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The Influence of Demographics and Cultural Attitudes on Sexual Orientation Attitudes in African American Adults.

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Walden University

College of Social and Behavioral Sciences

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Bernadette Dawn Harrell

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Walden University

2015

Abstract

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African American Adults

by

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MS, Virginia State University, 2003

BS, Virginia State University, 1999

Dissertation Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Philosophy
Counseling Psychology

Walden University

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Abstract

African Americans who identify as gay, lesbian, bisexual, and transgender (GLBT) are discriminated against in the African American community. Sociodemographics such as income, education, age, and religion/spirituality have been shown to be associated with sexual prejudice. There is limited research on how African American cultural attitudes influence attitudes towards sexual orientation. The purpose of this study was to examine the extent to which demographic variables and African American cultural attitudes (measured by the African American Acculturation Scale-Revised; AAAS-R) predict attitudes toward sexual orientation in African American adults (measured by the Attitudes towards Lesbians and Gay Men Scale; ATLG). Social identity theory (SIT) was used to describe how group affiliation influences attitudes. A sample of African Americans who were 18 years or older ($n = 236$) completed the questionnaires online. Stepwise multiple regression analyses were conducted to examine the relative importance of demographics and cultural attitudes in predicting attitudes towards homosexuals and lesbians. The results of the study indicated that religious affiliation and religious beliefs and practices were statistically significant in predicting attitudes towards both homosexual and lesbian individuals. These findings suggest that individuals who identify as Christians and have stronger religious beliefs and practices are more likely to have negative attitudes towards lesbians and gay men. These results lend support to efforts to create programs to educate people about cultural misconceptions of the African American GLBT community and to encourage spiritual leaders to promote efforts support to them.

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Dedication

This dissertation is dedicated to my grandparents Sealve and Loveland White Sr., and George and Lois Harrell Sr. It is also dedicated to my aunt Loveland White and my cousin Ariel Dunkley.

Acknowledgments

I would like to say thank to God for blessing me through my journey. To my chairperson Dr. Chet Lesniak thank for your encouragement, support, patience, and guidance. To Dr. Susan Marcus thank your support and advice. To my mother Fannie Harrell thank you for your prayers, supporting me during my journey, encouraging my dream, and your love. To my family Martha Martin, Nickki Jones, Mattie Lee, Brenda Dunkley, Sealve White Jr, Christopher White, Terry White, and Keith White for your prayers and loving support. To my father George Harrell Jr. and my stepmother Michelle Harrell thank you for your love and support. To Ana Placencia thank you for support and challenging me. To Dr. Spencer Olson thank you for all your encouragement, patience, and understanding. To all my friends and sorority sisters thank you for your encouragement and support.

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Chapter 1: Introduction to the Study

Over the last 20 years, researchers have studied the cultural and psychological factors that affect the acceptance of homosexuality (Herek, 2000, 2007; Herek & Glunt, 1993). In the African American community, sexual orientation can be a difficult and potentially controversial issue. African Americans often struggle with identity in more than one areas including but not limited to race, sexuality, and gender (Caple et al.; 2013; Collins, 2004; Jones & McEwen, 2000). Sexual identity as an African American can be especially challenging because of other sociocultural influences (Greene & Boyd-Franklin, 1996; Roberts-Douglass & Curtis-Boles, 2013). Cultural influences such as health beliefs, religion/spirituality, and family values in the African American community may hinder individuals who identify as gay, lesbian, bisexual, or transgender (GLBT) from comfortably expressing themselves (Greene & Boyd-Franklin, 1996; Miller & Stack, 2013; Ward, 2005). Exploring these issues may have a positive influence in cultivating self-acceptance and acceptance by others in the African American community.

The chapter begins with a brief discussion of relevant prior research. This is followed by the presentation of the problem statement, purpose and research questions focusing on the attitudes of African Americans towards GLBT individuals in the African American community. Social identity theory is identified as the theoretical framework to describe how individuals want to be accepted by the dominant group and how demographics play a part in acceptance. Limitations with regard to internal and external

validity are presented. Last, the significance of the study is discussed with regard to how the results of this dissertation will be shared.

Background

The first *Diagnostic and Statistical Manual of Mental Disorders* [DSM-I] was published in 1952 (Association of Gay and Lesbian Psychiatrists, 2007, American Psychiatric Association, 2012). At that time, homosexuality was identified as a mental health disorder. Over 20 years later, the DSM-II no longer listed homosexuality as a mental health disorder. Since then, other mental health fields have declassified homosexuality as a mental health disease as well (Association of Gay and Lesbian Psychiatrists, 2007).

In African American communities, the acceptance of an individual's sexual identity can be challenging. McCommon (2009) concluded that certain minority communities do not condone homosexuality. Numerous researchers have focused on attitudes toward gay men and lesbian women (Battle & Lemelle, 2002; Elderidge, Mack, & Swank, 2006; Herek, 2000; Herek, Cogan, & Gillis, 2009; Herek & Glunt, 1993; Marsiglio, 1993; Vincent, Peterson, & Parrot, 2009). For instance, Lorde (1984, as cited in Loianco, 1989) described African American women as having several identities such as ethnic, gender, and sexual preference. These multiple identities may inhibit their experience of community and cultural support (Loianco, 1989; Reed & Valenti, 2012).

