approach called *photovoice*, which is based on the principals of critical consciousness, feminist theory, and approaches to conducting community-based documentary photography. The photographs taken by participants using the photovoice approach served as a catalyst for them to participate in a critical dialogue about issues important to their experiences about a particular phenomenon. Photovoice as a qualitative method has the phenomenological aspect of recognizing and acknowledging that the human experience, although complex, can be fully understood by those individuals who are actually involved in the particular experience.

Mamary et al., (2007), with the assistance of three community agencies that served African American men, recruited non-identified, African American MSM living and working in the San Francisco Bay area through Internet sites and through venues known to be frequented by heterosexual men (e.g., bars, clubs, adult bookstores, churches). The first phase of the study consisted of interviews with a convenience sample of 25 men over the ages of 18 who identified themselves as African American MSM, but did not self-identify as being gay. The interviews were conducted from September of 2005 through December of 2005. After each interview, the participants were given a description of the photovoice project and informed that the project would require them to participate in multiple group sessions with other non-identified African

American MSM in order to discuss their photos. From the 25 men interviewed during the first phase, 7 men agreed to participate in the photovoice phase of the study.

The photovoice phase of the study consisted of the men working with two co-principal investigators, a photovoice consultant, and a photographer. There were four group sessions where the men learned how to operate the provided digital cameras, discussed their successes and difficulties taking photographs, discussed their photographs with other participants, and evaluated the experience of the project. The sessions were audiotaped, transcribed, and analyzed using the standard content analysis method of Miles and Huberman (1984).

From the results of the study, Mamary et al. (2007) discovered the following themes: (a) the importance of Black identity, or maintaining an African American identity and solidarity during times of adversity, (b) factors inhibiting (non-identified, African American MSM) from taking HIV/AIDS preventative measures, such as substance abuse, a reluctance to discuss HIV/AIDS issues in the African American community, and stereotypes and stigma associated with MSM, and (c) factors that maintained or promoted health, such as having an appreciation for life and maintaining perseverance. Mamary et al. also noted that few qualitative studies have been conducted that examined the sexual behaviors of non-gay identified, African American MSM.

#### *Dissertational Research on the DL or MSM*

Smith (2006) conducted a dissertational study in order to examine African-American DL men's views about the phenomenon. Smith conducted interviews with seven African American men on the DL in order to explore how various societal, psychological, and familial factors influenced their sexual behaviors.

Because the researcher wanted to explore the real life experiences of her subjects in order to understand the DL concept, Smith's qualitative research utilized the phenomenological methodology. Using a key informant who had knowledge of the local DL community to notify other men about the study, Smith was able to recruit seven men for her research. The men were screened as currently being on the DL and consented to the study. Each individual participated in a 60-minute, semi-structured interview with follow-up questions asked at the end of each interview as needed.

Data collected from the interviews were analyzed and managed with the assistance of Atlas.ti 5.0 qualitative software. Data were then reduced using open, axial, and selective coding. After the coding process, Smith summarized the data by seeking relationships that existed and by seeking interconnections of reoccurring concepts. From the data analysis, Smith determined that African American men engaged in DL behaviors in order to maintain their familial, social, and relational ties to the Black community. African American men also remained on the DL because of fear or being rejected from the Black community if they disclosed this part of their lives. Smith reported that complex factors influencing the experiences of men on the DL included racism, homophobia, stigma, religion, and African-American masculinity. These factors inhibited African American DL men from identifying themselves as gay, bisexual, or on the DL.

Pertaining to the rise of HIV/AIDS in the African American community, Smith (2006) suggested that further studies that explored and incorporated a holistic approach into the interplay of race, gender, and sexual orientation be considered. Smith added that studies exploring gender, sexual orientation, and race would play a major role in generating public policies that effectively target comprehensive sex education curriculums, safer sex practices, and improvements in HIV testing, surveillance, and reporting.

Henry (2006) conducted a study in order to explore the relationship between identity, high risk sexual behavior, the conceptions about racism and oppression, social supports, and coping strategies (against racism, oppression, and psychosocial stress) African American MSM's employed in their everyday experiences. The participants in this Internet research study included a sample of 85 Black men who had sex with men (BMSM) between ages 18-65. The men were recruited from gay, African American community-based organizations. Henry posted a secure website for the survey on New York Metropolitan gay and bisexual websites utilized by men of color.

The participants completed a Gay Identity Questionnaire (GIQ), which was used to identify gay men in the developmental stages of coming out; a modified sexual risk behavior questionnaire created by the CDC, which was used to assess the sexual risk behavior of the participants; a Perceptions of Racism and Oppression Scale (PROS-10), a 10-question scale that assesses whether individuals think racism or oppression is an actual occurrence in their lives and in the lives of other people; Coping and Responding to Racism and Oppression Staging Scale (CRROSS-20), an instrument that measures how individuals cope with racism and oppression in their lives- whether cognitively (e.g., thinking about racism or oppression) or actively (e.g., engaging in active coping skills, whether positive or negative); a Medical Outcomes Study Social Support Survey (MOS) to assess the influence of social supports the individual seeks help from others if they contemplate coming out; and a modified Schedule of Racist Events, which measures the number of times racist or heterosexist events have occurred in the participant's life over the past year.

Henry (2006) analyzed the data using descriptive statistics, an intercorrelations matrix. The results indicated that the men answering their Internet survey were predominantly HIV-

negative (83%, n=85), with 65% (n=60) always using condoms, and 65% used condoms in the past (n=64). On a scale of 1-6, the men's gay identity stage mean score was high at 4.69 (SD=1.48), encompassing *acceptance of* and *pride in* gay identity. Coping with racism and/or oppression (ranging from 0 to 9) produced a mean total score of 7.85 (SD=.80), suggesting a very high level of active coping, with a full 99% in a maintenance stage. Social support had four sub-scales with all ranging from one (none of the time) to five (all of the time); the men scored high on all subscales (emotional support mean of 3.69/SD=1.15, tangible support mean of 3.53/SD=1.30, affectionate support mean of 3.54/SD=1.34, and positive social interaction mean of 3.83/SD=1.16). On a scale of 1-6, the respondents reported low levels of stress due to racism (M=2.78, SD=1.25), and heterosexism (M=2.37, SD=1.24). Those who always use condoms (65%) reported less stress from heterosexist events. Older men had higher stages of gay identity, more stress from racist and heterosexist events, and less overall social support. Linear regression was used to determine the best predictors of experiences of racism; older age and lower social support scores were predictors of higher racist events. Linear regression was also used to determine the best predictors of experiences of heterosexism; social support was the best predictor such that the higher the men's social support, the lower their experiences of heterosexism.

#### Specific Foci of Research

From a review of the research articles on African American DL men and the DL phenomenon, there are specific foci that are analogous in the literature including:

1. A focus on HIV/AIDS. Most of the research articles in the scholarly literature and in this section of the literature review that specifically address African American DL men also link the DL with HIV/AIDS either in the context that African American DL men are at greater risk for

HIV/AIDS, or that the empirical research associating DL men with HIV/AIDS is inconclusive. In addition, the articles imply a link between DL men and the rise of HIV/AIDS in African American women. For example, the introduction of the research article by Mamary et al. (2007) discusses the discrepancy of HIV/AIDS in the African American community and among African American MSM. Clark (2005) noted in his research that, “HIV/AIDS is spreading through the African American community at uncontrollable rates, and is devastating to the unsuspecting women in their lives” (p. 21). However, Wolitski et al. (2006) indicated that:

Scant empirical data on DL MSM and their risk of HIV acquisition and transmission have been published... Black [men] are disproportionately affected by HIV/AIDS, but the degree to which the risk behavior of DL MSM accounts for this disparity among [African American] men and women is not clear” (p. 519).

2. A focus on identity. The research of Wester et al. (2006) focused on the racial identity of African American men and how their racial identity may sometimes influence or be in conflict with their gender roles in their communities and in society. Some of the research literature on African American DL men or MSM focused on how men in this population identify themselves, particularly their sexual identity. In some of the literature, the DL is only one of several identities of which African American men may identify. Pertaining to sexual identity, Wolitski et al. (2006) noted that their research participants identified as “gay-identified MSM, non-gay identified MSM, DL-identified MSM, and non-DL MSM” (p. 521). They did note that African American men were more likely to identify as non-gay identified MSM than White men. Wolitski et al. accounted that the decision by African American MSM to identify as non-gay may stem from “internalized homophobia” (p. 520). Burlew and Serface (2006) noted that gay African American men constantly struggling over their dual identities of being gay (and closeted) in a heterosexist society and being African American in the dominant White society

and how to integrate these identities without losing their status in the African American community.

3. A focus on disclosure (or non-disclosure) of sexual identity. Clark (2004) noted that many African American MSM avoid disclosure of their sexual identity because these men fear being rejected from their families, churches, and communities. Clark also reported that African American MSM may hide their sexual identity because of stigma and shame (p. 22). Ford et al. (2007) noted that the “DL stigma” (p. 212) continues to put the lives of African American DL men at risk, as they avoid disclosing their sexual identity. They found that African American DL men “fear the stigma more than they do the infection” (p. 212). Burlew and Serface (2006) noted that older, African American gay men struggled over keeping their sexual identity secret within their community because “the African American community provides [for] them as a racial minority” (p. 85). Cochran et al. (2004) found that African American MSM may “find themselves in particular peril for openly acknowledging or manifesting outward signs of gayness” (p. 87). Cochran et al. continued that African American MSM avoiding disclosure of their sexual orientation is a matter of survival, for gay and bisexual men are more likely to be the targets of violence when compared to women and heterosexual men.

4. A focus on risky, sexual behavior. Some research articles on the DL suggested that the sexual behavior of African American DL men is risky, pertained to safe sex practices, and inferred that DL men are the cause of African American women contracting HIV/AIDS. Other research articles warned against the suggestion that African American DL men are the cause of an epidemic within the Black community without supporting, empirical research. In research studies reviewed by Bleich and Taylor-Clark (2005), they noticed that a saturation of HIV/AIDS prevention measures in the mainstream media (“AIDS Burnout,” p. 14) may be an independent

predictor of unprotected sex among HIV-positive African American MSM. Bleich and Taylor-Clark also found that unrealistic perceptions about HIV/AIDS due to the new medical treatments available may also contribute to “increased risk behavior” (p. 15). Ford et al. (2007) noted that the inference of a relationship between African American DL men and HIV/AIDS relies on social constructions of African American male sexuality that may influence how research is conducted and what issues researchers address. Pertaining to what constitutes risk, Ford et al. caution researchers that their construction of identities as the sole basis of what defines a risk group may lead to unintentional group portrayals that are often inaccurate or negative, especially for socially marginalized groups (i.e., African American men).

5. A focus on psychological distress. Psychological distress in African American DL men and MSM was a common theme that was mentioned in most of the articles. In the counseling literature, Wester et al. (2006) noted that the constant struggle between racial identity and gender roles contributed to psychological distress in African American men. Pertaining to African American masculinity, Wester et al. referred to Majors and Billson’s (1992) term, the *cool pose*, to describe how African American men negotiate between the outside world, gender roles messages, and racism by, “Presenting a powerful face to the world while at the same time suppressing intense feelings of confusion and frustration” (Wester, et al., 2006, p. 420). In their study of older, African American gay men Burlew and Serface (2006) noted these men may endure psychological distress because of their experiences dealing with racism and heterosexism. Along with psychological distress, Wolitski et al. (2006) noted that DL-identified MSM also had higher levels of internalized homophobia that they accounted to the shame, guilt, and other negative feelings associated with having a gay or bisexual identity.

6. A focus on the stigma of being African American and gay. The fear of African American DL men and MSM being stigmatized for their intimate, same-gender behavior is a reoccurring theme that has been identified in the professional literature. Ford et al. (2007) defined stigma as a “negative social label that identifies people as deviant” (p. 212). Ford et al. found that research that reinforces DL stigma tends to aggravate the stigma among African Americans in general. Mamary et al. (2007) noted from their study that the stigma attached to being African American and gay caused a reluctance among African American MSM to discuss their sexual identity with family and friends. Stigmatization is further deepened when researchers associate HIV/AIDS to a “deviant lifestyle” (p. 368) of African American MSM. With the preponderance of information that links the DL to HIV/AIDS, Bleich and Taylor-Clark (2005) believed that stigmatization and discrimination from the medical community was a possible outcome, thus discouraging African American DL and MSM from seeking medical treatment (e.g., HIV/AIDS testing and adhering to a medication schedule).

7. A focus on the need for further research. Many of the authors in this literature review stressed the need for further research in the area of African American DL and MSM. With the need for additional research, some of the authors stressed precautions researchers should heed when conceptualizing a research focus, selecting subjects for research, and reporting research findings. Cochran et al. (2004) mentioned that presently, much of the research on HIV/AIDS risk and risk reduction on African American MSM has been epidemiologic in nature, with a focus on individual-level mediators of risk behaviors. Cochran et al. noted the need for mental health researchers to explore issues that focus on social and interpersonal factors of African American MSM. Research should entail a comprehensive focus on interpersonal factors (e.g., close and intimate relationships, neighborhood and community ties, sources of social support) and social

constructs (e.g., definitions of Black MSM, masculinities, sexuality, social inequalities, experiences of discrimination, prejudice, and Black MSM role expectations). Bleich and Taylor-Clark (2005) noted that qualitative research is needed to gain an greater knowledge and understanding about sexual identity, perceived risk, and the needed interventions targeting the African American DL and BMSM/W population. Bleich and Taylor-Clark recommended that a better understanding about identity formation “will be important for both their sexual partners and health care providers, among others. It may also add clarity to the media’s current presentation of this group” (p. 16). Ford et al. (2007) noted the scarcity of qualitative research pertaining to African American DL men, which limits the researcher’s ability to effectively conceive, create, and provide effective prevention and intervention options for this population of African American men. Ford et al. cautioned future researchers about how they perceive African American men on the DL (e.g., predatory, hypersexual, misogynistic) and how these social constructions can inadvertently further the stigmatization of these men and the African American community in general. Ford et al. suggested that future researchers should offer the participants the opportunity to assist in the formulation and direction of the research that targets their community.

#### Gaps and Limitations in the Research Literature

Gaps and limited information exist in the research literature pertaining to African American DL men or African American MSM. Some issues that were not addressed in the academic research literature pertaining to African American DL or MSM, or were limited in information included:

### *Internalized Homophobia*

Wolitski et al. (2006) noted in their research that internalized homophobia may prove to be a problem experienced by African American DL and MSM and recommended that this population be referred to “mental health providers [including counselors] who are skilled at addressing these issues” (p. 527). However, none of the research articles that focused on African American DL and MSM in the counseling and psychological literature addressed how internalized homophobia shapes the African American man’s decision to remain discreet about their sexual identity or intimate relationships with other men.

In *The Journal of African American Studies*, Brown (2005) studied the various ways African American men identify themselves sexually, and described how internalized homophobia among these men may be shaped. Brown noted that the ability to be open about one’s sexual identity is an important component for healthy maturation. In his case study, he analyzed data gathered from surveys given to 110 male respondents about sexual identity and disclosure. Brown found that African American MSM do not feel that they can be open about their identity to their family, partners, and friends. Brown compared African American MSM’s fear and reticence about disclosing their sexual identity to that of wearing a mask, adding that the façade African American men assume cannot be entirely blamed on racism or homophobia, but it can also be contributed to *contemporary* African American men. Living a double life, or the wearing of the façade, results in the loss of identity and the refusal to identify as being gay. According to Brown, this façade is further reinforced by the African American MSM who (a) portrays “manic masculinity and sexism” (p. 30) in order to escape homophobia from other individuals, (b) acts homophobic as a means of being accepted by others, and (c) participates in the “hierarchy of men” (p. 30) by assuming a homophobic stance and keeping their racial and

sexual identity separate. Using this logic, Brown suggested, that African American DL men rationalize the use of slurs and epithets pertaining to same-gender relationships.

Brown (2005) further examined the divide between African American MSM's sexual identity and their gender identification. He noted in his studies that sexual identification is based on sexual relationships, but the MSM's sexual partner determines his gender identification. To African American MSM, having sex with another man is unrelated to his sexual identity. The reason, according to Brown, appeared to be an attempt to avoid the social stigma in the African American community of being gay. Brown concluded that these actions could also be interpreted as "internalized homophobia" (p. 34).

#### *The Construct of African American Masculinity*

Although the concept of masculinity among African American DL and MSM has been addressed in the popular culture literature pertaining to why this population is discreet about their intimate relationships with men, the topic of masculinity has not been examined in the counseling literature pertaining to African American DL or MSM or African American men in general. In *The Journal of African American Men*, Sheila Wise (2001), an ethnographical strategist, stated that one of the strongest factors that has pressured African American men to live on the DL is the dogma of Black masculinity. In the same journal, Spraggins (1999) conducted ethnographical fieldwork in Michigan in which he interviewed African American men in the court setting, at a public rally, and also individually. In explaining a theoretical model of Black masculinity that examined the social location and masculinity of African-American men, Spraggins noted that the general definition of masculinity was defined as a gender order or a hierarchally structured standard of male behavior designed by and embedded in all social structures.

Wise (2001) noted that race distinguishes African American masculinity from the general definition of masculinity, and that the definition of masculinity for African American men is situated in the context of having been born and raised in the United States. Wise stated that the African American man's contextual experiences include the historical and psychological effects of racial, political, and economic oppression. Spraggins commented that the African American community places a high value on masculinities that run the continuum of power, prestige, and status. Wise (2001) wrote that masculinity among African American men is a crucial aspect of their self-esteem, self-worth, and self-respect.

#### *A Focus on Lived Experiences*

With the lack of qualitative research conducted with African American DL men also comes the scarcity of information about their subjective experiences from their worldview. Bleich and Taylor-Clark (2005), Wolitski et al. (2006), and Ford et al. (2007) noted that qualitative research findings on African American DL men would give researchers a deeper understanding into areas that remain unknown such as sexual behavior choices, internalized homophobia, and according to Ford et al., the concept of fearing "the stigma (of being gay) more than fearing the disease" (HIV/AIDS) (p. 212).

#### Summary

In summary, the previous research literature within the fields of counseling, psychology, public health, and epidemiology pertaining to the either African American DL men or African American MSM shows a pattern of analogous and reoccurring themes (i.e., HIV/AIDS focus; sexual identity construction; disclosure issues; psychological distress; risky, sexual behavior focus; stigmatization; the necessity for further research on the phenomenon). The research findings are based in part on information and definitions of the DL phenomenon that are found in

the media and popular-culture articles, which emphasize (a) sensationalism of the DL phenomenon, (b) vilifying African American DL and MSM as predators of African American women (Pitt, 2006), and stereotyped African American men as having “undisciplined sexual behaviors” (Canavera, 2006, p. 64).

