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Healthy Identity Development Among Black Same-Gender Loving Men: A Mixed Methods

Approach

A dissertation

presented to

the faculty of the Department of Psychology

East Tennessee State University

In partial fulfillment

of the requirements for the degree

Doctor of Philosophy in Psychology, concentration in Clinical Psychology

by

Byron Desalvio Brooks

August 2020

Stacey Williams, Ph.D. (Chair)

Julia Dodd, Ph.D.

Diana Morelen, Ph.D.

Abbey Mann, Ph.D.

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ABSTRACT

Healthy Identity Development among Black Same-Gender Loving Men: A Mixed Methods

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Black Same-Gender Loving Men (BSGLM) are a population at the juncture of multiple marginalized identities, which may make it difficult to successfully form their identity due to experienced racism and heterosexism from communities to which they belong. Current paradigms of racial/ethnic and sexual identity do not fully capture the complexities of identity development among BSGLM. Moreover, there is scant literature available detailing what the process of identity development looks like among this population and which factors influence identity development among BSGLM. As such, the current study used an exploratory sequential mixed methods design to first discover what healthy identity looks like among BSGLM and which factors influence the process of developing a healthy identity. The study then empirically tested the elucidated factors in order to understand which of them influence identity development among BSGLM. First, a sample of BSGLM living in the U.S. (n = 19) were recruited via online and interviewed for the qualitative phase of the study about their identity development process. Using a Grounded Theory approach, the qualitative data revealed three unique components of healthy identity among BSGLM (e.g., self-affirmation, freedom from social conventions, having unconditional acceptance) and 13 factors that either inhibited or facilitated their identity development process. Qualitative findings were subsequently used to create a survey battery to quantatively explore the relationships between the identified factors and components of healty identity among another sample of BSGLM. The generated survey battery was administered to another sample of BSGLM living in the U.S. (n = 54) recruited from social media and

organizations that service BSGLM. Bivariate correlations and multiple regression analyses examined inhibiting and facilitating factors as predictors of healthy identity. Findings revealed that minority stress-related factors were robust predictors of healthy identity. Specifically, rejection sensitivity from one's family negatively predicted self-affirmation, frustation with concealing one's sexual identity positively predicted freedom from social conventions, and experiencing threats/violence positively predicted unconditional acceptance. Results from the study may contribute to the refinement of identity development models among BSGLM and inform clinical interventions that bolster identity development among BSGLM such as transdiagnositic interventions that target minority stress and identiy-related concerns.

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CHAPTER 1 INTRODUCTION

Black Same-Gender Loving men (BSGLM) comprise a unique population situated at the intersection of multiple identities. Being Black in the United States and having same-gender attraction are frequently perceived as being at odds with one another. Amplified both by religious doctrines that condemn homosexuality and by socialization of distinct, static beliefs about gender, some BSGLM struggle with exploration of and commitment to their authentic self that integrates both identities.

Black same-gender loving authors have written about the struggle of holding these multiple identities for decades. For instance, Essex Hemphill (1990) stated: "it's all hand-in-hand, it comes as one package. I can't just be Black and then just be gay. I'm all of these things and it's taken me a very long time to arrive at a love of myself that allows the integration to work. Each thing plays off of the other. Each part of me empowers me. So I can't say, well my left hand is gay and my right hand is Black" (para. 44). In spite of the acknowledgement of these challenges, scientific inquiries of identity formation among BSGLM have lagged greatly behind. Many theories and models have been posited for racial and sexual identity, yet few examine how one's coherent sense of self develops among BSGLM. This void in the empirical literature makes it difficult to conceptualize, examine, and/or test identity development among this population.

The current study seeks to examine the development of healthy identity, a coherent sense of self where individuals have a positive disposition about both their racial/ethnic and sexual identities, among BSGLM living in the United States. The study also aims to understand which inhibiting and facilitating factors influence identity development among BSGLM.

Identity

Identity development is a lifelong process based around one's sense of who one is in relation to others in the context of one's world (Vignoles et al., 2011). Gaining a better understanding of identity and how it forms has been a topic of much examination given that it is a universal process. Though the development of one's identity is ubiquitous, it is understudied in specific populations, such as BSGLM. To date, researchers have yet to understand or postulate what healthy identity development looks like among BSGLM. We also lack knowledge about what factors may influence the development of healthy identities among BSGLM. For these reasons, much of the existing work on identity-related factors among BSGLM provides an incomplete understanding of the experiences of BSGLM. Research examining BSGLM needs a basic understanding of what healthy identity looks like as well as which factors contribute to healthy identity to guide future identity-related scientific inquiries and clinical efforts in order to enhance the experiences of this population. In doing so, this may lead to enhancing the lives of other groups with multiple marginalized identities.

Identity is a frequently studied phenomenon across scientific disciplines and its examination has steadily increased over time. Published research examining identity has increased by a factor of almost 50 during the last 50 years (Côte, 2006; Vignoles et al., 2011). With the proliferation of the examination of identity, many definitions are presented for this unique construct. Broadly defined, identity refers to how a person defines themselves individually and within their larger social context (Hammack, 2015). Further, identity is conceptualized as being multilayered (Vignoles et al., 2011). The first level represents the individual's personal identity inclusive of their values, beliefs, desires, views of their future selves, and sense of evaluation. One's roles in how they affiliate with others or their relational

identity is the next level. Examples of a relational identity are son, father, manager, or spouse. After the relational identity is the person's collective identity which refers to recognition and identification with larger social groups as well as what being a member of that group means to them. All together, these dimensions collectively form one's identity. Understanding one's identity and the groups they belong to provides vital information including what values, goals, and beliefs are important to their self-concept (Wilson, 2008). The current study examined the individual and collective identity of BSGLM.

Identity Development Among BSGLM

While understanding the content of identity is important, comprehending how one forms their identity is just as vital. Unfortunately, exploration into this process has been grossly neglected among BSGLM. In one of the earliest published papers discussing identity among BSGLM, Icard (1986, p. 91) stated, "the Black gay is placed psychologically in a position of triple jeopardy," and that, "the formation and maintenance of the self-concept is threatened by society-at-large, the Black community, and the gay community." This notion that the process of identity development among BSGLM is at-risk may be best understood via their collective identity groups they belong to. BSGLM stand at the junction between their Blackness and sexual identity. They experience racism and heterosexism from all communities they belong to (Akerlund & Cheung, 2000). There is amplified social pressure to conform to accepted gender role norms for Black men and subscribing to religious doctrines that condemn homosexuality (Smallwood et al., 2017). All of these sources of stigma may negatively impact healthy identity development among BSGLM. Akerlund and Cheung's (2000) content analysis of 22 papers examining ethnic sexual minorities published from 1989 to 1998 found the process of identity

development is inhibited by rejection from both ethnic minority and sexual minority communities.

This experienced, perceived, and anticipated stigma may make it difficult for BSGLM to explore and commit to their identity which is essential for identity formation. The fifth stage from Erikson's theory of psychosocial development details the psychosocial crisis of identity versus identity confusion where the individual has to successfully "configure" and integrate one's identities (1950). Marcia expanded upon Erikson's work, asserting that in order to navigate this psychosocial crisis, the process of identity development requires (1) exploration, defined as sorting through and trying out various roles, and (2) commitment, operationalized as the personal investment in a role or identity (Kroger & Marcia, 2011). BSGLM likely experience difficulties in exploring their sexual identity in the context of their racial identity given the social constraints and expectations for being Black, gay, and a man. BSGLM may be at particular risk for poorer identity development given the beliefs that being both Black and gay are incompatible. This may cause BSGLM not to achieve identity integration and instead result in underdeveloped identities that lack exploration and commitment (Marcia, 1987).

Factors That May Influence Identity Development Among BSGLM

There has been speculation about which factors influence the exploration and commitment process among BSGLM however it is not frequently tested. For instance, Martinez and Sullivan (1998) implicated race, culture, gender, and individual characteristics as four factors that influence BSGLM's ability to accept and integrate their gay identity into their overall identity. That commentary mentioned the experience of racism from both society-at-large and from the gay community make it difficult for BSGLM to synthesize their identity due to feeling rejected, exploited, or patronized for their marginalized identities. These same feelings and

expectations were seen in Loiacano's (1989) qualitative study of six Black gay and lesbian individuals in which they described how racism from all communities impacted their ability to integrate their identity.

Loiacano's (1989) study also documented how participants found it difficult to integrate their racial and sexual identities due to experienced homophobia from the Black community as well as society-at-large. Martinez and Sullivan (1998) argued that homophobia in the Black community is due to the community's strong fidelity to religious beliefs, hegemonic views of masculinity, and firm heterosexist attitudes. One study with a national probability sample of 391 Black heterosexual adults found that almost three-fourths of their sample expressed negative attitudes and beliefs towards gays and lesbians (Herek & Capitanio, 1995). More updated findings from the General Social Survey document little change in negative views toward sexual minorities among the Black community (Irizarry & Perry, 2018).

Religiosity is the main driving factor of homophobic views and heteronormative beliefs in the Black community. Blacks are the most "churched" racial/ethnic group in the United States. According the Pew Research Center, 79% of Blacks identify as being Christian, 83% believe in God with absolute certainty, 75% report religion as being very important to them, 73% engage in prayer daily, and almost half report attending religious services at least once per week (Masci, 2018). As some interpretations of Christian religious doctrines denounce homosexuality, it is likely this viewpoint runs throughout the Black community and perpetuates stigma towards BSGLM.

It is also possible that religiosity causes BSGLM to engage in self-stigma as they typically have a greater sense of religiosity and religious commitment compared to their White counterparts (Jones & Hill, 1996; O'Leary et al., 2007; Quinn et al., 2015; Stokes & Peterson,

1998; Ward, 2005; Woodyard et al., 2000). Glick and Golden (2010) found in a sample of Black men who have sex with men from the General Social Survey that two-thirds believed that same-sex attraction and behavior is always wrong. This may suggest that BSGLM still experience stigma or intraminority stress related to their sexual identity even when around other BSGLM. Despite the negative views towards homosexuality within Christian beliefs, many BSGLM remain engaged and committed to their religious beliefs and practices, (Woodyard et al., 2000) which likely negatively impacts their ability to integrate their identity.

Beliefs about gender roles and expectations, also appears to play a role in difficulties in identity development that BSGLM experience (Martinez & Sullivan, 1998). In a qualitative study of masculine socialization among 29 BSGLM, participants reported that Black men are socialized to think that being gay is counter to everything you are taught about being a man (Malebranche et al., 2009). Another qualitative study of 35 BSGLM found themes of participants concealing their sexual behavior and identity in order to avoid losing their social ties from the Black community if others perceived them as being gay (Fields et al., 2015). Further, the Black community holds stereotypes dichotomizing BSGLM into the flamboyant, feminine, and sissy stereotype frequently referred to as "Miss Thang" or the hypermasculine, sexualized thug, with neither allowing for the nuances of identity among SGL men (Bartone, 2017; Icard, 1986).

All of the aforementioned factors mention detrimental influences on identity development, even fewer studies have examined which factors have a positive influence on identity development among BSGLM. In the larger gay-identity related literature, it is often suggested that identification and engagement with the gay community provides a supportive environment for positive gay identity (Haldeman, 2008). A qualitative study of 22 gay, bisexual, and queer men of color, 10 of whom were Black, identified that connecting to the gay

community via other sexual minorities of color was beneficial for the identity development process (Jamil et al., 2009). Having a supportive social support system was significantly positively related to having positive attitudes about one's racial/ethnic and sexual identities among BSGLM (Crawford et al., 2002). Perhaps, a supportive social support system is necessary to foster exploration and commitment to BSGLM's sexual identity. As this process may be difficult in the context of BSGLM's family, qualitative findings suggest BSGLM may gain this sense of community using the internet, messaging boards, and chat rooms (Jamil et al., 2009).

Other findings suggest that BSGLM foster a healthy identity by not adhering to stereotypes about BSGLM (e.g., flamboyant and feminine, oversexualized down-low thug). BSGLM reported refusing to conform to limited narratives about being Black and gay contributed to their awareness and development of discovering who they are (Bartone, 2017). Results from another qualitative study of BSGLM found that those who reported more positive attitudes about their sexual identity appeared to criticize and reject stereotypes about their racial/ethnic and sexual identities (Reed & Miller, 2016).

Despite all of the suggested factors that influence BSGLM's ability to form their identity, few studies have examined this process. When studies of BSGLM discuss identity development, they use terms that describe an arduous journey (e.g., tension, antagonism, disjuncture, hostility, waring, clashing, contradiction, entrapped between, painfully juxtaposed, declare allegiance to on or the other). The use of such descriptors to depict the identity development process for BSGLM makes it appear as a futile effort. Instead, identity formation among BSGLM should be described as a complex process with more potential areas of complications compared to other populations, yet BSGLM can achieve a healthy identity. Even more problematic is that current identity development models do not capture the nuances of the experiences of BSGLM who

reside at the intersection of multiple identities which are not explained in the singular identity development models germane to BSGLM.

Singular Models Of Identity Development

Racial Identity Development

Black identity development begins in infancy and is socialized throughout one's lifetime (Battle & Crum, 2007; Icard, 1986). Cross et al.'s (1991) model of Black identity development posits a five stage process where the individual moves from identifying with the dominant White culture which deemphasizes one's racial group membership to committing to their Blackness. Between the first and last stage is a process where the individual recognizes the impact of racism on their life, explores Black history and culture, and internalizes pro-Black attitudes. The Cross model has been critiqued for assuming a static, uniformity of stages that the person goes through (Battle & Crum, 2007).

The Multidimensional Model of Racial Identity (MMRI; Sellers et al., 1998, p. 23) conceptualized racial identity among Blacks as, "the significance and qualitative meaning that individuals attribute to their membership within the Black racial group within their self-concepts." The MMRI is built upon four assumptions. First, identities are both dynamic as they are influenced by contextual circumstances and dispositional properties of the person. Second, each person has many identities that are in some sort of hierarchical order. The third assumption is that the person's views of their racial identity is the most accurate and valid indicator of their identity. And finally, the MMRI considers the person's perception of what being Black means to them.

Sellers et al. (1998) posits four dimensions of racial identity: racial salience, racial centrality, racial regard, and racial ideology. Racial salience represents the degree of one's Black

identity as important part of their self-concept. Racial centrality is the extent to which individual defines themselves in relation to their race; while salience varies by situation, centrality is relatively stable. Racial regard takes the individual's perceptions about what it means to Black and how others view Blacks. It is divided into private racial regard, the degree to which the person feels positively or negatively towards African Americans and how they feel about being African-American, public racial regard, or the degree to which the individual perceives African Americans positively or negatively. The last dimension, ideology, refers to a person's beliefs about how African Americans should behave and operate within society.

Unfortunately, both models of racial identity fail to comment on how Black identity interacts with other identities, especially sexual identity. Moreover, the literature is void of any discussion of how the experience of racial identity development may differ for BSGLM. For instance, within Cross' model (1991), the racial identity process is catalyzed by experiencing racism which then thrusts the individual into fully immersing themselves in Black culture and rejecting White culture. For BSGLM, experiencing racism from either society-at-large or the gay community and subsequently identifying with everything Black may result in being subjected to heterosexism and overt discrimination related to their sexual identity. The fourth stage of the Cross model details internalization of Black attitudes, values, and beliefs, which may result in stigmatizing thoughts about one's sexual identity. Cross' model ends with the individual committing to their Black identity; however, this may cause internal distress and discounting their sexual identity.

The MMRI provides a different conceptualization of Black identity but still does not account for the complexities of the BSGLM experience. Racial centrality proposes a hierarchy of one's identities and, as a result, introduces the notion that each identity has a value. In other

words, BSGLM's sexual identity cannot be the same level of importance as their racial/ethnic identity. Some aspects of the MMRI may be applicable to BSGLM. The idea of racial salience based upon the situation and social context may explain how BSGLM can go between Black and sexual minority communities. The racial regard dimension detailing affective and evaluation judgments of being Black, how the individual views the Black community, and how the individual perceives other think and feel about the Black community are of particular interest. Racial identity development for Blacks begins with an event that makes them aware they are objects of oppression and how others view them.

Sexual Identity Development

Sexual identity development models all posit stage models that operate in linear fashion where the sexual minority first gains awareness of their sexual orientation, then exits heterosexuality, next accepts their sexual identity, finally and discloses their sexual orientation to their social network. In fact, all models of sexual minority identity development suggest that sharing one's sexual orientation with everyone represents the successful end of the sexual identity development process.

The Homosexual Identity Formation Model (Cass, 1979) details a six-stage model where by the sexual minority individual moves from being confused about their sexual identity to integrating their sexual identity into other aspects of their identity. The end stage of the Cass model also hypothesizes that the individual's personal and public sexual identities will be synthesized and shared with the person's interpersonal environment. Cass' model may not be applicable to BSGLM because it does not account for how BSGLM tend not to disclose their sexual identity (Parks et al., 2004) or how finding an interpersonal network that supports their

sexual identity (e.g., other sexual minorities) may result in other forms of oppression such as racism.

Troiden's model of Gay Identity Acquisition (1979) posits a four-stage model in which sexual minorities have experiences during their youth or adolescence that brings awareness of their same gender attraction. In the next stage, the individual's awareness of their same gender attraction increases while they notice the incongruence between their assumed heterosexual identity and their homosexual thoughts and feeling. This is followed by the individual accepting their sexual identity and engaging in same-sex sexual experiences. And finally, the individual successfully navigates their sexual identity when they hold positive attitudes about being a sexual minority, engage in committed same-sex relationships, become socially connected with the gay community, and reject heterosexual and bisexual labels. BSGLM may not be able to fit into Troiden's model as it has no mention of any other intersecting identities. Additionally, it uses behavioral anchors as its benchmark for success. As such, BSGLM who identify as being heterosexual and engage in same-sex behavior (e.g., down low) would not fit into this model. BSGLM are also more likely to identify as being bisexual compared to other racial/ethnic sexual minorities and would not fit into this conceptualization. BSGLM would not thus fit into this model as they typically are not active participants in the larger gay community given the experienced racism from White sexual minorities (Friedman et al., 2018; Sandfort & Dodge, 2008).

Fessinger and Miller's model of gay identity development (1996) describes a four-stage process where each stage has an individual-level and group membership-level milestone related to that particular stage. The model describes a process during which the sexual minority individual becomes aware of their non-heterosexual identity as well as other non-heterosexual

identities. The person then begins to explore their sexual identity and consider how they fit into the larger group of sexual minorities. From there the individual commits to their sexual identity and becomes involved in the larger sexual minority community. Lastly, this model posits that the person develops a positive view of being a sexual minority, fits it into their larger identity, and identifies as being a sexual minority across all contexts. The focus on both the individual and group levels may be applicable to BSGLM.

Overall, models of sexual identity development may not be fully applicable to BSGLM. All of these models are Eurocentric as they originate from research on White gay men (Graham, 2011; Parks et al., 2004). Further, these models have not been thoroughly validated or tested among either White or ethnically-diverse sexual minority samples (Maritnez & Sullivan, 1998). The models focus on specific behaviors as a sign of positive sexual identity including engaging in same-sexual behavior, engaging in long-term committed relationships with the same-sex, and "coming out." The sexual identity development models assume achieving a positive sexual minority identity requires disclosing one's sexual orientation to those around them (Martinez & Sullivan, 1998). All of these models assume a linear progression of sexual identity instead of a complex fluid process.

A few studies have been conducted to determine if any differences exist among sexual identity development across ethnic groups. Dube and Savin-Williams (1999) examined sexual identity development among four racial/ethnic groups (Latino, Asian American, Black, and White) of young sexual minority men. They found no differences between groups in the timing of sexual developmental milestones (e.g., awareness of same sex attraction, first same sex relationship) or levels of internalized homophobia. They did find that the majority of the BSGLM in the sample engaged in same-sex behavior prior to identifying as gay or bisexual. The

study also found that less than half of the ethnic sexual minorities in the sample reported disclosing their sexual identity to family members (Dube & Savin-Williams, 1999). A ninemonth longitudinal study of 164 sexual minority youth aged 14-21 found no difference in age of same-sex debut across ethnic groups (Rosario et al., 2004). However, the study did find that Black participants reported less positive attitudes toward sexual minorities and were less likely to engage gay-related social and recreational activities compared to other ethnic groups (Rosario et al., 2004). Another study of sexual minorities found that Blacks are less likely to disclose their sexual identity (Parks et al., 2004). These findings highlight the differences BSGLM experience in their sexual identity development process. It appears that the first stages of the sexual identity models germane to awareness of one's attraction and exploration of sexual identity are applicable; however, the latter stages of disclosing one's sexual identity to others and identifying as gay or bisexual are not representative of BSGLM.

The lack of generalizability of sexual identity development models to groups outside of White sexual minorities is a problem for other diverse groups who identify as being a sexual minority. Participants from a qualitative study of 12 Black lesbians who previously identified as being heterosexual and were once married to men, documented themes of feelings as though they could not explore their sexuality as it evoked feelings of shame, guilt, and fear of rejection (Bates, 2010). Participants in that study recalled seeing how sexual minorities were ostracized by the Black community and entered into marriage with a man to avoid facing such consequences. Miller's (2011) narrative analysis of two Black lesbians describes how there is an informal "Don't Ask, Don't Tell" policy in the Black community, in which family members know about the person's sexual minority identity but do not acknowledge the topic. This evidence suggests that using behavioral benchmarks to assess sexual identity, such as engaging in same-sex

relationships and discussing one's sexual identity with others, are not appropriate for Black lesbians. For Latino gay men, disclosure of their sexual orientation to others is less likely compared to White gay men even when they identify as being gay (Villicana et al., 2016). Asian Pacific Islander gay men describe not being able to be a part of the larger, predominantly White, gay community due to racism and discomfort in those settings which ultimately makes it difficult to achieve some of the later stages presented in the sexual identity development models (Operario et al., 2008).

Conceptualizations of racial and sexual identity development models lack the assumptions that identities are not mutually exclusive, and instead interact with each other (Vignoles et al., 2011). These models fail to capture the intersectionality of the groups they intend to represent. Models of identity development should attempt to incorporate the fundamentals of intersectionality including: (1) race and sexual identities are not social categories that are independent and unidimensional, and attempting to understand one's identity without considering other identities leads to an incomplete picture; and, (2) understanding social identities at the micro-level must be done within the context of the interlocking macro-level social inequalities that exist (Bowleg, 2013; Cole, 2009; Crenshaw, 1989).

Application Of Identity Models To BSGLM

Parts of previously posited models may be applicable to the identity development process of BSGLM and incorporate a focus on intersectionality. One such model is Morales' (1989) model of identity development for ethnic minority gays and lesbians that proposes five states in which the ethnic sexual minority can be in multiple states simultaneously. In the first state of his model, termed denial of conflicts, the person minimizes the discrimination they are subjected to as an ethnic minority, believe they are treated equally compared to others, and they may or may

not have defined their sexual identity. The second state, bisexual versus gay/lesbian, describes a process whereby the individual identifies as bisexual and after further examination realizes their sexual lifestyles does not differ from someone who is gay or lesbian. The third state, conflicts in allegiances, is where the awareness of being both Black and gay results in anxiety and there is a need to keep both identities separated from each other. During the fourth stage, establishing priorities in allegiance, the individual's primary ethnic identity prevails due to experienced rejection from the gay community and the lack of integration between their sexual and racial identities is the issue in this state. The final state, integrating the various communities, is where the individual has the desire to integrate their racial and sexual identities and they learn to adjust to the lack of options currently available for sexual minorities of color.

While Morales' model is the only one that attempts to address the sexual identity development process among people of color, it does have its limitations. The model lacks an indepth discussion of each state and its basic assumptions. The model is not built upon any underlying work, nor has the model been tested for validity. Despite these flaws, Morales' model may be an initial framework for understanding the identity development process of BSGLM as they do describe feeling pressured to choose between their racial/ethnic and sexual identities and being able to honor both without consequences (Crisp et al., 1998).

Another model specific to BSGLM is Wilson's (2008) Dynamic-Ecological Model of Identity Formation and Conflict among Bisexually-Behaving African-American Men. The model hypothesizes that the formation of BSGLM's ethnic, sexual, and masculine identities results in conflicts given the cultural beliefs that these identities are incompatible with one another. The model states that ecological factors influence the identity formation process and the conflict between identities. Also posited is the idea that identity formation and conflict occur on

individual, interpersonal, community, and macro-levels that are overlapping and interrelated.

Lastly, the model assumes that identity formation and subsequent conflict for BSGLM occurs via a dynamic process in which the individual shapes their social context and their identity. While Wilson's model does account for intersectionality, it is only posited for Black bisexual men and the model has never been empirically tested.

Fassinger and Miller's (1996) focus on dual sexual identity development at the individual and group membership levels may also be applicable to BSGLM. It appears that BSGLM have the same sexual developmental trajectory as other ethnic groups however the affiliations with the larger gay community differs (Rosario et al., 2004). Perhaps modification of the group developmental aspects of the Fassinger and Miller model would make it more generalizable to BSGLM.

General self-related theories may be applicable as well. For example, Cooley's Looking Glass Theory (1902) may be applicable to this population. BSGLM may develop their identities, in part, based on how others view them, as evidenced by the secrecy and taboo around sexual minority identity (Graham, 2013). This theory states that one develops their sense of self based upon three processes: (1) we first imagine how we appear to others; (2) based upon how others respond and react to us we determine whether others' perception of us is consistent with our perception; and, (3) we use our perception of how others view us to develop feelings such as pride or shame about ourselves. Graham (2011) speculates this process may be of particular interest for BSGLM but never has it been tested in this population. Two of the dimensions of Sellers et al.'s (1998) MMRI do include some of the processes mentioned from the Looking Glass Theory. The racial public and private regard dimensions do account for the extent of the individual views themselves as well as how others view the Black community.

Need For Greater Investigation Into The Identity Process Of BSGLM: The Present Study

Existing models of identity have parts that are potentially applicable to BSGLM, but they have not been examined among BSGLM despite calls beginning in the mid-1980s for greater investigation into what processes facilitate identity development among BSGLM (Battle & Crum, 2007; Crawford et al., 2002; Fields et al., 2015; Graham et al., 2009; Icard, 1986). Of the few studies that have examined identity among BSGLM, they lack insight into how identity develops and what the ideal identity looks like among BSGLM (Corsbie-Massay et al., 2017; Crawford et al., 2002; Nelson et al., 2017; Santos & Van Daalen, 2016; Sarno et al., 2015). Understanding identity among BSGLM is a pressing need given the outcomes of poor identity development among this population including increased risk for HIV, low self-esteem, increased psychiatric morbidity, and overall lower satisfaction with one's life (Crawford et al., 2002; Matthews et al., 2016).

In sum, the existing literature is deficient in providing information about identity development among BSGLM. Exploration of identity, in general, and how it develops among BSGLM is needed, as factors that influence identity development among this population are unknown. The limited available quantitative findings about identity development among BSGLM have been insufficient in accounting for the process of identity development among this population. Further, qualitative analyses, which allow for rich descriptions of personal processes, have been missing from research on BSGLM identity process. Thus, a mixed methods approach may be appropriate to understand identity among BSGLM, which has been suggested as a possible avenue to deepen identity-related literature (Vignoles et al., 2011). Greater insight about which specific antecedent, precipitating, and maintaining factors facilitate healthy identity development among BSGLM is also needed. Moreover, the creation of targeted interventions

that aim to therapeutically bolster healthy identity development among this population is predicated upon this knowledge as well.

Additionally, the development of theoretical models hypothesizing the process of identity development among BSGLM needs information about what a healthy identity "looks like" among BSGLM as healthy identity likely looks different from other ethnic sexual minorities and what is posited by current sexual identity models (Dube & Savin-Williams, 1999; Rosario et al., 2004). BSGLM may achieve a healthy identity when they hold positive attitudes, beliefs, esteem, and a sense of pride about both their racial/ethnic and sexual identities simultaneously. For instance, Crawford et al. (2002) documented the association between holding positive attitudes about both racial/ethnic and sexual identities and adaptive health-related outcomes (e.g., life satisfaction, mental health, self-esteem). In addition to having a positive disposition about their identities, effectively managing racism and heterosexism from all communities BSGLM belong to may be an important indicator of healthy identity among BSGLM (Crawford et al., 2002; Della et al., 2002). Healthy identity among BSGLM may also look like less engagement with the majority White sexual minority community and less disclosure of their sexual identity to members of their social support system, while being able to explore and commit to their identities in a discreet, private manner (Jamil et al., 2009; Parks et al., 2004; Rosario et al., 2004); this may be due to avoiding possibly losing connection to the Black community (Battle & Crum, 2007).

The study intended to fill this void by studying healthy identity development among BSGLM, and examining inhibiting and facilitating factors of identity development among this population. The purpose of this two-phase, exploratory sequential design was to first qualitatively explore identity development with a small sample of BSGLM and then to determine

if the qualitative findings generalize to a larger sample of BSGLM. The first phase of the study was a qualitative exploration of identity development among BSGLM in which data were collected from interviews with BSGLM recruited from online resources. From this initial exploration, the qualitative findings were used to develop a survey battery of potential inhibitory and facilitating factors of identity development among BSGLM. This battery was administered to a second sample of BSGLM. In this second, quantitative phase, data from the surveys were collected from BSGLM recruited from various online resources described in the method section. Statistical analyses were used to explore the relationship between healthy identity outcomes and the factors that influenced identity development gleaned from the qualitative findings.

CHAPTER 2 STUDY ONE - QUALITATIVE PHASE

This study was approvied by the Institutional Review Board. Due to the limitations of performing qualitative or quantative research alone, the current sutdy used a mixed-methods research design to offset many of these limitations. Using a mixed-methods research design, we first aimed to contextualize identity and its development among BSGLM via qualitative methods. The study used an exploratory sequential design in which qualitative data collection occurred first followed by quantitative data collection (Creswell & Clark, 2011). The qualitative phase attempted to answer the questions: (1) what does a healthy identity look like among BSGLM? and, (2) which inhibiting and facilitating factors influence healthy identity development among BSGLM? Following qualitative data collection, themes and concepts were extracted resulting in the creation of a survey battery for quantitative data collection. The quantitative phase explored in a larger sample of BSGLM which specific inhibiting and facilitating factors were important for healthy identity development.

Methods

Qualitative Interviews

The qualitative phase of the study used one-on-one interviews to collect data from BSGLM (See Appendix A for semi-structured qualitative interview script).

Participants and Procedure

Potential participants were recruited via a variety of social media efforts. Advertisements describing the study were posted on Facebook, Twitter, Instagram, and Reddit. In order to specifically target BSGLM, the advertisements were posted in 11 Facebook groups for BSGLM with a combine membership of 30,363 in those groups. Social media accounts on Facebook, Tumblr, Instagram, Twitter, and Reddit were created to advertise the study to BSGLM. Specific

to Facebook, postings were made in groups for BSGLM and administrators of pages for BSGLM were asked to post the study on their pages. A graphic designer was hired to create marketing materials that features BSGLM and information about the study. The study was referred to as the, "Understanding Ourselves Study," on promotional material (See Appendix B). Studies of BSGLM using similar recruitment strategies were successful in BSGLM clicking the link to the study, and recruiting and retaining BSGLM in their studies as a result of the culturally-tailored promotional materials (Lassiter, 2016; Sullivan et al., 2011).

Potential participants completed a brief questionnaire using Google Forms (See Appendix C) to ensure that they met the eligibility requirements for the study, including that they: (1) are at least 18 years of age; (2) identify as being of African diaspora living in the United States; (3) identify as being a cisgender man; and, (4) identify as being gay or bisexual or same-gender loving or engages in sexual behavior with men or is attracted to men. Eligible participants were contacted via email or text to schedule the interview. Following the interview, also using Google Forms, participants provided brief demographic information and completed a battery of identity-related measures described below.

There was no ideal sample size for the qualitative phase of the study. Instead, participants were enrolled into the qualitative phase until the redundancy, or saturation, was reached (Bowen, 2008). Thus, the qualitative phase continued until no new insights or themes were provided by participants. Participants enrolled in the qualitative phase were compensated \$20 for their time and they had a choice of being paid via Amazon gift card or cash via CashApp or PayPal.

Measures

Demographic information and additional measures of identity (e.g., racial/ethnic, sexual, perceived conflicts between identities) were collected in order to characterize the sample of BSGLM. These measures were also used to compare and contrast the two samples in the study.

Demographics

In addition to the screening items, participants provided demographic data. Information about the participants' marital status, living arrangements, level of education, employment status, annual income, religious affiliation, and incarceration history was collected (See Appendix C).

Racial Identity

The Multidimensional Inventory of Black Identity (MIBI; Sellers et al., 1998) is a 56item assessment that measures three dimensions of Black Identity. The measure is based off of
the Multidimensional Model of Racial Identity development for African Americans. The MIBI is
designed to assess racial ideology, racial centrality, and racial regard. For the purposes of this
study, only racial centrality and racial regard will be assessed. The racial centrality scale assesses
the extent to which the person defines themselves as Black and how important their Blackness is
to them (Sellers et al., 1998). "In general, being Black is an important part of my self-image," is
an example item from the racial centrality scale. The racial regard scale is separated into two
subscales of private regard and public regard. Private regard measures the degree to which an
individual feels negatively or positively towards African Americans and how they feel about
being an African American. An example item is, "I am proud to be Black." Public regard
measures the extent to which the individual feels that others view African Americans negatively
or positively. "In general, other groups view Blacks in a positive manner," is an example item
from the public regard subscale. Participants respond to the items on a seven-point Likert scale

from 1 (*Strongly Disagree*) to 7 (*Strongly Agree*). Cumulative scores are calculated for each scale with negatively-worded items reversed scored. Higher scores are indicative of higher values on that particular scale.