Some of the researchers (including Bleich & Taylor-Clark, 2005; Cochran et al., 2004; Ford et al., 2007) noted gaps or omissions in the scholarly literature pertaining to the DL phenomenon including (a) a clear exploration of the cultural, social, and structural factors that may influence or shape the behaviors of these men, (b) the need for qualitative research which would help answer many questions about the subjective experiences of African American DL and MSM, and (c) the allowing of the participants in the research study to contribute as narrators of their own stories.

This is an advantageous opportunity for researchers the counseling field to (a) explore these issues about DL phenomenon, (b) address the recommendations of other authors for further research in areas that suggest a mental health focus (e.g., exploring interpersonal relationships, social supports, social constructions of sexual identity and masculinity), and (c) establish and contribute to the need for future research.

The research in this dissertational study is based on similar concepts and understandings about how African American DL men and the DL phenomenon should be explored. Specifically, this study seeks to (a) explore the DL phenomenon from the vantage point of African American men who presently live or have experienced this way of life, (b) examine factors from the subjective experiences of these men that shaped this lifestyle, (c) allow African American DL men to discuss how their experiences on the DL may have affected them psychologically, (d) describe the role of disclosure, and (f) provide DL men with the opportunity to describe how

they constructed their sexual identity. This will be accomplished through the following research questions:

1. How have the lived experiences of DL men been shaped by
  - Their family?
  - The African American church?
  - The African American community?
2. How have the lived experiences of DL men shaped
  - Their sexual identity construction?
  - Their understanding of masculinity?
  - Their mental health disposition?
3. What is the mental health impact that African American men experience being on the DL?
4. What reasons do African American men who struggle with their same-sex attraction give in considering whether or not to seek counseling or mental health services as an option?

## CHAPTER III

### METHODOLOGY

The phenomenon of African American men on the DL has received attention in the African American community (Buckner, 2006; Watkins, 2005), the media (Boykin, 2005; King, 2004; Pitt, 2006) and in the areas epidemiology and public health (Bleich & Taylor Clark, 2004, CDC, 2003; Millet et al., 2005). The DL phenomenon has raised questions about issues of sexual identity construction (Bowleg, 2004; Brown, 2005), concerns about DL men disclosing their sexual identity (Millet et al., 2005; Wolitski et al., 2006), the role of masculinity among African American men (Spraggins, 1999; Wise, 2001), and the problem of homophobia in the African American community (Putre, 2002; Watkins, 2005). The research questions guiding the present study include:

1. How have the lived experiences of DL men been shaped by
  - a. Their family?
  - b. The African American church?
  - c. The African American community?
2. How have the lived experiences of DL men shaped
  - a. Their sexual identity construction?
  - b. Their understanding of masculinity?
  - c. Their mental health disposition?
3. What is the mental health impact that African American men experience being on the DL?

4. What reasons do African American men who struggle with their same-sex attraction give in considering whether or not to seek counseling or mental health services as an option?

Given the research questions that are central to the study, the methodological framework is one that is characterized by understanding the subjective experiences of others, making the voice of others accessible, and analyzing and synthesizing conceptualizations. In Chapter III, I discussed the research methodology, which utilized the framework of Critical Race Theory as described by Delgado and Stefancic (2001) and the phenomenological research concepts illustrated by Van Manen (1990), Moustakas (1994), and Seidman (1998). The use of the CRT allowed the research participants to tell their stories about how the interplay of race, gender, and sexuality in the American and in the African American community formed their sexual identity construction; shaped their willingness to disclose their sexual identity to their family, partners, and friends; and played a factor in the psychological problems found among DL men. The use of phenomenological research methods allowed me to construct a thematic analysis based on interview data collected from the participants in the study. In this chapter, I discussed the purpose of CRT in the theoretical framework, explained the format of the phenomenological methodology, outlined the methodology to be used in the study, and provided a summary of the pilot study and how it assisted me in revising the design of the dissertation research.

### Critical Race Theory

Critical Race Theory (CRT) has often been used to understand the relationships between race and sexuality in American society. Lynn (2004) described CRT as a legal counter-discourse generated by legal scholars of color who were concerned about issues of racism, sexuality, gender, and racial oppression in the law, in American society, in the media, and in educational discourses. According to Delgado and Stefancic (2001), CRT was influenced by individuals who

represented the “American radical traditionists” (p. 4) such as Frederick Douglas, W.E.B. Dubois, Cesar Chavez, Martin Luther King, Jr., and the Black Power and Chicano movements of the 1960s and early 1970s. Solorzano and Yosso (2001) illustrated the birth and development of CRT in a family tree (See Figure 1 in the Appendix) and the splinter groups that developed from this theoretical framework, including Latino Critical Race Theory (LatCrits), Feminist Critical Race Theory (Fem Crits), Asian Critical Race Theory (AsianCrits), and White Critical Race Theory.

Lynn (2004) noted that CRT scholars such as Crenshaw, Gotanda, Peller, and Thomas (1995) referenced five common tenets that guide their work in utilizing CRT: (a) that the United States legal system is inherently unfair to people of color (e.g., African Americans, Latino/a Americans, Native Americans, Mexican Americans), which requires the constant scrutiny of its failure to address racism in the law; (b) that the centrality of race and the deeply entrenched influence of racism in contemporary American history is an indispensable aspect of social science research; (c) that Western-European and Modernist claims pertaining to “neutrality, objectivity, rationality, and universality” should be rejected (Lynn, p. 155); (d) that law critiques should strongly rely on the *subjective experiences* of people of color; and (e) that CRT is interdisciplinary with its roots in originating postmodern, Marxist, nationalist, and feminist discourses.

In expanding on these tenets of CRT, Delgado and Stefancic (2001) noted that racism is a routine, ordinary occurrence in society, since “White over color ascendancy” (p. 7) serves the purpose of advancing the interests of White elitists and White working class people. Delgado and Stefancic go on to assert that (a) the majoritarian portion of the U.S. society has little incentive to eradicate racism, (b) the concept of race is a product of social thought and relationships, not

genetic makeup, (c) the dominant society racializes different minority groups at different times in response to transient, temporal needs, (d) that no person has an easily-stated, unitary identity, and (e) the unique “voice of color” (p. 9) thesis that stressed that writers and thinkers of color, because of their different histories and experiences with oppression, are able to effectively convey information from their personal worldview to their White counterparts. The voice of color thesis has aspects (e.g., the telling of stories and the personal experiences from the worldview of the individual) that are well suited for the phenomenological research method of this study.

### The Use of CRT in Research Studies

CRT has proven an effective theoretical framework in various research studies where a critical look at the impact of race and racism in society is highly emphasized. Stoval (2005) found that CRT is useful as the theoretical lens by which to investigate the ideology and implementation of a community-based program that focused on the achievement of African-Americans students. Through qualitative inquiry, Stoval determined that CRT provided a window by which to analyze a project aimed at confronting the systemic effects of racism. With racism being endemic to American life, CRT plays an integral role in presenting to the reader the complex, intricate, and discrete functions of racism in society. According to Stoval, CRT gave the researcher the ability to have a pragmatic discussion (through the telling of stories) about racism in America and the role that racism plays in disadvantaging people of color. CRT also exposed and deconstructed the notions of the United States’ society being “color-blind or race-neutral” (p. 96). Stoval noted that using CRT as a theoretical framework legitimized and promoted the ideas and the voices of people of color as reasonable critics of the dominant social order which purposefully devalues them, and CRT offered legitimate challenges to the race-

neutral and multicultural movements in education which have upheld White students' behavior as the norm (Stoval, 2005).

McDowell (2004) explored CRT as it pertains to racial diversity and social justice in marriage and family therapy (MFT) training. McDowell found that most MFT programs are historically Euro-centered and are situated at predominantly White institutions. McDowell believed the choice and use of CRT as her guiding conceptual framework was necessary in order to clarify, through the telling of stories by the participants, the researcher's racial standpoint, particularly in relationship to the debate about researching race from "insider" and "outsider" identity locations (p. 306). CRT offers an established, critical lens through which to consider racial dynamics. In keeping with the interpretive framework of CRT, according to McDowell, the participants constructed shared stories with the goal of bringing to light what often goes unnoticed in the relationship between race and sexual orientation.

#### Methodological Strategies within CRT Framework

##### *Storytelling and Counterstorytelling*

I utilized the specific CRT concepts of narrative *storytelling* and *counterstorytelling* in the interviewing process of the research study. By encouraging African American DL men to provide a narrative representation of their life experiences and explain how race, environment, and sexuality factored into their living a DL lifestyle, I was able to give them a voice and be able to provide the reader with an understanding about this topic. According to Delgado and Stefancic (2001), society constructs the social world through a series of tactic agreements mediated by images, pictures, tales, and scripts. Through the telling of stories, Delgado and Stefancic reasoned that constructs, such as race, can be deconstructed and amended. As with phenomenology, the telling of stories provides a language that bridges the gap of that which is

perceived mentally to that which exists physically. According to Delgado and Stefancic, the concept of *intersectionality* provides a way to examine race, gender, social class, national origin, and sexual orientation and how a combination of these social categories plays out in various settings. The use of intersectionality is necessary and relevant to the study; through providing a space for African American DL men to tell stories about their social world and their personal experiences, I was able to construct an understanding of how issues of race, gender, and sexual orientation are played out in the various settings DL men encounter and experience (e.g., the church, family settings, at work).

Delgado and Stefancic noted that counterstories serve at least four theoretical, methodological, and pedagogical functions: (a) they can uplift those groups at the margins of society by bringing a human and familiar face to educational theory and practice; (b) they can challenge the perceived wisdom of the established institutions by providing a context to understand and transform established belief systems; (c) they can open new windows into the reality of those people at the margins of society by showing them the possibilities beyond the ones they live and by demonstrating to them that they are not alone in their position; and (d) they can teach individuals that by combining elements from both the story and the current reality, one can construct another world that is more comprehensible than either the story or the reality alone. Delgado and Stefancic found that storytelling has a rich and continuing tradition in the African American, Chicano, and Native American communities; and as Delgado (1989) has stated, “oppressed groups have known instinctively that stories are an essential tool to their own survival and liberation” (p. 2436). The telling of stories by African American DL men would allow them the opportunity to refute the stories reported in the media, which Pitt (2006) found described African American men on the DL as, “Pathological, selfish, dishonest and delusional,

deceptive, oversexed, and conveyers of sexually transmitted diseases to African American women” (pp. 255-256).

Another factor that I linked between CRT and phenomenology, according to Delgado and Stefancic (2001) and Masko (2005), is that the predominant CRT theme of storytelling bridges the world of the research participants to the world of the spectator by providing insight and understanding about their experiences (i.e., those of the research participants) that might not have been explored or known. Engaging stories can help the reader understand what life is like for others, and introduce the reader into a new and unfamiliar world. This method allows the reality of the lives of people of color to be told, through their stories, not *majoritarian* stories that are told by mainstream society about people of color, and are often lacking detailed information (Solorzano & Yosso, 2002).

Delgado and Stefancic (2001) also felt that the telling of stories served a powerful psychic function for minority communities. Many victims of racial discrimination suffer in silence, or blame themselves for their predicament. Delgado and Stefancic determined that story telling gives these individuals a *voice* and reveals that other people exist that share similar experiences. The rationale is...if race is not real or objective, but constructed, then racism and prejudice should be capable of being deconstructed since the pernicious beliefs and categories are, after all, the product of a concept.

### The Thematic Phenomenological Methodology

Because one of the objectives of this dissertation study is to interview African American DL men in order to allow them to discuss and present their perspective and experience, the use of the phenomenological methodology fits well within the “traditional” counseling orientation, given that through a relationship built on trust and understanding with the research participants, I

(refraining from prejudgments and personal biases) was allowed to explore the lives of African American men on the DL as they live (or lived) it. The participants also had an opportunity to tell their stories from their subjective world to offer me an understanding of how sexual identity construction is shaped among DL men. Below, I discussed how the specific characteristics of phenomenological inquiry are relevant to the proposed research.

Husserl (1970) defined *phenomenology* as a philosophical method in which individuals are capable of consciously defining their personal, immediate experiences. Husserl viewed reality as “pure phenomena” (p. 4). Groenewald (2004) expanded on Husserl, introducing the concept of “being there” (p. 4) in which individuals are in direct contact with their physical world. Schutz (1967) described phenomenology as an approach in which the researcher studies how “ordinary members of society attend to their everyday lives” (p. 5). Schutz viewed phenomenology through “lived experiences” (p. xxv) in which the researcher is concerned with the method of understanding “others” who are foreign to them. Schutz believed that the researcher’s true understanding about human beings is achieved through “face-to-face encounters, dialogue and commitment” (p. xv). These factors suit the objective of this study, given my goal to represent the life experiences of DL men to the reader and to facilitate a deeper understanding of the factors that contribute to African American men living this particular lifestyle.

#### Phenomenology from the Viewpoint of Moustakas

Because I endeavored to conduct in-depth interviews with these men to understand their experiences, the subjective, phenomenological research methods of Clark Moustakas (1994) was selected as a research guide. Influenced by Husserl, Moustakas’ transcendental phenomenology was rooted in “subjective openness” (p. 28). Moustakas described phenomenology as what ones

perceives, senses, and knows in one's immediate awareness and experience. Phenomenology is the building block for human science and the basis for all knowledge. To the researcher, what appears in the conscious mind or what is apparent is the phenomenon. The researcher's objective is to unify what is apparent to the conscious mind to that which is real and the ideal. Utilizing possible meanings the researcher has explored, the researcher blends what is really present with what is imagined as present, producing a collaboration between what exists in conscious awareness and what exists in the world.

The concepts of noema and noesis are central to Moustakas' (1994) conceptualization of phenomenology. In Moustakas' view, the noema is the object that is perceived or is in the abstract realm of possibility, whereas the noesis is the object in reality, or as Moustakas described as "perfect self-evidence" (p. 38). Through empathy and through the interplay of the researcher's experiences, objects (or others) that the researcher perceives as reality become real and concrete. These concepts are relevant to my study in that the noema is what I have perceived about the DL topic through my reviewing of the popular culture and scholarly literature. Once I interviewed African American men about their lives on the DL and had a chance to understand and process their experiences, the noesis became reality.

Because a phenomenological approach to study of African American DL men was chosen as the methodology, I was aware that there are certain limitations that phenomenology does not address. Van Manen (1990) stated that phenomenology is an appropriate method for exploring the existing "state of affairs" (p. 22) of a particular culture. Although phenomenology offers the reader the opportunity to observe and understand the subjective experiences and conceptualizations of other people and populations, the tenets of phenomenology do not specifically address underlying problems among cultural groups. As discussed within the

sections on CRT, within the context of the DL community lies an interrelationship between race, gender, and sexuality. The DL phenomenon is also shaped by the problems of racism and homophobia. Another objective and responsibility that I have is to give the participants the opportunity to tell their personal stories about how real situations and experiences in their own lives have shaped their decision to live a double life. Not directly addressing the interplay and problems of race and sexuality pertaining African American DL men would be a disservice to the participants in this study. The use of CRT assisted me in accomplishing this objective.

### Summary

CRT can be used in collaboration with phenomenology in giving African American men the opportunity to give their personalized accounts living on the DL because CRT incorporates tenets (e.g., the importance of the subjective experiences of people of color, and the unique voice of color thesis) that are analogous to phenomenological concepts including (see Phenomenology and CRT Frameworks Table in Appendix K):

1. The understanding of the lived experiences of others. Pertaining to phenomenology, Groenewald (2004) noted the individuals in question are capable of consciously defining their personal, immediate experiences. Seidman (1998) stated that the task of phenomenological research is to present the experiences of people, and to explain how particular members of society attend to their everyday lives. This task is complimentary to one of the tenets of CRT (Delgado & Stefancic, 2001) in that CRT educates the reader by strongly relying on the subjective experiences of people of color. According to Delgado and Stefancic, the participants' counterstories provide the reader with a look into reality of those people who live at the margins of society.
2. The telling of stories by those living the experience. Schutz (1967) wrote that true

understanding of other people is achieved through encounters such as interpersonal relationships and dialogue. Seidman (1998) explained that in phenomenological research, the telling of stories is a way of knowing the individual stories and experiences of people from their own stream of consciousness. In comparison, CRT's voice of color thesis (Delgado & Stefancic, 2001) and the telling of stories through the counterstory model compliment each other well. While African American DL men were able to tell the stories of their personal experiences, their stories may prove counter to the stories that are present in the media about DL men such as (a) DL men are being linked to the increase in HIV/AIDS among African American women (Millet et al., 2005), (b) DL men are deliberately being dishonest to their partners (Pitt, 2006), and (c) that DL men are villains and sexual predators (Pitt, 2006).

3. The role of the researcher. In both frameworks, the role of the researcher is that of being a receiver of new knowledge about the experiences of others. The researcher has the task of describing the "textual language" (Seidman, 1998) of the participant as they receive information about that language. The researcher also conveys the stories provided by the participants to the reader, offering the reader an understanding about the experiences of others. The role of the CRT researcher has an additional advocating aspect, which is complimentary to the advocate role counselors are encouraged to forge with their clients. In giving participants the opportunity to tell their stories, Delgado and Stefancic (2001) noted that story telling gives individuals a *voice* to effectively convey information from their personal worldview to the reader. Utilizing CRT in her theoretical framework, McDowell (2004) took on the role of clarifying the stories of her research participants (through counterstories) to her readers in order to demonstrate discrepancies in the

teaching of racial and sexual orientation topics in marriage and family counseling courses on the college level. Seidman (1998) stated that the role of the researcher is that of presenting the experiences of others, finding connections among the experiences of those interviewed, and examining patterns in those experiences.

4. The role of the consciousness in both frameworks. The focus on the conscious mind is a reoccurring theme in phenomenology and CRT. Moustakas (1994) stated that phenomenal knowledge is rooted in the conscious mind. The phenomenon only appears on the conscious level. According to Van Manen (1990), the consciousness is the only access human beings have to the real world. CRT utilizes the concept of “race-consciousness” or “critical consciousness” (Solorzano & Yosso, 2001) in which the researcher develops a critical awareness of the way people exist in the world. Scholars are taught to read the world as a text. The text develops into words and images that have meaning in the everyday lives of people. The researchers’ critical consciousness allows them to explore racial, gender, and sexual orientation inequities that exist in our society with the goal of refuting and amending the messages transmitted through society and the mainstream media. González (2007) found that the concepts of *double* or *dual* consciousness “denotes the ability of some African Americans to perceive dimensions of the US social reality that remain unseen, unexperienced, and denied by most of the nation’s citizenry” (p. 32). Also described as the “ability to see out of more than one eye” (p. 32), double or dual consciousness not only allows some African Americans to recognize the sociocultural features that all U. S. citizens share, but to also identify contradicting differences in these features by comparing and contrasting cultural, ethical, and political sensibilities gained through oppression.

I endeavored to present descriptive details about the phenomenon of the DL using the collaborative methodologies of phenomenology and CRT. Phenomenology allows the reader an insider look at the objective and subjective experiences of other people through observations, interviews (which I conducted) with research participants or informants, or reviewing artifacts that offer information about the participant. With CRT, the participants were able to tell their narratives through the interviewing process as well. The CRT concept of counterstories, offers participants the opportunity to give the personal accounts of their day-to-day lives that run counter to the stories created by institutions and mainstream media. The telling of stories through the narrative, according to Seidman (1998), offers the participants one way of making sense of themselves and their social world. It also offers me a way of making sense of the interview data. In this study, I endeavored to provide a culturally informative representation of the research factors and to offer readers the opportunity to review the impact that the American society and the African American community have on the expression of sexual orientation among certain African American men.

## Participants

### *Selection of Subjects*

For three years, I ran a discussion group on Yahoo.com called Down Low Talk. I started the group to give members a forum to discuss issues that shaped their decision to live on the down low. Topics of discussion included sexual identity, the members' responses to church sermons that denounced the gay community, and disclosure. The participants knew the moderator was a female and had the option of joining or leaving the group. None of the group members were solicited or selected for the study. For the actual study, I selected potential interviewees from Internet groups and chat rooms on one of the major Internet search engine

sites (the name of the search engine is withheld to safeguard the participant's anonymity). The Internet groups focused on men who have self-identified as on the down low (DL), African American men who have sex with men, or same-gender-loving men. Six men were interviewed for this study.

### *Criterion Sampling*

Given that the participants in this research study had to fall under specific criteria to be part of the study, I used the *criterion sampling* method in selecting the participants. According to Taylor-Powell (1998), criterion sampling occurs when the researcher selects subjects that meet a certain criteria. Heppner and Heppner (2004) and Seidman (1998) stated that participants selected using criterion sampling (a) have experienced the phenomena that is the basis of the study, and (b) are able to discuss their personal experiences about the phenomenon with the researcher. I selected the participants in this study based on the criteria of (a) being African American men and (b) reported having (or had) real life experiences living on the DL.

### *Number of Subjects*

I selected a minimum of six men to be in this CRT phenomenological study. Each of these men reported that they experienced living on the DL. In determining the number of subjects to be used in this study, I reviewed Kvale (1996), Seidman (1998), and Weiss (1994). Kvale stated that the number of subjects necessary for a study depends on what the researcher needs to know and the study's purpose. Kvale wrote that if the number of subjects is too small, then it is not possible to make statistical generalizations, to predict outcomes, or to test a hypothesis among groups. If the number of subjects is too large, Kvale found that it is difficult to make insightful interpretations about the interviews and the participants. Because the goals of this study were to explore, describe, and understand the background, mental health challenges,

and struggles of African American DL men, I selected a smaller number of participants. A smaller number of subjects allowed for a more in-depth exploration of the DL phenomena.

Kvale (1996) explained that in exploring and detailing a certain construct of a participant (e.g., behavior at home, attitude towards grades, personal satisfaction after completing an intervention program), additional interviews might be conducted to the point of *saturation* (collecting similar results) or might yield a slight amount of new knowledge. Seidman (1998) mentioned saturation as the point where the researcher hears the same information repeated, and no new learning has occurred. Seidman also noted the term *sufficiency*, in which the researcher finds there are sufficient numbers of participants that reflect the range and sites that comprise the population. Weiss (1994) described “diminishing returns” (p. 21) as the point when information gathered from interviews becomes redundant, peripheral, or adds too little to the information already obtained to justify the necessity for further interviews. For the purposes of this study, a point of diminishing returns was sought through multiple interviews with the participants. A point of diminishing returns was recognized when the data gathered became redundant or added little to previously obtained information.

Kvale (1996) acknowledged the concern that when a small number of subjects were interviewed, the research findings do not generalize to the larger portion of the population. Pertaining to generalizations in phenomenological studies, Van Manen (1990) stressed, “Never generalize” (p. 22). This study was not meant to generalize to the larger population of African American men on the DL. However, I provided the reader with descriptive insights into the real world experiences and beliefs of African American DL men.

### *Characteristics of the Sample*

Characteristics of the participants who gave their consent to be in the study included that they reported (a) they were African American men, (b) they were 19 years of age or older, and (c) they formerly or were currently living a DL life. Each of the participants provided me with a pseudonym, e-mail address, and a contact phone number. Men who did not report that they were 19 years of age or older, provide me contact information (e.g., phone number) through email, and provide me with a pseudonym were removed from the participant pool.

The possibility did exist that some of these men were not African American or on the DL. This possibility was listed as a limitation of the study. In addressing the likelihood of participants misrepresenting themselves, I felt that recruiting men from websites that cater to African American DL men would be a viable option because these websites targeted this particular population. I also felt that emailing potential participants information about the research study and what it entailed (e.g., three 90-minute interviews, and the risks and benefits of participating in the study) would serve as a filter to attract only those individuals who were genuinely interested in the study. By talking with the participants and interviewing them about their experiences, I had the opportunity to determine if they actually represented this population by their assessing their ability to discuss topics relevant to the DL experience (e.g., family members' belief systems about gay men, the topic of African American masculinity, and the influence of the African American church on their being on the DL). From their responses to these questions, if I determined that a participant was misrepresenting themselves as being on the DL, their interview was discarded from this study. As a counselor, I strive to establish a relationship of built on trust with a client, and I exercised the same belief that participants selected for this study were truthfully representing themselves during the interview process.

## Ethical Considerations

### *IRB Approval*

I obtained approval from the University of Alabama's Institutional Review Board (IRB). Before submitting an application to the board, I completed and passed the Social and Behavioral Human Subject Training on the University of Alabama's Research Compliance website. I then submitted my application, purpose for research, interview questions, and Informed Consent form to the IRB. The application was approved July 2007 (See approved IRB form [renewal] on page 298).

### *Anonymity*

Due to the nature of the subject matter and the information reviewed in the literature about African American DL men, I took the appropriate steps to protect the identity of the participants in this research study. According to Seidman (1998), when conducting in-depth, personal interviews, researchers cannot guarantee *total* anonymity to their participants. However, Seidman found that researchers can take steps to protect their participants. The researcher can assign the participants pseudonyms, which Seidman noted to be a complex and sensitive task. Secondly, Seidman suggested that the researcher stresses to the transcriber the importance of maintaining the participant's privacy. Another step Seidman mentioned involves using the participant's initials in the transcript so that no proper names would be readily identified. In this study, I used pseudonyms selected by the participants. General demographic information will be used to describe each participant (e.g., "Dexter" is a single, African American male, 36 years of ages, who works for the government, and lives in a small town in the Northwest."). I only discussed the participants' information (using their pseudonyms) with the dissertation co-chairs,

members of the dissertation committee, and with colleagues during peer debriefing. I destroyed audiotapes of the interviews when my dissertation was accepted.

### *Confidentiality*

Although the Informed Consent forms were completed online, emails were exchanged online, and the interviews were audiotaped, the study was not expected to present any greater loss to the participants' personal privacy than they would normally experience when sending or receiving information over the Internet or telephone. Email exchanges were conducted on an account I established with Netzero.com for the sole purpose of communicating with participants. I was the owner of the account and the password was only known by me. The response to the Informed Consent form was transmitted over a secure server and was stored in a password-protected environment. Only I knew the password. The interview audiotapes were kept in a locked office in my care during the transcription process and were destroyed upon the acceptance of my dissertation.

### *Protecting Against Bias*

Because of the nature of the study (i.e., consisting of a racial, sexual identity, and gender foci) and the background of the participants (i.e., African American men), I had to reflect on how I was doing and what I had accomplished so far. I acknowledged the necessity to discuss or put in writing reflections or a retrospective of what I had worked on so far. I made use of a journal in which to reflect on the research process and which served as a guide to keep my personal ideas and thoughts in perspective.

According to Seidman (1998), phenomenological researchers strive to remain objective and impartial about the individuals or the subject matter they are researching.

Baker (2006) noted that the researcher must be reflexive throughout the whole research process. This means that the researcher must acknowledge personal biases and experiences and the effect that these factors can have on the research and interpretation. Baker defined reflexivity as researchers acknowledging their own standpoint or theoretical perspective. In qualitative research, researchers should recognize what influences they may have on the participants and how their own beliefs and value systems can affect the research. A research journal and field notes, which are regularly reflected on, assists the researcher to be consistently reflexive.

### Data Collection Methods

#### *Setting*

In this section, I discussed how I conducted my data collection methods and also included a summary pertaining to my pilot study. I conducted audiotaped, telephone interviews on campus in a research suite of the University of Alabama's College of Education and at my residence, located in Tuscaloosa, Alabama. I conducted the audiotaped, telephone interviews at a time that was convenient for the participants.

#### *Recruiting Participants*

I recruited potential participants by emailing initial contact letters (see the initial contact letter in Appendix A) from my email account on the website Netzero.com. This account was set up for the sole purpose of communicating with research participants. In the initial contact letters, I introduced myself and described the purpose of the e-mail which was to solicit volunteers to participate in a dissertation research study pertaining to African American men on the DL. The readers were able to click on a link to a website (SurveyMonkey.com) in order to review further information about the research study.

The research participants were given the opportunity to review the informed consent form (see informed consent form in Appendix B) on the website surveyMonkey.com, which (a)

contained further information about purpose of the study, (b) informed the potential participants that the study consisted of three, 90-minute, audiotaped interviews, (c) alerted the potential participants about the possible benefits and risk of participating in the study, and (d) notified the potential participants about their rights as a participant in a research study. The respondents were able to give their consent by completing the information on the informed consent in which they notified the researcher (by clicking a box) that they were 19 years of age or older, and typed in a pseudonym, their e-mail address, and a contact phone number. The men also had the opportunity to decline to be in the study by exiting the website. I had no knowledge of who consented or who declined to participate in the study.

#### *Initial Contact*

The participants completed the informed consent application on SurveyMonkey.com if they were interested in taking part in the study. Within five days of posting the survey, I checked SurveyMonkey.com on a daily basis to see who was interested in being in the study and to obtain their information (i.e., email information, pseudonym, and phone number). I then communicated with the participant by email, introduced myself, and emailed him a copy of the questions for the first interview (see Focused Life History interview questions in Appendix C) to review, giving him a day to review the questions. I then contacted the participant by phone. Through my initial phone contact, the participant was given the opportunity to inform me of questions that he did not want to answer and also specified an interview time with me. I also went over the interview process with the participant and informed him that he could refuse to answer a question and that he could end the interview at any time without penalty.

## *Interview Design*

I used the *Three Interview Series* design as outlined by Seidman (1998). The research design consisted of three 90-minute, audiotaped interviews with men who were currently or formerly on the DL. Seidman's interview design consists of:

1. *Focused Life History*, in which the interviewer's task is to put the participant's experience in context by asking as many questions as possible about the interviewee in light of the topic up to the present time. The Focused Life History interview reconstructs the participant's early experiences (e.g., family, school, friends, neighborhood, and work). The researcher does not ask "why" questions, but open-ended, "how" questions in which the participant reconstructs past experiences (see Focused Life History interview questions in Appendix C).
2. The *Details* interview (see Details interview questions in Appendix D) that illustrates the participant's experience and focuses on the heart of the data. The purpose of the Details interview is to concentrate on the concrete details of the participant's present experiences in the topic area of the study. The participant reconstructs the details. The researcher does not ask participants for opinions, but for actual details of their experiences. For example, one of the interview questions I asked participants was, "Tell me about an experience in church where you heard a sermon in which the preacher condemned gay and lesbian individuals."
3. The *Reflection on the Meaning* interview is the final interview of Seidman's Three Interview Series. In the Reflection on the Meaning interview, the participant is asked to reflect on the meaning of their experience. Meaning in this context addresses the

emotional connection between the participant's work and life (see Reflection on the Meaning interview questions in Appendix E).

### *Exploration Versus Probing Questions*

For data to be in-depth, Baker (2006) stated that the researcher must probe and explore the issues that the respondent brings up during the interview process. However, Seidman (1998) cautioned researchers about probing questions in phenomenological interviews. Seidman believed that the use of probing questions by researchers has the potential of making the interviewee defensive. He suggested that the interviewer listen more to the stories of the participant, and incorporate the use of *exploration* (rather than probing) of the participant's personal experiences.

### *Interview Protocol*

At the beginning of the first audiotaped, telephone interview (Focused Life History interview), I introduced myself and informed the participant that he could skip any interview question that he did not want to answer, or he could end the interview without penalty. With the interviewee's consent, I asked a set of questions pertaining to the participant's family-of-origin and how they viewed same-sex relationships, friendships, initial contact with the DL community, and information about his educational and religious background.

Two days after the first interview, each participant was e-mailed a transcript summary, which contained a synopsis of the participant's responses from the interview questions, for his review. This transcript was provided in a summary form because a transcript of the entire interview might be too overwhelming for some of the participants to review, whereas a brief summary would be feasible to evaluate. In a follow-up phone call, I asked the participant if he reviewed the summary transcript and if he felt remarks during the first interview were accurately

represented in the summary or if there was any information he wanted me to remove. During this phone call, I also scheduled the second interview.

The second interview (the Details interview) was conducted within five days of the first interview. I asked the participant a set of questions about his experiences living on the DL and details about the DL culture. Two days after the second interview, the participant was emailed a transcript summary for his review and approval. In a follow-up phone call, I asked the participant if his remarks during the second interview were accurately represented in the summary or if there was any information he wanted me to remove. During this phone call, I scheduled the third interview. The third interview (the Reflection on the Meaning interview) was conducted within five days of the second interview. I asked the participant a set of questions about his reflections on living on the DL, about what it meant to be an African American man in our society, about his meaning of African American masculinity and its importance in his life, and his views about HIV/AIDS in the African American community. Two days after third the interview, the participant was emailed a transcript summary for his review and approval. In a follow-up phone call, I asked the participant if his remarks during the third interview were accurately represented in the summary or if there was any information he wanted me to remove. The audiotapes were locked up until the end of the dissertation study at which time they were destroyed. The timeframe I described in this paragraph was optimal. I was aware of the need to be flexible and allow for extra time in case an interviewing date or time needed to be changed (see Interview and Data Collection Timeframe in Appendixes L and M).

#### Data-Analysis Methods

In this section, I described the steps of analyzing the data from the interview transcripts. I discussed the use of the data analysis phases described by Seidman (1998) and Moustakas (1994)

including epoche, bracketing, and horizontalization. I also discussed how CRT was used to analyze the themes.

### *Transcribing the Interview*

I transcribed the interviews. Seidman (1998) stated that interviews produce an enormous amount of text. Seidman continued that the researcher's consciousness plays a major role in the interpretation of the data. Ziebland and McPherson (2006) noted that transcribing interviews is itself a research act. Ziebland and McPherson stated that qualitative data analysis should begin at the early stages of data collection. To identify emerging issues is important during the data collection and analysis as well as issues that the researcher may have anticipated (from examining the literature or through personal experience). Ziebland and McPherson noted that researchers do not limit the analysis to the issues that they initially deem important or provocative. The researcher seeks those factors that emerge from the data (i.e., topics that were not specifically asked about during the interview, but which, directly or indirectly, were raised by respondents). Primarily, the researcher seeks and examines emerging as well as probable themes.

### *Epoche*

Moustakis (1994) described the epoche as a Husserlian term, in which researchers free themselves from suppositions and abstain from prejudgments. In the epoche phase, biases and preconceived notions are invalid. In this phase, it is important for me as a researcher and as a counselor to refrain from making unfounded assumptions, predicting cause and effect, and coming to premature conclusions. Working in a reflexive journal in order to reflect and detail the research on paper helped me to stay aware of my responsibility to be impartial to my participants.

### *Bracketing*

My first step in analyzing each participant's transcript was to reduce the text in each transcript to what is important and meaningful. Moustakas (1994) noted that the process is inductive, rather than deductive. According to Seidman (1998), *bracketing* is the process of selecting and isolating passages in a transcript that are meaningful, important, and focus on the research study. I completed this process by highlighting passages throughout each transcript. Through close reading and judgment about each transcript, I was able to reduce the text by isolating and selecting passages in the transcript that were important and relevant to this study, that provided answers to my research questions, and that reoccurred in each participant's interview transcript. The remaining transcript was removed so that the entire research process was rooted on the topic in question. According to Moustakas (1994), bracketing clears and purifies texts that is selected as important in the research study, and prepares the researcher for obtaining new knowledge.

### *Horizontalization*

Moustakas (1994) described horizontalization as, "Unlimited horizons...we can never exhaust our experiences of things no matter how many times we consider or review them" (p. 95). Moustakas explained that during the horizontalizing process, every statement is initially treated as having equal value; then irrelevant statements (i.e., statements that are not relevant to the study or that add no new knowledge to the study) are deleted, leaving only the horizons, which are those statements that are textual meanings and pertinent elements to the phenomenon. In each transcript, I only retained passages that were bracketed (i.e., highlighted) and removed passages that were not relevant to this study, that did not include additional new knowledge to the collected data, or that did not reoccur in each participant's transcript. Moustakas noted that

the horizons are then clustered into themes, which are then organized into coherent, textual descriptions of the phenomenon.

### *Making Thematic Connections*

With the remaining passages that have been bracketed into horizons (i.e., passages containing information relevant to my study), I was able to create a connection of themes about the research data. The themes consisted of reoccurring passages that are present in each participant's transcript. Ziebland and McPherson (2006) found that in order to write up a qualitative study, it is necessary to identify the story that is supported by the data, and not the story that the researcher would like to tell. Ziebland and McPherson noted that qualitative interview studies explore the experiences, meanings and priorities of a particular group of people sharing similar circumstances. The resulting data tend to be rich, with the potential for many different analyses. However, some themes are more likely to produce new, useful (and publishable) papers than others.

### Creating Profiles

After I created my themes, I was also able to create a profile of each participant's real-life experiences on the DL. In sharing the interview data, Seidman (1998) described the process shaping and reducing the material into a form where it can be shared or presented to others as profiles and vignettes. According to Seidman, *profiles* consist of relevant individual passages that are marked and grouped into categories, and *vignettes* are shorter narratives limited to aspects of the research participant's everyday experience. Profiles of participants are usually holistic having a beginning, middle, and ending, and consist of a conflict that is resolved by the end of the profile format. Profiles allow the researcher to present (to others) the research participant in context and allow the researcher to open up the interview material to analysis and

interpretation. Profiles enable the researcher to share what they learned from the interview (through narratives). According to Seidman, the profile is the researcher's finished product (See the participants' profiles in Appendixes O through T).