The MIBI was developed on 474 Black college students enrolled in an introductory psychology undergraduate course at two universities in the United States, one predominantly White institution and the other a predominantly Black university (Sellers et al., 1997). In that study, factor analysis was used to create the scales of the MIBI, all of which had acceptable Cronbach's α values. To date, the MIBI has only been used in one sample of 120 BSGLM aged 18 to 29 (Walker et al., 2015). In that study, the racial centrality scale demonstrated an acceptable Cronbach's α (.79), while both racial private regard (.89) and racial public regard (.87) had good Cronbach's α values. In the current study, the racial centrality scale demonstrated an acceptable Cronbach's α (.795), racial private regard had an unacceptable Cronbach's α (.478), and racial public regard had a good Cronbach's α (.847). The Nationalist subscale had an acceptable Cronbach's α (.776) and the Humanist subscale had a poor Cronbach's α . The Oppressed Minority (.862) and Assimilation (.812) subscales had good Cronbach's α values.

Sexual Identity

The Lesbian, Gay, and Bisexual Identity Scale (LGBIS) is a 27-item assessment that measures eight dimensions of identity among sexual minority populations. The eight subscales of the LGBIS are Concealment Motivation, Identity Uncertainty, Internalized Homonegativity, Difficult Process, Acceptance Concerns, Identity Superiority, Identity Centrality, and Identity Affirmation (Mohr & Kendra, 2011). Concealment Motivation refers to an individual's sense of agency related to protecting the privacy of their sexual minority identity. Identity Uncertainty is the individual's ambiguity about their sexual identity. Internalized Homonegativity is

representative of the person's negative beliefs and rejection of their sexual minority identity. The Difficult Process subscale assesses the individual's perception whether their sexual identity process was difficult. Acceptance Concerns represents the worry the sexual minority individual has for potential stigmatization of their sexual identity. Identity Superiority measures the person's perspective of preferring sexual minority individuals over heterosexuals. Identity Centrality assesses the how important one's sexual minority is to them in relation to their other identities. Lastly, Identity Affirmation measures how the sexual minority person positively views their sexual identity.

Participants respond to items using a 6-point Likert Scale ranging from 1 (*Disagree Strongly*) to 6 (*Agree Strongly*). The subscales are scored by reverse-scoring negatively worded items, summing the items of the subscale and computing the average. Higher scores on each subscale are indicative of higher value based on the dimension of the subscale. For instance, greater values on the Internalized Homonegativity scale are representative of greater rejection of one's sexual minority identity.

The LGBIS was originally developed using two samples of predominantly sexual minority college students. The first study comprised participants from 45 U.S. states and Canadian provinces with 4.89% of the sample identifying as African-American or Black. Participants from the second study were recruited from 13 universities in the United States; however it is unclear how many of the participants were African-American or Black. Confirmatory factor analysis was used to determine the eight dimensions and Cronbach's α coefficients ranged from acceptable to good (.74 to .89) for the subscales. Criterion, concurrent, and discriminant validity was established among all subscales. Test-retest reliability was also established over a six-week period with correlation coefficients ranging from .72 to .94. In the

current study, Cronbach's α values for the Identity Centrality (.161), Identity Affirmation (.199), and Internalized Homonegativity (.443) subscale were unacceptable. Internal reliability coefficients were acceptable for the Difficult Process (.791), Acceptance Concerns (.760), and Identity Superiority (.743) subscales. The Concealment Motivation subscale had a good Cronbach's α value (.891) and the Identity Uncertainty subscale had an excellent Cronbach's α value (.919).

To date, the LGBIS has not been used in a sample of only BSGLM. Studies using the LGBIS among a Turkish adult sample, a Portuguese community sample, and a United States urban adult sample all provided evidence suggesting a possible six or seven-factor structure within those populations compared to the original college student samples the LGBIS was developed using (Cramer et al., 2017; Cramer et al., 2018; de Oliveira et al., 2012; Kemer et al., 2017; Mohr & Kendra, 2011). Cramer et al. (2017) examined various factor structures of the LGBIS among a diverse sample of 266 community adults of varying sexual and gender identities. The sample was predominantly male, and identified as being gay. Black participants comprised 33.1% of the sample however the authors did not include information about the exact number of BSGLM in the sample. They found support for the use of a six-factor structure for the LGBIS. Specifically, the results suggest the use of four factors (Acceptance Concerns, Concealment Motivation, Difficulty Process, and Internalized Homonegativity) that were accounted by the higher order Negative Identity factor. Both Identity Uncertainty and Identity Superiority were independent factors.

Religious Identity

The Religious Surrender & Attendance Scale-3 (RSAS-3) is a three-item of religious commitment (Clements et al., 2015). The RSAS-3 builds upon other measures and measures

religious surrendering which is a type of religious coping where one yields power to God. An example item of the RSAS-3 is "When my understanding of a problem conflicts with God's revelation, I will submit to God's definitions." Participants respond using a 5-point Likert scale ranging from 1 (*Never True of Me*) to 5 (*Always True of Me*) and higher scores are indicative of greater religiosity. The RSAS-3 was developed using a sample of undergraduate students from a Southern Appalachian university and another sample of pregnant smokers in Tennessee. The RSAS-3 demonstrated criterion validity with robust, positive associations with other measures of intrinsic religiosity (Clements et al., 2015); however, the authors did not comment on the internal consistency in the paper detailing the development on the RSAS-3. To date, the RSAS-3 also has not been examined in any ethnic minority or sexual minority samples. The RSAS-3 demonstrated a good (.881) Cronbach's α value.

Conflicts between Racial and Sexual Identities

The Conflicts in Allegiances Scale (CIA) is a 10-item measure posited to assess the "perceived incompatibility between one's racial/ethnic and sexual orientation identities" (Sarno et al., 2015, p. 550). The CIA was developed based off of the third stage of Morales' (1989) conceptual model of identity formation for ethnic minority gays and lesbians. Of the ten items, six items assess conflicts between racial and sexual identities and four items measure perceived racism from the lesbian, gay, and bisexual (LGB) community. An example item from the CIA scale is, "I feel like I'm betraying either my cultural community or the LGB community." "I have experienced cultural prejudice within the LGB community" is an item from the perceived racism scale of the CIA. Items are rated on a seven-point Likert scale ranging from 1 (*Disagree Strongly*) to 7 (*Agree Strongly*). Items on each scale are summed with particular items reverse-

scored. Higher scores are indicative of greater perceived incompatibility between racial and sexual identities or greater perceived racism from the LGB community.

The CIA was developed using a sample of 124 LGB people of color of whom, 52 were men and 27 were Black; it is unclear the number of BSGLM in the sample. Exploratory factor analysis was used to develop the subscales and the CIA demonstrated construct validity. The CIA had good internal consistency (α = .86) and the perceived racism scale had acceptable reliability (α = .74). The CIA has only been used in two other studies of LGB people of color (Santos & VanDaalen, 2016; Santos & VanDaalen, 2018). In both studies of 208 participants, the CIA had a good Cronbach's α value of .80. It is unclear the exact number of BSGLM in both samples. Both the CIA (.761) and perceived racism (.723) subscales demonstrated acceptable Cronbach's α values.

Positive Sexual Minority Identity

The Lesbian, Gay, and Bisexual Positive Identity Measure (LGB-PIM) is 25-item assessment that measures five dimensions of positive LGB identity including Self-Awareness, Authenticity, Community, Intimacy, and Social Justice (Riggle et al., 2014). Self-Awareness is representative of the belief that one's sexual minority identity has increased one's self-awareness and insightfulness. Authenticity refers to the degree of comfort the person has with their sexual minority identity and expressing that identity when interacting with others. Community is the person's sense of support from and involvement with the sexual minority community. Intimacy is the person's notion that being a sexual minority has enhanced their capacity for sexual freedom and intimacy. Finally, Social Justice is the belief that their sexual minority status increased their concerns for oppression and activism in the pursuit of social justice.

Participants respond to items using a 7-point Likert scale ranging from 1 (*Strongly Disagree*) to 7 (*Strongly Agree*). Subscale items are summed and averaged to create scores. Higher scores represent greater values in the subscale measured. For example, higher scores in the Community subscale are reflective of higher feelings of connection and perceived support from the sexual minority community.

The LGB-PIM was designed in two studies to establish and validate the measure. Exploratory and confirmatory factor analysis was used to develop the items and identify the factor structure. The second study established convergent and incremental validity of the LGB-PIM, and found good Cronbach α coefficients for the subscales (.82 to .89). Both studies used sexual minority samples with African-American participants comprising 7.05% of the first sample and 14.34% in the second study. Besides the original Riggle et al. (2014) study, the LGB-PIM has only been used in two other published studies. Unfortunately, Black sexual minorities comprised less than 7% of the sample in both studies (Szymanski et al., 2017; Whitman & Nadal, 2015). The Intimacy subscale (.502) demonstrated a poor Cronbach's α . The Social Justice subscale (.747) had an acceptable Cronbach's value while the Self-Awareness (.88) and Authenticity (.895) subscales demonstrated good Cronbach's α values. The Community subscale (.951) had an excellent Cronbach's α value.

Analyses

Interview transcripts were transcribed using an online transcription service, Temi (www.temi.com). Temi transcribes audio recordings with 90-95% accuracy and is cost efficient at a cost of 10 cents per minute. Temi provides transcripts including speaker identification, timestamps, the ability to edit transcripts online, and allows for exporting the transcript as a PDF

or word document. Given the potential errors with automatic transcription services, the lead researcher reviewed and edited all transcriptions as recommended (Bokhove & Downey, 2018).

Qualitative data analysis was conducted using the Grounded Theory (Glaser & Strauss, 1967), which requires the analyst to identify categories of meaning from the observations using an iterative process where categories are defined and refined based upon the information from the observations; this results in a theory as the end-product of this inductive process (Schutt, 2012). The Grounded Theory approach had the most applicability to the current study as it requires building upon the information presented by the BSGLM in our sample to identify factors that influence identity development among them as well as understanding what an optimal identity looks like among the sample. Other methods of qualitative data analysis including content analysis, narrative analysis, and discourse analysis, were not as applicable to the study given their focus on artifacts of social communication, understanding the entire observation as a whole instead of the various elements within the data, or analyzing conversations between a group of people, respectively (Berg, 2009; Schutt, 2012).

Using the Grounded Theory framework as the approach, the study analyzed the qualitative data in six phases as described by Braun and Clarke (2006). Using Braun and Clarke's (2006) guide allowed for the researchers to "legitimately focus on analyzing meaning across the entire data set, or examine one particular aspect of a phenomenon in depth" (p. 58). The first phase required becoming immersed, or familiar, with the data which involves transcription of the data, repeatedly reading the data in order to search for patterns and meanings. Both qualitative researchers (described in researchers section below) reviewed all transcripts. The researchers independently read through the entire data set once before beginning to code. The second phase of qualitative data analysis generated an initial list of codes. The initial codes

were organized into relevant groups related to the study questions of healthy identity among BSGLM and what factors inhibit and facilitate the identity development process. This step occurred after the researchers familiarized themselves with the data. The researchers independently generated an initial list of codes and both researchers identified emerging patterns related to the research questions examining inhibiting and facilitating factors of identity development among BSGLM and what a healthy identity looks like among BSGLM. Both researchers attempted to remain data-driven by focusing on what emerged from the data as opposed to automatically labeling the emerging factors as previously posited constructs (e.g., inductive instead of deductive, bottom-up instead of top-down). During the third phase, both researchers collaboratively discussed their organized codes into broader themes discussing which factors influence identity development and what a healthy identity looks like among BSGLM. The fourth phase refined and reconciled the themes. During this phase the researchers revised and dropped codes that were too diverse or did not have enough data to support them. Moreover, codes were collapsed that lack discernable aspects to separate them. The fifth phase operationalized each theme. Both researchers collaboratively defined and named each code. The sixth phase involved writing the results of the qualitative data analysis. Factors were extracted from the themes, codes, and quotes of the qualitative data analysis in order to design a survey battery representative of which factors were elucidated during the interviews with participants. The lead researcher wrote the results and extracted the factors identified in the qualitative analysis.

Researchers-as-Instruments and Positionality

Morrow (2005) recommends that qualitative researchers explicitly discuss their process of reflexivity, experience with qualitative methods and population being examined, the approach

to subjectivity, and acknowledging potential biases the researchers bring to the investigation. Moreover, acknowledging the identities of the participants and researchers are important to note how these factors may influence the qualitative research process (Bourke, 2014).

The lead qualitative researcher – identifying as a Black, highly educated/first generation college student, able-bodied, agnostic, cisgender, masculine-presenting gay man – was knowledgeable of how his intersectional identities and experience of privilege and oppression influence his worldview. Further, the lead researcher had six years of providing diversity-related training and education to healthcare providers. The lead researcher conducted all interviews. At the time of data collection, the lead researcher had six years of training in clinical psychology, five years of experience working with sexual minority individuals, and one year of qualitative research experience. The co-qualitative researcher – identifying as a White, highly educated, able-bodied, agnostic, cisgender, feminine-presenting heterosexual woman – was aware that her privilege contributes her worldview. The co-researcher had four years of training in clinical psychology and public health, five years of experience researching sexual minority individuals, and one year of qualitative research experience.

Both researchers engaged in ongoing self-reflection and conversations about how their identities may impact their interpretation of qualitative findings. Further, the lead researcher had to balance his insider status with the group being examined. This is due to there not being a clear demarcation between the researcher and participants' experiences as BSGLM. Other potential risks to the validity of qualitative data collection and analysis when completing research as an insider include not exploring deeper because of the assumption of shared experiences, crossing boundaries, and insider bias (Hewitt-Taylor, 2002). These potential issues were addressed by the lead researcher maintaining reflexive notes on how his identities, shared experiences with the

participants, and assumptions may have influenced the interview process and interpretation of themes.

Study One Qualitative Results

A total of 28 individuals completed the eligibility screener. All with the exception of one person who identified as genderqueer or non-binary were eligible for the study. The principal investigator reached out to all 27 eligible participants within 24 hours via email and/or text messaging to schedule a time to review the informed consent documents and conduct the interview. Interviews were conducted between November 2018 and February 2019.

Of the eligible participants, 19 responded and enrolled in the study. Participants were given the option to complete the interview via telephone or video teleconferencing software. The majority (n = 17) opted to complete the interview by telephone while two participants preferred video teleconferencing. Interviews lasted 26-70 minutes (M = 46:46 minutes) and were conducted using an interview guide (see Appendix). Table 1 provides demographic data for each participant. The mean age of the sample was 31.79 years (SD = 8.88 years) ranging from 23 to 53 years old. Pertaining to race/ethnicity, all participants identified as Black or African-American; one of the 19 participants identified as biracial (White/Caucasian and Black or African-American). All participants identified at cisgender men. The majority of participants (73.7%; n = 14) identified as gay. The remaining participants reported their sexual orientation as bisexual (10.5%; n = 2), same-gender loving (10.5%; n = 2), or queer (5.3%; n = 1). Most of the sample reported sexual attraction to men only (89.5%; n = 17) and two participants reported being sexually attracted to men and women (10.5%). With the exception of one participant who declined to answer, almost all participants (94%; n = 18) reported a history of engaging in sexual behavior with other men.

Table 1 $Demographic \ Characteristics \ of \ Phase \ One \ Participants \ (n=19)$

Pseudonym	Age	Sexual Orientation	Education	State	Marital Status	Religious	Interview Length
Alex	23	Gay	Some College	TN	Partnered	No Religious Affiliation	52:10
Dwayne	52	Gay	Master's	TX	Single	Catholic	1:06:35
Andrew	27	Gay	Master's	SC	Single	Protestant	51:42
Brian	26	Gay	Bachelor's	MD	Single	Catholic	48:06
BB	32	Gay	Master's	NY	Single	No Religious Affiliation	43:38
Karic	26	Gay	Master's	KY	Single	No Religious Affiliation	1:03:41
Rio	34	Same-Gender Loving	Master's	AL	Single	Agnostic	56:07
Bill	33	Bisexual	Bachelor's	ОН	Partnered	Don't Know	46:38
Brandon	28	Gay	Master's	FL	Partnered	Don't Know	1:01:31
Kevin	25	Queer	Bachelor's	NY	Single	Protestant	56:24
Kris	41	Gay	Decline to Answer	IL	Single	Spiritual	28:35
Chad	25	Gay	Master's	GA	Single	Protestant	26:36
Xavier	35	Same-Gender Loving	Doctorate	PA	Single	Spiritual not Religious	44:12
Q	53	Gay	Doctorate	VA	Partnered	Protestant	1:10:56
Derrick	38	Gay	Master's	MD	Married	Protestant	27:13
Darryl	23	Gay	High School Diploma	GA	Single	No Religious Affiliation	33:13
В	31	Gay	Bachelor's	SC	Single	No Religious Affiliation	28:12
Ту	25	Bisexual	High School Diploma	FL	Single	Atheist	44:54
T	27	Gay	Master's	FL	Single	Protestant	47:21

Pertaining to geography, the majority of participants lived in the southeast region of the U.S. (52.6%; n = 10). A fifth of participants lived in the northeast region of the U.S. (21.1%; n = 4). A couple of participants lived in the Midwest region (10.5%; n = 2) and another couple of participants lived in the mid-Atlantic region (10.5%; n = 2). A single participant lived in the southwest region (5.3%; n = 1). Participants reported living in the following states: Alabama, Florida, Georgia, Illinois, Kentucky, Maryland, New York, Ohio, Pennsylvania, South Carolina, Tennessee, Texas, and Virginia. Many participants reported growing up in the southeast region of the U.S. (42.1%; n = 8), while six grew up in the Midwest (31.6%), two were raised in the northeast (10.5%), two grew up in the west region of the U.S. (10.5%), and one participant was raised in the mid-Atlantic region (5.3%).

The majority of participants (73.7%; n=14) reported being single and never married. Several participants (21.1%; n=4) reported being partnered but not legally married, and one participant (5.3%) reported being married. Almost half of the sample reported having a master's degree (47.4%; n=9) and two participants reported having a doctoral or professional degree (10.5%). Some participants had a bachelor's degree (21.1%; n=4) and one participant reported having some college education (5.3%). A few participants indicated having a high school diploma or GED (10.5%; n=2) and one participant (5.3%) declined to answer. Almost half of participants (47.4%; n=9) reported living alone; the remaining participants reported living with their spouse or partner (15.8%; n=3), with other family (21.1%; n=4), with friends (5.3%; n=1), or with roommates (10.6%; n=2).

Most participants had full-time employment (68.4%; n = 13) and the remaining participants reported either being employed part-time (21.1%; n = 4) or being a student (10.5%; n = 2). The sample reported varying annual income levels as follows: \$20,000 to \$29,999

(10.5%; n = 2); \$30,000 to \$39,999 (42.1%; n = 8); \$40,000 to \$49,999 (15.8%; n = 3); \$50,000 to \$59,999 (5.3%; n = 1); \$70,000 to \$79,999 (5.3%; n = 1); \$100,000 and above (10.5%; n = 2); and, two participants declined to answer (10.5%). Related to being incarcerated, 89.5% (n = 17) denied spending time in prison; one participant (5.3%) endorsed previously serving time in prison and one participant (5.3%) declined to answer. Pertaining to faith-based beliefs, 31.6% (n = 6) of participants reported Protestant faith, two participants (10.5%) reported Catholic faith, 26.3% (n = 5) reported no religious affiliation, two participants (10.5%) reported being spiritual but not religious, two reported (10.5%) not knowing their faith-based beliefs, one participant (5.3%) reported being atheist, and one participant reported being agnostic (5.3%).

Justification Of Sample

As the information from participants in phase one of this study was going to be generalized to another sample of BSGLM, rationale is needed for how adequate this sample is to comment on what a healthy identity looks like among this population and what factors contribute to this process. Using the quantitative data from phase one, participants were appropriate to comment on a healthy identity among BSGLM as they reported a greater sense of racial centrality compared to Sellers et al. (1997) normative sample of Black college students at predominantly White institutions and Historically Black Colleges and Universities. Further, phase one participants reported greater self-awareness, authenticity, intimacy, and social justice on the LGB-PIM compared to the sample the LGB-PIM was based upon (Riggle et al., 2014). Lastly, the phase one sample reported greater sexual identity superiority, affirmation, and centrality as well as lower internalized homonegativity, identity uncertainty, acceptance concerns, and concealment motivation on the LGBIS compared to the normative sample (Mohr & Kendra, 2011). Altogether, these findings indicate this sample appears to be appropriate to

comment on healthy identity among BSGLM as the sample has positive attitudes, feelings, and beliefs about both their racial and sexual identities.

Qualitative Findings

Qualitative analyses were separated into three groups based upon the research questions:

(1) what does a healthy identity look like among BSGLM?; (2) and, which inhibiting and facilitating factors influence healthy identity development among BSGLM? The qualitative analysis explicated several components of healthy identity among BSGLM including freedom from conforming to societal views of Black men, unconditional acceptance of them by their social support system, and self-affirmation and comfort with themselves. The qualitative analysis also elucidated 13 factors that facilitate and inhibit identity development among BSGLM.

Healthy Identity Among BSGLM.

Participants identified several subthemes when asked about what healthy identity looks like among BSGLM. Specifically, participants repeatedly mentioned freedom from conforming to societal views of Black men, unconditional acceptance of them by their social support system, and self-affirmation and comfort with themselves.

Freedom From Conforming To Societal Views Of Black Men. Participants shared that a necessary component of healthy identity among BSGLM includes not trying to conform to heteronormative and masculine expectations, which, in turn, provides a sense of liberation. As Kevin, a 25 year-old queer man said,

A healthy identity for same-gender loving men looks like expressive, sexual, and political freedom in a way that is liberated from cis-heteronormativity and seeking to conform with established/existing social expectations. A healthy identity looks like building new

models to 'be.' He sees his identity as existing outside of a masc/femme binary and does not regulate or police his own sexual desires to conform with cis-heteronormativity.

Alex (age 23, gay) and Karic (age 26, gay) commented,

Simply being able to exist and live freely. Being able to express yourself without the pressure of knowing you may be in danger (Alex).

He does not let Black society or gay society define who he is (Karic).

Bill (age 33, bisexual) and T (age 27, gay) shared that BSGLM with a healthy identity would have positive thoughts and feelings, for example:

Look at me! I can be free to be me! And, I can do it joyously without others damning or shaming me. I can live in my truth. Hide? Closet? Child, for what (Bill)!

The feeling of relief and that allows one to be free is a feeling someone would have. A feeling of I can be my true self in any space and not think twice about [how] I am perceived (T).

Drawing from the participants' phase one qualitative references to freedom of conforming to social norms about BSGLM, four items were created to capture the sentiments gleaned from the participants: (1) I am able to live freely without being bothered by what others think of me being a Black same-gender loving man; (2) I do not have to conform to traditional views of what it means to be a Black man; (3) I define who I am and how I express myself; and (4) I do not feel pressured to act how others think Black same-gender loving men should act. These items were used to measure freedom from conforming to societal views of Black men in the second quantitative phase of the mixed-methods study.

Self-Affirmation And Comfort With Themselves. Participants discussed the importance of BSGLM that have a healthy identity must recognize their worth and feel comfort, not distressed, about all of their identities. They also acknowledged having a positive disposition toward both one's racial/ethnic and sexual identities. For example Q (age 53, gay) explained,

I believe that a positive or healthy identity would be one in which a Black same-gender loving man is comfortable with both his Blackness and his queerness/same-gender loving status. A comfortable same-gender loving Black man should have positive thoughts and feelings about both his Blackness and his queerness.

BB (age 32, gay) mentioned,

I believe a positive/healthy identity for a Black MSM is a self-concept of feeling loved, safe, and living their best life. The particulars are of course based on the individual, but the basics include feeling comfortable being one's self.

Chad (age 25, gay), Brian (age 26, gay), Xavier (age 35, gay), and Andrew (age 27, gay), respectively, acknowledged in order to feel comfortable and affirm oneself is a process:

A person that is self-affirming, and has worked/working through past traumas stemming from the complexity of being both Black and Gay. They are not always happy, but most days are good days. They would have a lot of self-love (Chad).

A sight of a man who is no longer attempting to be something, rather he will accept in fullness what it is he is, without doubt (Brian).

...loving himself fiercely simply because he exists (Xavier).

...constantly reminding themselves of their worth through affirmations, gratitude, and self-love (Andrew).

The ideal of self-affirmation and comfort is captured for the second quantitative phase by an adapted version of the Authenticity subscale from the Lesbian, Gay, and Bisexual Positive Identity Measure (Riggle et al., 2014). We adapted the measure to capture the degree of comfort the person has with their ethnic and sexual minority identities and expressing those identities when interacting with others. An example item is, "I am comfortable with my Black samegender loving identity."

Unconditional Acceptance From Their Social Support System. In addition to accepting and feeling comfort with themselves, participants identified BSGLM have to be fully accepted by their social networks. For instance, Bill (age 33, bisexual) and Karic (age 26, gay) commented:

Acceptance. And, when I say that, I mean FULL and unconditional acceptance. We will have access and abilities associated with every label/title (e.g., father, son, co-worker, etc.) without concerns of retribution from our families, friends, and careers (Bill). Someone with supportive family and friends, who does not have to hide who he is, who realizes that his Blackness and queerness are a disadvantage but doesn't make that affect him in a negative way (Karic).

Rio (age 34, same-gender loving) stated BSGLM have to experience acceptance in all spaces they occupy that affirm, not denigrate, them.

...it means having spaces in schools, jobs, religious, family and friendship circles, medical care and life overall that affirms our choice to be open about our orientation.

A pair of items were created for the second quantitative phase to capture the experience of having full and unconditional acceptance from their support systems. Those items are: (1) my

support system is fully accepting of my Black same-gender loving identity; and, (2) I have access to spaces or environments that are fully accepting of my Black same-gender loving identity.

Inhibiting Factors of Identity Development Among BSGLM.

Internalized Homophobia. Most participants described experiencing self-hatred relating to their same-gender attraction and internalizing negative messages about non-heterosexual individuals. Karic (age 26, gay) reported,

I hated myself, I really did because my family hated gay people. I absolutely hated who I was, absolutely. And the fact that I knew I was gay and obviously I couldn't change the fact that I was black, I would hear my classmates and family say awful, awful things about gay people. And, I begun, when you hear something so much you start to believe it. I believed I was a terrible person. I believed that I was going to hell. I believed that I was a sinner. I believed that I was nasty, that I was disgusting because it was something I always heard.

Alex (age 23, gay) commented,

Because I didn't like myself, I was trying to avoid mixing them [Blackness and queerness] because I tried to remove the gay. Like I said before, I got to experience those different gays, the only thing I thought about gay people is that they are sissys, they are punks, they act like women and they will go to Hell because of sin and stuff like that. So that wasn't something I wanted to be a part of me.

T (age 27, gay) discussed becoming aware of their internalized stigma,

I didn't realize until I got into college that I had experienced internalized homophobia.

And so that was a very like, yes, I into it with guys and date guys. But, as far as hanging out with other gay men, you know, I guess you could say other like hanging with other

straight-passing men. I wouldn't hang with those who were a little more feminine than I was or transsexual or those outside of being a cisgender, straight-passing male.

Rio (age 34, same-gender loving) mentioned,

I think worthlessness. I remember in 'I Know Why the Caged Bird Sings' when Maya Angelo mentioned when she realized that her voice could actually do harm. It was moments where I realized that my outness can have a negative impact like that and it is no longer just about me, like being comfortable with myself that day. It could be an impact on other people that isn't positive. So I internalized that a how do I, manage my impact on other people when it can possibly be negative for them. I would also reflect back on moments where I was in school and my voice got deeper and the pitch of my voice became higher when I was excited, and during these moments people would call me gay: 'There is that gay stuff.' And I remember just even throughout school reflecting back on those moments like manage yourself like this kind of like devil in your head type of thing of manage yourself because what you're presenting to the world is unacceptable.

The internalized homophobia the participants alluded to is captured for the second quantitative phase by the Internalized Homonegativity subscale of the Lesbian, Gay, and Bisexual Identity Scale (Mohr & Kendra, 2011).

Experiencing Non-Affirming Religious Beliefs. Participants commented on their experience of receiving non-affirming religious beliefs that made it difficult for them to accept and navigate their sexuality. Many of the participants recalled being told they were going to hell and that something was wrong with them, for example B (age 31, gay) recounted,

I was told I was possessed with a spirit. And so every Sunday I would go to the alter and I would pray out my supposed demons. I knew I was gay but I was possessed. And so I

struggled with that for years because every day I would wake up or every night before I went to bed, I asked God 'please don't send me to hell because I'm gay.' That's what I was taught of being gay is major sin and you're going to hell because you're gay.

Brandon (age 28, gay) reported a similar experience and hearing messages of damnation during weekly church services.

I know I struggled with the fact that I was gay. I always believed that growing up and being Black and gay within a family dynamic that is super religious is always frowned upon. It was one thing to go with my mom's family that were deeply embedded in the church and hear every Sunday from the pulpit that men that like men were going to hell.

Bill (age 33, gay) detailed his thoughts and feelings while receiving these negative messages during a church sermon.

I can recall a specific time when [pastor's name] made comments about homosexuality and it was one of the most unwelcoming feelings ever. I actually had a cousin who walked out. It was one of the most unwelcoming things. How can you sit there in the pulpit now and only less than 50, 60 years ago, you too nigga weren't anything. You were treated less than as well just 50, 60 years ago. How dare you judge me for who I like?

Several measures were used to assess the experience of non-affirming religious beliefs for the second quantitative phase of the study. A pair of items from Gibbs and Goldbach's (2015) study of religious conflict among LGBT young adults were used to retrospectively assess changing their faith because of its views of homosexuality and whether their parent's religion made it difficult to talk about their sexuality; those items were (1) I have left or changed my religious affiliation because of its view toward my sexuality and (2) my parents' religious beliefs

made it more difficult for me to tell them about my sexuality. A pair of items from Watkins et al.'s (2016) study of religiosity among Black men who have sex with men were used to assess additional experiences due to their religious beliefs: (1) my religious beliefs make me feel bad about having sex with other men and (2) I often have to choose my religious beliefs over my desire to be with a man. Several items were generated to assess other aspects mentioned by participants: (1) I heard negative messages about homosexuality during religious services while growing up; (2) I attempted to pray for my same-gender attraction to go away; (3) I experienced rejection or was treated differently from others involved in my religion due to my sexuality; (4) I heard others involved in my religion speaking negatively about individuals that identified as LGBTQ; and, (5) I witnessed others involved in my religion treating LGBTQ individuals poorly.

Experiencing Non-Affirming/Non-Supportive Messages from Family While Growing Up. Participants recalled experiences where they received non-supportive messages after their family and friends were aware of their sexuality. Many of these messages expressed disappointment of their sexuality and conditional support of them. For example, Alex (age 23, gay) detailed,

I would say my interaction with friends and family played a big part. For example, when people first started finding out about my sexuality, people were like, 'well you know you're still a man.' That brought it to my attention, and often reminded me that people feel as if they can't coexist. You can't be gay and be a man. Of course that connotation with gay men wanting to be like women, so it's kind of them saying gay is not that connoted with masculinity.

B (age 31, gay) remembered being told he was wrong at an early age:

For being Black and gay, I was always told that I was wrong and that I was going to hell. When I was like 11 or 12, I told my parents that I'm gay and they were like that's not right.

BB (age 32, gay) discussed his mother's conditional acceptance of his sexuality:

My mother always tells me I accept you but I don't necessarily agree with the sexuality part.

Items were generated for the second quantitative phase from qualitative responses to assess the non-supportive messages participants heard or received from their family about their sexuality. The following are a few of the 14 items generated: (1) my family believes Black men cannot be Black and gay; (2) my family conditionally accepts my sexuality such as "I accept you but don't agree with your lifestyle;" and, (3) I hear my family say negative comments about other LGBTQ people.

Concern of Hurting or Letting Down Others and Concerns About Possible

Rejection From Family and Friends. Participants described potentially disappointing their family, specifically their father, and concerns about anticipated rejection made their identity development process difficult. Brandon (age 28, gay) commented on his concern of hurting his father,

My father tried to reinforce that he wanted to raise a man's man. I knew at a very young age that I' going to break your [his father's] heart one day because I'm not the person that you're trying to raise.

Darryl (age 23, gay) commented on how the experience of possibly not having grandchildren would disappoint his father as well.

I think it would have been more of a disappointment for my dad. Growing up he mentioned how would love to have grandkids and how he would be so happy if we did this and that. So I think I would of shut his dreams down and disappointed him if I told him I was gay.

Brian (age 26, gay) reflected on how his intersectional identity as a first-generation Nigerian immigrant and how his family steeped in African culture made it difficult for him to navigate his identity as a Black gay man.