### Using CRT in Data Analysis

CRT can be used to provide insight into the ways that race, sexuality, and gender shape the lives of African American DL men, either as separate entities or through intersectionality (i.e., an overlapping of these factors). In this study, the CRT concepts of storytelling and counterstorytelling were used by allowing the research participants to give a narrative (in the form of pivotal stories) of their experiences on the DL through the interviews. During the interviewing process, the participants had the opportunity to tell their stories that countered with those told in the popular culture literature about African American DL men. During data analysis, I used CRT to determine the impact that race, gender, and sexuality had in shaping the lives of African American DL men by observing and noting any emerging themes pertaining to race, gender, or sexuality that resulted from analyzing the transcripts by hand and with QSR NVIVO qualitative software. The participant's narratives were also a part of their profiles, and intersectionality and counterstories were also identified in the profiles.

### The Researcher as Analyst

I, Priscilla Wilson, am the principal investigator of this study. I am a doctoral student in counselor education at the University of Alabama and have currently been awarded my Ph.D. I have several years of counseling experience working at two mental health centers and three social service agencies in Anniston, Gadsden, and Tuscaloosa, Alabama. I have several years of experience working as a graduate research assistant at the University of Alabama regarding a mix-methods study about family literacy with students considered at-risk. I completed a

quantitative research study of counseling students at the university regarding their opinions about depression in adolescents.

### The Qualitative Software Program

QSR NVIVO was the qualitative software program that I used in this study in order to generate and review emerging themes about the data. I began the coding analysis of the main research study by hand (bracketing, horizontalization, making thematic connections) and followed-up using qualitative software (NVIVO). According to Carroll (1997), NVIVO is able to assist with qualitative theory building in (a) managing transcribed text, (b) managing and exploring ideas about the data, (c) linking ideas and constructs about the data, and (d) generating reports. Emerging categories can be explored and added onto without losing any of the previous data. Indexes can be modified according to emerging categories. However, the computer program cannot replace the thinking and interpreting of the researcher, and the decision-making about what counts as relevant data is still in the realm of the researcher. In using qualitative software versus creating thematic analysis by hand in qualitative data inquiry, Seidman (1998) recommended beginning the analysis on paper and then transferring the analysis to the computer. Seidman reasoned that there are differences between the findings, interpretations, and responses one sees in a report presented on paper compared with what one sees presented on the computer. According to Seidman, relying solely on screen text rather than paper affects the message the researcher retrieves.

### Triangulation

During the data analysis process, I continuously reviewed and compared my collected data with the transcripts and information I found in the popular and professional literature. Oliver-Hoyo and Allen (2006) defined triangulation as the “careful reviewing of data collected

through different methods in order to achieve a more accurate and valid estimate of qualitative results for a particular construct” (p. 42). Johnson and Waterfield, (2004) described triangulation as a qualitative method that requires the researcher to examine data collected from different sources or by different methods or researchers, or findings drawn from different analytical procedures.

### Pilot Study Summary

As a preliminary step to this study, a pilot study was conducted. The results from this pilot study assisted me in revising the interview format and protocol, and in revising the final form of the research and interview questions based on the pilot participant’s responses. In preparation for the pilot study, I received IRB approval (see IRB approval for the pilot study in Appendix D). I created an account on Netzero.com for the purpose of communicating with the potential participants. Then I recruited participants from a Yahoo.com chat room. I sent them an email (through Netzero.com) about the study and gave them the opportunity to read more information about my research (through a link on Surveymonkey.com) and to consent or decline to be in the study. Six individuals consented, and I selected one of the participants (“Ace”) to be in the pilot study. I initially communicated with Ace through an introductory email in which I sent him the interview questions and asked for a phone number. He emailed me back that he had no problem answering the questions and enclosed his phone number. Then I called him the next day and discussed the interview process and his rights as a research participant (as was stated on my informed consent).

We scheduled an interview time. After the interview, I emailed Ace the entire transcript (which was 47 pages) for his review, and Ace emailed me that the interview accurately represented his comments. I scheduled a follow-up interview with Ace three days later, and

emailed him the follow-up interview transcript. Through an email, Ace informed me that the follow-up transcript accurately represented his comments. The transcript was then bracketed and analyzed for concepts, categories, and themes (see Themes from Ace's Interview in Appendix E). The transcript was also analyzed using QSR NVIVO qualitative software program in order to generate and review emerging themes about the data. Then I was able to create of profile on Ace (see Ace's full profile from the pilot study in appendix F). The pilot study was very helpful in allowing me to revise my research and interview questions, email interview summaries to the participants instead of the entire transcript, amend the interview process by using Seidman's (1998) three interview series, and restructure my interview protocol for the main study.

### Summary

In this chapter, I described the method of research and data collection, and discussed a pilot study conducted with an African American man who was on the DL for over six years. Qualitative research offers a pragmatic, in-depth, and humanistic method of exploring phenomena and examining information on concepts, populations of people, or both as the concepts relate to the population in question. Interviewing in this research study will assist me in investigating and understanding life on the DL as told by the African American men who lived this experience.

I described the Critical Race Theory theoretical framework and the phenomenological methodology. I selected the narrative aspect of CRT in the form of storytelling and counterstorytelling because it allowed the participants to give their stories about how they experienced life on the DL and allowed them to counter the stories, perceptions, and images that have been told about African American DL men in the media. Through forging a discourse based

on trust and providing a channel to convey their stories, I was able to engage the participants in conversation in order for them to share their real life experiences from their worldview.

In the process of completing a pilot study that has informed the construction of the proposed research, the participant (Ace) shared with me his belief that counselors were unaware of the DL and could not assist men living that lifestyle because they have no knowledge of the DL man's experiences. Through this study, not only did I have the opportunity to view the world through the lens of African American men on the DL, but counselors will have the opportunity to look at the world through the experiences of Ace and other African American DL men. The DL is sensitive subject, but it is also an important and life-saving subject as well.

## CHAPTER IV

### PHENOMENOLOGICAL RESULTS

The purpose of the study was to examine the experiences of men who identify as being on the DL and the factors that shape a sexual identity that encourages these men to live a double life. Professional, scholarly literature, and popular culture literature was reviewed pertaining to the DL culture, the history of this population of men, and the reasons why the DL phenomenon currently receives attention. Through discussions with African American men who are or have lived in the DL culture, the phenomenological data analysis provided insight on how family, church, and community framed the participants' perceptions of the gay community, the issue of African American masculinity and its significance to the sexual identity of these men, mental health problems that were possibly associated with the participants' need to hide their sexual feelings towards men, and the possible consequences of disclosure of the participants' sexual identity.

In presenting and discussing the themes that arose from the data, the analysis addresses the following research questions:

1. How have the lived experiences of DL men been shaped by
  - a. Their family?
  - b. The African American church?
  - c. The African American community?
2. How have the lived experiences of DL men shaped
  - c. Their sexual identity construction?

- d. Their understanding of masculinity?
  - e. Their mental health disposition?
3. What is the mental health impact that African American men experience being on the DL?
  4. What reasons do African American men who struggle with their same-sex attraction give in considering whether or not to seek counseling or mental health services as an option?

This chapter is divided into two sections. The first section is a brief review of how the participants were recruited along with an introduction of the participants. The second section contains a description of how the themes that arose from the analyzed data were formulated.

#### Recruiting Participants

Potential participants were from Yahoo.com groups and chat rooms (Nubian New Yorkers, What the Fuck?, The NY Urban X-Change, Gay Black Men News, The Brothers Urban Hang Site, The DL Chronicles). These Internet groups focused on men who self-identified as on the down low (DL), African American men who have sex with men (MSM), or same-gender-loving (SGL) men. With the permission of the moderator of each group or chat room, initial contact letters were posted on the websites (See Appendix A) in order to recruit participants for the study. Those who read the initial contact letter had the opportunity to click on a link to [surveymonkey.com](http://surveymonkey.com) in order to read the informed consent form and consent to or decline from participating in the study.

#### *Characteristics of the Sample*

Although 900 introduction letters were emailed, only 33 men viewed the informed consent form on [surveymonkey.com](http://surveymonkey.com) for the main study. Of this group of men, 25 men consented

and 8 men declined to be in the study. In order to initiate interview data collection, the first set of interview questions (See Focused Life History interview in Appendix C) were sent out to 25 men who had agreed to take part in the study. After three days, the men were contacted by email or phone (depending on their contact instructions) in order to schedule the initial interviews.

The day before the participants' interview, an email was sent out to confirm the interview day and time. Thirteen of the participants did not reply to the emails or phone calls so they were removed from the study and a termination letter was emailed to them (See Appendix H). The other 12 men who confirmed interview times were then interviewed. From this pool of participants, five of the men identified as being gay and never lived on the DL and one participant dropped out of the study before completing the final interview. Consequently, the data presented in this research is comprised of interviews with six men, each of whom completed three interviews (See the Focused Life History, Details, and Reflection on the Meaning interviews in Appendixes C, D, and E). Characteristics of these participants included that they reported (a) being African American men, (b) they were 19 years of age or older, and (c) they formerly or are currently living in the DL culture. Each of the participants who consented to be in the study provided a pseudonym, e-mail address, and a contact phone number. All of the interviews were conducted between January and March 2008.

#### The Participants

Using their pseudonyms, the African American men who participated in the study were "Ooma," "Jahmall," "Lenard," "Shawn," "Daniel," and "Jack." "D" participated in this study, but dropped out before completing his final interview. Below is a brief background description of each participant including their age or age range, where they live, the composition of their nuclear family growing up, occupation, level of education they completed, marital status, the number of years they lived on the DL, and their present sexual identification.

### *Ooma*

Ooma is in his mid-60s and lives in the New England area. He grew up with both parents in the household, along with an older sister and his grandmother. He is retired, but has been a professional musician, worked in the insurance industry, and worked with the Urban League as an openly gay HIV/AIDS outreach educator. He is college educated. Ooma was married twice and has two children. Ooma lived on the DL for 13 years (during his marriages, he lived concurrently on the DL). Pertaining to his sexual identity, Ooma stated, "I say gay just to keep it simple. I prefer Ooma, but I just say gay."

### *Jahmall*

Jahmall is in his mid-30s and lives on the West Coast. Jahmall attends college and is a blue-collar (factory) worker. His grandparents raised him. Jahmall stated that his mother was in his life and he occasionally visited his father who lived in another state. He dated women, but never married. Jahmall was on the DL for about 10 years of his life. Pertaining to sexual identity, Jahmall stated, "I don't know. I don't like labels. I'm not DL. I'm more bisexual I guess."

### *Lenard*

Lenard is in his early 30s and lives in the Midwest. He works in the public health field. He is college educated. He grew up in a two-parent home with two other siblings. His grandparents were in his life, but were not instrumental in his upbringing. Lenard dated women, but was never married. Lenard lived on the DL for eight years and still lives on the DL. Pertaining to his sexual identity, Lenard stated that he is bisexual.

### *Shawn*

Shawn is in his mid-20s and lives on the East Coast. Shawn grew up in a blended family with his mother, stepfather, half-siblings, and stepsiblings. His biological father remarried and

remained in his life. Shawn is a full-time college student. He dated women, but never married. He lived on the DL for seven years. Shawn is now exclusively dating men, although he has not disclosed this information to his family and friends. Pertaining to his sexual identity, Shawn stated, "I don't like labels. I don't deal with that."

### *Daniel*

Daniel is in his mid-30s. He lives in the South, but is originally from the Northeast. Daniel is college educated and works in the administrative department of a university in the Southeast. Daniel grew up in a two-parent household and had a special aunt who was like a second mother to him. She had children who were close to Daniel. He lived on the DL for two years. Daniel dated women, but never married. He now lives with his boyfriend and they have been a couple for over six years. Pertaining to his sexual identity, Daniel stated, "It varies. Sometimes I'm bisexual; sometimes I'm SGL."

### *Jack*

Jack is in his late 30s and lives on the Northwest coast (originally from the South). He is college educated and works in human resources. Being an only child, Jack grew up in a household with his mother and later, when he was 14, a stepfather. He spoke of two cousins he was close to when he was growing up, as well as his maternal and fraternal grandparents. Jack lived on the DL for about 10 years. Jack dated women and was engaged for a time, but broke off the engagement. He is currently not in a relationship and stated that he sexually identifies as MSM.

### *D*

D is in his mid-20s and lives in the Northeast. He works in law enforcement and did attend college, but did not receive a degree. D grew up with his parents, grandmother, and sister.

He lived on the DL for about six years. D dated women, but was never married. Because D dropped out of the study before completing the third interview, he was not able to discuss his sexual identity.

### Themes Generated from the Research

The interviews were transcribed upon completion and analyzed by hand using the phenomenological strategies of Moustakas (1994) through bracketing, horizontalization, and generating themes. After analyzing the data by hand, QSR NVIVO qualitative software was used to generate codes (a word or phrase used to represent the information bracketed from the lines of text). The codes were then assigned to a node (or category). Because some nodes were referenced frequently, *parent nodes* (main nodes) and *child nodes* (subsets of the main nodes) were created. QSR NVIVO keeps a tally of the number of times a node is coded (referenced). Five top nodes were generated into themes because the participants repeatedly referred to the nodes in the transcripts, the nodes were referenced upon in the scholarly and popular culture literature, and the nodes provided answers to the research questions. In analyzing, interpreting, and sharing research findings from his transcripts, Seidman (1998) developed themes from passages that he found interesting, parts of the transcript in which patterns were present (e.g., the repetition of aspects of previously mentioned experiences in the transcript), from excerpts of one participant's experience that were similar to another participant's experience, or from excerpts that referenced the literature on that particular subject. The five nodes from which themes were generated were (a) Family and Community Influence, (b) Masculinity and the DL (c) the African American Church, (d) Mental Health Concerns, and (e) Disclosure and Coming Out (see Nodes and Subnodes Used in the Study in Appendix N). Some of the themes overlapped (e.g., Family and Community Influence may include some reference to the African American church).

## Family and Community Influence

The theme Family and Community Influence included node categories “Family and Friend’s Influence,” “Family Belief System,” “Family Discussions” (about people who were gay and lesbian), and “Friends Influence.” This node contained 57 references (from the bracketed transcript) into QSR NVIVO, which was compiled into one theme, Family and Community Influence. This theme was based on how family, friends, school, and members of the community influenced the participant’s construction of what it meant to be a gay man.

The participants’ perceptions of gay men were shaped by the belief system of their family members, school experiences, or their community (or combinations of these factors). Five of the participants’ described family members, classmates, or community members who had negative perceptions about individuals who were gay. Jahmall talked about his father’s side of the family. He stated that some members of that side of his family described gay men as “sissies,” and “faggots.” He developed an apprehension about visiting his father’s side of the family because their negative attitudes towards gay men. Jahmall went on to discuss a distressing experience he had when he visited his father’s family and how it affected him. Jahmall was 10 years old at the time:

I had a Jherri curl. I had longer hair... so [the mother of the church] called me a sissy in front of adults and children. I remembered almost wanting to sink into the floor. I was so embarrassed. After that incident and other minor incidents- things being said by adults to me- I started to feel like that I have to change myself to make them happy. (Personal Interview)

Shawn described his father’s belief system and his father’s perceptions of people who were gay. Shawn’s father is a minister and believed individuals who were gay were condemned. Shawn’s father also gave his beliefs about what it is to be a man and how to raise a son to be a (heterosexual) man:

They were- both sides- my dad's side and my mother's side were completely against it. I don't think we had anybody in the family that was known to be homosexual, and going by my father being a pastor, he always talked about how wrong it was. How the gays are going to hell and all that kind of stuff. (Personal Interview)

Ooma recollected his mother's warning she gave to her children when he was growing up that revealed her negative feelings towards the gay community. Her opinion about the gay community changed when her son disclosed his sexual identity to her when he became an adult:

My mother, on the other hand, I always remember her sharing a story with me that basically resulted in her saying if any child of hers ever was caught doing what she had described in her story, she would disown them, you know. And those were the early years. Her attitude did a complete opposite many years later. (Personal Interview)

Two participants described negative experiences they endured or witnessed at school and discussed their reactions from these experiences. Daniel described how students in school would constantly tease and harass him, which resulted in him developing low self-esteem- an overlapping of the theme Family and Community Influence with that of Mental Health Issues. Daniel could not understand why the students harassed him. Daniel spoke slowly, laughing nervously at times, when he reflected on incidents that happened to him in school:

Actually, a lot of times depending on who it was and which day of the week it was, they were coming after me. I can remember [in the] 5<sup>th</sup> or 6<sup>th</sup> grade, that was the cool thing was to call Daniel "gay" (laughs) and I guess I don't know if I was a little mature for my age, or a little more aware because I remember saying, "Do you really think I want to have sex with another man"? (laughs) "Why did you say that? I didn't understand why." It definitely wasn't good for my self-esteem because I remember in the 8<sup>th</sup> grade walking with my head down. (Personal Interview)

Jack recalled an incident in junior high where he witnessed a student being harassed because other classmates thought the student was gay. Jack described how this incident affected, suggesting a personal rejection of being gay:

I remember seeing a young guy who was being called punk and sissy and he was being pushed around and picked on and people were laughing at him and that happened and again, it just kind of reinforced for me not wanting to be whatever that was. (Personal Interview)

Jack was asked if school administration intervened pertaining to this incident and if he was ever harassed by other students. Jack responded that no one in school administration assisted the student and believed no support structure was present in the school.

Negative perceptions of gay men were reflected by members of the community as five of the participants noted. Shawn talked about the community where he grew up and how gay and lesbian individuals were perceived and treated by residents, indicating homophobic attitudes shared by community members:

I mean, name-calling, don't want to hang around them, my son is not going to hang around your son and all this kind of stuff, like it was a contagious disease- stuff like that...I don't know if it's just the African American community, but like if a child is gay, then another parent wouldn't want their kids to hang around that child because they'd be scared that the gay child would introduce the child to something. (Personal Interview)

Jack discussed his mother's homophobic belief system and that of community members during his childhood. Jack noted that the renouncing of gays and lesbians permeated throughout his community in his home, school, and church.

My mother was kind of the primary person in the household, but being in the south, there was a community that was kind of focused on not validating gays and lesbians and it permeated from the church to kind of the different behavior you saw exhibited at school. So it was more of the social context of a person. (Personal Interview)

The belief systems of five of the participant's family, classmates, or community members negatively affect (to varying degrees) how the participants viewed men who were gay when they were growing up. The five participants viewed gay men negatively in that being gay was wrong; was not desired; may result in the individual being rejected by his family, friends, and community; and resulted in an individual going to hell- indicating an overlapping of the theme Family and Community Influence with that of the African American Church. The participants knew that being gay was an identity that they did not want to be.

Each of the participants was asked if they shared in the belief system of their family, classmates, or community when they were growing up. Jahmall answered that at that time, he did share in his family's beliefs. He felt that when he became an adult, he would have to distance himself from his family in order to be himself:

Yeh, I did. I felt that, from an early age I figured out that I was different. I was probably around 8 or 9 and at an early age I decided that when I grew up I would have to go away from my family in order to be true to myself. So yeh, I did feel- I felt condemned.

(Personal Interview)

Growing up, Ooma discussed his mother and father's beliefs and attitudes towards gay men and how he was shaped by those beliefs. He believed some that there was some degree of shame in being gay, and he knew that he did not want to be like or associated with anyone who was gay:

I'll say that the only beliefs that I may have shared at the time was that there was some degree of shame, but there was something about it that wasn't right. I did find myself kind of laughing at them because of the fact that this is a man who's acting like a girl.

(Personal Interview)

Jack was asked if he shared in the belief system of his family and of his community. Jack replied that although he did not share in their belief system, he was aware enough of the opinions of the community to know that he did not want to be gay:

No. What I knew was that whatever they were talking about, I was mindful of not wanting to be that-not understanding how to distinguish between what they were saying and what not being that meant. (Personal Interview)

Although five of the participants remembered negative experiences at home, school or in the community, Lenard commented that the subject of gay and lesbian individuals did not come up in family discussions, nor did family members share their feelings about gay men. Lenard stated:

I thought about each of those sectors very thoroughly and they never had any homophobic behavior whether it's friends, grandparents, siblings, or the parents. I never heard anything really bad other than derogatory terms people may be called as far as slang or terms used in the hood, but they were never any of "those people who are mad,"

or “stay away from those people,” or “I don’t ever want to see any of my kids grow up that way.” None of that kind of stuff. (Personal Interview)

Lenard noted that since his family did not display their feelings about individuals who were gay, his beliefs about gay men were not shaped by them or his community. Lenard explained that his experiences, his exposure to different types of people, and his educational background helped shape his belief system:

I would say that it didn’t influence me. The reason why I answered that question that way is because I had to think about the other things and beliefs and values that they had and how they influenced me, and I really am such an independent thinker that I truly feel that I know- I can honestly say that even if they did have attitudes towards that, I would have said sorry you feel that way and I would have my own beliefs. (Personal Interview)

The theme of Family and Community Influences described how five of the participants’ construction of being gay was shaped by members of their family, the experiences they endured or witnessed in school, and the community in which they lived. The theme overlapped with that of the African American church (in that the church had a significant influence on the beliefs of the participant’s family members and on individuals who lived in the community) and Mental Health Concerns (as described by Daniel in middle school that resulted in his developing low self-esteem). This theme provided the foundation upon which the African American participants formulated their sexual identity construction that they used to view themselves.

### Masculinity

Masculinity was a node that was referenced to 45 times on QSR NVIVO. The participants discussed masculinity in terms of the definition and traits, in terms of its history in the African American community, in terms of the importance of being an African American man in American society, and in terms of how it affects being a gay African American man.

#### Definition and Traits

The participants defined masculinity as a characteristic describing strength, assertiveness, protectiveness, and confidence. Additionally, Ooma defined masculinity as the opposite of femininity and Lenard noted that a masculine man is mindful of not doing anything that would be characterized as feminine:

Masculinity to me means strength and character and honor and discipline... [My father and grandfather] they're aggressive men, and they're assertive and they're dignified and proud, and [pause] they can admit that they made a mistake [pause] that's mine. That comes from me. (Daniel, Personal Interview)

When I think about masculinity, I think about a smell. I don't know if I can describe the type of smell I'm talking about, but I think about a smell. I also think about an over-exaggerated, take-charge, protector, and confident qualities when I think about masculinity. (Shaw, Personal Interview)

I looked upon the term masculinity as being the opposite of feminine. A masculine man does not act like a woman or exhibit feminine characteristics. (Ooma, Personal Interview)

I would say that...that's very subjective of course, but I would say it means portraying the stereotypes, the stereotypical male demeanor or the male role in our society or whatever society you're living in. That would mean having a strong demeanor, a strong personality, not perceived to be weak in any way, and to do what men tend to do- walk like men tend to walk, talk like men tend to talk- and not be mistaken for doing anything that's similar to what women's stereotypes are. (Lenard, Personal Interview)

Jack mentioned how masculinity helped shape the DL culture. Men in the DL culture rejected being perceived as not masculine. DL men rejected being labeled as gay for DL men interpret gay to mean feminine, the opposite of masculine:

Overtime I think the term shifted from being DL or even a level of discretion to being a label that men could choose somewhat to assert their level of masculinity, because before they did not want to be labeled as sissy, fag, or punk, or not even wanting to be called gay. So it became a letter of if you were on the "DL," that means straight acting, straight appearance. (Personal Interview)

## *History*

Ooma discussed masculinity in the context of the history of what it means to be an African American man in America. Ooma felt masculinity was a quality that Black men used to prove their self-worth and strength in American society:

Whereas masculinity is important to most men regardless of race, for African American men who I feel are still looked upon as being less than, masculinity is another way of proving to others as well as ourselves that we are in fact as good as any other men- that we are not weak or worthless. Something which many slave masters tried to instill in us and others. So yes, I can see where masculinity is very important. (Personal Interview)

## *Masculinity and African American Men*

All of the participants in the study agreed that masculinity was important to African American men. The participants felt it was important in terms of being seen as strong in their families and in their communities.

I think it is important. I think it's important for families and our communities to have a masculine man because a lot of times masculinity is seen as strength. I think our families and our communities need to see strength in a man...when I say strength I'm talking about standing up for what a person believes in, the take-charge, confident, the foundation- that's what I'm talking about. (Shawn, Personal Interview)

Lenard felt that masculinity was important because perceived masculinity was one aspect of their lives in which African American men had control. Lenard discussed aspects of society that he felt were outside an African American man's control, but stated that masculinity was the one important thing a Black man could manage about himself:

... we tend to focus on the reality that we can't control much that happens with us...we can control how people think of us. We can't control how much money we make. We tend to be low on the totem pole with a lot of things. So one of the things that we can control would be ourselves and our possessions. So I think it's very important to African American men because we need to be able to control ourselves and be dominant over something or else we'll always feel weak and a victim in everything that we do. (Personal Interview)

### *Masculinity and Being Gay*

The participants were asked, “Does being a gay, African American man make that person less masculine? Can an out-of-the-closet, gay, African American man ever be masculine”? All of the participants responded that being an African American man and being gay does not make the person less masculine; however, Shawn personally believed that if a gay African American man disclosed his sexual identity to the public, he was seen as less masculine. Shawn was asked to explain his answer and replied that many DL men “have the same homophobia and they believe the same stereotypes as other people.” Jahmall did think that society and some members of the African American community might see an out-of-the-closet, gay, African American man as being weak.

In society’s eyes yes. To me, no because I don’t think that- again the definition of masculinity goes beyond physical toughest and roughness- I actually know more gay men who are masculine in my opinion as far as men who are able to take care of their responsibilities and really understand who they are and understand other people in their lives. I believe that being gay doesn’t mean that you’re not masculine, that you can’t be masculine. (Personal Interview)

All of the participants believed that an out-of the closet, gay, African American men possessed inner strength because of the added burdens they would have to face on a day-to-day basis (i.e., being an African American male and being gay). Using Daniel’s response as an example, each participant felt like these were men to be admired:

I don’t think it makes him less masculine...having an extra set of bags to carry makes him a lot stronger. So I’m not going to say that I’m stronger than my straight, male counterparts, but I know that I have more to deal with than my straight, male counterparts (Daniel, Personal Interview)

The theme of masculinity builds upon the framework of Family and Community Influences in that it shaped how the participants felt their sexual identity should be viewed. In their words, masculinity shaped the participants perceptions of African American men and how

they felt African American men were suppose to behave in their homes, communities, and in American society.

### The African American Church

The African American church was mentioned frequently as a shaping tool in the lives of the participants pertaining to their sexual identity construction. The African American church was referenced 38 times on QSR NVIVO. All of the participants attended church as children and three of the participants continue to attend a church as adults, although not the church of their childhood. Growing up, the participants came from different denominations (Baptist, Pentecostal, Catholic, AME [African Methodist Episcopal], Non-demonational, and Lutheran). Three of the participants stated that their pastors talked about gays and lesbians during their sermons and that these sermons were predominated by negative commentary about the gay culture- that same-sex relationships were wrong, were abnormal, and that hell was the ultimate punishment for being gay or lesbian.

Three of the participants (Jahmall, Daniel, and Shawn) talked about significant events that occurred in their church that made a profound impact on their conceptualization of gays and lesbians and on how they viewed themselves. Jahmall described a ritual that took place in the church in which his grandmother and other church members attempted to “drive demons” from a woman who was thought to be a lesbian. The ritual consisted of Jahmall’s grandmother “calling them [the demons] out of her” (personal communication, February 7, 2008) and the woman leaving the church before the ritual was completed. Jahmall personalized the experience:

... I remember my grandmother saying something along the lines of her dying if she walks out [the church] door...at the time I was scared. I was terrified. So is this what I have to look forward to? So that was the most pressing experience for me. I don't remember anything else like that. That really sticks with me. It really affected me. (Personal Interview)

Daniel stated that he did not hear sermons about or critical of gays and lesbians as a child. Daniel did describe an experience he had when he and his aunt went to church when he was 21 years old. He was on his way back to college and his aunt wanted the pastor and congregation to pray for him at the altar after church. His aunt suspected he was gay and without his knowledge blurted out her suspicions during the prayer. The unexpected outburst from Daniel's aunt surprised him, for he was still constructing his sexual identity:

So after church and we're at the altar they're praying and speaking in tongues and Aunt L blurted out, "Please take these homosexual feeling away from Daniel," and I was like what? Oh my gosh. How do you know, and why don't I know because at that time I didn't know. (Personal Interview)

Lenard said he went to church as a child, but stopped going when he was 12 years old.

While attending church, Lenard stated that he heard no sermons about or admonishing gays and lesbians. As an adult, he did hear sermons on television denouncing gays and lesbians, but that the sermons had no affect on his self-concept:

...a couple of people that I watch on TV have said that it's something you'll struggle with like drug addiction or premarital sex and everything else. It's a sin that you need to be delivered from. But I don't think it's [the sermons] anything that kind of shocked me or that I felt was wrong, or they shouldn't say this or that. I figured they are entitled to their opinions. I don't feel condemned or like I'm going to hell or anything like that because of what I choose to do. (Personal Interview)

Ooma noted that sermons about gays and lesbians were never mentioned in church when he was growing up. He noted that now as an adult he has heard sermons on television condemning the gay community:

I may have seen like or heard a couple of things on TV, but- you know, like Jerry Falwell or something of that sort, but it's like I listen to them all of half a minute and switch the channel. (Personal Interview)

### *Homophobia in the Church*

Five of the participants (Shawn, Jahmall, Leonard, Ooma, and Jack) discussed their views about homophobia in the church and discussed how they believed the church supported homophobia in the African American community. Shawn believed that the church and the lack of knowledge about the gay and lesbian community played a role in promoting homophobia in the African American community. Like Shawn, Daniel felt that the African American church and a lack of knowledge and acceptance of African American gays and lesbians in the community contributed to homophobia in the overall African American community. Daniel believed the lack of knowledge and acceptance stemmed from a tradition of generational homophobia in the African American church, family, and community:

I haven't experienced it personally, but I think the church has a lot to do with it [homophobia in the African American community]. I think a lot of times we can be closed-minded. Actually, I think that's the biggest contributor. We're closed-minded... I think because we tend to rely on our traditions a lot and traditionally there haven't been, or they would have us believe or we would like to believe that there haven't been a lot of Black, gay or Black, bisexual men in our families...and we don't want to talk about it. (Personal Interview)

Jahmall felt that homophobia did exist in the African American community, but Jahmall thought homophobia's existence was no greater than in the White community. Jahmall felt that the African American church contributed to homophobia in the African American community:

The church, from my experience. The church...just the fact that above and foremost it's a sin and usually presented as the greatest sin even though the Bible says that no sin is greater than the other. They're all the same. In the pulpit it's presented to the congregation as the most abominable sin. (Personal Interview)

Ooma felt the same way as Jahmall- that the degree of homophobia is no greater in the African American community than in the White community, but he suggested that the church's played a significant role in contributing to homophobia in the African American community.

The church –even though many churches are changing, but the church is because the various quotes from the Bible that it continues to use...there are those people that have no idea- the church preaches one thing, and then there are those people who are just ignorant [about] what being gay is all about. (Personal Interview)

### *Condemnation*

Both Shawn and Jahmall grew up in families where church was an integral part of their upbringing (Shawn's father is a minister). Growing up in a religious home, Shawn took part in daily church activities and believed that there was an ultimate penalty for being gay:

I grew up in the Christian home and we were in church like seven or six days out of the week because there was always some type of board meeting or choir rehearsal... I felt like the ultimate penalty [for being gay] was that nothing was going to work out as far as life. I was probably going to catch a disease and go to hell. (Personal Interview)

Like Shawn, Jahmall participated in church activities on a frequent basis. His grandparents were so deeply involved in church that Jahmall did not have time for extracurricular activities. Jahmall talked about how the messages he received from sermons at church affected his self-concept; namely, that he felt condemned. Jahmall painfully recounted listening to sermons denouncing individuals who were gay:

I didn't play sports because my family was so strict with church, and that's where I spent most of my time, at church... I felt on one hand, that I was normal because this was how I felt. I didn't feel that the way I felt was wrong, but on the other hand I felt that I was condemned to hell and that perhaps I would go to hell. (Personal Interview)

Jack stated that negative sermons about gays and lesbians took place at his church when was growing up. As an adult, he did attend a church that was affirming of gays and lesbians:

Typically in a standard, cliché way. It was, "You're an abomination. It's not natural. It's man-woman, Adam and Eve, not Adam and Steve. A lot of the old, tired clichés. I wasn't until years later when I joined another congregation that I began to actually understand more of the hypocrisy that existed in churches relative to the churches and what was being promoted from the pulpit as a means of control. (Personal Interview)

## Dissent

Four of the participants expressed their disillusionment with the African American church because of negative experiences they witnessed in church, sermons that rebuked same-sex relationships, and their realization that their personal beliefs being gay were not aligned with the beliefs of the church. Ooma discussed how he rejected the church for its negative stance on same-sex relationships and for what he perceived as hypocrisy:

I had distanced myself from church when I was in junior high school, primarily because of the fact that I couldn't accept the Bible as it was written. That had nothing to do with my sexual orientation- well, I didn't even know then, but it wasn't until I was an adult before- this is another point. It wasn't until I was an adult before I started hearing about God's view on- or some church's views on homosexuality. I definitely believe that God loves. (Personal Interview)

Jack said that he did not share the beliefs of the church about same-sex relationships. He spoke out about what he believed was hypocrisy that he experienced in the church:

If anything, it made me more mindful of hypocrisy because I remember being in high school and one Sunday the minister was talking about gays and lesbians and all that stuff and I remember thinking about hypocrisy around how many times we're taking up an offering plate to keep him in a new car. I was really beginning to identify the disconnect between what was being said and what was being practiced by the ministers. (Personal Interview)

Shawn felt frustrated with the church and stated that he no longer goes to his father's church. He shared an incident that happened at a mega-church he visited that further affected his relationship with the African American church. While attending the church service during one of the previous presidential elections, the "first lady" of the church (i.e., the pastor's wife) warned the congregation, "I'm not telling you who to vote for, but if you don't vote for Bush, don't come and complain to me when gays are getting married" (Personal Communication, March 10, 2008). Shawn did not return to that particular church. The experience did increase Shawn's resolve to develop his own personal relationship with God:

So right now, my beliefs are [that] you go to church because that's the place you get to fellowship with other people, but it's hard for me to find that place because it's so much retribution about the gay lifestyle. (Personal Interview)

Jahmall cut ties with the church, developed a personal relationship with God, and strengthened his inner locus of control. He admitted that he still struggles as he navigates himself in the African American community and around heterosexual, African American men:

I think I understand God's purpose a little bit better because I actually- I kind of cut my ties with the church and I didn't stop believing in prayer and in understanding the scriptures. I just actually stepped away from the institution of religion and I've actually found that within myself, I'm just more peaceful. I feel comfortable within my skin, but at the same time it's still a struggle because I'm so use to the Black community rejecting homosexuality and I desire respect from straight, Black men. (Personal Interview)

The theme of the African American Church shows how a cultural enclave such as the church can have a profound influence on how individuals construct their sexuality and on how individuals portray an acceptable, sexual identity in public. The church's negative views of gay men influenced how some of the participants viewed themselves and influenced their decision to remain silent about their sexual identity. These negative experiences, belief systems, and views impacted four of the participants to the point that they were disillusioned with the church and sought acceptance elsewhere or from within.

#### Mental Health Issues

Mental health issues affected four of the participants (Ooma, Jahmall, Daniel, and Shawn) in this study. With the exception of Lenard and Jack, the participants discussed mental health problems that they experienced at different points in their lives, including while they were on the DL. The four participants spoke of mental health problems they experienced due to feelings of guilt, confusion, religious condemnation, or shame about their attraction to men. These men discussed the sadness they experienced in trying to live up to the expectations of their family (especially their fathers) and not being able to express their true identity or their intimate

feelings for men. Mental health issues were referenced 39 times on QSR NVIVO. The mental health issues parent node was broken down into the child nodes labeled anger, anxiety, feelings of condemnation, depression, inner struggle, substance abuse, and suicidal ideation and attempt.

### *Anger*

Jahmall spoke of being angry because he was trying to hide the pain felt inside. During this time, Jahmall was in high school and dating girls. He hid his feelings of anger with substance abuse and by immersing himself in the hip-hop culture:

I masked the sadness with- I smoked weed, I got drunk, I participated in hip-hop culture full force. I was just an angry, Black man. There was no way to even understand that my anger or my participation with marijuana and booze and sex was a way to mask the pain that I had on the inside. (Personal Interview)

### *Anxiety*

Jahmall described a time when he was anxious and worried that his parents or family members suspected that he was attracted to men. Jahmall mentioned the fact that he had sabotaged several relationships with family and friends because he worried that they might find out about his sexual identity or if they knew, they thought negatively about him:

I'm sure that they [Jahmall's parents] suspect, but still that's not being honest to me...so there's always a question mark. Is he [this] or is he that? Why can't he keep a relationship? When is he going to get married? When is he going to have kids? Do I want to have kids? I do want to have children, but I can't even deal with who I am as a person. (Personal Interview)

### *Feeling Condemned*

Both Shawn and Jahmall said they experienced feelings of being condemned because of their feelings for men. The condemnation stemmed from both the beliefs of their family members and from the church (an example of the theme of Mental Health Issues overlapping with the themes The African American Church and Family and Community Influence). Shawn stated that he once believed that his being gay was a curse that the consequence his father's

adultery with other church members. Jahmall emotionally recounted his belief that because of his attraction to men, he was not chosen of God, but condemned. He spent many nights crying, praying that God would change him:

The message that I always received was to take it to the Lord in prayer [and] He would answer and He would change. I honestly spent many, many, many nights just wailing. I grew up in a Holiness church so I'm just crying and asking for forgiveness, actually taking the steps not to live in that lifestyle. (Jahmall, Personal Interview)

### *Depression*

Four of the men noted experiencing depression, either during their teens, while they were on the DL, or both. The men spoke of low self-esteem, withdrawing from their families, losing pleasure in activities, and feelings of sadness. Shawn talked about feeling down when he was growing up because his interests (reading and working on computers) and his father's interest (yard work and fixing cars) were dissimilar. Shawn did not believe he could fit into his father's mold. When he went to college, Shawn sought professional help for his depression and anxiety. Whereas Jahmall experienced depression as an adolescent, Ooma spoke of experiencing major depression as an adult and how he coped with his feelings- by playing the piano and drinking alcohol:

I was depressed during my teen years, I suffered from depression because I wasn't being true to who I was...I always felt disconnected from my family, from my community, and so it depressed me. I felt guilt for being what I thought at the time dishonest and sneaky. I felt depression because I felt cowardly and I felt ashamed that I just accept who I am. I suffered from a lot of depression. (Jahmall, Personal Interview)

Major depression. I would say the- few things come to mind. I was definitely doing a lot of drinking. And I remember my son telling me one time how I would come home sometimes and I would be quiet. Sometimes I would just come home and immediately go to the piano and sit down and start playing piano- something of that sort. But it's like people knew there was something wrong, but I wasn't talking about it. I was mostly just very sad. (Ooma, Personal Interview)

### *Inner Struggle*

Jahmall, Shawn, Daniel, and Ooma did discuss what they described as a personal struggle between their sexual feelings for other men and their personal belief system. For Daniel, Jahmall, and Shawn, religious beliefs added to their personal struggle. Daniel described how he prayed to God to remove his feeling of attraction for other men.