Black culture and African culture are very similar but in my experience, African culture is much stricter. First and foremost, many Africans that are here [United States] don't have a lot of family here. So my only family are my mother, father, and siblings. There is no auntie or uncle because I'm first generation African-American. So if I was an American as a Black American, all my family is here so I have a better chance if my parents throw me away or kick me out. But if my parents kick me out as an African, even the African community, would abide by them; that is the atmosphere that your parents teach you at a young age and you see these examples. You hear stories of African kids who had babies out of wedlock and how they were castigated by the community. So when you hear that alone and think that's just having a baby. If I'm gay and they did that to a person who was straight, I can only imagine what they would do to me and that is exactly where my thought process was.

To capture this information for the second quantitative phase, the adapted nine-item Family Reactions subscale from Lewis et al.'s (2001) broader measure of stressors among sexual minorities and four generated items were used to assess concerns of hurting family members and anticipate rejection among participants. A few of the items from the family reactions subscale are

(1) I am concerned about rejection from my family due to sexuality and (2) there is distance between me and family due to my sexuality. The four generated items assessed additional information mentioned by participants in phase one: (1) I am afraid of hurting my family because of my sexuality; (2) I am afraid of disappointing my family because of my sexuality; (3) I am afraid of being kicked out of my family's home because my sexuality; and (4) I am afraid of losing love from my family because of my sexuality.

Threats and Enacted Violence, Discrimination, and Harassment. Participants frequently commented on how family members threatened harm or sanctioned violence toward the participant as a method to change their sexuality. Participants also commented on experiencing harassment from school officials, students, and other individuals due to their sexuality. Kevin (age 25, queer) elaborated on his experience with threatened harm from his family:

Yeah, just king of the moments of stigma replay in your head. I think from childhood and I think that's really also made it difficult to come out and to really be honest with myself because there was so many moments of stigma, whether it was passive or just very violent stigma from my childhood that made it so difficult. I think my father saying when I was in elementary school that he would physically harm me if I were to hypothetically be gay or queer. And, I overheard that conversation with family members of mine.

Karic (age 26, gay) commented on the physical abuse sanctioned by his family:

...because I was effeminate while growing up, my brother was very abusive. He was very abusive to me. He would beat me up, beat on me because the wind's blowing and that type of thing. My family masked that as him toughening me up because I was so

effeminate. They let him pretty much beat on me so much as a kid so I would finally fight back and toughen up.

An adapted version of the Violence and Harassment subscale from Lewis et al.'s (2001) broader measure of stressors among sexual minorities and one generated item were used in the second phase to retrospectively assess the experience to threats, violence, discrimination, and harassment due to sexuality. An example from the seven-item subscale is, "I have been physically assaulted due to my sexuality." An additional item was generated to capture what phase one participants described of being threatened with physical violence to coerce changing one's sexuality: I have been threatened with physical violence from family to make me change my sexuality or same gender attraction.

Seeing Other Queer People Being Referred To In A Negative Manner Or Treated Unfairly. Participants commented on how witnessing their family or the media treat or talk about other queer people in a negative manner made it difficult for them to navigate their on same-gender attraction. Brandon (age 28, gay) described two situations with his family:

One of my great uncles had been sexually assaulted by a gay man and later I had a cousin sexual assault another family member. I remember being 12 and hearing my father say 'I don't know why these gay niggas try to rape people.' I always felt like I had to conceal my sexuality if I wanted to have a relationship with my family because I didn't want them or my dad to look at me like I was a future predator. I didn't want my mom to look at me in the fact and ask me why I was choosing to go to hell.

Brandon went on further to mention,

I witnessed my family handle the gay and lesbian family members that were in the family. It was constant ridicule and assumptions. It was hard for me because I didn't want

to be seen in that light. And I've lived my whole life being the perfect student and perfect son and I always felt like there was a timer and the timer would go off and at the expiration of that time, they would find I was gay and would love me less. In the back of my mind, knowing or feeling they would resent me made it hard for me to be okay with it. I regret spending so much time being consumed with those fears.

Chad (age 25, gay) commented on how watching heterosexist media made his process difficult.

I knew the world was going to hate me from TV and seeing derogatory terms like 'faggots' always used with a negative connotation being gay as well as people were treated who were outwardly feminine. So I was lucky enough to pass as masculine while growing up. But those who couldn't pass were told they were going to hell or they got picked on and kind of bullied. I think I tried to overcompensate for that by being extra masculine.

A couple of items were generated to measure how the participant's family reacts to sexual and gender minorities for the second quantitative phase of the study. Those items were:

(1) my family speaks negatively about individuals that identify as LGBTQ; and, (2) my family treats LGBTQ individuals poorly.

Lack Of Representation Or Role Models. Several participants commented on how the lack of Black queer representation in the media they watched, within the LGBTQ community, or among those around them made it difficult to navigate their identity. For example, Ty, (age 27) a biracial, bisexual man, mentioned:

The lack of representation that I saw. Looking back on the time growing up, I feel as if I were to have had stronger representations in the media, it would of been easier to self-

identify. A stronger representation in my own community. So, again when I started to go to LGBT centers, I would not see a lot of Black folks, I didn't see a lot of people of color, I didn't see a lot of bisexual men going to these things didn't make it easier for me to a lack of representation or somebody that looks like me.

Brandon (age 28, gay) commented on how hard it was for him due to not having someone to relate to.

One of the things that was so much harder for me was not having anyone that I could directly relate to or connect to or confide in. But not like I needed a teacher. Straight people are reinforced every day in culture, right? If I just seen someone that looked like me outside of Karamo [Brown] when he was on The Real World Philadelphia that would of shown it is okay to be Black and gay, I think I would've felt a little better.

Moreover, participants commented that the lack of knowing anyone in their personal life that was queer made their identity development process more difficult. Alex (age 23, gay) stated:

The Black part was always there. It was really more so merging the Black with the gay because I've never been taught that they coexisted. I never knew of anybody gay so that played a big role with me learning myself because I didn't know how to barely identify. So learning myself took a long time.

This inhibiting factor is related to the facilitating factor discussed in the next section, having mentorship, role models, and/or media representation of Black queer men. As such, we used the same measures to assess the absence or presence of Black queer representation for the quantitative phase of the study. Several measures were combined to retrospectively assess the occurrence and perceived stress of having mentorship, queer role models, and seeing media representation of Black queer men. An item from the People of Color Heterosexism subscale

from the LGBT-People of Color Microaggressions scale (Balsam et al., 2011) was used to assess having LGBT people of color role model, "not having any LGBT people of color as positive role models." An item from Yancey et al. (2002) and Bird et al. (2012) was used to assess whether the participant had a role model with a similar identity with the participant, "I had a person or individual I really wanted to be like (this could be someone you know personally, or someone you have read about or seen on TV or in the movies, or that you know in some other way)."

More items were generated to assess other aspects mentioned by participants in phase one: (1) I saw Black gay or bisexual men in the media; (2) I knew about important Black gay or bisexual men; (3) I had a role model with similar identities as me; (4) I saw or knew of successful Black gay or bisexual men; and, (5) I was able to modify my views of Black gay or bisexual men by seeing positive images of Black gay or bisexual men.

Facilitating Factors Of Identity Development Among BSGLM.

Connecting With Other Black Queer People. Participants repeatedly mentioned the importance of having access to spaces and friends that affirmed who they were, and how helpful these connections were for their development as BSGLM. Kevin (age 25, queer) described gaining access to spaces with other BSGLM:

I intentionally entered into different spaces where I felt reaffirmed. For example, working with specifically a community-based organization that is led by Black gay men, and most of the services are aimed towards Black gay men and Black trans women. Being in that space became a family to me. Also, joining a cohort of Black gay men who are in different health professions programs or work for different community-based organizations. I feel like those things have been very intentional for me, and kind of reaffirmed myself as a Black queer man.

Derrick (age 38, gay) discussed how entering gay spaces and having friends with similar identities facilitating his process of being comfortable with himself.

So I remember I had gotten a fake ID and went with some friends to a gay club. And seeing all the guys and everything, I was like 'I'm home, I'm good.' At that point during my sophomore year of college, I had surrounded myself with enough friends who I've felt similar with. This made it easier for me to develop because I had come from such a sheltered place. I didn't really even know anything and so I learned, I learned so much from just being around them and how to be comfortable with myself.

B (age 31, gay) commented on how his supportive friends, queer or heterosexual, made his process easier.

Having friends, good friends around me. I had friends that were out, I had friends that were in the closet, it was all over the board. I had straight friends, female friends that were just loving and supporting me and were like, I don't care. All of that definitely helped me.

For the quantitative phase we adapted the 8-item Connectedness to the LGBT Community (Frost & Meyer, 2013) and four generated items to assess connectedness to other Black queer people. An example item from the Connectedness to the LGBT Community is, "You feel you're a part of your city's Black LGBT community." Several items were generated to assess additional connectedness aspects mentioned by participants in phase one: (1) I have used mobile applications and websites to connect with other Black LGBT people; (2) I have Black LGBT friends; (3) I have visited Black LGBT clubs to connect with people like me; and, (4) I have engaged with Black LGBT community-based organizations to connect with people like me.

Having Mentorship, Role Models, And/Or Media Representation of Black Queer Men. Many of the participants reflected on the experience of having a Black queer mentor during their youth, adolescence, or early adulthood was pivotal in their development as a BSGLM. Q (age 53, gay) discussed how having these mentors normalized his experience and provided images of successful BSGLM.

I think my interaction with other gay Black men who were older than I made it easier for me. Older Black males on campus who were gay and who were succeeding and who were thriving and they weren't necessarily out either; but they were academically very smart, going to medical school. There were a lot of things they were doing that helped me to understand that I can be successful as a gay Black man as well. I think it's through their mentorship that I started to evolve. And so I started to talk with them more and more about my experiences and they normalized those experiences for me by sharing their stories and their narratives as well. And so that helped me to really evolve to think that this is ok, and though none of us were really openly out, we had our own little story of secret society of support and mentorship.

T (age 27, gay) and Rio (age 34, same-gender loving) commented on having mentorship from queer individuals that were not Black men.

I had a mentor in undergrad who was a gay woman. She was really pivotal for my development of being okay with who I am.

I would say mentorship and also being able to find my mentors when they weren't really present for me. So for instance, my high school counselor was a lesbian woman who I would constantly be around. I would ask her questions and she would give me answers

but it was definitely in a coded language. I think for me that was the bed rock of much of my ability to stand in my own truth.

Xavier (age 35, same-gender loving) commented on having role models and being introduced to diverse presentations of BSGLM in the media from others.

I think just that I have been very lucky. God has placed so many images of BSGLM in my life at pivotal times that helped me have possibility models about the type of person I could be because for so long I had no images and everyone around me was telling me that it was wrong. I met this guy freshman year of high school and he was clearly out and proud and like stereotypically like flamboyant, but he would say 'hey girl.' And I'd be like, 'I'm not a girl, why you calling me girl?' I was super paranoid because I was still going through my own stuff. But he was an example of someone who was fully comfortable with himself and has friends and people don't shun him, people like him. He introduced me to the work E. Lynn Harris who was very influential for me because this was the first time I read about BSGLM who were middle-class and lawyers, and owned sports agencies and things like that. Then I got in college and learned about Baldwin and Bayard Rustin. Just having more and more images of what it looked like to be this sort of Black same-gender loving professional man who wasn't a character, who wasn't overly flamboyant or feminine.

Derrick (age 38, gay) discussed how seeing BSGLM men on television signaled more acceptance of BSGLM in society.

During grad school and when Noah's Arc [TV show featuring Black queer story lines during mid-2000s], came out and just seeing that representation made it seem like the

world was moving in a direction where it was ok for me to be gay. So that certainly helped.

Several measures were combined to retrospectively assess the occurrence and perceived stress of having mentorship, queer role models, and seeing media representation of Black queer men for the quantitative phase of the study. An item from the People of Color Heterosexism subscale from the LGBT-People of Color Microaggressions scale (Balsam et al., 2011) was used to assess having LGBT people of color role model, "not having any LGBT people of color as positive role models." An item from Yancey et al. (2002) and Bird et al. (2012) was used to assess whether the participant had a role model with a similar identity with the participant, "I had a person or individual I really wanted to be like (this could be someone you know personally, or someone you have read about or seen on TV or in the movies, or that you know in some other way)." More items were generated to assess other aspects mentioned by participants in phase one: (1) I saw Black gay or bisexual men in the media; (2) I knew about important Black gay or bisexual men; (3) I had a role model with similar identities as me; (4) I saw or knew of successful Black gay or bisexual men; and, (5) I was able to modify my views of Black gay or bisexual men by seeing positive images of Black gay or bisexual men.

Having Supportive Heterosexual Friends And Family. In addition to participants commenting on knowing other proximal Black queer individuals and having role models, participants reported having affirming and supportive heterosexual allies facilitated their identity development process. BB (age 32, gay) noted the following:

I was never kicked out of the house or disrespected because of my sexual orientation. So I have been affirmed in my sexuality. So for me this was a little different from other people I know. Those who either had parents that did not affirm them or their whole

families are not [affirming]. Because of that my identities, in my mind, don't kind of color my experiences

A couple of items were generated to assess perceived acceptance of the participants' sexuality by their family and friends. Those items were: (1) how accepting is your family of your sexuality?; and, (2) how accepting are your friends of your sexuality.

Significant Life Events. Many participants mentioned how they were able to accept and explore their sexuality as well as live more freely after significant life events. Specifically, participants commented on moving out their family home, being financially independent, going to college, or moving to a more liberal area as facilitating their identity exploration and commitment process. For example, Chad (age 25, gay) explained:

I really didn't come to terms with exploring my sexuality until I was much older. So that kind of facet of being gay really didn't active until I was about 21 and graduated from college when I was able to freely kind of explore my sexuality and things like that. And when I moved to Atlanta, I did have more opportunities, options, and freedom to openly explore my sexuality.

Items were generated to capture significant life events that phase one participants mentioned facilitated their ability to development identity as a BSLGM. Participants were asked, "Did any of the following events help you be more open and authentic about your Black LGBTQ identity?" Participants responded Yes, No, or Don't Know to 14 prompts including: moving out of your family's home; being more financial stable and independent where you did not rely on family for financial assistance; seeking higher education or going to college; and, moving to a place where you believe you could be more open about your Black LGBTQ identity.

Desire To Be Authentic/Frustration With Concealment. Several participants described eventually reaching a point where they no longer cared what others thought of their sexual orientation and fatigue of not being genuine to themselves and/or others. Kris (age 41, gay) mentioned,

I was 22 when I came to the point where I was tired of others saying negative things about me. I kind of had to respond with 'I am who I am and so what? If you got a problem with me, then screw you. But I am going to be true to who I am.

B (age 31, gay) described fed up with his circumstances and hiding himself.

I was in college and accepted that this is who I am. I had been tired of living in this box for all these years, for 20-plus years. And, I was like okay, I am who I am. Am I going to go out with flags and stuff? No, because that's still not who I am because heterosexual

people don't walk around with a heterosexual flag. At that point, I was not going to live

Karic (age 26, gay) also described his desire to be authentic despite the experience of negative experiences.

in a bubble.

I'm 26 years old and I do not care what you think about me or how you think my soul is going to be, or you being toxic in your masculinity. Even around my brother now, I don't hide my gayness. That was the main issue that I had when I was younger because I was completely afraid of him. I'm not afraid of him anymore. Like even around my five siblings or around my mom and things like that; I talk in my feminine manner, I walk in my feminine manner or what have you. I don't change who I am just to please them anymore because I'm my own person. I'm an adult, I live on my own. I don't depend on

them for anything. So you need to take me or you leave, so you take all of me or you leave me. So, I don't do that anymore: I don't hide who I am anymore.

Brandon (age 28, gay) mentioned:

It took for me be exhausted with having to lie and conceal things from my friends before I could start opening up. We often don't talk about the fatigue of having to cover up a lie with another lie. It was tiresome. I felt like I was going into my mid-20s and realizing nobody knows me.

The desire to be authentic and frustration with concealment mentioned by the participants is captured for the quantitative phase by the three item concealment motivation subscale from the Lesbian, Gay, and Bisexual Identity Scale (Mohr & Kendra, 2011). An example item is, "I keep careful control over who knows about my same-sex romantic relationships." We also created two additional items to assess frustration with concealment and desire to be authentic. Those items are: (1) "I have a strong desire for others to know my authentic Black queer identity;" and, (2) "I am tired of hiding my Black LGBT identity from other people."

Grit/Determination. Participants repeatedly described having a sense of perseverance and determination despite the experience of negative societal views toward them and their abilities.

For example, Chad (age 25, gay) reported:

Um, so I think that kind of thing, I'm into being a very strong person as well, but to have a very tough skin growing up and to be kind of determined and like a strong willed because I felt that, you know, growing up I was like, well not this might be like a derogatory mark I guess on my life. And so what can I do as far as achievement wise to sort of kind of alleviate that and kind of balance the scales a little bit.

Further, BB (age 32, gay) noted this sense of determination requires having agency in one's life and not succumbing to the poor expectations about BSGLM.

I'm not ignorant to the world we live in. So through my experiences I have learned to build up a certain level of resilience and grit, and being determined to succeed in spite of various barriers placed upon me due to my identities. I've never allowed myself to think I can't do anything because I am black and gay but I recognize those barriers could be used against me from achieving the things I want.

Bill (age 33, bisexual) commented,

What you eat ain't gon' make me shit for a lack of better words. What I have to be able to do is go write my own destiny and create my future, it's not up to everyone else. We all have our own story. However, society as a whole doesn't always care about what happens individually. I've never let anything hold me back and Kujichagulia [Kwanzaa principal about self-determination] helped me. I'm going to continue to move, I'm going to continue to go. I refuse to lose, literally, I refuse to lose. Nothing is going to keep me down. That principal established a firm foundation for what I've built so far.

The sense of grit and determination described by participants is captured for the quantitative survey battery by the Short Grit Scale (Duckworth & Quinn, 2009) which assess "perseverance and passion for long-term goals" and "entails working strenuously toward challenges, maintaining effort and interest over years despite failure, adversity, and plateaus in progress" (Duckworth et al., 2007, pp. 1087-1088).

Other Identity-Related Factors

In addition to identified inhibiting and facilitating factors, several participants discussed their unique identity-specific experiences that also influenced how they negotiated their identity

development experience. However, these unique experiences were not prevalent among other participants (e.g., first generation immigrant, military status, HIV-positive, biracial). For example, Brian (age 26, gay) reflected on navigating being African, African-American, and gay:

I accepted being African but the Black and gay were difficult parts. I was raised to believe that Africans were us and African-Americans are them, so it was never a combined. them. So it was always a dichotomy between I'm Black African but I'm not Black but you don't want to be them. So I always denied the Black part and being gay coming from an African background is not something you tell; it is very ridiculous and it's taboo. So I denied and opposed it.

B (age 31, gay) recounted concealing his sexuality while he was in the military despite enlisting after Don't Ask, Don't Tell was repealed:

I felt shy and ashamed of it [his sexuality]. I was in the military for six years and I hid it for a long time. For me I didn't feel comfortable because the military is very strict, clearcut, that kind of deal.

Darryl (age 23, gay) discussed how living with HIV added to his anticipated rejection from his family in addition to being Black and gay:

Just difficult. Being [HIV] positive, what's difficult is not wanting to express it to your family and being looked down upon and as if something bad is going to happen.

Qualitative Results Summary

The qualitative analysis revealed several themes related to what a healthy identity looks like and what factors inhibit and facilitate identity development among BSGLM. Related to healthy identity, participants indicated BSGLM with healthy identities are liberated from conforming to societal views of Black men, receive unconditional acceptance form the social

support system, and are comfortable with themselves. Participants also elucidated what experiences inhibited their identity development including internalized homophobia, hearing non-affirming religious beliefs, receiving non-supportive messages from their family, having concerns of possible rejection from their support system, being threatened about their sexuality, seeing other queer people treated poorly and not having Black queer individuals to admire when they were younger. Participants also highlighted which factors facilitated their identity development including having supportive heterosexual friends and family, connecting with other Black queer people, having queer mentorship and seeing Black queer men in media, significant life events, frustration with concealing their identity, and being gritty. Based on the participants' qualitative responses, a quantitative survey battery was inductively derived to assess a larger sample of BSGLM about their identity development process.

Discussion Of Study One: Qualitative Findings

Overall, the qualitative data elucidated what does a healthy identity look like among BSGLM and which factors or experiences influence the identity development process. The qualitative analyses explicated three components of healthy identity among BSGLM. The qualitative analyses also described 13 factors that either facilitated or inhibited their process of negotiating their identity.

Healthy Identity Among BSGLM

Participants identified several unique components of a healthy identity including (1) freedom from conforming to societal views of Black men, (2) unconditional acceptance of BSGLM by their social support system, and (3) self-affirmation and comfort with oneself. These three components align with several facets identified in a broader set of qualitative studies examining positive aspects of being a sexual or gender minority. Those studies reported eight

positive aspects that LGBTQ individuals ascribed to their sexual and/or gender identity including: (1) living an authentic life; (2) having increased self-awareness; (3) experiencing freedom from societal expectation of gender expression; (4) creating strong bonds with their family of choice; (5) not being limited by societal expectations around intimacy and sexuality; (6) having a unique perspective that engenders compassion for others; (7) being a role model; and, (8) belonging to the LGBTQ community (Riggle & Rostosky, 2012). Our participants reported similar sentiments regarding a healthy identity among BSGLM with freedom from adhering to societal expectations, being accepted by their social networks, and the ability to be authentic. While the Riggle and Rostosky (2012) studies were broad, less than three percent of their samples were Black participants. Our findings provide some preliminary evidence that healthy identity among BSGLM aligns with other identified positive aspects of being an LGBTQ individual.

Freedom From Societal Expectations About Being A Black Man

Participants in the current study shared that a necessary component of healthy identity among BSGLM includes not conforming to heteronormative and masculine expectations of Black men which contributes to a sense of liberation. This theme freedom from societal expectations as a component of healthy identity among BSGLM is seen in other samples of sexual minorities. In a qualitative sample of over 500 gay men and lesbian women living in the U.S., Riggle et al. (2008) found participants identified freedom to deviate from social conventions about gender, gender roles, relationships, and traditional heterosexual social scripts (e.g., getting married, having kids) as positive aspects of being a gay man or a lesbian.

Particularly, gay men in the Riggle et al. (2008) study also mentioned freedom from gender role expectation including being able to emotionally express themselves. This was explicitly

described by Brandon in the current study stating: "There's no expectation for me to be this hard, unreachable, emotionless being. I'm able to fully express the range of my emotion without judgement of having people looking like, 'oh, he's soft'."

In another qualitative study of 157 bisexual individuals from seven countries (US, Canada, UK, New Zealand, Finland, Norway, and Tunisia) indicated freedom from labels, roles, and social rules were identified as positive aspects of being bisexual (Rostosky et al., 2010). Further, participants in the Rostosky et al. (2010) study mentioned appreciating their freedom to love without regard for sex or gender, freedom to explore diverse relationships and experiences, and freedom of sexual expression, which align with the responses from participants in the current study. Lastly, the theme of freedom is documented in two other qualitative examinations of BSGLM. In Bartone's (2017) qualitative study of Black gay men negotiating their identities, participants mentioned it was important for them to refuse to conform to limited narratives of Black gay men and challenge traditional gender ideals. In another qualitative study of Black gay and bisexual men living in the U.S., participants identified freedom from societal expectations (e.g., marrying a woman, having children, working a specific job) or adhering to gender role norms as benefits of being a Black gay or bisexual man (Bowleg, 2013). Altogether, the necessity of freedom from social expectations highlighted in the current study appears to be consistent with results from the broader LGB community and other BSGLM.

Unconditional Acceptance From Social Networks

Participants mentioned that BSGLM must have unconditional acceptance of all their identities from their social support systems and access to affirming spaces in order to have a healthy identity. In another qualitative study of coping strategies BSGLM use to manage stigma, participants indicated the importance of relationships where they feel accepted in order to cope

with antagonistic environments (Bryant, 2017). Participants in the Bryant (2017) study reported acceptance, trust, and honesty were the most important qualities they considered when forming their support system. Our results were also consistent with findings from a qualitative study of the identity negotiation among queer women of color who also identified having access to affirming spaces where they can explore their identity was a critical factor in their identity development process (Cerezo et al., 2020).

Of note, it may be difficult for BSGLM to achieve unconditional acceptance from their support systems and have access to spaces that affirm all of their identities. This may be, in part, because BSGLM are more likely to conceal their sexual orientation compared to other ethnic same-gender loving male counterparts (Dube & Savin-Williams, 1999; Kennamer et al., 2000; Parks et al., 2004). This may limit their ability to access affirming social networks and strain their existing interpersonal relationships as BSGLM are less likely to engage in gay-related social activities compared to other ethnic groups, experience racism in the broader LGBTQ community, and encounter stigma from other BSGLM (Glick & Golden, 2010; Wade & Harper, 2019; Pachankis, 2007; Rosario et al., 2004). Receiving affirming support around their sexuality may also be difficult in the within their ethnic group given the Black community's views toward sexual minorities (Herek & Capitanio, 1995; Irizarry & Perry, 2018). Altogether, this suggests the issues BSGLM may experience in obtaining unconditional acceptance.

Self-Affirmation And Comfort With Oneself.

Participants discussed the importance of BSGLM that have a healthy identity must recognize their worth and feel comfort with all their identities. This is consistent with Operario et al.'s (2008) qualitative study of 25 Asian Pacific Islanders gay men where the authors assert identity integration involves arriving a "state of harmony" between one's ethnic and sexual

identities (p. 451). Arriving at this place where BSGLM affirm themselves also resembles the final stage of Troiden's (1989) Gay Identity Acquisition model where the individual perceives their sexual identity is valid, they express satisfaction with their sexual minority label (e.g., gay, bisexual), and they have pride in their sexual identity. This theme is also consistent with the themes from LGB individuals indicating self-acceptance, living authentically, and having a sense of wholeness are positive aspects of being LGB (Riggle et al., 2008; Rososky et al., 2010).

Inhibiting Factors Of Identity Development

Phase one participants recounted various experiences that inhibited their identity development as a Black same-gender loving man. Qualitative data analyses identified seven specific experiences mentioned by participants: (1) internalized homophobia; (2) experiencing non-affirming religious beliefs; (3) experiencing non-supportive messages from family; (4) having concerns of letting their family down or being rejected by family; (5) experiencing threats, violence, discrimination, and harassment; (6) observing other queer people being treated poorly; and (7) lacking role models or seeing Black queer men in media. Many of the identified inhibiting factors of identity development were congruent with the minority stressors posited by the Minority Stress Model (Meyer, 2003). Specifically, internalized homophobia, rejection sensitivity, and prejudice events such as discrimination and violence were mentioned.

Internalized Homophobia

Many participants described having a sense of hatred and disgust toward their sexuality and how they internalized messages they heard about sexual minorities from their family, peers, and in the media which impacted their identity development process. A systematic mapping review of studies examining internal homophobia research provides support for this inhibiting factor as several studies reviewed indicated internalized homophobia interferes with sexual

minority identity formation (Berg et al., 2016). In particular, a study of Australian MSM found that internalized homophobia was a robust predictor of lower levels of homosexual identity formation (Rowen et al., 2003). Results from 464 BSGLM revealed that those who identify as bisexual or heterosexual, as opposed to gay, reported higher levels of internalized homophobia (Quinn et al., 2015). Another larger study of 1,933 young Black MSM age 18-29 reported internalized heterosexism was significantly inversely related to pride in one's sexual identity (Vincent et al., 2019). Bryant's (2017) qualitative study of BSGLM highlighted that BSGLM struggle with internal conflict and confusion pertaining to their sexual identity as a result of internalized messages about the immorality of homosexuality from family and religious teachings. Altogether, these extant findings support that internalized homophobia may inhibit identity development among BSGLM via hindering their ability to acknowledge and explore their sexual identity.

Experiencing Non-Affirming Religious Beliefs

Participants commented on their experience of receiving non-affirming religious beliefs that made it difficult for them to accept and navigate their sexuality. Many of the participants recalled hearing damning messages about homosexuality in church that, in some cases, resulted in overt homophobia. This is well-documented in the among the extant literature on the complicated relationship between BSGLM and religion. For example, five separate qualitative studies of BSGLM report that BSGLM frequently hear negative rhetoric toward homosexuality in church (Bryant, 2017; Crisp et al., 1998; Garrett-Walker & Torres, 2017; Quinn & Gomez, 2016; Quinn et al., 2016). Specifically, same-sex behavior is framed as "dirty, deviant, against the will of God, and an abomination" (Garrett-Walker & Torres, 2017, p. 1821; Quinn & Gomez, 2016). A qualitative study of 30 young BSGLM and 21 pastors of Black churches, all the pastors

discussed how they promote that homosexuality is a sin based upon their convictions (Quinn et al., 2016). Multiple qualitative studies document participants mentioning how hearing these homophobic messages at church contributed to their internal identity struggle, delayed their self-acceptance, and caused them to internalized anti-gay attitudes (Crisp et al., 1998; Garrett-Walker & Torres, 2017; Quinn & Gomez, 2016; Quinn et al., 2016).

Experiencing Non-Supportive Messages From Family While Growing Up

Participants recounted how experiences of receiving non-affirming messages from their family impacted their identity development. These messages frequently communicated the perceived masculine gender roles that Black men are supposed to adhere to. Similar sentiments were discussed in Cerezo et al.'s (2020) study, where participants discussed how their family pressured them to adhere to gender role expectations which influenced their identity formation process as Black and Latinx sexual and gender minorities. Some participants commented on the continuation of religious messages from family members telling them they were going to hell. A couple of other qualitative studies of BSGLM also commented on how their participants heard similar messages of damnation at home about homosexuality that they heard at church (Garrett-Walker & Torres, 2017; Quinn & Gomez, 2016). Participants in phase one also mentioned hearing conflicting messages from parents about being accepted or loved but not agreeing with their sexuality. These types of messages from the families of BSGLM often made them feel betrayed, abandoned emotionally, and misunderstood by their families (Graham et al., 2009). Further, experiencing externally prescribed cisheteronormative beliefs from one's support system is a robust predictor of greater distress during one's identity development process among sexual minorities (Boyer & Lorenz, 2020).

Concern Of Hurting Or Letting Down Others And Concerns About Possible Rejection From Family And Friends

Another inhibiting factor mentioned was anticipated rejection from the participants' family and friends due to their sexual orientation. Participants reported apprehension about disappointing their family, experiencing anticipated rejection, and having concerns of being kicked out of their home which made their identity development process difficult. Similar experiences were discussed in Bartone (2017) where BSGLM mentioned hearing messages of disappointing their fathers due to their sexual orientation. Our participants discussed how they were concerned about letting their fathers down because of not being the man they were raised to be and not having children. Sarno et al.'s (2015) study of 124 queer people of color found that greater perceived conflicts between one's ethnic and sexual identities was significantly positively associated with maternal heterosexism. Further, Wilson et al.'s (2016) study of young BSGLM found that participants with high amount of paternal support had less internalized homophobia compared to those with less paternal support. Results from the current study and extant findings support that rejection sensitivity based on sexuality may engender negative emotions about not being able to meet familial expectations and internalized negative messages about being gay or bisexual among BSGLM, which may impede identity development.

Threats And Enacted Violence, Discrimination, And Harassment

Participants frequently commented on experiencing threats, harassment, and violence pertaining to their sexuality that inhibited their identity development process. In particular, they provided accounts of being threatened with violence to change their sexuality or were informed in a frightening manner of how the people were going to treat them poorly due to their sexuality. Graham et al. (2009) heard identical messages from their participants about being threatened by

family members about their sexuality and warned of the ridicule and social humiliation they would experience for being gay or bisexual. Participants also revealed being verbally harassed by family members, peers at school, and teachers based upon their sexual orientation. This is consistent with other accounts from BSGLM where they reported experiencing harassment and discrimination by family, peers at school, and church members (Bartone, 2017; Quinn & Gomez, 2016). Lastly, participants discussed experiencing physical violence sanctioned by family as a means to alter their sexuality. Other qualitative studies of BSGLM espouse similar themes of experiencing severe physical violence due to their sexuality which negatively impacted their identity development process (Bartone, 2017; Graham et al. 2009; Quinn & Gomez, 2016).

Seeing Other Queer People Being Referred To In A Negative Manner Or Treated Unfairly

Participants also described that in addition to negative messages about being queer directed at them, they commented on witnessing their family and the media talk about or treat other queer people in a negative manner which made their identity development process harder. Specifically, participants mentioned hearing negative messages about queer people from their family and observing how feminine, gay men were often treated poorly in the media alerted to how sexual minorities are regarded. A qualitative study exploring the sexual self-discovery process of young Western Australian adults found similar themes of hearing homonegative statements from family and observed in the media contributed to their internalized homophobia and informed them of how homophobic their environment was (Rosenberg, 2017). For BSGLM, the messages they receive from their family and the media about them often communicate BSGLM are a threat to traditional family values, they are distrustful and deviant, and they should live in secrecy due to their taboo nature (Glenn & Spieldenner, 2013). Furthermore, BSGLM are transmitted messages that they are "down low homothugs" or sissys responsible for widespread

HIV infections, which impacts their self-concept (Bartone, 2017; Battle & Crum, 2007; King, 2004). BSGLM likely also encounter these negative narratives about them in most spaces they navigate. For example, an intersectional analysis of sexual stereotypes ascribed to Black gay men by the general public found that participants frequently described Black gay men as the following: down low, diseased, loud, dirty, effeminate, attractive/sexy, weak, flirtatious, aggressive, strong, promiscuous, compassionate, oversexed/insatiable, reckless/irresponsible, and sexual (Calabrese et al., 2017).

Lack Of Representation Or Role Models

More than the messages that BSGLM receive about themselves from their family and media, participants commented on how the lack of Black queer representation in the media they watched, within the LGBTQ community, or among those around them made it difficult to navigate their identity. Participants recounted how their identity development process would have been easier if they had role models to identify with and learn more about themselves.

BSGLM in Crisp et al.'s (1998) qualitative study reported the media ignored and misrepresented BSGLM and limited their ability to identify with any positive images of BSGLM. A qualitative study of the influence of media of LGB identity on primarily white LGB participants also echoed similar themes (Gomillion & Giuliano, 2011). Participants in that study discussed how not seeing themselves in "traditional families" on television, only hearing love songs featuring men and women falling in love, and not being depicted in magazine contributed to them feeling excluded from mainstream society. Further, participants in that study commented on how only seeing negative depictions of queer people made them believe they could only express their identity as the stereotypes shown on television (Gomillion & Giuliano, 2011).

Facilitating Factors Of Identity Development

Phase one participants recounted various experiences that facilitated their identity development as a Black same-gender loving man. Qualitative data analyses identified six specific experiences mentioned by participants: (1) having role models and/or Black queer media representation; (2) connecting with other Black queer people; (3) having supportive heterosexual friends and family; (4) significant life events; (5) frustration with concealment; and (7) grit.

Having Mentorship, Role Models, And/Or Media Representation Of Black Queer Men

Participants discussed the importance of having a Black queer mentor and role models for their identity development process. Participants detailed how these experiences normalized being a Black same-gender loving man, provided anecdotal information that allowed them to navigate their identity-related challenges, challenged their interpersonal stigma, and gave examples of successful BSGLM. Further, seeing diverse BSGLM on television signaled that there was growing societal acceptance of BSGLM and that it was ok to be same-gender loving.

These sentiments were echoed in a qualitative study of 27 sexual minority men, primarily of color, examining mentorship in the gay community (Sheran & Arnold, 2012). Participants in that study reported having gay mentorship facilitated their sexual identity development process by helping them with disclosing their sexuality, role-modeling a gay identity, enculturating to queer culture, teaching them to manage minority stress, and informing them of queer resources. Moreover, participants mentioned how their gay role models taught them how to navigate gay and heteronormative spaces, modeled how to integrate their feminine and masculine traits while maintaining their queer identity, and provided a sense of hope about being openly queer and having a successful life (Sheran & Arnold, 2012). Other qualitative studies document queer individuals think it is important to mentor each other. For instance, Riggle et al. (2008) revealed

that participants believed acting as leaders and serving as positive role models for other queer individuals is a positive aspect of being LGBTQ. In a qualitative study of the needs of mature BSGLM, participants called for mentorship programs for younger BSGLM in order to help younger BSGLM learn from their mistakes and teach them about safe sex (Tobin et al., 2018).

Participants in the current study mentioned how media representation signaled more tolerance of queer people and that it is safe for them to live openly. Bond et al.'s (2018) content analysis of the depiction of queer characters of television found that most queer characters were most likely to bear the brunt jokes from heterosexual characters and frequently disclosure their sexual orientation. While this may be validating to see queer characters, the study noted many of their "coming out" stories were void of negative consequences which may depict the experiences of sexual minorities inaccurately (Bond et al., 2018). Gomillion and Giuliano's (2011) study elucidated that queer audiences want more realistic portrayals of them. However, participants in that study noted seeing queer characters made them feel less isolated, feel a sense of pride about their sexual identity, and normalized their identity which facilitated their sexual identity development (Gomillion & Giuliano, 2011).

Connecting With Other Black Queer People

Participants mentioned the importance of having other BSGLM in their social networks as it provided them with support which allowed them to feel more comfortable with their Black same-gender loving identity and access spaces that affirmed their identity. Sexual minorities identify the sense of belonging to the broader LGBTQ community and with individuals with shared experiences as a positive aspect of being a LGBTQ individual (Riggle et al., 2008). A study of ethnic sexual minority adolescents described similar benefits of queer friends for sexual identity development (Jamil et al., 2009). In particular, participants in that study discussed how

they connected to the queer community via community-based organizations, peers, and the internet which allowed them to explore their sexual identity (Jamil et al., 2009). Being connected with other Black queer people provided similar benefits of as having roles models and mentorship as it normalized being queer, provided strategies of how to manage heterosexism and navigate the gay community, and facilitated their comfort with themselves (Jamil et al., 2009). Our findings are also consistent with Vincent et al.'s (2019) study documenting that perceived peer social support from other BSGLM significantly positively predicts pride in one's sexual minority identity and significantly negatively predicts internalized heterosexism.

Having Supportive Heterosexual Friends And Family

In addition to knowing other proximal Black queer individuals, participants reported that having affirming and supportive heterosexual allies facilitating their identity development process. Participants commented on how affirming family members, classmates, friends, and teachers made them feel comfortable with their sexual identity and provided protection from others who attempted to harass them. Previous qualitative and quantitative findings support that social support facilitates the identity development process. Qualitative findings from a studies of ethnic sexual minorities reveal that social support and perceived acceptance from family influenced how participants were able to integrate all of their identities (Jamil et al., 2009; Kennedy & Dalla, 2014). Results from Perrin et al.'s (2019) cross-sectional study of ethnic sexual minorities found that social support significantly positively predicted pride in one's sexual identity. Lastly, Fingerhut's (2018) 14 day longitudinal study of gay men found that social support was also significantly positively associated with pride in sexual identify.

Significant Life Events

Participants discussed how they were able to accept and explore their Black same-gender loving more freely after specific life events. They routinely commented on being able to explore their identity after moving out of their family home, becoming financially independent, seeking mental health services, going to college, and moving to cities where that were more accepting of sexual minorities and had more BSGLM. These experiences reportedly allowed them to explore and commit to their Black same-gender loving identity. Similar experiences were reported in another study of ethnic sexual minority women. Participants in that study described having more freedom to explore their identity after joining the military and attending college (Cerezo et al., 2020). These experiences reportedly provided access to more liberal spaces away from their family where they could explore their identity without concern of embarrassing their family (Cerezo et al., 2020).

Desire To Be Authentic/Frustration With Concealment

Participants described eventually reaching a point where they no longer cared about what others thought of their sexual minority identity and being tired of not being genuine with themselves or others. Arriving at this point typically came after realizing the detrimental impact concealing their life and not being concerned of the possible negative consequences of disclosing their sexual orientation. Participants in Cerezo et al. (2020, p. 75) described similar feelings after being excluded from their broader ethnic and sexual communities and being made to feel different, which "fueled a desire" to live according to their own social standards, including creating spaces that affirmed all aspects of their identities." BSGLM in Graham et al. (2009) also described feeling tired of not being able to be authentic all the time.

Grit/Determination

Participants repeatedly described having determination and perseverance in spite of negative societal views about BSGLM allowed them to successfully develop their identity. This aligns with a previous qualitative study of BSGLM explaining how being determined despite oppressive conditions ensured they found spaces to explore their Black same-gender loving identity (Bartone, 2017). Moreover, BSGLM also identify self-determination a key characteristic of being a Black same-gender loving man (Crisp et al., 1998). Ethnic sexual minority women described this self-determination as an act of resistance to ensure they are able to thrive (Cerezo et al., 2020).

Grit is broadly defined as "perseverance and passion for long-term goals" and "entails working strenuously toward challenges, maintaining effort and interest over years despite failure, adversity, and plateaus in progress" (Duckworth et al., 2007, pp. 1087-1088). Grit is two-factor construct comprised of: (1) one's perseverance of effort or zeal in pursuing goals despite challenges and (2) continuity of interest which represents sustained focus on goals (Duckworth et al., 2007). Within the context of identity development among BSGLM, grit likely increases their ability to maintain their determination to explore their identity and seek authenticity despite the experience of multiple forms of stigma. In a cross-sectional study of college students, both perseverance of effort and continuity of interest were significantly positively associated with the identity development experiences of commitment making and identification with commitment (Weisskirch, 2019). Both perseverance of effort and continuity of effort were significantly negatively related to ruminative exploration. Only perseverance of effort was significantly association with exploration in breadth and exploration in depth. These findings suggest that independently and together, both facets of grit are associated with the identity development

process (Weisskirch, 2019). Perseverance of effort may more robustly associated with the active exploration process of BSGLM.

Limitations

The majority of phase one interviews were conducted by telephone at the discretion of the participant. While this provided participants with greater autonomy in the interview, this method limited the ability to observe body language and other non-verbal communication. Moreover, the use of telephone interviews may have limited the ability to enhance rapport that could have been achieved via video conferencing or in-person interviews. Future work should offer a diversity of methods to interview participants to increase accessibility; however, this work should emphasize in-person or video methods to address the limitations of non-video communication.

The qualitative interviews did not ask explicit questions about racial identity if it was not mentioned by the participant. The interviews did not explicitly inquire about gender or religion unless prompted by the participant. As such, the data provided may not have collected a robust identity development history from the participants but highlighted what the participants found to be most salient in their identity development process. Prospective work may use questions from Cerezo et al.'s (2020) study of identity formation among queer women of color including: (1) Can you tell me about how you identify with respect to race and ethnicity?; (2) Can you tell me about your gender and gender identity?; (3) Can you tell me about your sexual orientation?; (4) When you think about your identity, how do these different parts—race, gender, and sexuality overlap or relate to one another for you? In other words, how does being Black (whichever term used by participant) impact the ways you understand or experience your sexuality and gender?; and, (5) How about the ways your sexuality or gender impact your racial, ethnic identity? In

addition to using a different set of questions, future work should also interview key informants (e.g., family members, friends, partners) in the lives of BSGLM about how they witnessed identity development process of their family member or friend who is a Black same-gender loving man.

The qualitative phase asked adult participants to retrospectively reflect on their experience from years ago which may not be as accurate of an account. Future studies may decide to focus on individuals actively going through their identity development process at a younger age similar to Jamil et al. (2009) did in their study of identity among teenage ethnic sexual minorities.

Overall, the qualitative data highlighted three unique factors that comprise healthy identity among BSGLM and indicated which factors may inhibit or facilitate identity development among this population. The results also demonstrated several shared experiences between BSGLM and the broader sexual minority community including internalized and interpersonal stigma based upon sexuality. Additionally, the findings bring attention the unique experiences that BSGLM encounter while exploring and committing to who they are including concerns about not meeting societal expectations for Black men and being informed of the mutal exclusiveness of their Blackness and sexuality. The results also provide greater insight into how the identity development process of BSGLM is heavily shaped by internal cognitive-emotional factors (e.g., internalized homophobia, grit), social resources (e.g., supportive heterosexual allies, connectedness to the Black queer community, role models), media, and institutions that BSGLM are a part of (e.g., church, schools). While these findings are novel, we also want to determine if they are generalizable to other BSGLM. As such, we created a survey bastery based the

qualitative findings and quantatively tested our findings among another sample of BSGLM in the next phase of the study.

CHAPTER 3 STUDY TWO- QUANTITATIVE PHASE

Method

Quantitative Survey

The second phase of the study quantitatively addressed the second aim of the project, which was to clarify the factors that inhibit or promote healthy identity development. This portion included factors that were generated from the qualitative data and included in the quantitative survey to determine if the findings about identity from a small sample of BSGLM may be generalized to another sample of BSGLM. Statistical analyses were used to explore the relationship between healthy identity outcomes and the factors that influenced identity development gleaned from the qualitative findings.

Participants

Similar to the first phase, participants were recruited from various online platforms. The social media accounts (Facebook, Tumblr, Instagram, Twitter, and Reddit) created for the first phase of the study were also used to recruit participants to the second phase. New culturally-tailored marketing materials were created detailing the study (see Appendix J). Posts were made on pages geared toward BSGLM. Emails were sent to Pride and Black Gay Pride organizations, LGBTQ student organizations at Historically Black Colleges and Universities, and Black queer organizations in US cities with large Black populations (e.g., Atlanta, Detroit, Washington D.C., Jackson) requesting the organization forward the message to their members. Advertisements promoting the study were posted on websites, podcasts, and/or geolocation applications that BSGLM frequently use or listen to. Prominent celebrities that are BSGLM were contacted via their social media pages and asked to post the study on their pages or feeds.

Potential participants clicked the link which took them to a Google Forms survey.

Participants provided their informed consent prior to taking the advancing to the survey battery.

In order to be eligible for the second phase of the study, participants needed to meet the following criteria: (1) at least 18 years of age; (2) identify as being of African diaspora living in the United States; (3) identify as being a cisgender man; and, (4) identify as being gay or bisexual or same-gender loving, or engages in sexual behavior with men or is attracted to men.

To encourage participation, financial incentives were offered to facilitate greater likelihood of participation, and the ability to recruit a sufficient sample size. Participants had the chance of receiving one of 30 Amazon gift cards ranging in value from \$10 to \$100. Participants who completed the entire survey battery and opted to provide their email address in a separate database from their survey responses were entered into a raffle where they were randomly assigned a number. A random number generator selected 30 different numbers. The gift cards were assigned to a number one through 30 in ascending order, starting with the lowest value. Each drawing corresponded with the number of the gift card and was given to the randomly selected participant.

Measures

The survey battery was created based upon the findings from the qualitative data analysis (See Table 2 for qualitative themes and corresponding quantitative measures). The quantitative phase included the same demographic measures and identity-related measures used in the qualitative phase described above (See Appendix C). The survey battery was collected using Google Forms.

Table 2Phase Two Study Variables

Factor	Adapted/Generated	Interpretation	Scoring	Number of items	Study α	Previous use with BSGLM?
		Outcome Variables				
Self-Affirmation	Adapted Authenticity subscale from LGBT-PIM	· ·		5	.930	N
Freedom from Societal Norms	Generated	Greater freedom for social norms about Black men	Sum	4	.814	N
Unconditional Acceptance	Generated	Greater acceptance from support system Inhibiting Factors	Sum	2	.716	N
Internalized Homophobia	Internalized homonegativity from LGB-IS	Greater internalized homophobia	Average	3	.872	Y
Experiencing non- affirming religious beliefs	Generated and adapted	More stigma related to sexuality stemming from religious beliefs	Sum	9	.861	N
Experiencing non- affirming/non- supporting messages from family	Generated	Less support from family	Sum	14	.844	N
Letting others down/concern about anticipated rejection	Measure of Gay-Related Stress-Family reaction subscale and generated	Greater concern of rejection and disappointment from family	Sum	13	.876	N
Threats and enacted	Measure of Gay-Related	More experiences	Sum	8	.865	N

violence,	Stress -Violence and	with of violence and				
discrimination, and	Harassment subscale and	harassment during				
harassment	Generated	lifetime				
Witnessing other	Generated	More experiences	Sum	2	.879	N
queer people		witnessing				
referenced in a		discrimination				
negative manner or		toward other queer				
treated unfairly		people				
		Facilitating Factors				
Having supportive	Generated	Greater experiences	Sum	2	.749	N
heterosexual friends		of social support				
and family		acceptance related to				
		one's sexual				
		orientation in the				
		past				
Connecting with	Adapted from Connectedness	Greater	Sum	11	.937	Y
other Black queer	to the LGBT Community and	connectedness to the				
people	generated	Black LGBT				
		community				
Having mentorship,	LGBT People of Color	Greater exposure to	Sum	7	.824	N
role models and/or	Microaggressions Scale and	Black queer men				
media representation	generated					
of Black queer men						
Significant life	Generated from qualitative	More life events	Sum	7	.859	N
events	responses	promoting the ability				
		to be authentic				
Desire to be	LGB Identity Scale –	Greater frustration	Sum	5	.789	N
authentic/frustration	Concealment Motivation	with hiding sexual				
with concealment	subscale and generated	orientation				
Grit/Determination	Grit Scale	Greater grit	Sum	8	.897	Y

Freedom From Conforming To Societal Views Of Black Men

Participants in phase one described one component of a healthy identity among BSGLM is the liberation from adhering to norms for Black men. Several items were created to assess this factor: (1) I am able to live freely without being bothered by what others think of me being a Black same-gender loving man; (2) I do not have to conform to traditional views of what it means to be a Black man; (3) I define who I am and how I express myself; and (4) I do not feel pressured to act how others think Black same-gender loving men should act. Participants responded to these four items using a 7-point Likert scale ranging from 1 (*Strongly Disagree*) to 7 (*Strongly Agree*). These items were summed and higher scores were indicative of greater freedom from conforming to societal views of Black men. This measure had a good internal consistency ($\alpha = .814$) in the current study.

Unconditional Acceptance

Participants in phase one described another component of a healthy identity among BSGLM is having full acceptance from their social support systems. A pair of items were created to capture the experience of having full and unconditional acceptance from their support systems. Those items are: (1) my support system is fully accepting of my Black same-gender loving identity; and, (2) I have access to spaces or environments that are fully accepting of my Black same-gender loving identity. Participants responded to these items using a 7-point Likert scale ranging from 1 (*Strongly Disagree*) to 7 (*Strongly Agree*). These items were summed and higher scores were indicative of greater acceptance from their social support systems. This measure had acceptable internal consistency ($\alpha = .716$) in the current study.

Self-Affirmation And Comfort With Oneself

Phase one participants described BSGLM with healthy identities must affirm themselves and be comfortable with their intersecting identities. The Authenticity subscale of the Lesbian, Gay, and Bisexual Positive Identity Measure (Riggle et al., 2014) was adapted to measure the degree of comfort participants had with their ethnic and sexual identities and expressing those identities. An example item is, "I am comfortable with my Black same-gender loving identity." Participants responded to items using a 7-point Likert scale ranging from 1 (*Strongly Disagree*) to 7 (*Strongly Agree*). Items were summed with higher scores represent greater self-affirmation and comfort with oneself. The authenticity subscale had excellent internal reliability ($\alpha = .930$).

Internalized Homophobia

The three-item Internalized Homonegativity subscale from LGBIS (Mohr & Kendra, 2011) was used to assess internalized homophobia. Internalized Homonegativity is representative of the person's negative beliefs and rejection of their sexual minority identity. Participants responded to items using a 6-point Likert Scale ranging from 1 (*Disagree Strongly*) to 6 (*Agree Strongly*) and items are summed and averaged. Higher scores are indicative of greater internalized homonegativity. The Internalized Homonegativity subscale had a good internal consistency ($\alpha = .872$) in the current study).

Experiencing Non-Affirming Religious Beliefs

Previous experiences related to difficulties with religion were assessed retrospectively using two items from Gibbs and Goldbach (2015), two items from Watkins et al. (2015), and five generated items. The two items from Gibbs and Goldbach (2015) were (1) I have left or changed my religious affiliation because of its view toward my sexuality and (2) my parents' religious beliefs made it more difficult for me to tell them about my sexuality. The items from Watkins et

al. (2016) were (1) my religious beliefs make me feel bad about having sex with other men and (2) I often have to choose my religious beliefs over my desire to be with a man. The five generated items were as follows: (1) I heard negative messages about homosexuality during religious services while growing up; (2) I attempted to pray for my same-gender attraction to go away; (3) I experienced rejection or was treated differently from others involved in my religion due to my sexuality; (4) I heard others involved in my religion speaking negatively about individuals that identified as LGBTQ; and, (5) I witnessed others involved in my religion treating LGBTQ individuals poorly. Participants responded using a 5-point Likert scale including 0 (*No Religious Beliefs/Did Not Experience*) and from 1 (*Strongly Disagree*) to 4 (*Strongly Agree*). Items were summed and higher values were indicative of greater experiences with difficulties with religion. This measure had good internal consistency (α = .861).

Experiencing Non-Affirming /Non-Supportive Messages From Family

Items were generated from qualitative responses to assess the non-supportive messages participants heard or received from their family about their sexuality. The following are a few of the 14 items generated: (1) my family believes Black men cannot be Black and gay; (2) my family conditionally accepts my sexuality such as "I accept you but don't agree with your lifestyle;" and, (3) I hear my family say negative comments about other LGBTQ people. Participants responded to these items using Yes, No, or Don't Know. Affirmative responses were allocated one point while No and Don't Know were scored as zero. Items were summed and higher values were reflective of greater experiences of non-supportive messaged from participants' family. In the current study, this measure had a good internal consistency ($\alpha = .844$).

Concern Of Hurting Or Letting Down Others And Concerns About Possible Rejection From Family And Friends

The adapted nine-item Family Reactions subscale from Lewis et al.'s (2001) broader measure of stressors among sexual minorities and four generated items were used to assess concerns of hurting family members and anticipate rejection among participants. A few of the items from the family reactions subscale are (1) I am concerned about rejection from my family due to sexuality and (2) there is distance between me and family due to my sexuality. The four generated items assessed additional information mentioned by participants in phase one: (1) I am afraid of hurting my family because of my sexuality; (2) I am afraid of disappointing my family because of my sexuality; (3) I am afraid of being kicked out of my family's home because my sexuality; and (4) I am afraid of losing love from my family because of my sexuality. The original Lewis et al. (2001) study requested participants respond to items using a 4-point Likert scale of 0 (No Stress/Has Not Occurred) to 3 (Severe Stress). Given the critiques of using this Likert scale by Lewis et al. (2001), participants in the current study responded to items using a 5point Likert scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). Items were summed with higher values reflective of greater concerns of hurting others due to their sexuality and anticipated rejection based upon their sexuality. This measure had a good internal consistency (\alpha = .876).

Threats And Enacted Violence, Discrimination, And Harassment

An adapted version of the Violence and Harassment subscale from Lewis et al.'s (2001) broader measure of stressors among sexual minorities and one generated item were used to retrospectively assess the experience to threats, violence, discrimination, and harassment due to sexuality. An example from the seven-item subscale is, "I have been physically assaulted due to

my sexuality." An additional item was generated to capture what phase one participants described of being threatened with physical violence to coerce changing one's sexuality: I have been threatened with physical violence from family to make me change my sexuality or samegender attraction. Participants responded to items using a 5-point Likert scale ranging from 1 ($Strongly\ Disagree$) to 5 ($Strongly\ Agree$). Items were summed with higher values reflective of more experiences with threats, violence and discrimination based on their sexuality. This measure had a good internal consistency ($\alpha = .865$) in the current study.

Seeing Other Queer People Being Referred To In A Negative Manner Or Treated Unfairly

A couple of items were generated to measure how the participant's family reacts to sexual and gender minorities. Those items were: (1) my family speaks negatively about individuals that identify as LGBTQ; and, (2) my family treats LGBTQ individuals poorly. Participants responded using a 5-point Likert scale ranging from 1 (*Strongly Disagree*) to 5 (*Strongly Agree*). The cumulative score was computed and higher values indicative of participants witnessing more negative responses toward sexual and gender minorities. This measure had a good internal consistency ($\alpha = .879$) in the current study.

Having Supportive Heterosexual Friends And Family

A couple of items were generated to assess perceived acceptance of the participants' sexuality by their family and friends. Those items were: (1) how accepting is your family of your sexuality?; and, (2) how accepting are your friends of your sexuality. Participants responded using a 5-point Likert scale ranging from 1 (*None*) to 5 (*A Great Deal*). Items were summed and higher values were indicative of greater support and acceptance of one's sexuality from family and friends. This measure had an acceptable internal consistency ($\alpha = .749$).

Connecting With Other Black Queer People

We adapted the 8-item Connectedness to the LGBT Community (Frost & Meyer, 2013) and four generated items to assess connectedness to other Black queer people. An example item from the Connectedness to the LGBT Community is, "You feel you're a part of your city's Black LGBT community." Several items were generated to assess additional connectedness aspects mentioned by participants in phase one: (1) I have used mobile applications and websites to connect with other Black LGBT people; (2) I have Black LGBT friends; (3) I have visited Black LGBT clubs to connect with people like me; and, (4) I have engaged with Black LGBT community-based organizations to connect with people like me. Items were summed and higher values were reflective of greater connectedness to Black queer people. This measure had an excellent internal consistency ($\alpha = .937$).

Having Mentorship, Role Models, And/Or Media Representation Of Black Queer Men

Several measures were combined to retrospectively assess the occurrence and perceived stress of having mentorship, queer role models, and seeing media representation of Black queer men. An item from the People of Color Heterosexism subscale from the LGBT-People of Color Microaggressions scale (Balsam et al., 2011) was used to assess having LGBT people of color role model, "not having any LGBT people of color as positive role models." An item from Yancey et al. (2002) and Bird et al. (2012) was used to assess whether the participant had a role model with a similar identity with the participant, "I had a person or individual I really wanted to be like (this could be someone you know personally, or someone you have read about or seen on TV or in the movies, or that you know in some other way)." More items were generated to assess other aspects mentioned by participants in phase one: (1) I saw Black gay or bisexual men in the media; (2) I knew about important Black gay or bisexual men; (3) I had a role model with similar

identities as me; (4) I saw or knew of successful Black gay or bisexual men; and, (5) I was able to modify my views of Black gay or bisexual men by seeing positive images of Black gay or bisexual men. Participants responded to items on a 6-point Likert scale ranging from 1 (*did not happen to me and bothered me not at all*) to 6 (*it happened to me and bothered me extremely*). This Likert scale was adapted from the LGBT-People of Color Microaggressions scale (Balsam et al., 2011) to assess the occurrence and perceived stress of each item. Items were reversed scored and summed to where higher values are indicative greater experiences with role models, mentorship, and seeing media representation. This measure had a good internal consistency ($\alpha = .824$).

Significant Life Events

Items were generated to capture significant life events that phase one participants mentioned facilitated their ability to development identity as a BSLGM. Participants were asked, "Did any of the following events help you be more open and authentic about your Black LGBTQ identity?" Participants responded Yes, No, or Don't Know to 14 prompts including: moving out of your family's home; being more financial stable and independent where you did not rely on family for financial assistance; seeking higher education or going to college; and, moving to a place where you believe you could be more open about your Black LGBT identity. Affirmative responses were allocated one point while No and Don't Know were scored as zero. Items were summed and higher values were reflective of greater experiences significant life events that facilitated identity development. This measure had a good internal reliability ($\alpha = .859$).

Desire To Be Authentic/Frustration With Concealment

The three-item Concealment Motivation subscale from the LGBIS (Mohr & Kendra, 2011) and two generated items were used to assess participants' desire for authenticity and

frustration with concealing all, or parts, of their identity. The concealment motivation scale refers to an individual's sense of agency related to protecting the privacy of their sexual minority identity using the following questions: (1) I prefer to keep my same-sex romantic relationships rather private; (2) I keep careful control over who knows about my same-sex romantic relationships; and, (3) my sexuality is a very personal and private manner. A pair of additional items were also generated to capture the frustration with concealment: (1) I have a strong desire for others to know my authentic Black same-gender loving identity; and, (2) I am tired of hiding my Black same-gender loving identity from other people. Participants responded to items using a 6-point Likert Scale ranging from 1 (*Disagree Strongly*) to 6 (*Agree Strongly*). Items from the concealment motivation subscale were reversed scored and added to the total of the generated items. Higher scores on this combined measure is indicative of a greater desire for authenticity and frustration with concealment. This measure had a good internal consistency ($\alpha = .789$) in the current study.

Grit/Determination

The Short Grit Scale (Duckworth & Quinn, 2009) was used to assess perseverance toward goals (Duckworth et al., 2007). The Short Grit Scale is an eight-item measure inquiring about how much the prompt describes them. An example item is, "setbacks don't discourage me." Participants respond using a 5-point Likert scale ranging from 1 (Very Much Like Me) to 5 (Not at All Like Me). After reverse scoring specific items, the average of the summed items is calculated and higher values are indicative of being more gritty. A previous study using the Short Grit Scale among Black MSM documented a Cronbach's α of .80 (Winiker et al., 2019). In the current study, the Short Grit Scale had good internal consistency (α = .897).

Data Analysis Strategy

The data were reviewed and cleaned prior to data analyses using Google Sheets. All statistical analyses were conducted using Jeffreys's Amazing Statistics Program (JASP, 2020). Given as the measures were generated from the qualitative responses, adapted from existing measures, or not tested explicitly with BSGLM, all measures were evaluated for their internal consistency. Cronbach's α were used to assess internal consistency for each measure and use these guidelines to determine sufficient reliability with greater than 0.70 deemed as having adequate internal consistency (Taber, 2018).

Pearson's product-moment correlations were used to measure the association between, and independence of, study variables. The associations were examined to ensure none exceeded the recommended limit for multicollinearity (r > .80) (Katz, 2006). These correlations in addition to the Variance Inflation Factor (VIF) and Tolerance were utilized to determine whether any multicollinearity exists between study variables. Multicollinearity occurs when there is redundancy among variables resulting in difficulties in assessing the statistical significance of predictors (Hair et al., 1998). VIF measures "the inflation in the variances of the parameter estimates due to multicollinearity potentially caused by the correlated predictors (Vatcheva et al., 2016, p. 5)" and VIF values greater than 10 are indicative of multicollinearity (Yoo et al., 2014). Pearson's product-moment correlations also were used to examine the relations between predictor variables (inhibitory and facilitating factors) and outcome variables (identity).

Prior to conducting multiple linear regression, the quantitative data was inspected for the assumptions of ordinary least squares regression including normality, linearity, homoscedasticity, and independence (Field, 2013). The assumption of normality means the data should be normally distributed; the Shapiro-Wilk test and normal probability plot was used to

assess is the sample distribution significantly differed from a normal distribution. The assumption of linearity recommends that the dependent variable is linearly related to the independent variables. The assumption of homoscedasticity posits the sample being tested comes from a population with the same variance. A standardized residual plot was used to assess linearity and heteroscedasticity of the sample. The assumption of independence requires that the errors in the tested models are not related to one another. A visual plot of the independent variables and residual errors was used to assess the assumption of independence.

Multiple linear regression was used to determine which covariates were included in each regression model. The demographic variables were entered simultanously into a regression analysis predicting each identity outcome, to determine which variables should be retained as covariates based upon statistical significance of the variable.

Main study analyses included multiple linear regression conducted separately for inhibiting and facilitating factors for each of the three outcome variables, for a total of six regression analyses. A post-hoc power analysis (based upon a sample size of 54) for each outcome variable was conducted based upon the number of predictors and covariates included in each model. The inhibitory model with self-affirmation as the dependent variable with seven predictors had a statistical power of .78; the faciliting model with self-affirmation as the dependent variable with six predictors had a stastical power of .81. The inhibitory models with either freedom from social conventions of Black men or unconditional acceptance as the dependent variable with eight predictors had a statistical power of .74. The facilitating models with either freedom from social conventions of Black men or unconditional acceptance as the dependent variable with seven predictors had a statistical power of .78.

Results

Sample Characteristics

Phase two data were collected between January 2020 and April 2020. The mean age of the sample was 35.50 years (SD = 13.20) ranging from 24 to 68 years old. Pertaining to race/ethnicity, 98% (n = 53) of participants identified as Black or African-American; while one (1.89%) identified as biracial (Black or African-American and White/Caucasian). All participants identified as cisgender men. The majority of participants (63.7%; n = 33) identified as gay. The remaining participants reported their sexual orientation as bisexual (11.3%; n=6), same-gender loving (7.5%; n = 4), queer (5.7%; n = 3), heterosexual (5.7%; n = 3), pansexual (3.8%; n = 2), demisexual (1.9%; n = 1), or unsure (1.9%; n = 1). Most of the sample reported sexual attraction to men only (83%; n = 44) and nine participants reported being sexually attracted to men and women (10.5%). With the exception of one participant who declined to answer, almost all participants (94%; n = 50) reported a history of engaging in sexual behavior with other men. Remaining participants (7.5%; n = 4) denied a history of engaging in sexual behavior with other men and one (1.9%) declined to answer.

Pertaining to geography, the majority of participants lived in the southeast region of the U.S. (34%; n = 18). About one-fourth of participants lived in the northeast region of the U.S. (24.5%; n = 13). Of the remaining participants, almost one-fifth (18.9%; n = 10) were in the Midwest, some (13.2%; n = 7) lived in western U.S., and the remaining participants (9.4%; n = 5) lived in the Southwestern U.S. Participants reported living the following states: California, Connecticut, Florida, Georgia, Illinois, Indiana, Kentucky, Maryland, Mississippi, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Virginia, and Washington. In addition, two-fifths of the sample (40.5%; n = 22) reported growing up in the

southeast region of the U.S., while other participants (18.9%; n = 10) reported growing up in the northeastern U.S., the Midwest (18.9%; n = 10), 9.4% in the Western region of the U.S. (9.4%; n = 5), Southwest U.S. (5.7%; n = 3), outside of the U.S. (3.8%; n = 2), and one participant (1.9%; n = 1) declined to answer.