I use to pray that God would take it away from me, and it wasn't so much because I thought it was wrong, but it was because I just having sex with these men, and I have never been one to just have sex with people. When I started having sex with men it wasn't- I would play that God would stop me from having sex with men because I knew it was wrong for me to be having sex with people I didn't really have any regard for.  
(Daniel, Personal Interview)

Although Jack stated that he did not experience any personal struggles, he believed that leading an authentic life meant realizing that “now I’m going to be Black, male, and gay- a triple threat.” Jack stated that his living an authentic life meant mourning the loss of “the life of the picket fence and everything that you were taught that you were suppose to aspire to that never felt right to you.” Jack continued:

...but then you go- kind of like the five steps of Kübler-Ross where you go through a kind of fear. You go through all that stuff and then you finally get to a point where you say you know what, this is who I am and this is how I have to approach this. (Personal Interview)

### *Substance Abuse*

Ooma and Jahmall discussed using alcohol and drugs as coping mechanisms- Jahmall abused drugs as a teen and Ooma stated that he was an alcoholic as an adult while living on the DL. Both men noted that this episode is now in their past:

I was very depressed and I did drugs. I mean hard drugs. I suffered from a lot of depression and I did meth, you know crystal meth. I started doing it and I realized- it made me feel strong. It made me feel like it didn't matter. So I participated in that.  
(Jahmall, Personal Interview)

In describing how he was able to overcome his addiction, Ooma commented that his supervisor intervened and asked Ooma to talk with someone in the employment assistance program. After going to the employment assistance program, Ooma entered treatment. He stated that he has been clean and sober for 26 years.

### *Suicidal Ideation*

Of the six men interviewed, Jahmall and Daniel disclosed that they contemplated and attempted suicide as teens because of depression and because of the emotional struggles and pain they were experiencing:

Yes. I tried to commit suicide when I was 16. I call it trying to commit suicide. I took some pills and I don't know if I was really trying to kill myself or I was just reaching out for somebody to acknowledge that I have this pain on the inside. (Jahmall, Personal Interview)

I remember at one point I was thinking about committing suicide, but I think more than anything else I was always sexually puzzled. [Daniel was asked what did he do or think about that kept him from committing suicide] I guess it was a failed or weak attempt to commit suicide because it was like the last day of 7<sup>th</sup> grade and I reached under the sink and got some cleaner and I was going to drink it. I don't think I clearly thought I was going to die. I think I was being dramatic. (Daniel, Personal Interview)

Besides his parents (who were unaware of his sexual identity at that time), Daniel did not have any support mechanisms to cope with his feelings. Daniel believed that prayer has helped him and that, "I just accepted that this is who [*sic*] God made me. This is how God made me. I'm attracted to men and I'm attracted to women and I just had to accept it."

### *Seeking Professional Help*

Shawn and Ooma were the only participants who sought professional help of the participants who disclosed having mental health problems. Ooma discussed seeking help through his employment assistance program. Shawn acknowledged seeing a psychiatrist when he was in

college about depression and anxiety. Of note is the reported fact that Shawn requested to see a White, male psychiatrist. He gave his reason for his request:

It had to be a White male...I guess the White part because it wasn't someone from my own community. You know how the African American community feels about homosexuality, and then the male because I thought there was some type of understanding. Again, didn't know too much about females and lesbians. A White male could probably identify or picture what I'm going through better than anyone else. (Personal Interview)

Whereas Jahmall, Shawn, Ooma, and Daniel experienced mental health issues at different times in their lives, both Lenard and Jack self-reported that they did not experience any mental health problems pertaining to their attraction to other men. Jack made a conscientious decision to pursue living an authentic life. Lenard reasoned that because he keeps his intimate relationships with other men private, he did not experience any mental health problems:

Of course there are struggles. I didn't have any mental health issues or emotional crisis or breakdowns or any need for medication or supervision or therapy. What did happen though was you have to- I think any time you make conscious choices, you have to be aware about what kind of life you are leading and then become hopeful and optimistic about what you are embracing. (Jack, Personal Interview)

No. I think that I kept it private so that I wouldn't have any personal or psychological problems (laughs). I think that is probably- I think I've been cool. I think it's been the best decision, but I'm coming from the pattern of behavior where- even in heterosexual relationships, before I started keeping my relationships separate from my friends, from my family...so I just kept tended to keep things separate anyway, so that was never a problem with me. (Lenard, Personal Interview)

The theme of Mental Health Issues examined how the family, the community, the importance of masculinity, and the African American church psychologically affected four of the participants, whether by exhibiting anger, experience anxiety and/or depression, or using drugs or alcohol. At one point in their lives, two of the participants felt suicide was their only option. Of the six participants in the study, two noted that they sought professional help in the form of

psychiatric (Shawn) assistance or receiving professional assistance through their place of employment (Ooma).

### Disclosure or Coming Out

The theme of disclosure or coming out was referenced in QSR NVIVO 45 times. The information coded at this node pertained to whether or not the participants disclosed their sexual identity, considered disclosing their sexual identity, and individuals the participants knew who disclosed their sexual identity to their family or friends. Three of the participants disclosed their sexual identity to close family and friends, two participants stressed that they used discretion when they disclosed to family and friends, and one participant told a classmate but has not disclosed to his family or close friends. Reasons participants gave for not disclosing (at particular times in their lives before or while they were on the DL) were similar- fear of being rejected or ostracized by family and friends, fear of being regarded as weak, and yearning for acceptance from family and peers.

#### *Before Disclosure*

Each of the participants was asked how their lives would be different if they did tell family and friends about their sexual identity. Three of the men stated that they would be free to be themselves and would not have to hide their feelings or their partners from close friends or family. Jack felt that a person could live an authentic life as well as be free. To Jack, being authentic and free meant being able to care and love someone and not being ashamed to let other people know. Jack stated, “Love at that level is a declaration and is not something that you keep and you feel is something less than worthy of being celebrated.”

Jahmall felt that with freedom, he could be truthful to other people instead of hiding his feelings because of fear. Jahmall has disclosed to his mother, father, and to a close female friend,

but feared disclosing to his close, male friends. In terms of not disclosing to these friends, Jahmall does not feel free, but trapped. Jahmall further described the fear of being rejected by his family and friends. Jahmall's fear was so strong, that he described putting up barriers and sabotaging relationships because he was afraid that someone might find out about his same-sex feelings. Although this fear of rejection affected Jahmall on an emotional and interpersonal level, he stated he is working on self-acceptance:

You know, I think that I'm afraid of rejection...I'm afraid to take the first step. So I've been conditioned to feel like I have to walk around with this barrier up. It's still an ongoing process for me, and I haven't come to a point where I could just step out on faith and say it is what it is...most recently I felt like I guess I grown some inner strength within myself to just stand up and accept who I am...this is still a challenging journey for me. (Personal Interview)

Shawn discussed freedom in terms of being more visible in the public eye. Shawn has not disclosed his sexual identity to his family or friends. He spoke about aspirations of running for public office or volunteering at the Boys and Girls Club. Since he is on the DL, Shawn feels he cannot be publicly visible for fear of being exposed by someone in the DL community:

Now, I wouldn't be able to do that because I would be so afraid that someone that I met on the DL in my past would say, "That's so and so." I'm scared to-I always wanted to help out a kid who doesn't have or was not as fortunate as I was growing up, but I don't want my good deeds to be spoken of. There's a lot of things that I stay away from that I wouldn't have if I was free and out. (Shawn, Personal Interview)

### *After Disclosure*

Three participants in the study have disclosed their sexual identity to family and friends (Daniel, Ooma, Jack). Jahmall disclosed to his parents and a female friend and Lenard only disclosed to his mother and a few close friends. Shawn recalled disclosing to a female classmate who persistently tried to date him. After telling her, she was accepting of Shawn, and he stated that they are still friends; however, Shawn has not told his family members or any other friends. Daniel described how his life has been different now that he has disclosed to his parents and his

siblings. Daniel first disclosed to one of his cousins who is a lesbian. He expressed relief that his immediate family knows and was accepting of his sexual identity:

It is pretty positive, especially my immediate family because they're the ones who really, really know... I had some ambivalence about- well apprehension about telling them. I really did...my mom has been really supportive...and my young sister has been great...now I have to say that my immediate family, they knew. I just hadn't told them (laughs. ( Personal Interview)

An interesting aspect of the participants' disclosure was that five of the participants first disclosed their sexual identity to a female family member (mother, sister, or female cousin) or a female friend. Ooma expressed that disclosing to his son and then his mother lightened his burden of hiding his sexual identity from family and friends significantly. The first family members Jack disclosed to were his aunt, (female) cousin, and mother. Ooma and Jack spoke about being hesitant to disclose to their fathers. Ooma stated that he had fleeting feelings that he was a disappointment to his father because of his (Ooma's) sexual identity. Although he mentioned that they were not close, Ooma believes his father unconditionally loves him:

I really never came out to was my father. I'm still trying to figure out what that was all about... actually, the closest I came to telling him- let me take that back- the closest I came to telling him was early one Monday morning, he just asked me if I was dating women anymore, and I just told him no, and he never went any further. (Personal Interview)

Jack believed that the female family members he disclosed to suspected his sexual identity. He has not disclosed to his father because the two of them do not have a close relationship. Jack stated that they are becoming closer. Jack discussed telling his father at some point, but does not feel the need to disclose to other family members. Daniel mentioned that he had some hesitancy about his disclosing to his father (Daniel's mother told his father), but his father was accepting of him and his partner:

...and my dad is...he's been silent about it. He doesn't really talk about it. I know that he's okay with it because he will ask me about my partner. (Personal Interview)

Lenard came out to his mother because he felt he could trust her and they shared secrets with each other. Lenard has not come out to his father or other family members although he stated he had no problems disclosing to them if he needed to do so. Disclosure to Lenard was about discretion, not fear:

I was able to talk her about it. I didn't really see any harm from my mother. We had a lot of secrets on her part and I knew that I could trust her with every little thing. It was never an issue for me. I think I could tell my family any time. I don't feel a fear or anything about telling them. I just think that I don't see any benefits... I don't see any fear or harm in disclosing at all. (Personal Interview)

When Jahmall told his mother, he was surprised that she was unaware or suspected him of being attracted to men. Jahmall told his father, whom Jahmall said was fine about his sexual identity:

She [my mother] was clueless...she was fine with me- as long you're happy and you're not hurting anybody and you're taking care of yourself, then I love you and that's who you are...[My father] was surprisingly- he was okay. I thought he would condemn me to hell...he was fine with me- said the same things that my mother said. (Personal Interview)

### *Coming Out as a Process*

Ooma and Jack defined coming out as a progression of stages. Coming out was not something that occurred immediately for them, but over a period of time and through a succession of life experiences. Ooma explained that, "Coming out for me was a process...I was in the closet and didn't even know it. I wasn't aware of who I really was." Ooma started going to gay bars and made friends there, but kept this part of his life secret, which Ooma admitted resulted in deception towards his family and friends. Eventually Ooma was able to disclose his sexual identity to his son and mother. Jack compared the coming out process to leaving home and finding one's own way in life. Jack felt that the coming out process was the ultimate test of courage and determination:

What worked for me was going through the process of constantly choosing to be integrated as oppose to being forced out by someone, and allowing myself to be grounded in knowing and that saying, “You know what? There’s nothing you can do to me that’s going to detract me from what I’m doing.” (Jack, Personal Interview)

### *The Experiences of Others*

The participants discussed other African American men who disclosed their sexual identity to their families and how the outcomes of the disclosure shaped their decision to come out or to remain silent. Some of the experiences were encouraging and left positive impressions on the participants; however, the participants also described negative experiences. Shawn and Lenard described experiences they knew about that had negative outcomes. Lenard remembered a friend who came out to his parents. After his friend’s disclosure, Lenard stated that the his friend’s parents, “kicked him out of the house, got new family pictures without him in it, didn’t tell his young sister that she ever had a brother.” Shawn reflected on a friend who came out to his parents and discussed the reaction the friend received from his parents; namely, disappointment from his mother and silence from his father, which resulted in the friend becoming depressed:

...every time he went home or goes home he still gets that disappointment from his mother and his father is still not speaking to him. That really depressed him, but he felt like he got it out... I’ve heard of stories, but I don’t know of any personally. (Personal Interview)

Jack described an affirming experience that he felt was exemplary of a parent’s positive acceptance of their gay child. Jack’s best friend came out to his mother and family (his friend had seven siblings- three of whom were gay). Jack conveyed that his friend was a great example to him of how to be “fully authentic as a man, as a gay man, as a spiritual man, as a Black man.” Jack recalled:

That’s been wonderful and what’s also been is the relationship that he has with his mother and how accepting she is and how she has embraced who he is as a person. So that’s been an example... his relationship with his mother stands out as a true pillar me for in that sense. (Personal Interview)

The theme of Disclosure and Coming Out described how the participants were about to disclose their sexual identity to certain family members and friends. Disclosure meant having the freedom to be authentic. Although Shawn and Lenard recounted the negative experiences of acquaintances, all of the participants' personal disclosures of their sexual identity to either family or friends were affirming.

### Summary

The themes given in this chapter illustrate experiences the participants discussed that helped shape their sexual identity construction during their childhood, adolescence, and adulthood. The belief systems of their family, the African American church, and the African American community constructed how they referenced the gay community and influenced how they viewed gay men. The themes explored how the most of the participants struggled internally because of their attraction to men and their belief systems. Four participants did speak of internal struggles; however, some of them were able to eventually disclose to a friend, a parent, or relative. Two participants considered and sought professional help as an option.

The experiences of these men formulated several themes, the top five of which were presented in this section. The belief system learned during their childhood and adolescence left lasting impressions on five of the participants and set forth the foundation upon which they constructed their sexual identity, and how they continue to construct who they are as African American men.

The participants discussed experiences that were not part of the shared experience, therefore not used in this study. These themes were coded a fewer number of times in NVIVO than the above themes, including the participant's description of their roles in society, a brief discussion about stigma and being gay (discussed briefly by two of the participants), and

homophobia in the African American community and the African American church's contribution to spreading homophobia among its congregation. Although these themes were not used in this study, they were unique to the experience of the participants who discussed them and may have a place in future research studies.

## CHAPTER V

### CRITICAL RACE THEORY RESULTS

In Chapter IV, five themes were generated from the data to describe how the participant's sexual identity was shaped from childhood to the present and these themes gave the reader insight into the participant's experiences in the DL community. Critical Race Theory (CRT) was chosen as the theoretical framework for this study because the participants' experiences on the DL culture incorporated aspects of race, gender, and sexuality (i.e., non-gay identified African American men who have sex with men). These aspects are central to CRT, which framework and tenets explore, critique, and analyze how race, gender, and sexuality are expressed among various cultures in American society.

Through the CRT concept of counterstorytelling, the participant's were able to discuss their experiences in the form of narratives. According to Masko (2005), CRT storytelling is a prevailing theme in which participants describe their reality in order to help the reader understand their world through their voices. The participants' sexual identity construction was shaped by the African American cultural and social environment of their childhood, adolescence, and adulthood. This cultural and social environment in turn influenced their identity and framed the participant's beliefs about being a masculine, African American man in our society. McDowell (2004) noted that although CRT does not provide the researcher with a structured research methodology or format, the interpretive framework of CRT (personal, in-depth interviews) is essential in order to examine the racial experiences of people of color.

The participants have a unique perspective of their experiences on the DL and of how they constructed their sexual identity that has not been fully understood by society or the research community. The participants utilized the voice of color thesis to describe their experiences. Delgado and Stefancic (2001) noted that the voice of color thesis emphasized writers and thinkers of color as effective narrators of their different histories and experiences with oppression. In addition, the voice of color thesis stressed that people of color can effectively convey their lived experiences to Whites who may not be knowledgeable about their worldview. Regarding the voice of color thesis as it applies to women of color, Johnson (1991) wrote that, “Only when a scholar of color draws on her experiences and the insight gained from living as a person of color does she speak with the voice of color” (pp. 2009-2010). During the course of the interview process, the participants gave personal stories about their childhood, adolescence, and adulthood; spoke about personal mental health problems that resulted from living a double life; reflected on disclosing their sexual identity to family or friends; defined being an African American man in American society; gave their definition of masculinity and its significance to African American men; discussed the existence or nonexistence of homophobia in the African American community including the African American church; and shared their views on HIV/AIDS and its impact in the African American community.

Ballard (2001) found that features of counterstorytelling include personal narratives, narratives of other people’s stories, or composite stories. In sharing their personal accounts in the interviewing process, I came across four powerful, pivotal stories that were emblematic of the participants’ experiences. I felt these stories were pivotal because they were told in such a way that was emotionally provocative, and their stories captured the significance of a man growing up questioning his sexuality, the mental health problems that may arise from a person living a

double life, the meaning of being an African American man in America, and the association of the terms gay and bisexual to White men. In this section, I present four pivotal stories as told by Jahmall, Daniel, and Jack (Jack tells two stories). In addition to their stories are reflections from the other participants that are supportive of these pivotal stories.