The majority of participants (71.7%; n = 38) reported being single and never married, while the remaining participants reported being married (15.1%; n = 8), were partnered but not legally married (9.4%; n = 5), and one participant (1.9%; n = 1) was widowed and one participant was divorced (1.9%; n = 1). Over half of the participants (58.5%; n = 31) reported living alone. Almost one-fifth (18.9%; n = 10) reported living with a spouse or significant other and three participants (5.7%; n = 3) reported living with their spouse/significant other and their children. A minority of participants reported living with their family (7.6%; n = 4) and two participants reported living with roommates (3.8%; n = 2).

Considering socioeconomic status (education level, employment status, and income) of the sample, approximately one-third of the sample (34%; n = 18) reported having a master's degree and close to one-fifth (17%; n = 9) reported having a doctoral or professional degree, and one-quarter of participants (24.5%; n = 13) reported having a bachelor's degree. Of the remaining participants, three (5.7%; n = 3) had an associate's degree, two reported (3.8%; n = 2) reported some college, one (1.9%; n = 1) had a trade school certification, and seven (13.2%; n = 7) had a high school diploma or GED. Most participants had full-time employment (66.1%; n = 35) and nine (17%; n = 9) as students. A few participants worked part-time (5.7%; n = 3) while two (3.8%; n = 2) were retired. Of the remaining participants, three (5.7%; n = 3) were on disability and one (1.9%; n = 1) was unemployed and seeking employment. The sample reported varying annual income levels as follows: \$0 to \$9,999 (3.8%; n = 2); \$10,000 to \$19,999 (9.4%;

n = 5); \$20,000 to \$29,999 (1.9%; n = 1); \$30,000 to \$39,999 (15.1%; n = 8); \$40,000 to \$49,999 (11.3%; n = 6); \$50,000 to \$59,999 (13.2%; n = 7); \$60,000 to \$69,999 (5.7%; n = 3); \$70,000 to \$79,999 (7.5%; n = 4); \$80,000 to \$89,999 (11.3%; n = 6); \$90,000 to \$99,999 (5.7%; n = 3); \$100,000 and above (11.3%; n = 6); and, two participants declined to answer (3.8%; n = 2).

Related to being incarcerated, most particiapnts (96.2%; n = 51) denied spending time in prison; one participant (1.9%; n = 1) endorsed previously serving time in prison and one participant (1.9%; n = 1) declined to answer. Pertaining to faith-based beliefs, almost half of the (45.3%; n = 24) participants reported Protestant faith, three participants (5.7%; n = 3) reported Catholic faith, and almost two-fifths of the sample (37.7%; n = 20) reported no religious affiliation. Of the remaining participants, one participant each endorsed being a Jehovah's Witness (1.9%; n = 1), Buddhist (1.9%; n = 1), atheist (1.9%; n = 1), agnostic (1.9%; n = 1), Apostolic (1.9%; n = 1) and Lutheran (1.9%; n = 1).

Differences Between Phase One And Phase Two Samples

Overall, the samples of were similar in age, relationship status, and education (see Table 3). Both samples also were comparable in how their viewed their race as they had similar levels of racial centrality, racial public regard and racial private regard. Related to sexual identity, both sample were comparable in the domains of having a difficult sexual identity development process, identity centrality, and identity affirmation. They also had similar levels of perceived conflicts between their racial and sexual identities as well as perceived racism in the LGB community. Participants in phase two had significantly greater levels of acceptance concerns, concealment motivation, identity uncertainty, and internalized homonegativity compared to phase one participants. These differences indicated that phase two participants had greater concerns about how their sexual identity may stigmatize them, a higher need to hide their sexual

identity, more ambiguity about their sexual identity, and greater negative beliefs about their sexual identity.

 Table 3

 Descriptive Statistics And Independent Samples t-Tests Comparing Variables In Phases One (n = 19) And Two (n = 54)

Mean (SD)				Mean (SD)				
Variable	Phase 1	Phase 2	Range	t-test	Variable	Phase 1	Phase 2	Range
Age	31.79 (8.88)	35.50 (13.20)	-	1.14	BSGLM Self- Affirmation	-	26.93 (9.27)	5-35
Gay	73.7%	63.7%	-	-	Freedom from Norms	-	21.04 (6.54)	4-28
Lives in Southeastern US	52.6%	34%	-	-	Acceptance from Support System	-	10.39 (3.48)	2-14
Single, Never Married	73.7%	71.7%	-	-	Non-Affirming Religious Messages	-	20.30 (8.91)	9-45
Master's Degree	47.9%	34%	-	-	Threats and Enacted Violence	-	21.19 (8.70)	8-40
Racial Centrality	5.86 (1.08)	5.36 (1.24)	1-7	-1.56	Witnessing Other Queer People Treated Poorly	-	4.85 (2.57)	2-10
Racial Public Regard	3.13 (1.17)	3.00 (1.07)	1-7	-0.42	Non-Supportive Family Messages	-	2.46 (2.69)	0-10
Racial Private Regard	6.58 (0.48)	6.34 (1.07)	1-7	-0.94	Concerns of Letting Family Down	-	26.93 (13.21)	12-60
Acceptance Concerns	3.28 (1.40)	4.52 (1.29)	1-6	3.53*	Mentorship	_	2.98 (2.41)	0-10
Concealment Motivation	2.98 (1.53)	4.47 (1.18)	1-6	4.37^	Frustration with Concealment	-	2.54 (0.82)	1-6
Identity Uncertainty	1.28 (0.57)	4.98 (1.44)	1-6	10.86^	Affirming Social Support	-	6.74 (2.90)	2-10
Internalized Homonegativity	1.80 (0.51)	4.94 (1.29)	1-6	10.29^	Connection to Black Queer Community	-	30.24 (12.24)	12-60
Difficult Process	4.22 (1.38)	4.77 (0.99)	1-6	1.87	Significant Life Events	-	4.02 (2.57)	0-7
Identity Superiority	2.06 (1.24)	-	1-6		Grit	-	3.16 (1.25)	
Identity Affirmation	4.79 (0.79)	4.44 (1.20)	1-6	-1.18	Self-Awareness	6.24 (1.06)	- ′	1-7
Identity Centrality	4.75 (0.75)	4.63 (0.97)	1-6	-0.49	Authenticity	6.56 (0.65)	_	1-7
Conflicts in Allegiance	3.27 (1.20)	3.28 (1.52)	1-7	0.03	Community	4.47 (1.73)	_	1-7
Perceived Racism in the LGB Community	4.86 (1.33)	4.72 (1.22)	1-7	-0.42	Intimacy	6.15 (0.66)	-	1-7

Note: * $p < .05, +p < .01, ^p < .001$

Quantitative Findings

Bivariate Correlations

Pearson's product-moment correlations were used to measure the association among independent variables (for detecting multicollinearity) and between independent and dependent variables (as described in the analysis plan). The relation between being authentic about one's Black same-gender loving identity and freedom from conforming to societal norms about Black men was the only observed relationship above $0.8 \ (r = .875, p < .001)$; however, the two factors only served as outcome variables in separate models and were never included in the same model.

Age had significant bivariate associations with Black same-gender loving authenticity (r = .27, p = .04), freedom from societal norms about Black men (r = .34, p = .01), and internalized homophobia (r = .42, p < .001). Sexual attraction (higher values indicated less same-gender attraction) had significant bivariate associations with Black same-gender loving authenticity (r = -0.43, p < .001), freedom from societal norms about Black men (r = -0.31, p = .02), and significant life events (r = -0.28, p = .04). None of the other demographic variables of sexual orientation, history of engaging in sex with men, marital status, current living situation, education, employment, income, or religion was significantly associated with the study variables.

Bivariate correlations were also used to test if the inhibitory and facilitating factors would be significantly associated with the three outcome variables identified as components of healthy identity among BSGLM (see Table 4). Self-affirmation and comfort with oneself was significantly associated with concerns of letting others down (r = -.307, p = .024), connection with other Black queer people (r = .318, p = .019), and significant life events (r = .315, p = .020). Self-affirmation and comfort with oneself was not significantly associated with internalized homophobia (r = .212, p = .123), experiencing non-affirming religious messages (r = -.011, p = .012).

.934), seeing family members treat other queer people unfairly (r = -.086, p = .538), hearing non-supportive messages from family (r = -0.216, p = .116), having mentorship or role models (r = .035, p = .804), frustration with concealment (r = .099, p = .474), experiencing threats, harassment, and violence (r = .109, p = .432), grit (r = .148, p = .287), or having affirming social support (r = .219, p = .111).

Freedom from conforming to societal views of Black men was significantly associated with internalized homophobia (r = .282, p = .039). Freedom from conforming to societal views of Black men was not significantly associated with frustration with concealment (r = .230, p = .095), grit (r = .255, p = .062), affirming social support (r = .178, p = .198), connection with other Black queer people (r = .081, p = .560), significant life events (r = .144, p = .300), experiencing non-affirming religious beliefs (r = .038, p = .783), experiencing threats, harassment, and violence (r = .071, p = .609), concerns of letting others down (r = .232, p = .091), seeing family members treat other queer people unfairly (r = .103, p = .460), hearing non-supportive messages from family (r = .237, p = .085), or having mentorship or role models (r = .002, p = .987).

Unconditional acceptance from one's support system was significantly associated with internalized homophobia (r = .409, p = .002), concerns of letting others down (r = -.367, p = .006), hearing non-supportive messages from family (r = -.329, p = .015), and affirming social support (r = .325, p = .017). Unconditional acceptance from one's support system was not significantly associated with experiencing non-affirming religious beliefs (r = -.002, p = .989), experiencing threats, harassment, and violence (r = .150, p = .278), having mentorship, role models (r = .148, p = .281), grit (r = .068, p = .626), connection to other Black queer people (r =

.212, p = .123), seeing family members treat other queer people unfairly (r = .187, p = .175), frustration with concealment (r = .190, p = .168), or significant life events (r = .112, p = .420).

Table 4

Correlation Matrix Of Phase Two Study Variables

	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.
1.Self-Affirmation										10.			10.	
2. Freedom from Norms	.875^													
3. Unconditional Acceptance	.731^	.680^												
4. Internalized Homophobia	.212	.282*	.409+											
5. Non-Affirming Religion	011	038	002	.102										
6. Threat	.109	.071	.150	.132	.426+									
7. Concern of Letting Family Down	307*	232	367+	070	.144	.293^								
8. Seeing other queer	086	103	187	.007	.297*	.371^	.554^							
9. Non-supportive messages	216	237	329*	167	.221	.249	.552^	.637^						
10. Mentorship	.035	.002	.149	.190	.094	023	047	263	276*					
11. Connection to Black Queer Community	.318*	.081	.212	.015	012	.287^	003	.191	.008	.094				
12. Affirming Social Support	.219	.178	.325*	.204	173	073	504^	492^	616^	.017	.222			
13. Life Events	.315+	.144	.112	047	.279*	.462^	.094	.188	.161	.077	.418^	078		
14. Frustration with Concealment	.099	.230	.190	.235	.309*	.109	.038	.114	.008	.028	.165	.099	072	
15. Grit	.148	.255	.068	026	.291*	.135	228	105	015	.051	081	015	.150	.050

Note: * *p* < .05, + *p* < .01, ^ *p* < .001

Assessing Regression Assumptions

The Shapiro-Wilk test was conducted for each study variable to check for the assumption of normality. Frustration with concealment (p = .063), experiencing non-affirming religious beliefs (p = .098), threats and enacted violence (p = .245), affirming social support (p = .073), connection to the Black queer community (p = .357), and grit (p = .358) were not significant indicating no significant deviation from normality. The remaining variables demonstrated significant Shapiro-Wilk values indicating significant deviations for the following variables: selfaffirmation (p < .001), freedom from societal norms (p < .001), unconditional acceptance (p < .001) .001), seeing other queer people treated poorly (p = .002), experiencing non-supportive messages from family (p < .001), concerns of letting one's family down (p = .04), significant life events (p = .04)< .001), and mentorship (p < .001). Variables that demonstrated significant Shapiro-Wilk values underwent a square transformation to reduce skewness and increase the variable's normal distribution (Manikandan, 2010). Following the transformation, only concerns of letting one's family down (p = .166) demonstrated a non-significant Shapiro-Wilk value. For the remaining variables that had significant Shapiro-Wilk values after transformation, both the transformed and non-transformed histogram plots were visually assessed which version of the variable most approximated a normal distribution for use in the current study. The remaining regression assumptions were assessed using tolerance/VIF values, scatterplots of the residual errors versus the predicted values, and quartile-quartile plots. All remaining regression assumptions were met unless noted below.

Main Study Analyses

A series of two multiple regression analyses were conducted for each of the three outcome variables, for a total of six separate analyses. Specifically, each healthy identity factor

(e.g., self-affirmation, freedom from societal norms, and unconditional acceptance) was regressed (separately) on all of the inhibitory factors and each healthy identity factor (e.g., self-affirmation, freedom from societal norms, and unconditional acceptance) was regressed (separately) on all of the facilitating factors.

Self-Affirmation As The Dependent Variable. Results of a multiple regression testing whether inhibitory variables predicted self-affirmation showed that the overall model was not significant F(7, 46) = 1.415, p = .222. Approximately 17.7% of the variance of self-affirmation was accounted for by the inhibitory variables. Specifically, concerns of letting one's family down ($\beta = -.356$, se = .003, p = .047) was the only significant predictor in the model.

Next, results of a multiple regression testing whether facilitating variables predicted self-affirmation showed that the overall model was not statistically significant F(6, 47) = 1.972, p = .089. Approximately 20.1% of the variance of self-affirmation can be accounted for by the facilitating variables. None of the predictors in the model were significant predictors of self-affirmation.

Table 5
Summary Of Multiple Regression Analyses For Variable Predicting Self-Affirmation

	Inl	nibitory Factors O	rs Only Facilitating Factors C				
Variable	В	SE B	β	В	SE B	β	
Internalized homophobia	.117	.112	.148				
Experiencing non-affirming	088	.174	078				
religious beliefs							
Threats and violence	.267	.202	.207				
Seeing other queer people treated poorly	2.154	3.293	.128				
Experiencing non-supportive messages	-1.003	.1746	109				
Concern of letting down family	007	.003	356*				
Mentorship	.059	1.660	.005	483	1.497	043	
Affirming social support				.289	.197	.203	
Connection with Black queer community				.212	.189	.174	
Significant life events				.128	.079	.247	
Frustration with concealment				.890	1.889	.063	
Grit				2.112	2.239	.127	
R^2			.177			.201	
F for change in R^2			1.415			1.972	

Note: * $p < .05, +p < .01, ^p < .001$

Freedom From Societal Expectations Of Black Men As The Dependent Variable. A multiple regression was conducted to see if the inhibitory variables and age predicted freedom from societal expectations when tested together. The linear combination of inhibitory variables were significantly related to freedom from societal expectations F(8, 45) = 2.605, p = .02. Approximately 31.7% of the variance in freedom from social expectations was accounted for by the inhibitory variables and age. Age was the only significant predictor in the model.

A multiple regression was conducted to see if the facilitating variables and age predicted freedom from societal expectations when tested together. The linear combination of facilitating variables and age were significantly related to freedom from societal expectations F(7, 46) = 4.475, p < .001. Approximately 40.5% of the variance in freedom of societal expectations and age was accounted for by the facilitating variables and age. Age and frustration with concealment ($\beta = .282$, se = 1.173, p = .021) were significant predictors in the model.

 Table 6

 Summary Of Multiple Regression Analyses For Variable Predicting Freedom Of Societal Expectations Of Black Men

	Inhi	bitory Factors and	itating Factors and	ting Factors and Age		
Variable	В	SE B	β	В	SE B	β
Internalized homophobia	.048	.078	.086			
Experiencing non-affirming	046	.114	057			
religious beliefs						
Threats and enacted violence	.221	.135	.242			
Seeing other queer people treated	1.498	2.161	.126			
poorly						
Experiencing non-supportive	-1.121	1.137	173			
messages						
Concern of letting down family	001	.002	056			
Mentorship	774	1.083	097	-1.097	.935	138
Affirming social support				.146	.122	.144
Connection with Black queer				.007	.117	.008
community						
Significant life events				.087	.049	.238
Frustration with concealment				2.798	1.173	.282+
Grit				1.44	1.407	.123
Age	.279	.087	.489+	.300	.069	.525^
Age R^2			.317			.405
F for change in R^2			2.605+			4.475^

Note: * *p* < .05, + *p* < .01, ^ *p* < .001

Unconditional Acceptance As The Dependent Variable. A multiple regression was conducted to see if the inhibitory variables and age predicted unconditional acceptance when tested together. The linear combination of inhibitory variables and age were significantly related to unconditional acceptance F(8, 45) = 3.339, p = .004. Approximately 37.2% of the variance in unconditional acceptance was accounted for by the inhibitory variables and age. Specifically, threats and enacted violence ($\beta = .307$, se = .070, p = .035) was a significant predictor in the model.

A multiple regression was conducted to see if the facilitating variables predicted unconditional acceptance and age when tested together. The linear combination of facilitating variables and age were significantly related to unconditional acceptance F(7, 46) = 2.848, p = 0.015. Approximately 30.2% in the variance of unconditional acceptance was accounted for by the facilitating variables and age. Age was the only significant predictor in the model.

 Table 7

 Summary Of Multiple Regression Analyses For Variable Predicting Unconditional Acceptance

	Inhi	bitory Factors and	Age	l Age			
Variable	В	SE B	β	В	SE B	β	
Internalized homophobia	.081	.041	.264				
Experiencing non-affirming	035	059	079				
religious beliefs							
Threats and enacted violence	.153	.070	.307*				
Seeing other queer people treated poorly	.369	1.131	.057				
Experiencing non-supportive messages	475	.595	134				
Concern of letting down family	002	.001	301				
Mentorship	.207	.566	.048	.077	.553	.018	
Affirming social support				.139	.072	.252	
Connection with Black queer community				.055	.069	.117	
Significant life events				.031	.029	.154	
Frustration with concealment				1.069	.694	.197	
Grit				143	.832	022	
Age	.059	.045	.188	.123	.041	.393	
Age R^2			.372			.302	
F for change in R^2			3.339+			2.848*	

Note: * *p* < .05, + *p* < .01, ^ *p* < .001

Quantitative Results Summary

The quantitative analyses aimed to examine relationships between the inhibitory and facilitating factors and healthy identity among BSGLM. Bivariate correlations found that selfaffirmation was significantly negatively associated with concerns of letting others down, and significantly positively associated with connection with other Black queer people and experiencing significant life events. Bivariate analyses also indicated that freedom from conforming to societal views of Black men was significantly positively related to internalized homophobia. Lastly, bivariate correlations determined that unconditional acceptance from one's support system was significantly positively associated with internalized homophobia and affirming social support and significantly negatively associated with concerns of letting others down and hearing non-supportive messages from family. Multiple regression analyses revealed that four of the six models tested were statistically significant. In particular, concerns of letting one's family down was a significant negative predictor of self-affirmation, frustration with concealment significantly postively predicted freedom from societal expectations, and threats and enacted violence significantly positively predicted unconditional acceptance from one's social support system.

Discussion Of Study Two: Quantitative Findings

Overall, the quantitative findings illuminated some significant relationships between inhibitory and facilitating factors and healthy identity among BSGLM generated from the information gathered from the phase one participants. While participants in phase one stressed the importance of the various inhibitory and facilitating factors in negotiating their identity, only a subset significantly predicted positive identity outcomes during the quantitative analyses.

Bivariate-Level Discussion

To begin, bivariate analyses were used to explore the relationships between the inhibitory and facilitating factors with healthy identity development. Self-affirmation and comfort with oneself was significantly positively related with connection with other Black queer people and significant life events, and significantly negatively related to concerns of letting others down. These findings are consistent with previous results highlighting the positive relationships between racial and sexual identity affirmation with community connectedness (Derlan & Umaña-Taylor, 2015; Frost & Meyer, 2013). Also, self-affirmation was positively associated with significant life events such as queer migration and moving away from one's family is supported by qualitative findings of other sexual and gender minorities reporting an increased sense of freedom to explore their identity and affirm their identity after such events (e.g., moving out of parent's home, attending college, moving to a LGBTQ-friendly city; Cerezo et al., 2020; Lewis, 2012). Self-affirmation and comfort with oneself was significantly negatively related to concerns of letting others down. This finding was also expected as previous findings of queer people of color document negative associations between affirmation of both their sexual and racial identities and acceptance concerns from those around them (Ghabrial & Andersen, 2020).

Self-affirmation was not significantly related with internalized homophobia, experiencing non-affirming religious messages, seeing family members treat other queer people unfairly, hearing non-supportive messages from family, having mentorship or role models, frustration with concealment, experiencing threats and enacted violence, or having affirming social support. These findings do not align with previous studies documenting the negative associations between identity affirmation and internalized homonegativity and concealment among queer people of color (Ghabrial & Andersen, 2020). Our findings are not supported by previous results reporting

significant positive associations among negative sexual minority identity with religious stress, experiencing violence and harassment, or experiencing rejection from one's family based upon their sexual identity among a sample of LGB teenagers and young adults (Page et al., 2013). Self-affirmation was not significantly associated with having mentorship or role models which is counterintuitive based upon qualitative results from gay samples stressing the importance of gay mentorship and role models on developing appreciation of one's identities (Sheran & Arnold, 2012). Lastly, self-affirmation not being significantly associated with affirming social support was inconsistent with previous findings highlighting the significant positive relationships between ethnic and sexual identity affirmation with perceived support from friends and family (Fingerhut, 2018; Gallor & Fassinger, 2010).

Freedom from conforming to societal views of Black men was significantly positively associated with internalized homophobia. This was expected as cognitive flexibility, or "one's ability to effectively modify coping behavior according to the nature of each stressful situation," is documented as a strength for sexual minorities as it allows them to eschew cisheteronormative ideals (Kato, 2012, p. 262). For example, a study of bisexual-identified individuals found that greater cognitive flexibility was associated with less internalized stigma (Brewster et al., 2013).

Freedom from conforming to societal views of Black men was not significantly associated with frustration with concealment, grit, affirming social support, connection with other Black queer people, significant life events, experiencing non-affirming religious beliefs, experiencing threats, harassment, and violence, concerns of letting others down, seeing family members treat other queer people unfairly, hearing non-supportive messages from family, or having mentorship or role models. Again, using cognitive flexibility as a proxy for freedom from conforming to societal views of Black men, some of our results did not align with previous

findings. For example, it would be expected that freedom from societal views would be significantly negatively related to minority stress given past findings of cognitive flexibility among bisexual individuals (Brewster et al., 2013). Freedom from conforming to societal views of Black men not being significantly associated with social support or grit was consistent with past findings documenting a nonsignificant relationship between cognitive flexibility and both social support and grit (Ahn et al., 2009; Kalia et al., 2019).

Unconditional acceptance from one's support system was significantly and positively associated with internalized homophobia and affirming social support, and significantly negatively associated with concerns of letting others down and hearing non-supportive messages from family. Greater unconditional acceptance from one's support system was positively associated with greater internalized homophobia which may seem counterintuitive and not aligned with previous findings of greater acceptance being inversely related to internalized homophobia among sexual minority college students (Heiden-Rootes et al., 2020). BSGLM may still hold negative attitudes about their sexuality despite having acceptance from friends and family around them. BSGLM do report less positive attitudes toward sexual minorities compared to other ethnic groups as up to two-thirds of BSGLM report having negative views toward their sexuality (Glick & Golden, 2010; Rosario et al., 2004). Unconditional acceptance was significantly negatively related to concerns of letting others down and hearing non-supportive messages from family, which is consistent with past literature documenting this relation between social support and minority stress among BSGLM (Bauermeister et al., 2018).

Unconditional acceptance from one's support system was not significantly associated with experiencing non-affirming religious beliefs, experiencing threats, harassment, and violence, having mentorship or role models, grit, connection to other Black queer people, seeing

family members treat other queer people unfairly, frustration with concealment, or significant life events. Based upon previous research on sexual minority college students, we would expect a significant inverse relationship between perceived acceptance and experiencing non-affirming religious beliefs (Heiden-Rootes et al., 2020). We would also anticipate a significant negative association between unconditional acceptance and experiencing threats, harassment, and violence as well as witnessing their family treat other queer people unfairly given the documented relationship between social support and minority stress (Bauermeister et al., 2018). A non-significant relationship was unexpected between unconditional acceptance and either having mentorship or role models due to the importance that sexual minority men placed upon social support and mentorship in qualitative studies (Bryant, 2017; Sheran & Arnold, 2012). Unconditional acceptance did not have significant association with grit with is consistent with previous literature document a similar nonsignificant relationship between social support and grit (Atkinson & Martin, 2020). Lastly, the nonsignificant association between unconditional acceptance and connection to other Black queer people is partially supported by previous findings. A study of sexual and gender minorities found that social support from family had a nonsignificant bivariate relationship with community connectedness while social support from friends was significantly positively related to community connectedness (Puckett et al., 2019).

Multivariate-Level Discussion

To start, age was the only statistically significant covariate when tested in multiple regression analyses with the other possible demographic covariates. However, age was only a significant predictor for freedom from societal views of Black men and unconditional acceptance from one's social support system. Being older in phase two sample predicted greater freedom from societal norms and unconditional acceptance from their support system. Older individuals

may have more resources and skills needed to build affirming circles of friends and family around them and embody non-traditional expectations of Black men as they may not be subjected to the losing resources (e.g., money, support from non-affirming family) that younger BSGLM may not have (Bryant, 2017; Pachankis et al., 2018). Age was not a significant predictor of self-affirmation which is not supported by the literature indicating differences in timelines of sexual identity development (Calzo et al., 2011).

Self-Affirmation As The Outcome

In our models examining self-affirmation and comfort with oneself as the dependent variable, neither model examining inhibiting or facilitating factors were statistically significant. The model examining inhibitory factors as predictors of self-affirmation and comfort with oneself did show that concerns for letting one's family down was a significant negative predictor of self-affirmation. This is consistent with previous findings among queer people of color illustrating that identity affirmation of both racial and sexual identity is negatively associated with acceptance concerns (Ghabrial & Andersen, 2020). Based upon the extant studies of queer people of color, we would anticipate that internalized homophobia, experiencing threats and violence, and seeing other queer people being treated unfairly by ones' family would also significantly predicted self-affirmation and comfort with oneself (Ghabrial & Anderson, 2020; Jackson et al., 2020). It is important to note that this model was marginally underpowered at .78 and statistically underpowered studies my inflate the *p*-value and increase the risk of Type II error.

The model examining facilitating factors as predictors of self-affirmation and comfort with oneself was not significant nor were there any significant predictors in the model. This model was adequately powered at .81. Given the large impact of having mentorship, role models,

and Black gay representation on feeling comfortable with oneself mentioned by participants in phase one, it is surprising this facilitating factor was not a robust predictor of self-affirmation. It is possible that the measurement of this factor impacted its accuracy. For instance, this measure incorporated prompts from several measures and inquired whether the participant had the experience and the degree to which it bothered them using the Likert scale LGBT People of Color Microaggressions scale (Balsam et al., 2011). Further, we would anticipate that having affirming social support and connectedness to the Black queer community would also be robust predictors of self-affirmation based upon previous findings documenting community connectedness and social support as significant positive predictors of identity affirmation among a sample of queer people of color (Perrin et al., 2019). Lastly, we would also anticipated that grit would be a robust predictor of self-affirmation due to the burgeoning evidence that grit positively predicts the exploration and commitment processes of identity development (Weisskirch, 2019).

Freedom From Societal Expectations Of Black Men As The Outcome

In our models examining freedom from societal expectations of Black men, we found that both our inhibiting and facilitating models were overall statistically significant suggesting these factors account for a significant amount of variance of the outcome. While the inhibitory model was overall statistically significant, only the covariate of age was a significant predictor of freedom from societal expectations. This model was statistically underpowered at .74 and had an increased risk of Type II error. Based upon previous findings, we would anticipate that greater minority stressors (e.g., internalized homophobia, rejection sensitivity) would be negative predictors of freedom from societal expectations of Black men as individuals with greater proximal stressors may be less inclined to freely express themselves (Sattler et al., 2016).

In the model examining facilitating factors of freedom from societal expectations of Black men, we found the overall model was statistically significant and accounted for a significant portion of the variance of the outcome. The covariate of age along with frustration with concealment were significant positive predictors of freedom from societal expectations of Black men. Frustration with concealment serving as a robust predictor of freedom from societal expectations of Black men may align with the Self-Determination Theory (Ryan & Deci, 2000). The Self-Determination Theory posits that human motivation is influenced by three components: (1) Competence or the need to be effective in navigating one's environment; (2) Relatedness which is the need to have a sense of belonging and connectedness with others; and, (3) Autonomy or the need to feel as if one has agency and control over their life and behavior (Ryan & Deci, 2000). Concealment of one's sexual identity may result in greater feelings of frustration, diminished self-efficacy and a thwarted sense of autonomy, which engenders intrinsic motivation to not adhere to societal conventions germane to Black men (Pachankis, 2007). For BSGLM, frustration with concealment may motivate them to break free from narratives about Black men that devalue deviations from rigid cisheteronormative scripts and instead create and live their own narratives. This may include thinking flexible about gender roles and the expression of gender as well as sexuality; it also may include not being secretive about one's sexual orientation and rethinking socialized thoughts and attitudes toward sexual minorities (Lemelle & Battle, 2004; Wilson et al., 2010). Supporting evidence testing the Self-Determination Theory found in a two-week daily diary study of sexual minorities that perceived autonomy and selective disclosure of one's sexual orientation predicted needs satisfaction, which was measured by the freedom to be oneself and not feeling pressured to behave in certain ways (Legate et al., 2017).

Like the previous models, this analysis was statistically underpowered at .78 and had an increased risk to of Type II error. Based upon previous findings, we would anticipate observing role models, seeing BSGLM in media and being connected to the Black queer community would provide exposure to the diversity of BSGLM and not limit them to stereotypes and archetypes of BSGLM and, in turn, contribute to greater freedom from societal expectations of Black men. From a social cognitive theory standpoint, BSGLM seeing a wide variety of BSGLM who are living authentically may model how to navigate the unique challenges BSGLM experience and increase their self-efficacy in managing BSGLM-specific stressors. This is supported by previous qualitative findings documenting queer mentorship and media representation provided information about how to navigate dominant social norms about sexual minorities and various environments, instilled a sense of hope and sexual identity pride, and normalized their identity (Gomillion & Giuliano, 2011; Sheran & Arnold, 2012). Extant results would suggest that having affirming social support would promote freedom from adhering to societal expectations of Black man. For example, a qualitative study of 10 Black sexual minorities documented that having affirmative social support was important to reconciling beliefs about being Black and a sexual minority and provided a context to deviate from traditional masculine expectations of Black men (Levitt et al., 2015). Lastly, we would also expect for significant life events to be a robust predictor of freedom from societal expectations of Black men. Previous qualitative results from a qualitative study of queer people of color document how accessing more liberal spaces allow for greater exploration of identity and freedom from scripts of Black men (Cerezo et al., 2020).

Unconditional Acceptance As The Outcome

In our models examining unconditional acceptance as the outcome, both inhibitory and facilitating models were overall statistically significant suggesting these factors account for a

significant amount of variance of the outcome. In the inhibitory model, expereincing threats, harassment, and enacted violence was the only significant predictor in the model. Specifically, we saw a positive relationship between experiencing threats, harassment, and enacted violence in the past and having unconditional acceptance. The positive direction of this effect differs from previous literature among young BSGLM living with and without HIV documenting greater discrimination (sexual and racial) being associated with lower social support (Bauermeister et al., 2018). Our findings suggest that more experiences of threats and enacted violence are related to greater unconditional acceptance from their social networks. It may be that individuals who experienced more threats and violence in order to change their sexuality may have purposefully sought out more affirming social support and environments.

Like the previous models, this analysis was statistically underpowered at .74 and had an increased risk to of Type II error. We would anticipate that internalized homophobia may contribute to less disclosure of sexual orientation to their support system and, in turn, limit their ability to receive affirmative social support (Moradi et al., 2010; Pachankis, 2007). We would also expect significant relationships between concerns of letting family down, experiencing non-supportive messages from family and non-affirming religious messages, and seeing other queer people being treated poorly from family with unconditional acceptance given the documented significant associations between minority stressors and social support among BSGLM (Bauermeister et al., 2018).

In the model examining facilitating factors, only the covariate of age was a significant predictor in the model. Again, this model was statistically underpowered at .78 and had an increased risk to of Type II error. We would anticipate based upon previous findings that connection to the Black queer community would be significant predictors of unconditional

acceptance. This is based upon the existing literature documenting significant associations between community connectedness and social support (Puckett et al., 2019).

Limitations

The quantitative phase of the study asked adult participants to retrospectively reflect on their experience from years ago which may not be as accurate of an account. Future studies may decide to longitudinally examine individuals actively going through their identity development process at a younger age similar to Jamil et al. (2009) did in their study of identity among teenage ethnic sexual minorities. While the qualitative and quantative samples were similar, they differed in a few key ways which may impact the quantitative findings. First, the quantative sample reported greater internalized homophobia than the qualitative sample which may influence their ability to be self-affirming and comfortable with all of their identities. Second, the quanitative sample endorsed greater concealment than the qualitative sample which also may hinder self-affirmation and ability to not adhere to societal expectations of Black men. Lastly, participants in the second phase reported greater concerns of being stigmatized based upon their sexual identity which may likely influence their perception of receiving unconditional support of all their identities. These key differences between the samples may be a reason why some of the qualitative findings did not generalize to the quantative sample.