#### Jahmall: Childhood Church Experiences

Jahmall recalled two negative incidents that happened to him as a child. Jahmall told a pivotal story about meeting one of the mothers of the church while he was visiting his father. The comment from the church mother embarrassed him to the point that he felt he had to change who he was in order to please others. He then recounted an incident he witnessed at his grandparent's church when his grandmother attempted to exorcise a woman thought to be a lesbian. Both incidents left an indelible mark on Jahmall's psyche:

I remember being with my father's family one summer and it was a mother of the church. We went to her house right after I got off the plane, and I was around 10. I was humiliated because there were about 10 people around. I had a Jherri curl. I had longer hair. So I guess to them, being a very strict Christian, a man having long hair was a sign of homosexuality. So she called me a sissy in front of adults and children. I remembered almost wanting to sink into the floor. I was so embarrassed. After that incident and other minor incidents, things being said by adults to me, I started to feel like that I have to change myself to make them happy, whereas it wasn't really a problem to my family in [withheld].

One [an incident that occurred in the church] that sticks in my mind actually was given by my grandmother. Everybody in my family on both sides are ministers or evangelist or missionaries, so sermons came from the family. I remember one particular incident- this lady happened to walk into the church and she was a known lesbian in the community and my grandmother and others in the church proceeded to cast the demons out of her. Her homosexuality was seen as the work of the devil and it wasn't her who was in control of her sexuality. It was a supernatural entity and they proceeded to cast the demon out. I guess at the end, she was still the same person. After the sermon, she [his grandmother] was kind of calling them out, and she [the woman who was thought to be a lesbian] left the church and I remember my grandmother saying something along the lines of her dying if she walks out the door. It was something really far-fetched to me. At the time I was scared. I was terrified. So is this what I have to look forward to? It was something else that caused me to force myself inside. So that was the most [significant] experience for me. I don't remember anything else like that. That really sticks with me. It really affected me. I remember feeling- I felt that I knew I was like her, so it made me feel like

maybe I have demons in me. It caused me to seek God in order to be changed. (Personal Interview)

Shawn shared Jahmall's beliefs pertaining to changing himself in order to fit in with his family. Whereas Shawn liked to read and work on computers, his father felt that his sons should like to work in the yard and on cars. Shawn stated that this difference in interests depressed him. Shawn recalled, "I felt I had to do this life or fit into this mold and I couldn't be myself. And it got me depressed a lot...I can't be myself around them, so they think I'm quiet. They always say, 'You're so quiet. You never talk back.'"

Additionally, Daniel spoke of a profound experience that happened to him in church. Daniel recounted that his aunt embarrassed him during alter prayer by saying out loud, "Please take these homosexual feeling away from Daniel." Daniel said he was shocked when his aunt vocalized his sexuality to the other congregants, especially because Daniel was still questioning his sexuality at that time.

#### Daniel: On Being Bullied

A pivotal story told by Daniel during his first interview (the Focused Life History Questions interview) concerned being bullied as a fifth grader and a middle school student regarding his sexual identity. Daniel did not fully understand his sexuality, but the negative treatment he received from other classmates in the form of repeated harassment puzzled him. Although Daniel's parents knew something was bothering their son, they were not aware of his struggle with his sexuality. During this portion of the interview, Daniel would laugh nervously as he discussed his experiences in elementary and middle school:

[I was first exposed to the terms gay and lesbian] in school and playing in the neighborhood... Actually, a lot of times depending on who it was and which day of the week it was, they were coming after me. I can remember fifth or sixth grade, that was the cool thing was to call Daniel "gay" (laughs) and I guess I don't know if I was a little mature for my age, or a little more aware because I remember saying, "Do you really

think I want to have sex with another man?” (Laughs) Why did you say that? I didn’t understand why... I think they thought I was a little feminine- that I was a little soft. I didn’t want to play any football and I wasn’t like an organized sports kid at all. I was a geek. I was nice (laugh). A lot of my friends were girls... It definitely wasn’t good for my self-esteem because I remember in the eighth grade walking with my head down. It definitely wasn’t good for my self-esteem. I remember at one point I was thinking about committing suicide, but I think more than anything else I was always sexually puzzled because one day when they were talking about me, they would say I liked this particular girl. We were really close friends and they were saying I liked her, and then maybe two days later it would be Daniel is gay. I could never understand. I was like, “Okay make up your mind.” I didn’t understand that, and actually for a long time, and I think even now I don’t like the word gay because it just sound like- it sound kind of soft to me. It sounds like a euphemism. It sound like you really want to call me faggot, but you really don’t want me to get upset.

... I guess it was a failed or weak attempt to commit suicide because it like the last day of seventh grade and I reached under the sink and got some cleaner and I was going to drink it. Well actually I did drink it and I don’t know if I thought I was going to die or not because it was just like-it wasn’t ammonia or bleach. It was like an all-purpose cleaner. And I remember drinking a big glass of it and going to school. I don’t think I thought about what was going to happen to me. I don’t think I clearly thought I was going to die. I think more than anything else that (laughs). I think I was being dramatic. Even though nobody knew. I don’t think I was really serious about it, especially since I don’t like pain, and I don’t like to throw up and there was no way I was going to slit my wrist because I just don’t like to hurt that much. So I think I was being dramatic. [I asked Daniel if his parents knew about the bullying he was experiencing at school] Yes, they knew. My mom and my dad knew that I was teased. I don’t think they knew exactly what the kids were saying about me, but I know they knew I was being- my dad knew very much because I remember the first day at school seventh grade, he was hoping I had a good day at school because he was planning on- the kids were talking about me. If I had come and I said I didn’t have a good day he said he was going to go find them. He was tired of them picking on me and I wasn’t a fighter for some reason. I was- it takes a lot for me to get angry enough to fight, and I never fought those kids. (Personal Interview)

After we completed the interviews, Daniel told me that the Focused Life History

Questions interview was difficult for him, for he had to reflect on the painful memories of being harassed and bullied in school. It was especially difficult for Daniel to recount his suicide attempt. Two other men additionally recounted about either attempting suicide or being bullied in school. Jahmall disclosed to me his suicide attempt when he was 16 as a result of being depressed and feeling shame about his sexual identity. Jack recalled being bullied in school by a student who thought he was gay. In response to the repeated taunts by this student, Jack

retaliated. After hitting the student on the head with his metal lunchbox, Jack concluded, “It became clear that I was not going to stand there and take it, but would actually fight back...I established that I wasn’t going to be the person that they could pick on.”

#### Jack: Being an African American Man in America

In the Reflection on the Meaning interviews, each participant gave their account of being an African American man in America. Jack gave a pivotal story about what it means to be a Black man in our society that was notable of the other participant’s narratives. To Jack, being an African American man in America meant remembering the past in order for men to construct the present. Remembering the past includes remembering the historical context of being an African American man, which Jack believed was fraught with disfranchisement. Being mindful of this history, Jack felt, assisted African American men in navigating themselves through their present and future experiences:

I think it first and foremost is accepting the role as a member of society, but you also have an enormous amount of historical context that you have to deal with. I think depending on how you’d be able to synthesize the historical context and at the same time create your own identity, I think African American men have an immense opportunity in the shared burden because I think more than any other member of society you are required to demonstrate a level of reflective memory while at the same time being required to transcend the historical context. So I think there’s definitely a duality that African American men have; and I would also say that African American women- in that sense both share duality. But I think the dualities are a bit different... I think that if anything, being an African American male means being ever mindful of the duality of the reflective and the transcending states.

[I asked Jack what to expand on his knowledge of the historical context] well I mean it’s the origins of our arrival in this country. Everything from the way that we arrived to the way that we were subjugated to the way that traditional, male roles were purposely and systematically destroyed to destabilize the family, to the way that the psyche of the Black male was permanently, in many ways, destroyed. The reason I say permanently is that it’s not as if there are Black men in this country who can recall, or even Blacks in general, can recall what it meant to be African in the cultural context. I think what we have is based on conjecture or some historical document. So I think from a historical context it’s been an inconsistent evolution toward establishing the meaning that I mentioned in the first question which was being completely mindful and reflective of the historical context while we continue to transcend the present context. So I don’t think we can forget not

being able to protect your children, not being able to pray, not being able to provide for your families, not being able to recognize the children that you were siring even to the point of fathering or parenting. Not even recognizing that responsibility for that and to that. So I think there's a huge historical context that I am mindful and ever mindful of in that sense...I can reflect on the things I was told and the experiences that I had. I can reflect on those from the lessons I was taught. When I went to college in [withheld], I went to one of the largest historical Black colleges in this country. You go there in awe of the historical context, and you're talking to people who marched with King. You're talking to people who are first generation college students. There's an enormous amount of history. I was molded and shaped into the person that I am today because that's why I said it is about both the reflective and transcending at the same time, and that's how I've been able to synthesize the experience for myself, I did experience it both from the reflective as well as the transcending perspective. (Personal Interview)

Ooma discussed the historical context African American men in America in his

Reflection on the Meaning interview, adding that masculinity played an important role in showing other Americans that "we are in fact as good as any other men- that we are not weak or worthless. Something which many slave masters tried to instill in us." The question regarding what it means to be an African American man in today's society baffled Daniel- although I gave him the opportunity to send me a reply in an email after the last interview, Daniel did not answer the question. However, regarding a question I asked the participants about the importance of masculinity among African American men (Tell me about the importance of masculinity to African American men and why is it important), Daniel agreed about the historical context of African American men being deprived of their role and responsibility in the African American family. Daniel explained, "So many years historically, we haven't been able to really be men in our homes and in our communities...whether we didn't know how to take the role or if the role was taken from us, it's always- our masculinity has always been denied."

Jack: Gay Means White

During the last interview (the Reflection on the Meaning interview), I asked the participants two questions: a) What does it mean to be gay? What does it mean to be bisexual?

and b) What images come to mind when you think about the terms gay and bisexual? Four of the participants associated the gay and bisexual term with White men. The most pivotal story came from Jack who explained the association of the terms gay and bisexual with White men:

I think bisexual is more of splinter of White DL. You don't have Black men saying that they're bisexual who are DL, even though that's is the more technical definition of what they do and who they are, but I think it's much more gay. It goes back to that question of what's more socially acceptable. What's more tolerable? Being gay means White; DL is probably the term that's much more culturally acceptable than being bisexual. So I think that of those terms conjure images of White men. *[I mentioned to Jack that other participants associated the gay and bisexual term with White men and asked him what images come to mind when thinking about those terms]... I think that is what most people think. It's not that gay and bisexual mean White, it's that the people who have been visibly at the forefront of the gay right's movement have been White. So the idea that the term is White is a reflection of who's been involved in the movement. (Personal Interview)*

Jahmall, Daniel, and Shawn also commented that they thought of White America when they thought of images associated with the gay and bisexual term. Jahmall felt that White America is more supportive of gays and bisexuals and stated, "I don't think that being gay in Black society, where I am, is supportive. That's why people continue to live on the DL because there's nothing that says yes, you can be the star basketball player, yes you can be a role model and still be gay in our community." Shawn and Daniel explained that there are not a lot of images of African American, gay men in the media- most images in the media of gay and bisexual men are White. Daniel noted that "even like during the beginning of the AIDS epidemic when it was described as being a gay man's disease, they always showed a White man. It was always a gay, White man."

### Summary

The use of counterstories allowed the participants in this study the opportunity to tell their stories for the purpose of raising awareness about their experiences in the African American community and in American society. According to Masko (2005), storytelling is a prevailing

theme in CRT whereby participants describe their reality in order to help the reader understand their world through their voices. Through the use of counterstorytelling, Stoval (2005) found that CRT legitimizes and promotes the “voices and narratives of people of color” (p. 96). The participants offered the reader a unique view into their world. Each of the participants described personal experiences with the intention of giving the reader the opportunity to sit at their table and listen to their stories. The pivotal stories of Jahmall, Daniel, and Jack offer the reader poignant accounts from the table where they live.

## CHAPTER VI: DISCUSSION

### SUMMARY

The purpose of this study was to explore the experiences of African American men who identified as being on the DL or MSM. The study further explored factors that shaped their sexual identity construction and compelled these men to live a double life with the objective of providing readers with a better understanding of their lives from the participants' perspective. To achieve this goal, the participants participated in a three-part interview series in which they provided information about various aspects of their lives. Information provided included their family background; childhood experiences from home, church, and school; the DL community and how they found out about it, how they connected with other men, and how they navigated between their public heterosexual life and their intimate, private life with other men; their personal experiences of being attracted to men and the conflict they grappled with as they constructed their sexual identity; the issue of masculinity and its importance among African American men and within the DL community; and the question about how DL men are portrayed in the media.

My research findings support the information found in the scholarly literature in two areas: non-disclosure of sexual identity to significant others, and mental health issues experienced by African American men who hide their sexual identity, feelings, and same-sex relationships from the public.

## Non-Disclosure of Sexual Identity

Exploring the reasons for African American men's non-disclosure of their sexual identity was a central rationale for this dissertation, and it remained a pivotal theme throughout the data collection and analysis phases of the research. Early into the exploration of their sexual identity, the participants discussed reasons for not disclosing their sexual identity to family and close friends. Their explanations for non-disclosure are shared in the findings of Crawford et al. (2002), Ford et al. (2007), Burlew and Serface (2006), and Cochran et al. (2004). Crawford, Allison, Zamboni, & Soto (2002) noted that intolerance, the fear of rejection, and the need for acceptance promoted non-disclosure among African American DL and MSM, a reason shared by Jahmall, Shawn, Daniel, and Ooma. As Jahmall explained; "You know, I think that I'm afraid of rejection...I'm afraid to take the first step." Jack acknowledged that he kept his sexual identity secret because of his fear of rejection. Jack recounted, "I always felt vulnerable because I was afraid of the rejection, and the rejection is based on the fact of lack of security, lack of stability." As the participant who most fully disclosed his sexual identity to others, Jack noted that getting to a place where he was psychologically, professionally, and financially secure assisted him in being able to withstand any possible consequence of disclosing his sexual identity to his family.

## Mental Health Issues

Four of the six research participants recalled mental health problems they experienced as they constructed, explored, and concealed their sexual identity. From their findings, Wester et al. (2006), Burlew and Serface (2006), Wolitski et al. (2006), and Crawford et al. (2002) noted that psychological distress may present in African American men as they navigate themselves in a homophobic and racist society. While Wester et al. (2006) found that psychological distress in African American men may result from the discrepancy between the perceived roles of

masculinity versus what African American men are allowed to portray in Westernized society, Wolitski et al. (2006) reported that African American MSM may experience internalized homophobia as a result of keeping their sexual identity secret. From the participants' responses to an assessment used in their study, Wolitski et al. determined that this internalized homophobia manifested itself in the form of depression, self-degradation, and the rejection of their sexual identity (p. 521). Ooma noted that as an adolescent, he sensed that being a gay man was unacceptable in his family. Ooma recalled how his father's reaction to gay men fashioned his desire not to identify as gay:

I think the fact that my father, although he didn't seem to have a hostile attitude towards gays... he kind of laughed at them, and so that was another reason that I will say contributed to me not coming out...I know one other thing in the back of my mind was that I didn't want to bring any shame upon the family...there was a degree of shame associated with being gay that I didn't want to put my family through in the beginning. (Personal Interview)

As a result of hiding his sexual identity from family and friends, Ooma became depressed and used alcohol to cope with these feelings of distress. Jahmall and Daniel experienced depression and attempted suicide in their teens, and Shawn experienced depression and anxiety. The only participants who sought professional assistance for their mental health problems were Shawn and Ooma. Shawn sought the assistance of a psychiatrist in college, and Ooma found assistance with his employee assistance program.

#### Dissertation Similarities

The findings of my research mirrored themes present in the scholarly literature, and I noted several similarities between my research findings and the findings presented in dissertations and published work. For example, in dissertations that focused on African American DL and MSM, I noticed that CRT concepts were mentioned as factors to be considered (the interplay of race, gender, and sexuality). For example, in Smith's (2006)

discussion chapter, she noted, "...sociodemographic factors [age, race, gender]...all play a role in shaping men's attitudes, values, and experiences" (p. 79). However, none of the dissertations that focused on these three distinct areas gave mention about CRT and how the interplay of race, gender, and sexuality impact the African American DL and MSM and various areas of their lives.

### Contributions to Previous Findings

In comparing the research findings in the scholarly literature with my research findings, my findings extend the scholarly literature's postulations and recommendations for further study. Areas I identified are sexual identity construction, the topic of African American masculinity and how it influences the identities of African American DL and MSM, and the impact of the African American community (family and church) on African American men hiding their sexual identity.

#### *Sexual Identity Construction*

While some researchers recognized the role of sexual identity in constructing the identity and sexual behavior of African American DL and MSM, most stopped short of examining seminal factors that shape the sexual identity construction of this population. Of those studies I examined that discuss this topic (Bleich and Taylor-Clark, 2005; Ford et al., 2007; Harawa et al., 2008; Millet et al., 2005; Wolitski et al., 2006), the researchers made assumptions about the factors that shape sexual identity construction (e.g., stigma, rejection of a gay identity, homophobia) and made recommendations for further research to examine whether these assumptions are valid. According to Harawa et al. (2008), very little research has been published on the subject of the sexual identity construction or development of African American men who identify as DL or MSM. Bleich and Taylor-Clark (2005) noted that the DL identity may have resulted from the "stigmatization of homosexuality by the larger Black community or may be a

response to the desire of BMSM/W to avoid stereotypes of gay, White male culture in an effort preserve their masculinity” (p. 15). Bleich and Taylor-Clark found that the limited research regarding African American DL and MSM has hampered HIV/AIDS preventative methods targeting this population due to misclassification of these men’s identities. Bleich and Taylor-Clark stressed the importance of qualitative research examining African American DL and MSM’s sexual identity construction, noting that the research “may also add clarity to the media’s current presentation of this group” (p. 16).

Wolitski et al. (2006) determined that African American MSM were more likely to identify themselves as non-gay identified MSM than White men due to internalized homophobia; however, Wolitski et al. did not explore how internalized homophobia influenced the construction of sexual identity in this population. Wolitski et al. recommended, “Health care providers refer DL and MSM who experience anxiety about their sexual identity or practices to mental health providers who are skilled at addressing these issues” (p. 527). Ford et al., (2007) noted that African American sexuality in African American DL and MSM community is influenced by social constructions, noting the media’s contribution to this social construction. Ford et al. did not empirically determine factors that shape sexual identity construction, but recommended further research into the roles of social construction and structural factors in shaping African American sexuality in DL and MSM men.

The results of my dissertation research directly addressed the issue of African American men's sexual identity construction. Specifically, I found that the participant’s perceptions of homosexuality were skewed by the belief system of their family, church, and community that in turn skewed how they constructed their sexual identity. These findings provide a further

understanding into how the African American community plays a seminal role in shaping the sexual identity of its young, Black men.

### *The Influence of Masculinity*

Although the popular culture literature has expounded on the importance of masculinity or hyper-masculinity in the African American DL and MSM community, empirical research regarding masculinity's role in the framework of sexual identity construction remains basically superficial. Ford et al. (2007) maintained that social constructions of African American male sexuality include hyper-masculinity, hyper-heterosexuality, and aggression (p. 212), making the idea of a gay, African American man difficult to perceive because the concept of Black MSM does not fit into the recognized stereotypes of blackness (i.e., hyper-masculine) or of being gay (i.e., not black). Wolitski et al. (2007) determined that the limited research data pertaining to masculinity's impact on African American DL and MSM is largely "anecdotal reports and externally applied labels" (p. 519). In-depth research into the role and importance of masculinity among African American DL and MSM and its affect on disclosure, mental health problems, and sexual identity construction remains limited.