Results from the quantitative sample in the study may not be representative of all BSGLM and, as such, not generalizable to all BSGLM. Additionally, this study targeted a difficult population to recruit which was further complicated by the COVID-19 pandemic. Prospective work with BSGLM should employ unique and creative strategies to reach this population. Quantitative findings should be interpreted with caution as most of the analyses were slightly underpowered due to small sample size. Statistically underpowered studies can inflate

the *p*-value which may increase the likelihood of Type II error and determining non-significant results when there may be a substantial effect. Future studies should recruit larger samples of BSGLM to reduce the risk of Type II errors. Lastly, the use of cross-sectional data precludes examination of causality. Future longitudinal studies of BSGLM may allow for the examination of causality.

CHAPTER 4 DISCUSSION

While researchers have recently started to expand the inquiry into the full, lived experience of BSGLM beyond sexual health outcomes, there is still limited information about how BSGLM navigate their unique experience of exploring and committing to their intersecting identities. The purpose of the current study was to examine two key voids in the literature about BSGLM: (1) identifying what a healthy identity looks like among BSGLM; and, (2) understanding what are the inhibiting and facilitating factors of healthy identity development among this population. To address these knowledge gaps, an exploratory sequential mixedmethods study was conducted to first qualitatively explore identity development among a sample of 19 BSGLM and then qualitative findings were quantitatively tested among a larger sample of BSGLM. This study provides novel information about identity among BSGLM; specifically, the study highlights what an ideal identity looks like for BSGLM and the challenges they traverse to reach an ideal identity.

Overall, the qualitative phase identified three specific factors of healthy identity among BSGLM of freedom from conforming to societal views of Black men, unconditional acceptance, and self-affirmation and comfort with oneself. These factors align with results of the broader LGBTQ population (Riggle et al., 2008; Riggle & Rostosky, 2012; Rostosky et al., 2010), budding literature about identity negotiation among BSGLM (Bartone, 2017; Bowleg, 2013), and other samples of queer people of color (Cerezo et al., 2020). The qualitative phase also identified 13 factors that either inhibit or facilitate identity development among BSGLM. Many of the elucidated inhibiting factors of identity development were reflective of proximal and distal minority stressors posited by the Minority Stress Theory (Meyer, 2003), suggesting BSGLM experience many of the unique stressors that sexual minorities endure. The facilitating factors identified highlighted the importance internal cognitive-emotional resources (e.g., frustration

with concealment, grit) and social resources (e.g., having role models, mentorship, Black queer media representation, connection with Black queer people, having access to affirming social support and spaces) in the identity development process of BSGLM. Findings from the qualitative phase detailing the importance of the social environment in the identity development process of BSGLM support previously posited theories including Wilson's (2008) Dynamic-Ecological Model of Identity Formation and Conflict among Bisexually-Behaving African-American Men, Seller et al.'s (1998) Multidimensional Model of Racial Identity, and Cooley's Looking Glass Theory (1902).

In addition to identifying a healthy identity and which factors the identity process, the current study examined whether the qualitative findings generalized to a second sample of BSGLM using a quantitative battery. The qualitative findings did partially generalize to the larger sample of BSGLM. The qualitative findings did generalize to the larger sample of BSGLM when freedom from societal expectations of Black men and unconditional acceptance were tested as outcomes. We found overall statistical significance in all four of these models suggesting the inhibitory and facilitating factors tested did account for a significant amount of variance in both of these outcomes. When self-affirmation was tested as the outcome variable, neither model examining the inhibitory or facilitating factors were statistically significant, thus not provided support for the qualitative findings in our larger sample.

Limitations

While mixed methods studies are beneficial for the combined use of qualitative and quantitative methods, the results of the current study should be framed within the context of its limitations. Participants were recruited online and excluded BSGLM that lacked access to social media platforms or the internet and Black queer organizations. Potential participants also had to

be a part of groups for BSGLM and self-select into the study which may indicate they had a positive sense of their identity and were comfortable disclosing their experiences. Future studies should attempt to recruit BSGLM with limited access to the internet or groups related to BSGLM as well as BSGLM that are not as comfortable with their identities; the latter may make recruitment more study recruitment more difficult. Perhaps using strategies respondent-driven sampling methods, convinence sampling, or snowball sampling are more effective means to recruit BSGLM who are not connected to Black queer groups and are not as comfortable with their identities. Our study was also limited by both samples being highly education and more efforts should be made to recruit BSGLM with less formal education. Results from both qualitative and quantitative samples in this mixed methods study may be representative of all BSGLM and may not be generalizable to all BSGLM. Additionally, this study targeted a difficult population to recruit which was further complicated by the COVID-19 pandemic.

Quantitative findings should be interpreted with caution as most of the analyses were slightly underpowered due to small sample size. Statistically underpowered studies can increase the likelihood of Type II error and result in non-significant results when there may be a substantial effect. Future studies should recruit larger samples of BSGLM to reduce the risk of Type II errors. Lastly, the use of cross-sectional data precludes examination of causality.

Moreover, many of the elucidated inhibiting and facilitating factors likely occur simutaneously (e.g., non-supportive messages from family and non-affirming messages from church), reciprocally influence each other (e.g., internalized homophobia and connection to Black queer community), and some factors may be more salient at specific times (e.g., significant life events, frustration with concealment). These considerations may limit our findings as we only captured a snapshot of the participants and are unable to examine the fluidity of the identity development

process. Future longitudinal studies of BSGLM may allow for the examination of causality, increase insight into which factors are most important for identity development at specific times, and enhance our understanding of the dynamic interactions between these factors that influence identity among BSGLM.

Both the qualitative and quantitative phases of the current study asked adult participants to retrospectively reflect on their experience from years ago which may not be as accurate of an account. Future studies may decide to focus on individuals actively going through their identity development process at a younger age similar to Jamil et al. (2009) did in their study of identity among teenage ethnic sexual minorities. Despite these limitations, this work provides novel information about how what does a healthy identity look like among BSGLM and what factors influence their identity development process.

Research Implications

The findings of this study may have implications for prospective research. This research calls attention to the dearth of work explicitly focusing on identity development not only among BSGLM, but also among queer and transgender people of color. Future studies should investigate whether similar inhibiting and facilitating factors influence identity development among BSGLM as well as quantitively test the elucidated factors in the current study.

Researchers should also reevaluate previous models of identity development and use more mixed-methods approaches to generate new models of identity development among communities with multiple marginalized identities. Hopefully, investigating identity development among queer people of color will result in new measures of identity being devised for this population.

There are a few measures that are beginning to fill this void, such as the Conflicts in Allegiance scale or the Queer People of Color Identity Affirmation Scale, however more unique measures

are needed (Ghabrial & Andersen, 2020; Sarno et al., 2015). At the minimum, researchers should consider including measures of identity (e.g., race/ethnicity, sexual, gender, religion) in thier broader survey batteries. These potential measures should be more than what labels the person uses and instead ask their disposition about those identities and how those identities align with one another. A practical extension of this current study would include further assessing the psychometric properties of the generated measures used in the second phase of this study.

Pertaining to the components of what a healthy identity consists of among BSGLM, future work should examine the measurement of these components as well as whether they are a part of a higher-order construct of healthy identity. Self-affirmation and comfort with all of one's identities is consistent with previous assumptions that ethnic sexual minorities attain a positive identity when they endorse positive thoughts and feelings about both their ethnic and sexual identities (Crawford et al., 2002). Freedom from societal expectations also aligns with previous work among sexual minorities about the positives aspects of their sexual identity (Bowleg, 2013; Riggle et al., 2008; Riggle & Rostosky, 2012; Rostosky et al. 2010). However, the inclusion of unconditional acceptance from others is not a factor typically seen among positive identity among sexual minorities (Riggle et al., 2014). Unconditional acceptance is likely needed as BSGLM often remain engaged in the Black community exposing them to possible hetersexism and they may not engage in the broader LGBT community due to racism (Choi et al., 2013; Della et al., 2002). Altogether, positive identity for BSGLM likely differs from posited ideal identity outcomes for sexual minorities and these identified factors of healthy identity for BSGLM should be examined further.

Related to the inhibiting factors of identity development, participants frequently commented on how the messages they received at church, directly or indirectly, often served as

the basis of both their internalized stigma and anticipated rejection and their family's heterosexist beliefs. Perhaps creating interventions for Black churches aimed at promoting love and tolerance may mitigate the impact of negative religious rhetoric on the identity development process of BSGLM (Lassiter et al., 2019). Similar interventions have been implemented to encourage HIV prevention and referral services for HIV for BSGLM which customizes previously developed strategies, uses scripture to support the intervention, and emphasizes the tenets of liberation theology to promote social justice (Jeffries et al., 2017).

Participants commented on the power of, or not, having exposure to Black queer individuals via media, role models, mentorship, or other Black queer friends. This may spur several potential research projects. First, exposing BSGLM to prominent to Black queer media featuring BSGLM in an experimental design and then measuring whether participants had any changes in their attitudes or beliefs about their identities may be a possible intervention. Another line of research could examine how the growing exposure of queer and transgender people of color on television (broadcast, cable, streaming) is impacting how BSGLM view themselves and impacts their identity development. GLAAD (2020) reported in their annual report on LGBTQ representation of television that queer and transgender people of color account for 47% of queer and transgender characters on television. Further, 22% of LGBTQ characters on television are Black which has increased from 10% of representation during the 2011-2012 television season (GLAAD, 2020).

Participants also detailed the beneficial impact of having heterosexual allies in their family and at school on their identity development process. This could generate prospective research questions about allyship for BSGLM and the broader queer and transgender people of color community. To date, the scant literature about LGBTQ allyship has been overwhelmingly

focused on White LGBTQ allies (Duhigg et al., 2010; Jones & Brewster, 2017; Rostosky et al., 2015). Just as there are unique challenges with being a BSGLM, there may be particular challenges with being a Black LGBTQ ally that differ from being a White ally. Research efforts investigating Black LGBTQ allyship may opt to focus on understanding the unique challenges of being a Black LGBTQ ally and developing interventions to promote allyship.

Lastly, there may be a need to direct more research on two of the facilitating factors elucidated, grit and frustration with concealment. Grit was described, by name in many interviews, as a factor that allowed participants to continue striving toward their goals despite the experience of minority stress and adversity. In the only published study to date of grit in an exclusive sample of BSGLM, compared to those with less grit, participants with high grit reported better health, reported less symptoms of psychopathology, engaged in less sexual risk taking behaviors, and were more likely to have more friends who were sexual minorities and participant in gay activities (Winiker et al., 2018). Grit may be an important protective factor for BSGLM that also plays an important role in identity development which needs to be further examined. Participants in the current study also commented on the importance of growing more frustration with concealing their identity as a facilitating factor of their identity development. While the impact of concealment on sexual and gender minorities is well-documented, there is limited information about how being frustrated with hiding one's identity may be a by-product of this minority stress process and appears to play a role in the identity development process of BSGLM. Prospective studies should examine frustration with concealment further in the context of identity integration.

These potential research implications should be understood within the structural constraints of conducting research with this population. Researchers should broaden the scope of

inquiry about BSGLM as 90% of research examining this group focuses on sexual health and HIV (Frost, 2017; Lassiter, 2017; Wade & Harper, 2017). This often makes the examination of BSGLM the de facto study of HIV and ignores the full experience of this group. The focus of HIV and sexual health is warranted given the transmission rates within the community however this furthers the portrayal of BSGLM as sexual, disease-laden deviants (Calabrese et al., 2017). Prospective work on BSGLM should stop evaluating this population from a deficit-model and neglecting the positive aspects of BSGLM, which beckons the need for more Black researchers to examine BSGLM as White researchers center their investigation of this community around their identities and experiences as normative (Bowleg et al., 2017; Meyer, 2010). A shift in current funding is also needed to broaden the examination of BSGLM. For example, less than 1% of National Institutes of Health (NIH) funding focuses on sexual and gender minorities and 80% of that 1% focuses on HIV/AIDS work (Coulter et al., 2014; Voyles & Sell, 2015). Moreover, Black applicants for NIH funding are less likely to receive funding compared to White applicants (Ginther et al., 2011). These are some of the barriers in place that limit the investigation of the full, lived experience of BSGLM. Broadening the investigation of BSGLM may better inform the development of more effective interventions for this population.

Clinical Implications

Results from the current study may also inform potential clinical interventions. BSGLM need to be able to explore and commit to thier identities in order to successfully navigate the identity development process and arrive a point where the feel self-affirmed, feel free from pressure to adhere to societal expectations of Black men, and have unconditional acceptance from their support network (Kroger & Marcia, 2011). Interventions that target internalized stigma may assist BSGLM in being self-affirming and having more comfort with themselves.

Rostosky et al. (2010) recommends that clinicians assist sexual minorities with developing a positive self-image by deconstructing internalized heterosexism and generating narratives that focus on resilience. Further, our quantitative results demonstrated that concerns of letting one's family down was a robust predictor of self-affirmation. Providing BSGLM with psychoeducation about rejection sensitivity and interpersonal schemas as well as increasing coping skills to manage rejection sensitivity may reduce concerns for letting one's family down and promote self-affirmation (Flentje, 2020; Shenkman et al., 2019).

Deconstructing negative internalized messages about BSGLM while generating a positive narrative may also facilitate greater perceived freedom from adhering to societal expectations of Black men. Assisting BSGLM feel free from social norms may also include promoting psychological flexibility. A cross-sectional study of sexual minority men of color found that psychological flexibility mediated the relation between experiencing sexual racism and symptoms of psychopathology (Bhambhani et al., 2018). Although this study was cross-sectional and focused on sexual racism, the results may suggest promoting psychological flexibility via Acceptance and Commitment Therapy (ACT) with BSGLM may be a useful strategy to navigate racism within the LGBTQ community and heterosexism within the Black community. There is limited evidence in using ACT with sexual minorities. A study of five sexual minorities in a multiple baseline evaluation study found that engaging a course of ACT individual treatment resulted in positive changes in internalized homophobia, psychological flexibility, psychopathology, quality of life, and perceived social support, which were sustained at four and 12 week follow-up evaluations (Yadavaia & Hayes, 2012). There is a growing amount of LGBTQ adaptations of ACT concepts and principles though the use of ACT is not thoroughly tested with sexual minorities (Stitt, 2014). The use of gender role analysis, an intervention used

in feminist therapy, is another possible tool to promote psychological flexibility and freedom from societal expectations of Black men (Riggle et al., 2008). Gender role analysis may assist BSGLM in understanding the impact of gender role expectations on their life and challenge heterosexist messages that conflate gender with sexual identity.

Assisting BSGLM in deconstructing social expectations and building social scripts that promote liberation and freedom from social conventions of Black men may be achieved via narrative therapy (McLean, 2012). Quantitative results from the current study suggest that both grit and frustration with concealment may promote freedom from social conventions about Black men. Scholars have posited that building grit requires having a growth mindset where one perceives their ability traits are malleable and not fixed (Burgoyne et al., 2018). However, to date there are no interventions that attempt to modify mindset or bolster grit that have been effective (Burgoyne et al., 2018; Credé, 2018). Thus, attempting to promote grit among BSGLM may not be effective but clinicians may use motivational interviewing and/or problem-solving therapy to target the underlying components of grit, perseverance despite challenges and sustained focus on goals. Related to frustration with concealment, clinicians may be tempted to encourage BSGLM to disclose their sexual orientation to abate their frustration but this may place BSGLM at risk for losing social support from their network and cause more distress (Cerezo et al., 2020; Rosario et al., 2009; Schrimshaw et al., 2013). Instead, clinicians working with BSGLM should validate their experience of minority stress, assist them in finding emotional support to cope with their frustration, and evaluate the possible consequence of disclosing their sexual orientation (Brooks et al., 2020; Russell & Bohan, 2007).

Germane to having unconditional acceptance from one's support system and having access to affirming spaces, BSGLM may need to actively seek affirming spaces and communities

while enhancing their skills to manage heterosexism from the Black community. Clinicians should assist BSGLM in developing confidence to engage with the broader Black queer community in order to find affirming people and spaces (Jamil et al., 2009; Lytle et al., 2014). Facilitating connection to safe and inclusive spaces for BSGLM including but not limited to racially inclusive LGBTQ clubs, affirming faith-based groups, Black queer community events, and Black queer organizations, brick-and-mortar or online, may be useful for BSGLM to find affirming social support (Jackson et al., 2020; Lytle et al., 2014). Clinicians should be cautious in recommending BSGLM engage with the broader LGBTQ community as almost 70% of BSGLM report experiencing sexual racism within the gay community (Choi et al., 2013). It is also important to assist BSGLM in coping with heterosexism they experience in the Black community as they often remain connected with the Black community despite the threat of experiencing stigma based upon their sexuality in order to receive social support (Battle & Crum, 2007). Qualitative studies of BSGLM reveal they use specific strategies to cope with heterosexism they experience in the Black community: role flexing to conceal sexual identity in non-gay friendly spaces, suppression of same-gender attraction, keeping the faith or remaining close to God, and standing their ground by actively confronting homophobia (Balaji et al., 2012; Bryant, 2017; Della et al., 2002). Being aware of the strategies BSGLM use to manage heterosexism and generating more adaptive strategies may be a necessary treatment goal.

In addition to the therapeutically bolstering the three components of healthy identity among BSGLM, treatment may also assist BSGLM with navigating the inhibiting factors mentioned by participants. Affirming family-based interventions may be used to limit exposure to non-supportive messages from family member and increase social support from family members (Hossain & Ferreira, 2019; Perrin et al., 2019). These family-based interventions would

target friends and family of BSGLM in order to education them of the implications of their attitudes and behavior toward LGBTQ individuals (Perrin et al., 2019). Pertaining to assisting BSGLM cope with hearing non-affirming messages at spiritual venues, clinicians may help BSGLM find affirming faith-based organizations or seek guidance from affirming clergy. It is also important for clinicians to understand how BSGLM are managing the experience of non-affirming messages at church if they decide to continue attending that place of worship. Previous qualitative findings of BSGLM illustrated that BSGLM manage negative religious messages in church by mentally discrediting the person delivering the message and identifying fallacies in their religious leader's arguments (Pitt, 2010).

Participants in the first phase of the study discussed the importance of having role models, mentorship, and Black queer representation in the media. BSGLM may benefit from interventions that create mentorship programs and connect them to Black queer mentors. Previous studies detail how queer mentorship is mutually beneficial for both the mentor and mentee (Riggle et al., 2008; Russel & Bohan, 2007; Sheran & Arnold, 2012). Older BSGLM have even called upon the creation of mentorship to help younger BSGLM learn from their mistakes and teach them health-promoting behaviors (Tobin et al., 2018).

Interventions facilitating identity development among BSGLM may also encourage them to seek out Black queer media as participants reported having this representation normalized their experiences, helped mitigate their minority stress, and provided examples of successful BSGLM. Encouraging BSGLM to explore their culture via learning about prominent Black queer figures (e.g., Marsha P. Johnson, Bayard Rustin) or reviewing important literature by and about Black queer people (e.g., Audre Lorde, James Baldwin, Essex Hemphill, E. Lynn Harris) may be useful exercises (Jackson et al., 2020). Clinicians may encourage BSGLM to also

explore important pieces of Black queer art (e.g., *Paris is Burning, Tongues United, Moonlight*), contemporary Black queer writers (e.g., Michael Arceneaux, George M. Johnson, Darnell L. Moore), podcasts (e.g., The Read), social media influencers (e.g., TS Madison, Tarell Grice), and countless other Black queer creators. Lastly, clinicians may refer BSGLM to review GLAAD's annual *Where Are We On TV* report that details which broadcast, cable, and streaming television shows feature Black queer characters (GLAAD, 2020).

The qualitative findings also revealed the importance of being connected to the Black queer community and having affirming social support for identity development among BSGLM. Clinicians should assess the level of engagement of BSGLM have with the broader LGBTQ community as well as the Black queer community. Additionally, providers should explore the barriers which prevent BSGLM from engaging with the Black queer community if they are not already connected to the community. This is important as Black queer social support is associated with less psychopathology, greater resilience, and greater sexual identity pride among young BSGLM (Vincent et al., 2019). Qualitative findings of young sexual minorities of color also reveal the central role of developing and maintaining Black queer relationships in building a sense of collective self-esteem and gaining access to support to address challenges associated with the lives of BSGLM (Jamil et al., 2009).

Participants in the qualitative phase of the current study also mentioned appreciating the opportunity to speak about their experiences and reflect on their identity development process; a few participants even described the process as cathartic. Similar responses were documented in two other studies of sexual minority men of color and may suggest that having opportunities to recount their experiences, perhaps via conversation or storytelling, counseling, journal or

expressive writing, may be an intervention in itself (Jackson et al., 2020; Jamil et al., 2009). Creating spaces for BSGLM to tell their stories may be a useful tool.

Beyond the aforementioned interventions targeting the components of healthy identity and factors influencing identity development, there are transdiagnostic treatment protocols that target minority stress among sexual minorities and may be of particular utility for BSGLM navigating identity-related concerns. The Effective Skills to Empower Effective Men (ESTEEM) is a 10-session transdiagnostic treatment protocol that targets the cognitive, affective, and behavioral responses gay and bisexual men have to minority stress (Burton et al., 2019). The ESTEEM protocol has demonstrated efficacy in reducing minority stress and symptoms of psychopathology among sexual minority men and may benefit BSGLM navigating identityrelated challenges yet further examination is warranted (Burton et al., 2019). Approach the World with Acceptance, Respect, and Equity with New and Explicit Strategies for Self-Awareness (AWARENESS) is another cognitive-behavioral transdiagnostic approach targeting intersectional minority stress as the driver of psychopathology, poor health, and substance use among sexual minorities that may be applicable for BSGLM (Flentje, 2020). Lastly, Shades of Black is an integrative psychotherapy group for BSGLM intended to facilitate identity integration, engender resilience, increase self-esteem and self-acceptance, and attenuate loneliness and internalized stigma (Haynes & Dale, 2017). The Shade of Black group would likely be the best option for BSGLM with identity-related concerns however there is no data about the efficacy of the group.

Finally, various barriers must be addressed in order to provide any of the aforementioned interventions for BSGLM. First, clinicians working with BSGLM should acknowledge their own biases and engage in self-reflective practices to promote cultural humility in their clinical

practice (Cerezo et al., 2020; Jamil et al., 2009; Rostosky et al., 2010). Clinicians must be sensitive to the needs to BSGLM and be aware of the unique clinical issues that may arise in treatment with this population including issues of gender role expectations in therapy, addressing cultural stigma and cultural mistrust, acknowledging the intersectionality issues in treatment, potential defensiveness in therapy, and managing transference and countertransference (Nadal et al., 2014). Providers need to also have knowledge about local, regional, national, and online organizations and resources for BSGLM in order to facilitate connections to the Black queer community (Perrin et al., 2019).

BSGLM may have limited access to mental health services and providers may have to use different strategies to reach this population. This may include providing telehealth services, partnering with community-based organizations that serve BSGLM, or providing discounted fee or pro bono services. Further, clinicians may consider providing education to the communities and systems where BSGLM frequently experience stigma including family systems, churches, barbershops, and both the legal and justice systems. Engaging in systems-level, community-level, and structural interventions to create safe, inclusive spaces may create less hostile environments that contribute to experiences mentioned in the current study that make it difficult to arrive at a healthy identity among BSGLM (Brooks et al., 2020; Perrin et al., 2019).

Conclusion

Multiple calls for greater investigation into the identity development process of BSGLM have been largely ignored since the 1980s and scientific inquiry examining this population has predominantly focused on sexual health and neglected the full experience of BSGLM. This population stands at a unique junture precariously positioned between various sources of stigma from all the communities they belong to, which threatens their identity development process.

This study provides an unique perspective and novel information about the identity development process of BSGLM. These findings call attention to what healthy identity looks like for BSGLM as well as the factors that influence attaining a positively formed identity. Findings affirm that identity development is a complex and multifaceted process shaped by intra- and interpersonal processes. It is imperative that researchers begin asking more questions about identity and that clinicians factor the intersectionality of BSGLM into their work with this population.

References

- Ahn, A. J., Kim, B. S. K., & Park, Y. S. (2009). Asian cultural values gap, cognitive flexibility, coping strategies, and parent-child conflicts among Korean Americans. *Asian American Journal of Psychology*, S(1), 29–44. https://doi.org/10.1037/1948-1985.S.1.29
- Akerlund, M., & Cheung, M. (2000). Teaching beyond the deficit model: Gay and lesbian issues among African Americans, Latinos, and Asian Americans. *Journal of Social Work Education*, 36(2), 279-292.
- Atkinson, F., & Martin, J. (2020). Gritty, hardy, resilient, and socially supported: A replication study. *Disability and Health Journal*, *13*(1). https://doi.org/10.1016/j.dhjo.2019.100839
- Balaji, A. B., Oster, A. M., Viall, A. H., Heffelfinger, J. D., Mena, L. A., & Toledo, C. A. (2012). Role flexing: how community, religion, and family shape the experiences of young black men who have sex with men. AIDS patient care and STDs, 26(12), 730–737. https://doi.org/10.1089/apc.2012.0177
- Balsam, K. F., Molina, Y., Beadnell, B., Simoni, J., & Walters, K. (2011). Measuring multiple minority stress: The LGBT People of Color Microaggressions Scale. *Cultural Diversity and Ethnic Minority Psychology*, *17*(2), 163–174. https://doi.org/10.1037/a0023244
- Bartone, M. D. (2017). "Nothing has stopped me. I keep going:" Black gay narratives. *Journal of LGBT Youth*, *14*(3), 317-329. doi:10.1080/19361653.2017.1324342
- Bates, D. D. (2010). Once-married African-American lesbians and bisexual women: Identity development and the coming-out process. *Journal of Homosexuality*, *57*(2), 197-225.
- Battle, J., & Crum, M. (2007). Black LGB health and well-being. In I. H. Meyer, M. E. Northridge, I. H. Meyer, M. E. Northridge (Eds.), *The health of sexual minorities: Public health perspectives on lesbian, gay, bisexual, and transgender populations* (pp. 320-352).

- New York, NY, US: Springer Science + Business Media. doi:10.1007/978-0-387-31334-4_1380/19361653.2017.1324342
- Bauermeister, J. A., Muessig, K. E., Flores, D. D., LeGrand, S., Choi, S., Dong, W., ... Hightow-Weidman, L. B. (2018). Stigma Diminishes the Protective Effect of Social Support on Psychological Distress Among Young Black Men Who Have Sex With Men. *AIDS Education and Prevention*, 30(5), 406–418. doi:10.1521/aeap.2018.30.5.406
- Berg, B.L. (2009). *Qualitative research methods for the social sciences* (7th ed.). Boston, MA: Allyn & Bacon.
- Berg, R. C., Munthe-Kaas, H. M., & Ross, M. W. (2015). Internalized Homonegativity: A

 Systematic Mapping Review of Empirical Research. *Journal of Homosexuality*, 63(4),
 541–558. doi:10.1080/00918369.2015.1083788
- Bhambhani, Y., Flynn, M. K., Kellum, K. K., & Wilson, K. G. (2020). The role of psychological flexibility as a mediator between experienced sexual racism and psychological distress among men of color who have sex with men. *Archives of sexual behavior*, 49(2), 711-720. https://doi.org/10.1007/s10508-018-1269-5
- Bokhove, C., & Christopher. (2018). Automated generation of "good enough" transcripts as a first step to transcription of audio-recorded data. *Methodological Innovations, May-August*, 1-14. doi:10.31219/osf.io/sn7w9
- Bowen, G. A. (2008). Naturalistic inquiry and the saturation concept: A research note.

 Qualitative Research, 8(1), 137-152. doi:10.1177/1468794107085301
- Bowleg, L. I. (2013). 'Once you've blended the cake, you can't take the parts back to the main ingredients': Black gay and bisexual men's descriptions and experiences of intersectionality. *Sex Roles*, 68(11-12), 754-767. doi: 10.1007/s11199-012-0152-4

- Bowleg, L., del Río-González, A. M., Holt, S. L., Pérez, C., Massie, J. S., Mandell, J. E., & A. Boone, C. (2017). Intersectional epistemologies of ignorance: How behavioral and social science research shapes what we know, think we know, and don't know about U.S. Black men's sexualities. *The Journal of Sex Research*, *54*(4-5), 577–603. https://doi.org/10.1080/00224499.2017.1295300
- Braun, B., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101. doi: 10.1191/1478088706qp063oa
- Brewster, M. E., Moradi, B., DeBlaere, C., & Velez, B. L. (2013). Navigating the borderlands:

 The roles of minority stressors, bicultural self-efficacy, and cognitive flexibility in the mental health of bisexual individuals. *Journal of Counseling Psychology*, 60(4), 543–556. doi:10.1037/a0033224
- Bryant, L. O. (2017). Effective strategies used by African American same gender loving men in promoting health and well-being. In L. D. Follins & J. M. Lassiter (Eds), *Black LGBT health in the United States: The intersection of race, gender, and sexual orientation* (pp. 169-184). Lanham, Maryland: Lexington Books, an imprint of The Rowman & Littlefield Publishing Group, Inc.
- Brewster, M. E., Moradi, B., DeBlaere, C., & Velez, B. L. (2013). Navigating the borderlands:

 The roles of minority stressors, bicultural self-efficacy, and cognitive flexibility in the mental health of bisexual individuals. *Journal of Counseling Psychology*, 60(4), 543–556. https://doi.org/10.1037/a0033224
- Brooks, B. D., Job, S. A., Clark, E. A., Todd, E. A., & Williams, S. L. (2020). Concealment as a moderator of anticipated stigma and psychiatric symptoms. *Journal of Gay & Lesbian Mental Health*. Advance online publication. doi: 10.1080/19359705.2020.1721037

- Bond, B. J., Miller, B., & Aubrey, J. S. (2018). Sexual References and Consequences for Heterosexual, Lesbian, Gay, and Bisexual Characters on Television: A Comparison Content Analysis. *Mass Communication and Society*, 22(1), 72–95.
 doi:10.1080/15205436.2018.1489058
- Bourke, B. (2014). Positionality: Reflecting on the research process. The Qualitative Report, 19(33), 1-9. Retrieved from https://nsuworks.nova.edu/tqr/vol19/iss33/3
- Boyer, S. J., & Lorenz, T. K. (2020). The impact of heteronormative ideals imposition on sexual orientation questioning distress. *Psychology of Sexual Orientation and Gender Diversity*, 7(1), 91–100. https://doi.org/10.1037/sgd0000352
- Burgoyne, A. P., Hambrick, D. Z., Moser, J. S., & Burt, S. A. (2018). Analysis of a mindset intervention. *Journal of Research in Personality*, 77, 21–30. https://doi.org/10.1016/j.jrp.2018.09.004
- Burton, C. L., Wang, K., & Pachankis, J. E. (2019). Psychotherapy for the spectrum of sexual minority stress: Application and technique of the ESTEEM treatment model. *Cognitive and behavioral practice*, 26(2), 285–299. https://doi.org/10.1016/j.cbpra.2017.05.001
- Calabrese, S. K., Earnshaw, V. A., Magnus, M., Hansen, N. B., Krakower, D. S., Underhill, K., ... Dovidio, J. F. (2017). Sexual Stereotypes Ascribed to Black Men Who Have Sex with Men: An Intersectional Analysis. *Archives of Sexual Behavior*, 47(1), 143–156. doi:10.1007/s10508-016-0911-3
- Calzo, J. P., Antonucci, T. C., Mays, V. M., & Cochran, S. D. (2011). Retrospective recall of sexual orientation identity development among gay, lesbian, and bisexual adults.
 Developmental psychology, 47(6), 1658–1673. https://doi.org/10.1037/a0025508

- Cass, V. C. (1979). Homosexual identity formation: A theoretical model. *Journal of Homosexuality*, 4(3), 219-235. doi:10.1300/J082v04n03_01
- Cerezo, A., Cummings, M., Holmes, M., & Williams, C. (2020). Identity as Resistance: Identity Formation at the Intersection of Race, Gender Identity, and Sexual Orientation.

 *Psychology of Women Quarterly, 44(1), 67–83. doi:10.1177/0361684319875977
- Choi, K. H., Paul, J., Ayala, G., Boylan, R., & Gregorich, S. E. (2013). Experiences of discrimination and their impact on the mental health among African American, Asian and Pacific Islander, and Latino men who have sex with men. *American journal of public health*, 103(5), 868–874. https://doi.org/10.2105/AJPH.2012.301052
- Clements, A.D., Fletcher, T. R., Cyphers, N.A., Ermakova, A.V., & Bailey, B. (2015). RSAS-3: Validation of a very brief measure of religious commitment for use in health research. *Journal of Religious Health*, *54*, 134-152. doi: 10.1007/s10943-013-9791-1
- Cole, E.R. (2009). Intersectionality and research in psychology. *American Psychologist*, 64(3), 170-180. doi: 10.1037/a0014564
- Cooley, C.H. (1902). *Human nature and the social order*. Retrieved from https://archive.org/details/humannaturesocia00cooluoft
- Corsbie-Massay, C., Miller, L., Christensen, J., Appleby, P., Godoy, C., & Read, S. (2017).

 Identity conflict and sexual risk for Black and Latino YMSM. *AIDS & Behavior*, 21(6), 1611-1619. doi:10.1007/s10461-016-1522-7
- Côté, J. (2006). Identity studies: How close are we to developing a social science of identity?—

 An appraisal of the field. *Identity*, 6(1), 3-25.
- Coulter, R. W., Kenst, K. S., Bowen, D. J., & Scout (2014). Research funded by the National Institutes of Health on the health of lesbian, gay, bisexual, and transgender populations.

- *American Journal of Public Health*, *104*(2), e105 e112. https://doi.org/10.2105/AJPH.2013.301501
- Cramer, R. J., Burks, A. C., Golom, F. D., Stroud, C. H., & Graham, J. L. (2017). The lesbian, gay, and bisexual identity scale: Factor analytic evidence and associations with health and well-being. *Measurement and Evaluation in Counseling and Development*, 50(1-2), 71-88. doi:10.1080/07481756.2017.1325703
- Cramer, R. R., Golom, F. D., Gemberling, T. M., Trost, K., Lewis, R., & Wright, S. (2018).

 Examining the lesbian, gay, and bisexual identity Scale among members of an alternative sexuality special interest group. *Archives of Sexual Behavior*, 47(4), 1251-1264.
- Crawford, I., Allison, K. W., Zamboni, B. D., & Soto, T. (2002). The influence of dual-identity development on the psychosocial functioning of African-American gay and bisexual men. *Journal of Sex Research*, *39*(3), 179-189. doi:10.1080/00224490209552140
- Credé, M. (2018). What shall we do about grit? A critical review of what we know and what we don't know. *Educational Researcher*, 47(9), 606–611. https://doi.org/10.3102/0013189X18801322
- Crenshaw, K. W. (1989). Demarginalizing the intersection of race and sex: a black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics. *University Of Chicago Legal Forum*, 1989139-167.
- Creswell, J. W., & Clark, V. P. (20). *Designing and conducting mixed methods research* (2nd ed.). Thousand Oaks, CA, US: Sage Publications, Inc.
- Crisp, D., Priest, R., & Torgerson, A. (1998). African American gay men: Developmental issues, choices and self-concept. *Family Therapy*, 25(3), 161-168.

- Cross, W. J., Parham, T. A., & Helms, J. E. (1991). The stages of Black identity development:

 Nigrescence models. In R. L. Jones, R. L. Jones (Eds.), *Black psychology* (pp. 319-338).

 Berkeley, CA, US: Cobb & Henry Publishers.
- de Oliveira, J. M., Lopes, D., Costa, C. G., & Nogueira, C. (2012). Lesbian, gay, and bisexual identity scale (LGBIS): Construct validation, sensitivity analyses and other psychometric properties. *The Spanish Journal of Psychology*, *15*(1), 334-347.

 doi:10.5209/rev_SJOP.2012.v15.n1.37340
- Della, B., Wilson, M., & Miller, R. L. (2002). Strategies for managing heterosexism used among African American gay and bisexual men. *Journal of Black Psychology*, 28(4), 371–391. doi:10.1177/009579802237543
- Derlan, C. L., & Umaña-Taylor, A. J. (2015). Brief report: Contextual predictors of African American adolescents' ethnic-racial identity affirmation-belonging and resistance to peer pressure. *Journal of adolescence*, *41*, 1–6.

 https://doi.org/10.1016/j.adolescence.2015.02.002
- Dube, E. M., & Savin-Williams, R. C. (1999). Sexual identity development among ethnic sexual-minority male youths. *Developmental Psychology*, *35*(6), 1389.
- Duckworth, A. L., Peterson, C., Matthews, M. D., & Kelly, D. R. (2007). Grit: Perseverance and passion for long-term goals. *Journal of Personality and Social Psychology*, 92(6), 1087–1101. https://doi.org/10.1037/0022-3514.92.6.1087
- Duckworth, A. L., & Quinn, P. D. (2009). Development and validation of the Short Grit Scale (GRIT–S). *Journal of personality assessment*, 91(2), 166-174. https://doi.org/10.1080/00223890802634290

- Duhigg, J. M., Rostosky, S. S., Gray, B. E., & Wimsatt, M. K. (2010). Development of heterosexuals into sexual-minority allies: A qualitative exploration. *Sexuality Research & Social Policy: A Journal of the NSRC*, 7(1), 2–14. https://doi.org/10.1007/s13178-010-0005-2
- Erikson, E. H. (1950). Childhood and society. New York: Norton.
- Fassinger, R. E., & Miller, B. A. (1996). Validation of an inclusive model of sexual minority identity formation on a sample of gay men. *Journal of Homosexuality*, *32*(2), 53-78. doi:10.1300/J082v32n02_04
- Field, A. (2013). Discovering statistics using IBM SPSS statistics (4th edition). London: Sage.
- Fields, E. L., Bogart, L. M., Smith, K. C., Malebranche, D. J., Ellen, J., & Schuster, M. A. (2015). 'I always felt I had to prove my manhood': Homosexuality, masculinity, gender role strain, and HIV risk among young Black men who have sex with men. *American Journal of Public Health*, 105(1), 122-131. doi:10.2105/AJPH.2013.301866
- Fingerhut, A. W. (2018). The role of social support and gay identity in the stress processes of a sample of Caucasian gay men. *Psychology of Sexual Orientation and Gender Diversity*, 5(3), 294–302. doi:10.1037/sgd0000271
- Flentje, A. (2020). AWARENESS: Development of a cognitive—behavioral intervention to address intersectional minority stress for sexual minority men living with HIV who use substances. *Psychotherapy*, *57*(1), 35–49. https://doi.org/10.1037/pst0000243
- Friedman, M.R., Bukowski, L., Eaton, L.A., Matthews, D.D., Dyer, T.V., Siconolfi, D., & Stall, R. (2018). Psychosocial health disparities among Black bisexual men in the U.S.: Effects of sexuality nondisclosure and gay community support. *Archives of Sexual Behavior*.

 Advance online publication. doi: 10.1007/s10508-018-1162-2

- Frost, D. M. (2017). The benefits and challenges of health disparities and social stress frameworks for research on sexual and gender minority health. *Journal Of Social Issues*, 73(3), 462-476. doi:10.1111/josi.12226
- Frost, D. M., & Meyer, I. H. (2012). Measuring community connectedness among diverse sexual minority populations. *Journal of Sex Research*, 49(1), 36–49. https://doi.org/10.1080/00224499.2011.565427
- Garrett-Walker, J. J., & Torres, V. M. (2016). Negative Religious Rhetoric in the Lives of Black
 Cisgender Queer Emerging Adult Men: A Qualitative Analysis. *Journal of Homosexuality*, 64(13), 1816–1831. doi:10.1080/00918369.2016.1267465
- Gibbs, J. J., & Goldbach, J. (2015). Religious conflict, sexual identity, and suicidal behaviors among LGBT young adults. *Archives of Suicide Research*, *19*(4), 472–488. https://doi.org/10.1080/13811118.2015.1004476
- Ginther, D. Schaffer, W., Schnell, J., Masimore, B., Liu, F.... & Kington, R. (2011). Race, ethnicity, and NIH research awards. *Science*, *33*, 1015-1019.

 https://doi.org/10.1126/science.1196783
- GLAAD (2020). Where are we on TV. GLAAD.

 https://www.glaad.org/sites/default/files/GLAAD%20WHERE%20WE%20ARE%20ON
 %20TV%202019%202020.pdf
- Glaser, B. G., & Strauss, A. L. (1967). The discovery of grounded theory: Strategies for qualitative research. New Brunswick: AlineTranaction.
- Glenn, C. L., & Spieldenner, A. R. (2013). An intersectional analysis of television narratives of african american women with african american men on "the down low". *Sexuality & Culture*, *17*(3), 401-416. doi:http://dx.doi.org/10.1007/s12119-013-9189-y

- Glick, S. N., & Golden, M. R. (2010). Persistence of racial differences in attitudes toward homosexuality in the United States. *JAIDS Journal of Acquired Immune Deficiency Syndromes*, 55(4), 516-523. doi:10.1097/QAI.0b013e3181f275e0
- Gomillion, S. C., & Giuliano, T. A. (2011). The influence of media role models on gay, lesbian, and bisexual identity. *Journal of Homosexuality*, *58*(3), 330–354. doi:10.1080/00918369.2011.546729
- Graham, L. F. (2013). Psychosocial health of Black sexually marginalized men. In H. M.

 Treadwell, C. Xanthos, K. B. Holden, (Eds.), *Social determinants of health among African-American men*(pp. 63-81). San Francisco, CA, US: Jossey-Bass.
- Graham, L. F., Braithwaite, K., Spikes, P., Stephens, C. F., & Edu, U. F. (2009). Exploring the mental health of black men who have sex with men. *Community Mental Health Journal*, 45(4), 272-284. doi:10.1007/s10597-009-9186-7
- Hair, J.F. (1998). Multivariate data analysis. New York, NY: McGraw-Hill.
- Haldeman, D. C. (2007). The Village People: Identity and Development in the Gay Male
 Community. In K. J. Bieschke, R. M. Perez, K. A. DeBord (Eds.), *Handbook of counseling and psychotherapy with lesbian, gay, bisexual, and transgender clients.*, 2nd ed (pp. 71-89). Washington, DC: American Psychological Association.
 doi:10.1037/11482-003
- Hammack, P. L. (2015). Theoretical foundations of identity. In K. C. McLean, M. Syed, K. C.McLean, M. Syed (Eds.), *The Oxford handbook of identity development* (pp. 11-30). New York, NY, US: Oxford University Press.
- Haynes, T. T. & Dale, S. K. (2017). Shade of black: A psychotherapy group for Black men who have sex with men. In L. D. Follins & J. M. Lassiter (Eds), *Black LGBT health in the*

- United States: The intersection of race, gender, and sexual orientation (pp. 151-168).

 Lanham, Maryland: Lexington Books, an imprint of The Rowman & Littlefield

 Publishing Group, Inc.
- Heiden-Rootes, K., Wiegand, A., Thomas, D., Moore, R. M., & Ross, K. A. (2020). A national survey on depression, internalized homophobia, college religiosity, and climate of acceptance on college campuses for sexual minority adults. *Journal of Homosexuality*, 67(4), 435–451. https://doi.org/10.1080/00918369.2018.1550329
- Hemphill, E. (1990). *Take care of your blessings/Interviewer: Chuck Tarver*. [Transcription of interview]. Retrieved from http://www.qrd.org/qrd/www/culture/black/essex/blessings.html.
- Herek, G. M., & Capitanio, J. P. (1995). Black heterosexuals' attitudes toward lesbians and gay men in the United States. *Journal of Sex Research*, 32(2), 95-105. doi:10.1080/00224499509551780
- Hewitt-Taylor J. (2002). Inside knowledge: issues in insider research. *Nurs Stand*, *16*(46):33-35. doi:10.7748/ns.16.46.33.s5
- Hossain, F., & Ferreira, N. (2019). Impact of social context on the self-concept of gay and lesbian youth: A systematic review. *Global Psychiatry*, 2(1). https://doi.org/10.2478/gp-2019-0006
- Icard, L. (1986). Black gay men and conflicting social identities: Sexual orientation versus racial identity. *Journal of Social Work & Human Sexuality*, *4*(1-2), 83-93. doi:10.1300/J291v04n01_10

- Irizarry, Y. A., & Perry, R. K. (2018). Challenging the Black church narrative: Race, class, and homosexual attitudes. *Journal of Homosexuality*, 65(7), 884-911. doi:10.1080/00918369.2017.1364566
- Jackson, S. D., Mohr, J. J., Sarno, E. L., Kindahl, A. M., & Jones, I. L. (2020). Intersectional experiences, stigma-related stress, and psychological health among Black LGBQ individuals. *Journal of Consulting and Clinical Psychology*, 88(5), 416–428. https://doi.org/10.1037/ccp0000489
- Jamil, O. B., Harper, G. W., & Fernandez, M. I. (2009). Sexual and ethnic identity development among gay–bisexual–questioning (GBQ) male ethnic minority adolescents. *Cultural Diversity and Ethnic Minority Psychology*, 15(3), 203-214. doi:10.1037/a0014795
 JASP Team (2020). JASP (Version 0.12.2)[Computer software].
- Jeffries, W. L., IV, Sutton, M. Y., & Eke, A. N. (2017). On the battlefield: The Black church, public health, and the fight against HIV among African American gay and bisexual Men. *Journal of urban health: bulletin of the New York Academy of Medicine*, 94(3), 384–398. https://doi.org/10.1007/s11524-017-0147-0
- Jones, K. N., & Brewster, M. E. (2017). From awareness to action: Examining predictors of lesbian, gay, bisexual, and transgender (LGBT) activism for heterosexual people.
 American Journal of Orthopsychiatry, 87(6), 680–689.
 https://doi.org/10.1037/ort0000219
- Jones, B. E., & Hill, M. J. (1996). African American lesbians, gay men, and bisexuals. In R. P.
 Cabaj, T. S. Stein, R. P. Cabaj, T. S. Stein (Eds.), *Textbook of homosexuality and mental health* (pp. 549-561). Arlington, VA, US: American Psychiatric Association.

- Kalia, V., Fuesting, M., & Cody, M. (2019). Perseverance in solving sudoku: Role of grit and cognitive flexibility in problem solving. *Journal of Cognitive Psychology*. https://doi.org/10.1080/20445911.2019.1604527
- Kato, T. (2012). Development of the Coping Flexibility Scale: Evidence for the coping flexibility hypothesis. *Journal of Counseling Psychology*, 59(2), 262–273. doi:10.1037/a0027770
- Katz, M. H. (2006). *Multivariable Analysis A Practical Guide for Clinicians* (2nd ed.). Cambridge University Press.
- Kemer, G., Demirtaş, E. T., Pope, A. L., & Ummak, E. (2017). Psychometric properties of the Lesbian, Gay, and Bisexual Identity Scale–Turkish (LGBIS-TR). *Journal of Homosexuality*, 64(12), 1632-1649. doi:10.1080/00918369.2016.1249741
- Kennamer, J. D., Honnold, J., Bradford, J., & Hendricks, M. (2000). Differences in disclosure of sexuality among African American and White gay/bisexual men: implications for HIV/AIDS prevention. AIDS education and prevention: official publication of the International Society for AIDS Education, 12(6), 519–531.
- Kennedy, H. R., & Dalla, R. L. (2014). Examining identity consolidation processes among ethnic minority gay men and lesbians. *Journal of Gay & Lesbian Social Services*, 26(4), 465–501. doi:10.1080/10538720.2014.951817
- King, J. L. (2004). On the down low: A journey into the lives of "straight" Black men who sleep with men. New York: Random House.
- Kroger, J., & Marcia, J. E. (2011). The identity statuses: Origins, meanings, and interpretations.
 In S. J. Schwartz, K. Luyckx, V. L. Vignoles, S. J. Schwartz, K. Luyckx, V. L. Vignoles (Eds.), *Handbook of identity theory and research* (pp. 31-53). New York, NY, US:
 Springer Science + Business Media. doi:10.1007/978-1-4419-7988-9_2

- Lassiter, J. M. (2016). Religious participation and identity salience of Black men who have sex with men: Findings from a nationally recruited sample. *Psychology of Sexual Orientation And Gender Diversity*, *3*(3), 304-312. doi:10.1037/sgd0000176
- Lassiter, J.M. (2017). For us, by us: A manifesto of black SGL and trans health. In L.D. Follins and J.M. Lassiter (Eds.), *Black LGBT in the United States: The intersection of race,* gender, and sexual orientation (pp. 1-9). Lanham, Maryland: Lexington Books.
- Lassiter, J. M., Brewer, R., & Wilton, L. (2019). Black sexual minority men's disclosure of sexual orientation is associated with exposure to homonegative religious messages.

 American journal of men's health, 13(1), 1557988318806432.

 https://doi.org/10.1177/1557988318806432
- Legate, N., Ryan, R. M., & Rogge, R. D. (2017). Daily autonomy support and sexual identity disclosure predicts daily mental and physical health outcomes. *Personality & Social Psychology Bulletin*, 43(6), 860–873. https://doi.org/10.1177/0146167217700399
- Lemelle, A. J., & Battle, J. (2004). Black masculinity matters in attitudes toward gay males. *Journal of Homosexuality*, 47(1), 39–51. doi:10.1300/j082v47n01_03
- Levant, R. F., Hall, R. J., & Rankin, T. J. (2013). Male Role Norms Inventory–Short Form (MRNI-SF): Development, confirmatory factor analytic investigation of structure, and measurement invariance across gender. Journal of Counseling Psychology, 60(2), 228–238. https://doi.org/10.1037/a0031545
- Levitt, H. M., Horne, S. G., Puckett, J., Sweeney, K. K., & Hampton, M. L. (2015). Gay families: Challenging racial and sexual/gender minority stressors through social support.

 Journal of GLBT Family Studies, 11(2), 173–202.

 https://doi.org/10.1080/1550428X.2014.958266

- Lewis, N.M. (2012) Remapping disclosure: Gay men's segmented journeys of moving out and coming out, *Social & Cultural Geography*, *13*(3), 211-231. doi: 10.1080/14649365.2012.677469
- Lewis, R. J., Derlega, V. J., Berndt, A., Morris, L. M., & Rose, S. (2001). An empirical analysis of stressors for gay men and lesbians. *Journal of Homosexuality*, 42(1), 63–88. https://doi.org/10.1300/J082v42n01_04
- Loiacano, D. K. (1989). Gay identity issues among Black Americans: Racism, homophobia, and the need for validation. *Journal of Counseling & Development*, 68(1), 21-25. doi:10.1002/j.1556-6676.1989.tb02486.x
- Luyckx, K., Schwartz, S. J., Goossens, L., Beyers, W., & Missotten, L. (2011). Processes of personal identity formation and evaluation. In S. J. Schwartz, K. Luyckx, V. L. Vignoles, S. J. Schwartz, K. Luyckx, V. L. Vignoles (Eds.) , *Handbook of identity theory and research* (pp. 77-98). New York, NY, US: Springer Science + Business Media. doi:10.1007/978-1-4419-7988-9_4
- Lytle, M.C., Vaughan, M.D., Rodriguez, E.M., & Shmerler, D.L. (2014). Working with LGBT individuals: Incorporating positive psychology into training and practice. *Psychol Sex Orientat Gend Divers*, 1(4):335-347. doi:10.1037/sgd0000064
- Malebranche, D. J., Fields, E. L., Bryant, L. O., & Harper, S. R. (2009). Masculine socialization and sexual risk behaviors among black men who have sex with men: A qualitative exploration. *Men and Masculinities*, 12(1), 90-112. doi:10.1177/1097184X07309504
- Manikandan S. (2010). Data transformation. *Journal of pharmacology & pharmacotherapeutics*, 1(2), 126–127. https://doi.org/10.4103/0976-500X.72373

- Marcia, J. E. (1987). The identity status approach to the study of ego identity development. In T. Honess, K. Yardley, T. Honess, K. Yardley (Eds.), *Self and identity: Perspectives across the lifespan* (pp. 161-171). New York, NY, US: Routledge.
- Matthews, D. D., Herrick, A. L., Coulter, R. S., Friedman, M. R., Mills, T. C., Eaton, L. A., & ...
 Stall, R. D. (2016). Running backwards: Consequences of current HIV incidence rates for the next generation of Black MSM in the United States. AIDS and Behavior, 20(1), 7-16.
 doi:10.1007/s10461-015-1158-z
- Martinez, D. G., & Sullivan, S. C. (1998). African American gay men and lesbians: Examining the complexity of gay identity development. *Journal of Human Behavior in The Social Environment*, 1(2-3), 243-264. doi:10.1080/10911359.1998.10530795
- Masci, D. (2018, February 7). 5 facts about the religious lives of African Americans. FACTANK of the Pew Research Center. Retrieved from http://www.pewresearch.org/fact-tank/2018/02/07/5-facts-about-the-religious-lives-of-african-americans/
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, *129*(5), 674-697. doi:10.1037/0033-2909.129.5.674
- Meyer, I. H. (2010). Identity, stress, and resilience in lesbians, gay men, and bisexuals of color. *The Counseling Psychologist*, 38(3), 442-454. doi:10.1177/0011000009351601
- McLean, R. (2012). Working with African American lesbian, gay, bisexual, transgender, and queer people. In S. H. Dworkin & M. Pope (Eds.), *Casebook for counseling lesbian, gay, bisexual, and transgendered persons and their families.* (pp. 153–162). American Counseling Association.

- Miller, S. J. (2011). African-American lesbian identity management and identity development in the context of family and community. *Journal of Homosexuality*, 58(4), 547-563.
- Mohr, J. J., & Kendra, M. S. (2011). Revision and extension of a multidimensional measure of sexual minority identity: The lesbian, gay, and bisexual identity scale. *Journal of Counseling Psychology*, 58(2), 234-245. doi:10.1037/a0022858
- Moradi, B., Wiseman, M. C., DeBlaere, C., Goodman, M. B., Sarkees, A., Brewster, M. E., & Huang, Y.-P. (2010). LGB of color and white individuals' perceptions of heterosexist stigma, internalized homophobia, and outness: Comparisons of levels and links. *The Counseling Psychologist*, 38(3), 397–424. doi:10.1177/0011000009335263
- Morales, E. (1989). Ethnic minority families and minority gays and lesbians. *Marriage & Family Review*, 14(3-4), 217-239.
- Morrow, S. L. (2005). Quality and trustworthiness in qualitative research in counseling psychology. *Journal of counseling psychology*, *52*(2), 250-260. doi: 10.1037/0022-0167.52.2.250
- Nadal, K. L., & Rivera, D. P. (2014). Navigating multiple identities with gay and bisexual men of color. In A. B. Rochlen & F. E. Rabinowitz (Eds.), The Routledge series on counseling and psychotherapy with boys and men. Breaking barriers in counseling men: Insights and innovations (p. 156–165). Routledge/Taylor & Francis Group.
- Nelson, L. E., Wilton, L., Zhang, N., Regan, R., Thach, C. T., Dyer, T. V., ... & HPTN 061

 Study Team. (2017). Childhood exposure to religions with high prevalence of members who discourage homosexuality is associated with adult HIV risk behaviors and HIV infection in Black men who have sex with men. *American Journal of Men's Health*, 11(5), 1309-1321.

- O'Leary, A., Fisher, H. H., Purcell, D. W., Spikes, P. S., & Gomez, C. A. (2007). Correlates of risk patterns and race/ethnicity among HIV-positive men who have sex with men. *AIDS* and *Behavior*, 11(5), 706-715. doi:10.1007/s10461-006-9205-4
- Operario, D., Han, C., & Choi, K. (2008). Dual identity among gay Asian Pacific Islander men.

 Culture, Health & Sexuality, 10(5), 447-461. doi:10.1080/13691050701861454
- Pachankis, J. E. (2007). The psychological implications of concealing a stigma: A cognitive-affective-behavioral model. *Psychological Bulletin*, *133*(2), 328–345. doi:10.1037/0033-2909.133.2.328
- Pachankis, J. E., Sullivan, T. J., Feinstein, B. A., & Newcomb, M. E. (2018). Young adult gay and bisexual men's stigma experiences and mental health: An 8-year longitudinal study. Developmental psychology, 54(7), 1381–1393. https://doi.org/10.1037/dev0000518
- Page, M. J., Lindahl, K. M., & Malik, N. M. (2013). The role of religion and stress in sexual identity and mental health among lesbian, gay, and bisexual youth. *Journal of Research on Adolescence*, 23(4), 665-677.
- Parks, C. A., Hughes, T. L., & Matthews, A. K. (2004). Race/ethnicity and sexual orientation: Intersecting identities. *Cultural Diversity and Ethnic Minority Psychology*, 10(3), 241-254. doi:10.1037/1099-9809.10.3.241
- Perrin, P. B., Sutter, M. E., Trujillo, M. A., Henry, R. S., & Pugh, M. (2019). The minority strengths model: Development and initial path analytic validation in racially/ethnically diverse LGBTQ individuals. *Journal of Clinical Psychology*, 76(1), 118–136. doi:10.1002/jclp.22850

- Pitt, R. N. (2010). "Killing the messenger": Religious black gay Men's neutralization of anti-gay religious messages. *Journal for the Scientific Study of Religion*, 49(1), 56-72. https://psycnet.apa.org/doi/10.1111/j.1468-5906.2009.01492.x
- Puckett, J. A., Matsuno, E., Dyar, C., Mustanski, B., & Newcomb, M. E. (2019). Mental health and resilience in transgender individuals: What type of support makes a difference?

 **Journal of Family Psychology, 33(8), 954–964. https://doi.org/10.1037/fam0000561.supp

 (Supplemental)
- Quinn, K., & Dickson-Gomez, J. (2016). Homonegativity, religiosity, and the intersecting identities of young Black men who have sex with men. *AIDS And Behavior*, 20(1), 51-64. doi:10.1007/s10461-015-1200-1
- Quinn, K., Dickson-Gomez, J., DiFranceisco, W., Kelly, J. A., St. Lawrence, J. S., Amirkhanian, Y. A., & Broaddus, M. (2015). Correlates of internalized homonegativity among Black men who have sex with men. *AIDS Education and Prevention*, 27(3), 212-226. doi:10.1521/aeap.2015.27.3.212
- Quinn, K., Dickson-Gomez, J., & Kelly, J. A. (2015). The role of the Black Church in the lives of young Black men who have sex with men. *Culture, Health & Sexuality, 18*(5), 524–537. doi:10.1080/13691058.2015.1091509
- Rendina, H. J., Carter, J. A., Wahl, L., Millar, B. M., & Parsons, J. T. (2019). Trajectories of sexual identity development and psychological well-being for highly sexually active gay and bisexual men: A latent growth curve analysis. *Psychology of Sexual Orientation and Gender Diversity*, 6(1), 64–74. https://doi.org/10.1037/sgd0000308

- Reed, S. J., & Miller, R. L. (2016). Thriving and adapting: Resilience, sense of community, and syndemics among young Black gay and bisexual men. *American Journal Of Community Psychology*, *57*(1-2), 129-143. doi:10.1002/ajcp.12028
- Riggle, E. B., Mohr, J. J., Rostosky, S. S., Fingerhut, A. W., & Balsam, K. F. (2014). A multifactor Lesbian, Gay, and Bisexual Positive Identity Measure (LGB-PIM). *Psychology of Sexual Orientation And Gender Diversity*, 1(4), 398-411. doi:10.1037/sgd0000057
- Riggle, E. D. B., & Rostosky, S. S. (2012). A positive view of LGBTQ: Embracing identity and cultivating well-being. Lanham, MD: Rowman & Littlefield.
- Riggle, E. D. B., Whitman, J. S., Olson, A., Rostosky, S. S., & Strong, S. (2008). The positive aspects of being a lesbian or gay man. *Professional Psychology: Research and Practice*, 39(2), 210–217. https://doi.org/10.1037/0735-7028.39.2.210
- Rosario, M., Schrimshaw, E. W., & Hunter, J. (2004). Ethnic/racial differences in the comingout process of lesbian, gay, and bisexual youths: A comparison of sexual identity development over time. *Cultural Diversity & Ethnic Minority Psychology*, 10(3), 215-228.
- Rosario, M., Schrimshaw, E. W., & Hunter, J. (2009). Disclosure of sexual orientation and subsequent substance use and abuse among lesbian, gay, and bisexual youths: Critical role of disclosure reactions. *Psychology of Addictive Behaviors*, 23(1), 175–184. doi:10. 1037/a0014284
- Rosario, M., Schrimshaw, E. W., & Hunter, J. (2011). Different patterns of sexual identity development over time: Implications for the psychological adjustment of lesbian, gay,

- and bisexual youths. *Journal of Sex Research*, *48*(1), 3–15. https://doi.org/10.1080/00224490903331067
- Rosenberg, S. (2017). Coming In: Queer Narratives of Sexual Self-Discovery. *Journal of Homosexuality*, 65(13), 1788–1816. doi:10.1080/00918369.2017.1390811
- Rostosky, S. S., Black, W. W., Riggle, E. D. B., & Rosenkrantz, D. (2015). Positive aspects of being a heterosexual ally to lesbian, gay, bisexual and transgender (LGBT) people.

 American Journal of Orthopsychiatry, 85(4), 331–338.

 https://doi.org/10.1037/ort0000056
- Rostosky, S., Riggle, E. D. B., Pascale-Hague, D., & McCants, L. E. (2010). The positive aspects of a bisexual self-identification. *Psychology and Sexuality*, 1(2), 131–144. doi:10.1080/19419899.2010.484595
- Rowen, C. J., & Malcolm, J. P. (2003). Correlates of Internalized Homophobia and Homosexual Identity Formation in a Sample of Gay Men. *Journal of Homosexuality*, 43(2), 77–92. doi:10.1300/j082v43n02_05
- Russell, G. M., & Bohan, J. S. (2007). Liberating psychotherapy: Liberation psychology and psychotherapy with LGBT clients. *Journal of Gay & Lesbian Psychotherapy*, 11(3-4), 59–75. https://doi.org/10.1300/J236v11n03_04
- Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, *55*(1), 68–78. https://doi.org/10.1037/0003-066X.55.1.68
- Sandfort, T. G. M., & Dodge, B. (2008). "...And then there was the down low": Introduction to Black and Latino male bisexualities. *Archives of Sexual Behavior*, *37*(5), 675–682. http://doi.org/10.1007/s10508-008-9359-4

- Santos, C. E., & VanDaalen, R. A. (2016). The associations of sexual and ethnic–racial identity commitment, conflicts in allegiances, and mental health among lesbian, gay, and bisexual racial and ethnic minority adults. *Journal Of Counseling Psychology*, 63(6), 668-676. doi:10.1037/cou0000170
- Santos, C. E., & VanDaalen, R. A. (2018). Associations among psychological distress, high-risk activism, and conflict between ethnic-racial and sexual minority identities in lesbian, gay, bisexual racial/ethnic minority adults. *Journal of Counseling Psychology*, 65(2), 194-203. doi:10.1037/cou0000241
- Sarno, E. L., Mohr, J. J., Jackson, S. D., & Fassinger, R. E. (2015). When identities collide: Conflicts in allegiances among LGB people of color. *Cultural Diversity & Ethnic Minority Psychology*, 21(4), 550-559. doi:10.1037/cdp0000026
- Sattler, F. A., Wagner, U., & Christiansen, H. (2016). Effects of minority stress, group-level coping, and social support on mental health of german gay men. *PloS one*, *11*(3), e0150562. https://doi.org/10.1371/journal.pone.0150562
- Schrimshaw, E. W., Siegel, K., Downing, M. J., Jr., & Parsons, J. T. (2013). Disclosure and concealment of sexual orientation and the mental health of non-gay-identified, behaviorally bisexual men. *Journal of Consulting and Clinical Psychology*, 81(1), 141–153. doi:10. 1037/a0031272
- Scutt, R.K. (2012). *Investigating the social world: The process and practice of research* (7th ed.). Thousand Oaks, CA: Sage Publications.
- Sellers, R. M., Rowley, S. J., Chavous, T. M., Shelton, J. N., & Smith, M. A. (1997).