Within my dissertation, I found that masculinity is believed to be an important attribute of African American men. The participants defined masculinity as a quality of being strong, confident, and proud. Masculinity among African American men, according to Jahmall, Daniel, Jack, and Ooma, also carried a historical importance because African American men were not able to assert this quality during slavery. Jack explained, "...the origins of our arrival in this country...everything from the way that we arrived to the way that we were subjugated... the psyche of the Black male was permanently, in many ways, destroyed."

Important questions remain, however, regarding the polarity between being a gay African American male and being masculine, and the impact of masculinity on the DL man's decision to conceal his sexual identity. When asked about their sexual identity, only Ooma responded, "I say gay just to keep it simple. I prefer Ooma, but I just say gay." When I asked the participants if they could think of any advantages of being African American and gay, five of the participants (excluding Lenard) replied that an out, African American man has more freedom to be himself. When asked of disadvantages of being an African American man whose gay sexual identity is publicly known, most of the responses were typical of Lenard and Shawn's answers- being gay only added to the burden African American men experienced being Black in America, which included being rejected and experiencing homophobia in the African American community:

I think that you already have it hard as a Black male in America, and to be gay and a Black male adds more weight to the burden that's placed upon you. (Lenard, Personal Interview)

But the disadvantages I see is rejection from community. The Black community is kind of homophobic. That's another thing he's going to have to deal with when he's fighting oppression of being a Black male who's also gay. (Shawn, Personal Interview)

Regarding the interview questions about disclosure, Shawn did not believe African American gay men who publicly disclosed their sexual identity could be seen as being masculine. The role of masculinity among African American DL and MSM raises important questions that should continue to guide behavioral research in this area. The findings can in turn provide a further understanding into the importance and impact that cultural awareness plays in formulating and implementing mental health interventions.

### *The Impact of the African American Community*

The popular culture literature (e.g., 2005, 2004; Denizet-Lewis, 2003; King, 2004) has discussed the impact of the African American community (e.g., the African American family,

friends, and church) on African American DL and MSM, whereas empirical research regarding the African American community's impact on the shaping of African American DL and MSM has been limited or not addressed in this dialogue. For example, in examining DL men, Ford et al. (2007) examined social constructions of African American male sexuality; however, their research did not examine the African American community's impact on their own social constructions. Each of my six research participants recounted pivotal stories of how family members and incidents at home, in school, and in the African American church impacted their mental health, influenced their reasons to remain discreet about their intimate relationships, contributed to their decisions not to disclose their sexual identity, and affected how they constructed their sexual identity.

In her dissertation, Smith (2006) noted that the African American community (in particular, the African American church) contributed to increased homophobia; negative perceptions of gay, Black men; and decreased mobilization of HIV/AIDS preventative methods. Although the majority of the research in the scholarly community remains quantitative in scope, an in-depth examination into how the African American community has shaped African American DL and MSM remains unaddressed. Possible reasons why this is the case include (a) the topic of being both African American and gay remains a highly controversial subject matter, (b) the topic of African American sexuality remains highly sensitive in nature, and (c) the difficulty of recruiting African American men who identify as DL or MSM remains a factor. My findings provide insight into the impact that the African American community (including the family of origin, friends, school, community, and the African American church) has on shaping the sexual identity framework of African American DL and MSM.

### *The Contribution of Qualitative Research to the Field*

My research findings add to the previous findings in the professional literature by providing information through qualitative inquiry regarding the impact that the African American community, masculinity, mental health problems, and disclosure issues has on the lives of African American DL and MSM. Each of these areas is, according to researchers, where qualitative research is needed. Quantitative research has been conducted regarding disclosure rates among African American men who identified as DL, MSM, or non-identified gay men (Millet et al., 2005; Wolitski et al. 2007). Dissertations have been written about African American DL and MSM in the areas of demographic and psychological factors that affect this population (Smith, 2006); a quantitative study analyzing oppression, social supports, risky sexual behavior, and identity of African American MSM, (Henry, 2006); and a mix-methods study that examined the sexual identity of DL, non-gay identified MSM (Kesller, 2008). My findings add to the previous research by offering a first person account of the experiences of six participants—their backgrounds, how they constructed their sexual identity, their discovery and participation in the DL community, mental health problems they encountered, their reasons for disclosure, and their insights on African American masculinity and HIV/AIDS in the Black community. These narrative accounts are a critical component in understanding the experience African American DL and MSM from a qualitative viewpoint.

#### New Findings

My dissertational study introduced a methodological approach regarding gathering, analyzing, and presenting data on African American DL and MSM that has not been used in previous studies. Qualitative research into the phenomenon of the DL is still emerging, and dissertations make up the majority of conducted studies. Smith's (2006) used a

phenomenological theoretical position and used the methodology of Denzin and Lincoln (2000). Being a mostly quantitative mix-methods study, Kessler (2008) specified no theoretical position. In this study, I utilized the methods of Seidman (1998), Moustakas (1994), and the theoretical framework of CRT.

The Three-Interview Series of Seidman (1998) offers an in-depth look into the lived experiences of others. The interview series offers an exploration into past, present, and future-focused experiences, giving the reader a comprehensive view into their world. Seidman explained that phenomenological interviews allow the behavior of the participants to be more meaningful and understandable “when placed in the context of their lives...without context there is little possibility of exploring the meaning of an experience” (p.17). Moustakas’ (1994) phenomenological research method offers a person-centered approach to gathering, coding (bracketing), and analyzing data in order to generate themes. Moustakas’ approach requires the researcher to be aware, insightful, empathetic, and reflective in the experience. The research methods of Moustakas and Seidman offer a new approach to gathering qualitative data on this subject.

In using these qualitative research methods, the participants were allowed to give descriptive, in-depth stories about their experiences that have not been expounded in the scholarly literature in qualitative form. The participants gave rich details about their experiences in the African American church and how the church affected their mental health and shaped their identity. The participants were able to give their reflection on the meaning of masculinity and its importance to their identity. Through their profiles (See Appendixes L through Q) and through the theoretical framework of CRT, the participants gave pivotal stories about their experiences navigating themselves in a heterosexist and homophobia society.

By combining phenomenological and CRT research methods, I was able to demonstrate how the attitudes, religious tenets, and belief systems of a culture has the ability to shape not only sexual identity of its members, but also gender roles, and definitions of behaviors and identities that are deemed acceptable and unacceptable. While phenomenology gives us an understanding of lived experiences, CRT puts the factors of race, sexuality, and gender into context and combines them synergistically in describing of this population of African American men. CRT gives phenomenology another dimension as the participants provide an oral account of their experiences.

### Limitations

Because this study was phenomenologically-based, the results are not generalizable to the larger population of African American men who identify as DL, MSM, or SLG; however, the results provided a greater understanding of the lived experiences of these men through the voices of the research participants. A second limitation was because the interviews were audio-recorded, telephone interviews and I was not able to see the participants in person, I could not discern if the participants were actually African American men and if they actually are (or were) on the DL. A third limitation was because the topic (Down Low) itself is about discretion, it was very difficult to recruit participants. Of over 900 emails I sent to participants, only 33 men responded.

A fourth limitation to the study pertains to identity. Because several terms exist that describe African American men who have intimate relationships with men while maintaining a heterosexual identity (e.g., DL, MSM, SGL, Straight, trade), some African American men may have ignored the contact letter because they believed the subject matter did not pertain to them.

A final limitation of the study could be that because I was a female, recruiting potential participants proved to be a difficult task that probably resulted with the low response rate.

#### Implications for Counselors and Mental Health Providers

The subject of African American DL and MSM continues to be an emerging phenomenon and continues to be a theme of HIV/AIDS research in the African American community. Recommendations for behavioral studies on the DL topic continue to be addressed by researchers (Ford et al., 2007; Sandfort and Dodge, 2008). Wolitski et al. (2006) recommended, “Health care providers should refer DL MSM who experience anxiety about their sexual identity or practices to mental health providers who are skilled at addressing these issues” (p. 527). What has not been addressed from my research findings is how counselors and mental health providers can offer services and support to those African American men who seek help as they navigate their sexual identity in the African American community and American society. I provide suggestions that developed from my research findings:

#### *The Importance of the African American Family*

Counselors should keep in mind that the African American family tends to be very close-knit. There are various reasons for the closeness and importance of the family unit. One reason focuses on the historical context of African American families. Because of the ravages of slavery, African American families were often torn apart as the institution of slavery did not recognize the African American family unit. Hill (2001) wrote that, “Slave owners controlled the Black family to their own advantage...dictating family roles, and asserting control over slave children” (p. 496). Another reason for the importance and closeness of the African American family is the product racism and living in a predominantly White society. Hill (2001) noted that the closeness of African American families served as a cushion to prepare young children as they

navigate a racist society. The African American family serves as a support and a fortress to family members when they experience the racism from the outside world.

Counselors and mental health providers should keep in mind the importance of African American families to Black men. Hill found that the African American family adopted African-based norms of family, including, “Being cared for by an extended kin unit and taught values including strong families [and] respect for the elderly...” (Hill, 2001, p. 497). Each of my participants described the composition of their families. Most of my participants (Daniel, Ooma, Jack, Shawn, and Lenard) came from two-parent families. Jack’s mother raised him until he was 14 when she married and he gained a stepfather, and Shawn was raised by his father and stepmother. Jahmall spoke of being raised by his grandparents and visiting his parents as a child. Although Lenard acknowledged his family members were not that close growing up, the other five participants mentioned the significant bond that they had with nuclear family members and how extended family members played an important role in their early life. Daniel spoke of a special aunt and her two children to whom he was close, and referred to this aunt as his “second mother.”

According to my participants, the African American family plays a pertinent role in shaping the belief system of its members, including family beliefs and attitudes about being gay. Beliefs, values, and norms that are considered unacceptable are forbidden in the African American community. Gilbert and Williams (2007) found that, “When individuals deviate from cultural norms and violate the ethos sanctioned by the community, they are likely to face rejection from that community” (p. 508). According to Gilbert and Williams, the African American family may hold strong, anti-gay attitudes and may stigmatize (p. 508) same-sex relationships. Aside from Lenard, the participants spoke of family members who expressed

disapproval of the gay culture. Shawn recalled his parent's disdain for homosexuality, noting that, "They were completely against it ... my father being a pastor, he always talked about how wrong it was. How the gays are going to hell and all that kind of stuff" (Personal Interview).

I encourage counselors and mental health providers are to be knowledgeable about the African American family and how the history of African Americans is intrinsic to the Black family. Counselors are encouraged to discuss the family dynamic with clients, what members hold high rank (and influence) in the family, and be aware of the possibility that the client's family may regard the gay community negatively. If the client discusses disclosure issues, I suggest that counselors talk with the client about family members to whom it may be "safe" to disclose. In my interviews with the participants, most of them recalled that their mothers, or female family members, were the first people to whom they disclosed their sexual identity, and that they received positive reactions from these family members.

#### *The Influence of the African American Church*

Throughout the history of America- through slavery, reconstruction, Jim Crow, and the Civil Rights Era, the African American church remains one of the strongest institutions in the African American community. Blank, Mahmood, Fox, and Guterbock (2002) noted that, "[African American Churches] are strongholds of cultural and community identity and, because of congregational commitment, hold great promise for influencing the attitudes and behaviors of members" (p. 5). From the pulpit on Sunday mornings, the pastor ministers to his congregation, and his words carry tremendous weight not only with his members, but also with their families, and within the community. The African American minister can influence the thoughts, feelings, and behaviors of his congregation. His roles in the community can include that of being a counselor to his members and to their families.

Mansfield, Mitchell, and King (2000) found African American religious practices and beliefs to be much stronger than White Americans. Mansfield et al. found that African Americans prayed more for their healing and physical well-being. Blank et al. (2002) noted that, “Churches occupy a unique position because they offer counseling and guidance along spiritual lines and often provide support in a nonstigmatizing way” (p. 4).

Although the African American Church has played a pivotal role as a bastion of freedom and tolerance in the Black community, the church has also expressed its intolerance of the gay culture and its rejection of gays and lesbians in the church membership. Griffin (2000) wrote that, “In the climate of gay visibility in religious circles, African American heterosexual voices have been some of the most intolerant and oppositional” (p. 88). Ministers continue to denounce homosexuality and same-sex relationships from the pulpit, even if gays and lesbians are members of their congregation. Harris (2008) noted that, “All seven of the historically African American Church denominations...still view homosexuality ‘as an abomination,’ and still do not see it as an acceptable ‘lifestyle’” (p. 263). According to these churches, HIV/AIDS is still believed a punishment for being gay and participating in the gay culture. Harris determined that with the increase in HIV/AIDS among African American men, some religious leaders scorned those infected with the disease, believing their “lifestyle” (p. 263) led to individuals acquiring AIDS. With this strong intolerance for the gay community, African American men who are questioning and exploring their same-sex feelings struggle to construct their identity amid the negative views of the Black church and its congregants.

Counselors and mental health providers are encouraged to ask their African American male clients about the role of the church and the degree of influence the church has in the client’s everyday life. Counselors are encouraged to have a healthy dialogue with their clients about

whether or not they witnessed sermons or church members referring to the gay community disparagingly. Counselors are encouraged to talk with their clients about the many feelings they may have experienced being part of an environment that openly rejects their sexual identity and develop strategies clients can use to cope with and manage these feelings.

### *The Fear of Rejection*

Several of the participants in my study stressed the fear of rejection from their families when deciding whether or not to disclose their sexual identity, reinforcing the importance of the family in their lives. Counselors should keep in mind that the fear of rejection is a strong and real among African American DL and MSM. Jahmall's recollection of fearing rejection from family and friends was emotional and compelling. Shawn stated that he has not disclosed to family members because of his fear of being rejected, and this fear keeps him from being visible (e.g., running for a public office) in his community. African American men fear being rejected from family and friends, being ostracized from the African American church, and feeling isolated from the Black community. Counselors can assist African American men in building strong social supports within the family if clients decide to disclose to trusting family members. Linking clients to churches that are gay affirming is also a possibility if the client decides to disclose their sexual identity and faces scrutinization from family or from members of the African American community.

### *Mental Health Problems and African American Men*

Researchers have noted the psychological distress that gays and lesbians experience (Battle & Lemelle, 2002; Cochran & Mays, 1994) and the reluctance that that some African American men experience regarding seeking mental health services (Smith, 2003). In my study, two participants received mental health services (Ooma and Shawn), while the other four did not

seek services (Jack and Lenard stated that they experienced no mental health issues). Shawn stated that he sought the support of the mental health system because, “I was tired of being fake. I was tired of having to put on this front.” Ooma remembered seeking services through a combination of an intervention by his supervisor and making the connection between his drinking and his sexuality. He recalled, “On this particular night, I was able to make the connection between my drinking and the problems I was having... I went to the employee assistance program and I think the day after that I was in treatment.”

I encourage counselors and mental health providers to become knowledgeable about the reluctance that African American men may have in seeking mental health services. Smith (2003) noted that, “It is believed they [African American men] distrust, are suspicious, and may be fearful of majority-culture white counselors” (pp. 48-49). Smith added that because of the importance of masculinity to some African American men, counseling services may conflict with their definition of being a Black man (i.e., being strong, being a protector of the family, and being confident), therefore resulting in *gender-conflict*, which she defined as the stress men experience because of the “contradiction between the demands of the male role and naturally occurring desires” (p. 6). Bradley felt that this gender-conflict, or violation of African American masculinity, may influence Black men to avoid counseling services altogether. I would encourage counselors to forge a counselor-client relationship with African American men built on trust and being culturally sensitive. I also recommend that counselors and mental health provider become knowledgeable of the psychological stressors that can result from being an African American man in the process of constructing his sexual identity.

## Recommendations for Future Research

In the literature review of this study, several researchers recommended that a further investigation into the area of African American DL and MSM was needed; however, they suggested that researchers take precautions when conceptualizing a research focus, selecting subjects for research, and reporting study findings. Cochran et al. (2004) mentioned that presently, much of the research on HIV/AIDS risk and risk reduction on African American MSM has been epidemiologic in nature, with a focus on individual-level mediators of risk behaviors. Cochran et al. noted the need for mental health researchers to explore issues that focused on social and interpersonal factors of African American MSM. Research should include a comprehensive focus on interpersonal factors (e.g., close and intimate relationships, neighborhood and community ties, sources of social support) and social constructs (e.g., definitions of Black MSM, masculinities, sexuality, social inequalities, experiences of discrimination, prejudice, and Black MSM role expectations).

I recommend that further qualitative research explore the behavioral aspects of sexual identity construction of African American DL and MSM. The results could assist in the creation of new preventative and intervention programs regarding HIV/AIDS in the African American community. Bleich and Taylor-Clark (2005) noted that qualitative research is needed to gain greater knowledge and understanding about sexual identity, perceived risk, and the needed interventions targeting the African American DL and BMSM/W population. Ford et al. (2007) noted the scarcity of qualitative research pertaining to African American DL men, which limits the researcher's ability to effectively conceive, create, and provide effective prevention and intervention options for this population of African American men. Ford et al. cautioned future researchers about how they perceive African American men on the DL (e.g., predatory,

hypersexual, misogynistic) and how these social constructions can inadvertently further the stigmatization of these men and the African American community in general. Ford et al. suggested that future researchers offer the participants an opportunity to assist in the formulation and direction of the research that targets their community.

Because several research studies about the DL and MSM have a disease focus (HIV/AIDS), I agree and support the recommendations of Sandfort and Dodge (2008) that future research concentrate on the behavioral side of the DL and MSM in different ethnic groups including African American and Hispanic men. They contended that, “much of the contemporary knowledge related to the sexual behaviors of bisexual men has been constructed in the context of HIV” (p. 679). From their findings, they introduced the term “behavioral bisexuals,” (p. 679) which describe men who have intimate relationships with other men (behavior), but do not identify as being bisexual. Sandfort and Dodge preferred the acronym men who have sex with men and women (MSMW) to describe this population of men.

### Conclusion

This research study provided the reader with an understanding into the lives of African American DL or MSM. The participants have greatly contributed to my exploration of sexual minorities and to how race, gender, and sexuality constructed their sexual identity. The study helped to give these men a voice by which their stories were told and by which they hope others will have some insight into their lives and into their growth process. The participants hoped that by telling their stories, they might be able to assist other men who are struggling with constructing their sexual identity. I endeavor to continue this exploration into the lived experiences of sexual minorities to provide researchers with a better understanding of these

individuals' experiences and to give readers more insight into the lives of others from the table where they live.

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