 Multidimensional inventory of Black identity: A preliminary investigation of reliability

- and construct validity. *Journal of Personality and Social Psychology*, 73(4), 805-815. doi:10.1037/0022-3514.73.4.805
- Sellers, R. M., Smith, M. A., Shelton, J. N., Rowley, S. J., & Chavous, T. M. (1998).
 Multidimensional model of racial identity: A reconceptualization of African American racial identity. *Personality and Social Psychology Review*, 2(1), 18-39.
 doi:10.1207/s15327957pspr0201_2
- Shenkman, G., Ifrah, K., & Shmotkin, D. (2019). Interpersonal vulnerability and its association with depressive symptoms among gay and heterosexual men. *Sexuality Research and Social Policy*, *17*, 1-10. https://doi.org/10.1007/s13178-019-00383-3
- Sheran, N., & Arnold, E. A. (2012). Fairy Godmothers and Guardian Angels: A Qualitative Study of the Gay Mentorship Relationship. Journal of Gay & Lesbian Social Services, 24(3), 201–220. doi:10.1080/10538720.2012.697050
- Smallwood S.W., Carter J.W., & Odusanya A.O. (2017). Intersecting HIV prevention practice and truth among black MSM. In: Parks F., Felzien G., Jue S. (Eds.) *HIV/AIDS in rural communities*. New York, NY: Springer.
- Stitt, A. L. (2014). The cat and the cloud: ACT for LGBT locus of control, responsibility, and acceptance. *Journal of LGBT Issues in Counseling*, 8(3), 282-297. https://doi.org/10.1080/15538605.2014.933469
- Stokes, J. P., & Peterson, J. L. (1998). Homophobia, self-esteem, and risk for HIV among

 African American men who have sex with men. *AIDS Education and Prevention*, 10(3),

 278-292.
- Sullivan, P. S., Khosropour, C. M., Luisi, N., Amsden, M., Coggia, T., Wingood, G. M., & DiClemente, R. J. (2011). Bias in online recruitment and retention of racial and ethnic

- minority men who have sex with men. *Journal of Medical Internet Research*, *13*(2), e38. http://doi.org/10.2196/jmir.1797
- Szymanski, D. M., Mikorski, R., & Carretta, R. F. (2017). Heterosexism and LGB positive identity: Roles of coping and personal growth initiative. *The Counseling Psychologist*, 45(2), 294-319. doi:10.1177/0011000017697195
- Taber, K.S. (2018). The use of cronbach's alpha when developing and reporting research instruments in science education. *Res Sci Educ 48*, 1273–1296. https://doi.org/10.1007/s11165-016-9602-2
- Tobin, K. E., Winiker, A. K., & Smith, C. (2018). Understanding the Needs of Older (Mature)

 Black Men who have Sex with Men: Results of a Community-based Survey. *Journal of Health Care for the Poor and Underserved*, 29(4), 1558–1569.

 doi:10.1353/hpu.2018.0112
- Troiden, R. R. (1979). Becoming homosexual: A model of gay identity acquisition. *Psychiatry: Journal for The Study Of Interpersonal Processes*, 42(4), 362-373.
- Troiden, D. R. R. (1989). The Formation of Homosexual Identities. Journal of Homosexuality, 17(1-2), 43–74. doi:10.1300/j082v17n01_02
- Vatcheva, K. P., Lee, M., McCormick, J. B., & Rahbar, M. H. (2016). Multicollinearity in regression analyses conducted in epidemiologic studies. *Epidemiology (Sunnyvale, Calif.)*, 6(2).
- Vignoles, V. L., Schwartz, S. J., & Luyckx, K. (2011). Introduction: Toward an integrative view of identity. In S. J. Schwartz, K. Luyckx, V. L. Vignoles, S. J. Schwartz, K. Luyckx, V. L. Vignoles (Eds.), *Handbook of identity theory and research* (pp. 1-27). New York, NY, US: Springer Science + Business Media. doi:10.1007/978-1-4419-7988-9_1

- Villicana, A. J., Delucio, K., & Biernat, M. (2016). 'Coming out' among gay Latino and gay

 White men: Implications of verbal disclosure for well-being. *Self and Identity*, *15*(4),

 468-487. doi:10.1080/15298868.2016.1156568
- Vincent, W., Peterson, J. L., Huebner, D. M., Storholm, E. D., Neilands, T. B., Rebchook, G. M., ... Kegeles, S. M. (2019). Resilience and depression in young Black men who have sex with men: A social-ecological model. *Stigma and Health*. doi:10.1037/sah0000206
- Voyles, C. H., & Sell, R. L. (2015). Continued disparities in lesbian, gay, and bisexual research funding at NIH. *American Journal of Public Health*, 105(Suppl 3), e1–e2. https://doi.org/10.2105/AJPH.2014.302265
- Wade, R. M., & Harper, G. W. (2017). Young Black gay/bisexual and other men who have sex with men: A review and content analysis of health-focused research between 1988 and 2013. *American Journal Of Men's Health*, 11(5), 1388-1405. doi:10.1177/1557988315606962
- Wade, R. M., & Harper, G. W. (2019). Racialized sexual discrimination (RSD) in the age of online sexual networking: Are young Black gay/bisexual men (YBGBM) at elevated risk for adverse psychological health? *American Journal of Community Psychology*. doi:10.1002/ajcp.12401
- Walker, J. J., Longmire-Avital, B., & Golub, S. (2015). Racial and sexual identities as potential buffers to risky sexual behavior for Black gay and bisexual emerging adult men. *Health Psychology*, *34*(8), 841-846. doi:10.1037/hea0000187
- Ward, E. G. (2005). Homophobia, hypermasculinity and the US black church. *Culture, Health & Sexuality*, 7(5), 493-504. doi:10.1080/13691050500151248

- Watkins, T. L., Jr., Simpson, C., Cofield, S. S., Davies, S., Kohler, C., & Usdan, S. (2016). The relationship between HIV risk, high-risk behavior, religiosity, and spirituality among black men who have sex with men (MSM): An exploratory study. *Journal of Religion* and *Health*, 55(2), 535–548. https://doi.org/10.1007/s10943-015-0142-2
- Weisskirch, R. S. (2019). Grit Applied Within: Identity and Well-being. *Identity*, 19(2), 98–108. doi:10.1080/15283488.2019.1604345
- Whitman, C. N., & Nadal, K. L. (2015). Sexual minority identities: Outness and well-being among lesbian, gay, and bisexual adults. *Journal of Gay & Lesbian Mental Health*, 19(4), 370-396. doi:10.1080/19359705.2015.1038974
- Wilson, P. A. (2008). A dynamic-ecological model of identity formation and conflict among bisexually-behaving African-American men. *Archives of Sexual Behavior*, *37*(5), 794-809. doi: 10.1007/s10508-008-9362-9
- Wilson, B. D. M., Harper, G. W., Hidalgo, M. A., Jamil, O. B., Torres, R. S., & Isabel Fernandez, M. (2010). Negotiating dominant masculinity ideology: Strategies used by gay, bisexual and questioning male adolescents. *American Journal of Community Psychology*, 45(1-2), 169–185. doi:10.1007/s10464-009-9291-3
- Wilson, P. A., Meyer, I. H., Antebi-Gruszka, N., Boone, M. R., Cook, S. H., & Cherenack, E. M. (2016). Profiles of Resilience and Psychosocial Outcomes among Young Black Gay and Bisexual Men. *American Journal of Community Psychology*, 57(1-2), 144–157. doi:10.1002/ajcp.12018
- Winiker, A. K., Tobin, K. E., Davey-Rothwell, M., & Latkin, C. (2019). An examination of grit in black men who have sex with men and associations with health and social outcomes.

 Journal of Community Psychology, 47(5), 1095–1104. doi:10.1002/jcop.22176

- Woodyard, J.L., Peterson, J.L., & Stokes, J.P. (2000). "Let us go into the house of the Lord": Participation in African American churches among young African American men who have sex with men. *Journal of Pastoral Care*, 54(4), 451-460.
- Yadavaia, J. E., & Hayes, S. C. (2012). Acceptance and commitment therapy for self-stigma around sexual orientation: A multiple baseline evaluation. *Cognitive and Behavioral Practice*, *19*(4), 545-559. https://doi.org/10.1016/j.cbpra.2011.09.002
- Yancey, A. K., Siegel, J. M., & McDaniel, K. L. (2002). Role models, ethnic identity, and health-risk behaviors in urban adolescents. *Archives of Pediatrics & Adolescent Medicine*, 156(1), 55-61. doi:10.1001/archpedi.156.1.55
- Yoo, W., Mayberry, R., Bae, S., Singh, K., He, Q. P., & Lillard Jr, J. W. (2014). A study of effects of multicollinearity in the multivariable analysis. *International journal of applied science and technology*, 4(5).

APPENDICES

Appendix A: Proposed Script For Qualitative Interviews

Qualitative Interview Script

RESEARCH QUESTION: Healthy identity development among BSGLM

Introduction: I'd like to take a few minutes to talk to you about being a BSGLM today. First, I'd like to cover a few details for this discussion:

- I am interested in what you have to say and there are no wrong answers. I am just asking for your opinions based on your own personal experiences. I am here to learn from you.
- If there's a particular question you don't want to answer, you don't have to. If you have ideas or experiences you believe would be helpful, I encourage you to discuss them with me.
- Feel free to treat this as a discussion and to ask questions.
- I am audio recording the discussion today and also taking notes because I don't want to miss any of your comments.
- Do you have any questions before we begin?

Neutral Introductory Question: Tell me a little about yourself.

Transition Question: If you had to describe your identity, how would you do so? **Key Questions:**

- Tell me about some experiences that helped shape how you see and describe yourself?
- Tell me about how the process was for you in developing who you are? Exploration? Deeping/Commitment?
 - What made it easier for you to develop your identity?
 - What made it difficult for you to develop your identity?
- How important is your sexual identity?
- How important is your racial/ethnic identity?
- How integrated/congruent/in sync is your Blackness with your sexual identity?
- Tell me about any thoughts or feelings about conflict between your racial/ethnic and sexual identities?
 - Tell me about a specific time when you believed your racial/ethnic and sexual identities were at odds with one another.
 - How do you navigate (perhaps use *manage* or *negotiate* instead) conflicts between your various identities?
- What makes being a BSGLM hard?
- What makes it easier to be a BSGLM?
- How do you view other BSGLM?
 - What thoughts do you have about other BSGLM?
- How do you think you appear to others?
 - What reactions do you think others have to you?
 - How have others viewed you influenced your identity or how you view yourself?
 - What stereotypes are there about BSGLM?
- During our conversation you identified a few barriers or difficulties in developing your identity, in an ideal world where you didn't face those barriers, how would you express your authentic self?

- How would say that is different from how you express or view your identity currently?
- What does a positive or healthy identity look like among Black same-gender loving men?
- What does a Black same-gender loving man who is comfortable with all his identities look like?
- What type of thoughts and/or feelings would a Black same-gender loving man have if they were comfortable with all their identities?
- How do Black same-gender loving men develop a coherent, integrated sense of their identity?
- How do Black same-gender loving men fit their identities together?
- What advice would you give to other BSGLM struggling with their identity?
- What do you love about being a Black same-gender loving man?

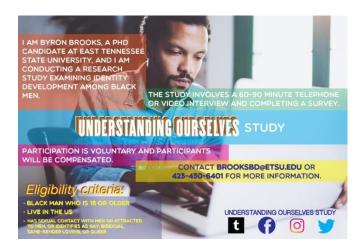
Probes:

- · Can you tell me more about that?
- · Tell me more.
- · You mentioned "...". I'd like to know more about that.
- · Can you give an example of what you mean?
- · Say what you mean by "...".
- · What makes you feel that way?
- · What are some of the reasons "..."?
- · How did you feel about that?
- · What was significant about that to you?
- · What motivated your response?
- It sounds like you are saying, "...". Is that correct?
- · So you are saying "..."?

Closing Question: What else would you like to share with me today?

Conclusion: Thank you so much for speaking with me today. I really appreciate all of the information you were able to provide.

Appendix B: Promotional Materials For Phase One







Appendix C: Phase One Eligibility Screener

- 1. Do you currently live in the United States? Yes or No.
- 2. Do you identify as being any of the following: African-American, Black, or Mixed Race inclusive of being Black? Yes or No.
- 3. Are you 18 years or older? Yes or No.
- 4. Please describe your gender identity. Man (cisgender), Woman (cisgender), Man (Transgender), Woman (Transgender), Genderqueer or Nin-binary, Agender, Androgynous, Demigender, Questioning, Bigender, Two-Spirit, Unsure, or Other.
- 5. How would you describe your sexual orientation? Heterosexual or Straight, Gay, Bisexual, Same-Gender Loving, Pansexual, Demisexual, Queer, Questioning, Unsure, or Other.
- 6. Are you attracted to men? Yes or No.
- 7. Have you ever engaged in sexual behavior with men? Yes or No.

Appendix D: Phase One Brief Demographic Survey

1.	Age:				
2.	Of what race or ethnicity do you consider yourself?				
	a. White/Caucasian				
	b. Black or African American				
	c. Hispanic or Latino/a				
	d. American Indian or Alaska Native				
	e. Native Hawaiian or Other Pacific Islander				
	f. Asian (include Asian Indian here)				
	g. Multiracial, please specify:				
	h. Not Listed Above, please specify:				
3.	How would you describe your sexual orientation?				
	a. Heterosexual or straight				
	b. Gay				
	c. Bisexual				
	d. Same-Gender Loving				
	e. Pansexual				
	f. Demisexual				
	g. Queer				
	h. Questioning				
	i. Unsure				
	j. Other:				
4.	To whom are you sexually attracted to?				
	a. Men only				
	b. Women only				
	c. Men and Women				
	d. Not Sexually Attracted to Anyone				
	e. Not Listed Above, please specify:				
_	f. Decline to Answer				
5.	Have you ever engaged in sexual behavioral with other men?				
	a. Yes				
_	b. No				
6.	What sex were you assigned at birth on your original birth certificate a. Male				
	b. Femalec. Decline to answer				
7					
7.	Please describe your gender identity?				
	a. Man (cisgender)b. Woman (cisgender)				
	b. Woman (cisgender)c. Man (transgender)				
	d. Woman (transgender)				
	e. Non-binary				
	5. Tion only				

f.	Genderqueer
g.	Agender
h.	Androgyne
i.	Demigender
j.	Questioning

- k. Unsurel. Other:
- 8. What region of the United States do you live in?
 - a. Northeast
 - b. Southeast
 - c. Southwest
 - d. Midwest
 - e. West
- 9. Which state do you live in?
- 10. Which region did you spend a significant amount of time in growing up?
 - a. Northeast
 - b. Southeast
 - c. Southwest
 - d. Midwest
 - e. West
 - f. Same Region I currently live in.
- 11. What is your current legal marital status?
 - a. Single, Never Married
 - b. Partnered, but not legally married
 - c. Married
 - d. Legally Separated
 - e. Divorced
 - f. Widowed
 - g. Decline to answer
 - h. Not Listed Above, please specify:
- 12. Living Arrangements:
 - a. Alone
 - b. With Spouse/Significant Other/Partner
 - c. With Spouse/Significant Other/Partner & Children
 - d. With Children
 - e. With Other Family
 - f. With Friends
 - g. Not Listed Above, please specify:
- 13. What is your highest level of completed education?
 - a. Some high school
 - b. High school (includes GED)
 - c. Associate's Degree (2 years of college)
 - d. Bachelor's Degree (4 years of college)
 - e. Master's Degree

- f. Doctorate or other Professional Degree
- g. Don't know
- 14. What is your current employment status?
 - a. Full time, paid
 - b. Part time, paid
 - c. Student
 - d. Homemaker
 - e. Retired
 - f. On disability
 - g. Unemployed, seeking paid employment
 - h. Unemployed, not seeking paid employment
- 15. What is you annual income?
 - a. \$0-\$9,999
 - b. \$10,000-\$19,999
 - c. \$20,000-\$29,999
 - d. \$30,000-\$39,999
 - e. \$40,000-\$49,999
 - f. \$50,000-\$59,999
 - g. \$60,000-\$69,999
 - h. \$70,000-\$79,999
 - i. \$80,000-\$89,999
 - j. \$90,000-\$99,999
 - k. Greater than \$100,000
- 16. What is your religious affiliation?
 - a. Protestant (eg. Baptist, Methodist)
 - b. Catholic
 - c. Mormon
 - d. Jehovah's Witness
 - e. Jewish
 - f. Muslim (Islam)
 - g. Buddhist
 - h. Hindu
 - i. Atheist
 - j. Agnostic
 - k. Other
 - 1. Don't Know
- 17. Have you ever been incarcerated in prison?
 - a. Yes
 - b. No
 - c. Refuse to Answer

Appendix E: The Multidimensional Model of Black Identity (MIBI)

Racial Centrality Scale							
	1	2	3	4	5	6	7
	(Strongly			(Neutral)			(Strongly
	Disagree)						Agree)
Overall, being Black has							
very little to do with how I							
feel about myself.*							
In general, being Black is an							
important part of my self-							
image.							
My destiny is tied to the							
destiny of other Black							
people.							
Being Black is unimportant							
to my sense of what kind of							
person I am.*							
I have a strong sense of							
belonging to Black people.							
I have a strong attachment							
to other Black people.							
Being Black is an important							
reflection of who I am.							
Being Black is not a major							
factor in my social							
relationships.*							
<i>Note:</i> *denotes items should	be reverse co	ded.					
D: . D 101 1							
Private Regard Subscale	1		2	4	_		
	(C4 1	2	3	4 (Nan-4-1)	5	6	7 (Store or a 1-a
	(Strongly			(Neutral)			(Strongly
IC 1 11 (DI 1	Disagree)						Agree)
I feel good about Black							
people.							
I am happy that I am Black.							
I feel that Blacks have made							
major accomplishments and							
advancements.							
I often regret that I am							
Black.*							
I am proud to be Black.							
I feel that the Black							
community has made							
valuable contributions to							

this society.							
<i>Note:</i> *denotes items should	be reverse co	ded.					
Public Regard Subscale							
	1	2	3	4	5	6	7
	(Strongly			(Neutral))		(Strongly
	Disagree)						Agree)
Overall, Blacks are							
considered good by others.							
In general, others respect							
Black people.							
Most people consider							
Blacks, on the average, to							
be more ineffective than							
other racial groups.*							
Blacks are not respected by							
the broader society.*							
In general, other groups							
view Blacks in a positive							

Society views Black people as an asset.

manner.

Note: *denotes items should be reverse coded.

Appendix F: The Lesbian, Gay, & Bisexual Identity Scale

1=Disagree Strongly; 2=Disagree; 3=Disagree Somewhat; 4=Agree Somewhat; 5=Agree; 6=Agree Strongly.

	1	2	3	4	5	6
I prefer to keep my same-sex romantic relationships rather private.						
If it were possible, I would choose to be straight.						
I'm not totally sure what my sexual orientation is.						
I keep careful control over who knows about my same-sex romantic						
relationships.						
I often wonder whether others judge me for my sexual orientation.						
I am glad to be an LGB person.						
I look down on heterosexuals.						
I keep changing my mind about my sexual orientation.						
I can't feel comfortable knowing that others judge me negatively for						
my sexual orientation.						
I feel that LGB people are superior to heterosexuals.						
My sexual orientation is an insignificant part of who I am.*						
Admitting to myself that I'm an LGB person has been a very painful						
process.						
I'm proud to be part of the LGB community.						
I can't decide whether I am bisexual or homosexual.						
My sexual orientation is a central part of my identity.						
I think a lot about how my sexual orientation affects the way people						
see me.						
Admitting to myself that I'm an LGB person has been a very slow						
process.						
Straight people have boring lives compared with LGB people						
My sexual orientation is a very personal and private matter.						
I wish I were heterosexual.						
To understand who I am as a person, you have to know that I'm LGB						
I get very confused when I try to figure out my sexual orientation.						
I have felt comfortable with my sexual identity just about from the						
start.*						
Being an LGB person is a very important aspect of my life						
I believe being LGB is an important part of me.						
I am proud to be LGB.						
I believe it is unfair that I am attracted to people of the same sex.						
37 364						

Note: *denotes items should be reverse coded.

Appendix G: Conflicts In Allegiances Scale

	1 (Disagree Strongly)	2	3	4	5	6	7 (Agree Strongly)
I feel little or no conflict							
between my cultural identity and							
my identity as [l/g/b].*							
I have personally experienced							
cultural prejudice within the							
LGB community.							
I have not yet found a way to							
integrate being [l/g/b] with being							
a member of my cultural group.							
It is easy for me to be both							
[l/g/b] and a member of my							
cultural group.*							
I am angry at the way the LGB							
community treats members of							
my cultural group.							
I separate my [l/g/b] and cultural							
identities.*							
I have found the LGB							
community to be embracing of							
my cultural identity.*							
I have felt rejected by the LGB							
community because of my							
cultural identity.							
I often feel like I'm betraying							
either my cultural community or							
the LGB community.							
I feel as if my sense of cultural							
identity is at odds with my							
[l/g/b] identity.							
Note: *denotes items should be rev	verse coded						

Note: *denotes items should be reverse coded.

Appendix H: Lesbian, Gay, Bisexual Positive Identity Measure

1=Strongly Agree; 2=Disagree; 3=Somewhat Disagree; 4=Neither Agree nor Disagree; 5=Somewhat Disagree; 6=Agree; 7=Strongly Agree.

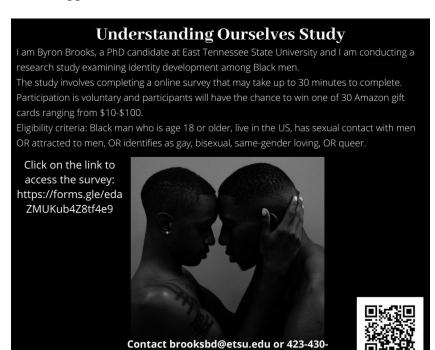
	1	2	3	4	5	6	7
My LGBT identity leads me to important insights about myself.							
I am more aware of how I feel about things because of my LGBT							
identity.							
My LGBT identity motivates me to be more self-aware.							
Because of my LGBT identity, I am more in tune with what is							
happening around me.							
My LGBT identity has led me to develop new insights into my							
strengths.							
I feel I can be honest and share my LGBT identity with others.							
I am honest with myself about my LGBT identity.							
I have a sense of inner peace about my LGBT identity.							
I embrace my LGBT identity.							
I am comfortable with my LGBT identity.							
I feel supported by the LGBT community.							
I feel visible in the LGBT community.							
I feel included in the LGBT community.							
I feel a connection to the LGBT community.							
I find positive networking opportunities in the LGBT community.							
My LGBT identity allows me to understand my sexual partner							
better.							
My LGBT identity allows me to be closer to my intimate partner.							
My LGBT identity frees me to choose who I want as my							
sexual/intimate partner.							
I have a sense of sexual freedom because of my LGBT identity.							
My LGBT identity helps me to communicate better with my							
intimate partner.							
As an LGBT person, it is important to act as an advocate for							
LGBT rights.							
My LGBT identity makes it important to me to actively educate							
others about LGBT issues.							
My experience with my LGBT identity leads me to fight for the							
rights of others.							
I am more sensitive to prejudice and discrimination against others							
because of my LGBT identity.							
I have a greater respect for people who are different from							
society's expectations because of my LGBT identity.							

Appendix I: Religious Surrender & Attendance Scale -3

1=Never True of Me; 2=Occasionally True of Me; 3=Fairly Often True of Me; 4=Very Often True of Me; 5=Always True of Me.

	1	2	3	4	5	
When my understanding of a problem						
conflicts with God's revelation (this						
means that God showed you something),						
I will submit to God's definitions.						
Although I may not see results from my						
labor (this means work that you do), I						
will continue to implement God's plans as						
long as God directs me to do so.						
I try hard to carry my religious beliefs						
over into all my other dealings in life.						
	Never	1-2	Every	1-2	Every	More
		times	Mont	times	Week	than
		per	h	a		one
		year		month		time a
		•				week
How often do you attend religious services?						

Appendix J: Promotional Materials For Phase Two Understanding Ourselves Study



UNDERSTANDING OURSELVES STUDY

6401 for more information

I am Byron Brooks, a PhD candidate at East Tennessee State University and I am conducting a research study examining identity development among Black men. The study involves completing a online survey that may take up to 30 minutes to complete.

Participation is voluntary and participants will have the chance to win one of 30 Amazon gift cards ranging from \$10-\$100.

Eligibility criteria: Black man who is age 18 or older, live in the US, has sexual contact with men OR attracted to men, OR identifies as gay, bisexual, same-gender loving, OR queer.

Click on the link to access the survey: https://forms.gle/edaZ MUKub4Z8tf4e9





Contact brooksbd@etsu.edu or 423

Appendix K: Black Same-Gender Loving Authenticity Adapted From The LGB Positive Identity

Measure

	1 –	7 –
	Strongly	Strongly
	Disagree	Agree
I feel I can be honest and share m	y	
Black same-gender loving identity	У	
with others.		
I am honest with myself about my	,	
Black same-gender loving identity	y.	
I have a sense of inner peace abou	ıt	
my Black same-gender loving		
identity.		
I embrace my Black same-gender		
loving identity.		
I am comfortable with my Black		
same-gender loving identity.		

Appendix L: Freedom From Societal Expectations Of Black Men

1 –	7 –
Strongly	Strongly
Disagree	Agree

I am able to live freely without being bothered by what others think of me being a Black same-gender loving man.

I do not have to conform to traditional views of what it means to be a Black man.

I define who I am and how I express myself.

I do not feel pressured to act how others think Black same-gender loving men should act.

Appendix M: Unconditional Acceptance

	1 –	7 –
	Strongly	Strongly
	Disagree	Agree
My support system is fully accepting of my Black same-gender loving identity.		
I have access to spaces or environments that are fully accepting of my Black same-gender loving identity.		

Appendix N: Internalized Homophobia – Internalized Homonegativity Subscale From The LGB Identity Scale

	1 –	6 –
	Disagree	Agree
	Strongly	Strongly
If it were possible, I would choose to be		
straight.		
I wish I were heterosexual.		
I believe it is unfair that I am attracted to		
people of the same sex.		

Appendix O: Experiencing Non-Affirming Religious Beliefs

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	No Religious Beliefs/Did Not Experience
I have left or changed my					
religious affiliation because of its					
view toward my sexuality					
My parents' religious beliefs made it more difficult for me to					
tell the about my sexuality					
I heard negative messages about					
homosexuality during religious					
services while growing up					
I attempted to pray for my same-					
gender attraction to go away					
I experienced rejection or was					
treated differently from others					
involved in your religion due to					
my sexuality					
I heard others involved in my					
religion speaking negatively					
about individuals that identified					
as LGBTQ					
I witnessed others involved in					
my religion treating LGBTQ					
individuals poorly					

I often have to choose my religious beliefs over my desire

to be with a man

Appendix P: Experiencing Non-Affirming/Non-Supportive Messages From Family

	Yes	No	Don't Know
My family believes Black men cannot be Black and gay.			
My family believes men should not be gay My family tells me that being attracted to men is wrong.			
My family conditionally accepts my sexuality such as "I			
accept you but don't agree with your lifestyle."			
My family expresses disappointment about my sexuality. My family tells me to tone down my gayness.			
My family requests that I not act on my sexuality until I am out of the family home.			
My family requests that I not act on my sexuality until I am			
financially independent.			
My family does not accept my sexuality.			
I hear my family say negative comments about other			
LGBTQ people.			

Appendix Q: Concern Of Hurting Or Letting Down Others And Concerns About Possible

Rejection From Family And Friends

	Strongly Disagree	Disagree	Neither Disagree or Agree	Agree	Strongly Agree
I am concerned about rejection from my					
family due to my sexuality.					
My family lacks understanding about my					
sexuality.					
There is distance between me and family					
due to my sexuality.					
There is a lack of support from family due					
to my sexuality.					
My family has an overzealous interest in					
my sexuality.					
I experience rejection from my siblings due					
to my sexuality.					
My family tolerates rather than accepted					
my sexuality.					
My family ignores my sexuality.					
I talk with some of my relatives about my					
sexuality.					
I am afraid of hurting my family because of					
my sexuality.					
I am afraid of disappointing my family					
because of my sexuality.					
I am afraid of being kicked out of my					
family's home because of my sexual.					
I am afraid of losing love from my family					
because of my sexuality.					

Appendix R: Threats And Enacted Violence, Discrimination, And Harassment

	Strongly Disagree	Disagree	Neither Disagree or Agree	Agree	Strongly Agree
I have experienced threats of violence due					
to my sexuality.					
I have experienced physically assault due					
to my sexuality					
I have experienced harassment due to my					
sexuality.					
I have been called names due to my					
sexuality.					
I have been threatened with physical					
violence from family to make me change					
my sexuality or same-gender attraction.					
I constantly need to be careful to avoid					
having anti-homosexual violence directed					
at me.					
I am fearful that I will be attacked due to					
my sexuality.					
I always consider the possibility of					
violence when out with a group of LGBTQ					
individuals					

Appendix S: Seeing Other Queer People Being Referred To In A Negative Manner Or Treated
Unfairly

	Strongly Disagree	Disagree	Neither Disagree or Agree	Agree	Strongly Agree
My family speaks negatively about					
individuals that identified as LGBTQ.					
My family treats LGBTQ individuals					
poorly.					

Appendix T: Affirming Social Support

	None	A Great Deal
How accepting is your family of your		
sexuality?		
How accepting are your friends of your		
sexuality?.		

Appendix U: Connection With Other Black Queer People

	Agree	Disagree
You feel you're a part of your city's Black	Strongly	Strongly
LGBT community		
Participating in your city's Black LGBT community is a positive thing for you.		
You feel a bond with the Black LGBT		
community.		
You are proud of your city's Black LGBT		
community.		
It is important for you to be politically active in		
your city's Black LGBT community.		
If we work together, gay, bisexual, lesbian, and		
transgender people can solve problems in your		
city's Black LGBT community.		
You really feel that any problems faced by your		
city's Black LGBT community are also your		
own problems.		
You feel a bond with other people of the same		
sexuality.		
I have used mobile applications and websites		
(e.g., BGC, Black Planet, Jack'd) to connect		
with other Black LGBT people.		
I have visited Black LGBT clubs to connect		
with people like me.		
I have engaged with Black LGBT community-		
based organizations to connect with people like		

me.

Appendix V: Having Mentorship, Role Models, And/Or Media Representation Of Black Queer Men

	Did not	Did not	Did not	Happened	Happened	Happened
	happen	happen	happen	to me and	to me and	to me and
	and it	and it	and it	it	it bothered	it
	bothered	bothered	bothered	bothered	me	bothered
	me not at	me	me	me not at	moderately	me
	all	moderately	extremely	all		extremely
Not having any LGBT people of						
color as positive role models.						
I had a person or individual I really						

color as positive role models. I had a person or individual I really wanted to be like (this could be someone you know personally, or someone you have read about or seen on TV or in the movies, or that you know in some other way). I saw Black gay or bisexual men in the media (e.g., TV, movies, music, books).

I knew about important Black gay or bisexual men.

I saw or knew of successful Black gay or bisexual men.

I had a role model with similar identities as me.

I was able to modify my views of Black gay or bisexual men by seeing positive images of Black gay or bisexual men.

Appendix W: Significant Life Events

Did any of the following events help you be more o identity?	pen and a	authentic a	about your Black	LGBTQ
	Yes	No	Don't Know	N/A
Moving out of your family's home.				
Being more financial stability and independence				
where you did not rely on family for financial				
assistance.				
Seeking higher education and going to college.				
Seeking counseling, therapy, or mental health				
services.				
Moving to a location that was less homophobic				
than were you were raised.				
Moving to a place where you believed you could				
be more open about your Black LGBT identity.				
Moving to a place where you believed more Black				
LGBT people lived.				

Appendix X: Frustration With Concealment

	Yes	No	Don't Know	N/A
I prefer to keep my same-sex romantic				
relationships rather private				
I keep careful control over who knows about my				
same-sex romantic relationships				
My sexuality is a very personal and private matter.				
I have a strong desire for others to know my				
authentic Black same-gender loving identity				
I am tired of hiding my Black same-gender loving				
identity from other people.				

Appendix Y: Short Grit Scale

Very	Mostly	Somewhat	Not	Not
Much	Like	Like Me	Much	Like
Like	Me		Like	Me At
Me			Me	All

New ideas and projects sometimes distract me from previous ones.

Setbacks don't discourage me.

I have been obsessed with a certain idea or project for a short time but later lost interest.

I am a hard worker.

I often set a goal but later choose to pursue a different one.

I have difficulty maintaining my focus on projects that take more than a few months to complete..

I finish whatever I begin.

I am diligent.

VITA

BYRON DESALVIO BROOKS

Education:

- Ph.D. Psychology, East Tennessee State University, Johnson City, Tennessee, 2020
- M.A. Clinical Counseling, The Citadel, Charleston, South Carolina, 2014
- B.A. Sociology, Clemson University, Clemson, South Carolina, 2010

Southside High School, Greenville, South Carolina, 2005

Professional Experience:

- Adult Clinical Health Psychology Intern, University of Chicago Medicine, 2019-2020
- Behavioral Health Consultant, East Tennessee State University

 College of Nursing, Mountain City, Tennessee, 2018-2019
- Clinic Coordinator, East Tennessee State University Behavioral Health and Wellness Clinic, Johnson City, Tennessee, 2017-2018
- Behavioral Health Consultant, East Tennessee State University,

 Departments of Family Medicine and Pediatrics, Johnson
 City, Tennessee, 2016-2017

Publications:

Brooks, B., Job, S., Clark, E., Todd, E., & Williams, S. (2020).

Concealment as a moderator between anticipated stigma and psychiatric symptoms. *Journal of Gay & Lesbian Mental Health*.

https://doi.org/10.1080/19359705.2020.1721037

Kaniuka, A., Kelliher Rabon, J., **Brooks, B**., Sirois, F., Kleiman, E., & Hirsch, J.K. (2020). Gratitude and suicide risk among college students: Substantiating the theoretical pathways of

- being thankful. *Journal of American College Health*. https://doi.org/10.1080/07448481.2019.1705838
- Brown, A., Sang, J., Bukowski, L., Meanley, S., **Brooks, B.**, & Chandler, C. (2019). Discrimination, coping, and depression among Black men who have sex with men. *Journal of Health Disparities Research and Practice*, 12(6), 112-134.
- Kaniuka, A., Pugh, K.C., Jordan, M., **Brooks, B.**, Dodd, J., Mann, A.K., Williams, S.L., & Hirsch, J.K. (2019). Stigma and suicide risk among the LGBTQ population: Conditional indirect effects of depressive and anxiety symptoms and connectedness to the LGBTQ community. *Journal of Gay and Lesbian Mental Health*, 23(2), 205-220. doi: 10.1080/19359705.2018.1560385

Honors and Awards:

- University of Chicago, Office of Diversity and Inclusion Grant Award, 2019
- Build a Brother Institute Youth Scholars Institute Fellowship,

 National AIDS Education & Services for Minorities, 20182019
- East Tennessee State University School of Graduate Studies Research Grant, 2017
- The Citadel Graduate College Scholarship, 2013
- J. Patrick Leverett Award for Outstanding Clinical Counseling Graduate Student, 2014