Some researchers studied connections between attitudes toward gay men and lesbians and sociocultural factors (Vincent et al., 2009). Herek and Glunt (1993) focused on interpersonal contact and how heterosexual men and women react to gay men and

cultural influences, but did not include sexual orientation in their study. In another study, Elderidge et al. (2006) conducted a study on homosexuality within rural communities. Researchers found that certain personal and social settings will impact an individual's feeling comfortable around gay people. Battle and Lemelle (2002) examined gender difference in the African American community and attitudes toward gay men. Researchers found that African American women had positive attitudes and were more acceptable of homosexuality compared to African American men. However, there is a lack of research investigating the influence of African Americans' cultural attitudes and sociodemographics on attitudes towards the gay and lesbian community. The majority of studies that focused on African Americans and the GLBT community used samples of adolescents and college students. This study focuses on adults.

Statement of the Problem

In the African American community, there are some people who hold prejudicial attitudes toward African Americans who identify as GLBT (Herek et al., 2009; Vincent et al., 2009). Research has suggested that these attitudes have inhibited the acceptance of African American GLBT individuals' African American communities. More research is needed to better understand how racial identity influences perceptions of tolerance and rejection of GLBT people in the African American community and how sociodemographics (gender, income, education, age, and religion/spirituality) differentiate those who are more prejudiced from those who are more tolerant (Besen & Zicklin, 2007; Lambert et al., 2006; Wills & Crawford, 2000). Additionally, there is limited research examining if these differences are consistent between attitudes toward

gay versus lesbian African Americans. For instance, Vincent et al. (2009) examined sociocultural factors that influence sexual orientation. The sample included both African Americans and European Americans, but did not compare the two groups. Lemelle and Battle (2004) conducted a national study on African Americans' attitudes toward gay men. Their research indicated African American women had negative attitudes towards gay men; however, the study did not include African American attitudes towards lesbians.

It is important to establish scientific knowledge for psychologists, counselors, and community leaders in order to help them advocate for reducing the discrimination of GLBT African Americans. The intent of this study is to facilitate social change in the African American community by providing insights into racial attitudes and tolerance of African American GLBT individuals.

Purpose of the Study

The objective of this investigation was to examine the extent to which demographic variables and African American cultural attitudes predict attitudes towards sexual orientation in African American Adults. African Americans' cultural attitudes were assessed by the eight subscales of the African American Acculturation Scale (Klonoff & Landrine, 2000). Attitudes towards sexual orientation were measured by the Attitudes toward Lesbians and Gay Men Scale (ATLG) (Herek & Mc Lomore, 2011). Demographic variables were also examined to determine if these individual differences influence attitudes toward sexual orientation.

Research and Hypotheses

Research Question 1: Are self-reported demographic variables (gender, age, education, income, and religion) among adult African Americans significant predictors of attitudes towards gay men, as measured by the ATG-R-S5 subscale Attitudes towards Gay Men?

H_{a1}: Demographic variables (gender, age, education, income, and religion) will significantly predict the ATG-R-S5 subscale Attitudes towards gay men.

H₁₂: Demographic variables (gender, age, education, income, and religion) will not predict the ATG-R-S5 subscale Attitudes towards Gay Men.

Research Question 2: Is the African American Acculturation Scale-Revised (as measured by the eight subscales of the African American Acculturation Scale) among adult African Americans a significant predictor of attitudes towards gay men, as measured by the ATG-R-S5 subscale, Attitudes towards Gay Men?

H₀₂: The eight subscales of the African American Acculturation Scale-Revised (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial Segregation, and Family Values) will significantly predict the ATG-R-S5 subscale Attitudes towards Gay Men.

H₁₂: The eight subscales of the African American Acculturation Scale-Revised (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial

Segregation, and Family Values) will not predict the ATG-R-S5 subscale Attitudes towards Gay Men.

Research Question 3: Are self-reported demographic variables (gender, age, education, income, and religion) among adult African Americans significant predictors of attitudes towards gay women, as measured by the ATL-R-S5 subscale, Attitudes towards Lesbians?

H_03 : Demographic variables (gender, age, education, income, and religion) will significantly predict the ATL-R-S5 subscale Attitudes towards Lesbians.

H_13 : Demographic variables (gender, age, education, income, and religion) will not predict the ATL-R-S5 subscale Attitudes towards Lesbians

Research Question 4: Is African American Acculturation (as measured by the eight subscales of the African American Acculturation Scale) among adult African Americans a significant predictor of attitudes towards gay women, as measured by the ATL-R-S5 subscale, Attitudes towards Lesbians?

H_04 : The eight subscales of the African American Acculturation Scale-Revised (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial Segregation, and Family Values) will significantly predict the ATL-R-S5 subscale Attitudes towards lesbians.

H_14 : The eight subscales of the African American Acculturation Scale-Revised (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial

Segregation, and Family Values) will not predict the ATL-R-S5 subscale Attitudes towards Lesbians.

Theoretical Framework for the Study

The theoretical framework for the study was social identity theory (SIT), created by Taifel and Turner in 1986. This theory explains how individuals who want to belong to the dominant group come to be accepted in the dominant group. There are several approaches to SIT. Taifel and Turner analyzed interactions with individuals within the dominant group, individuals' identities within the dominant group, and how individuals label themselves within that dominant group. Theorists expanded SIT to include cultural competence, social stigma, social identity, and social cognition (Padilla & Perez, 2003). These additional components play an important part in acceptance into the dominant group. In addition, the individual will search or find a new environment and develop an identity in that new environment and will disregard the old identity (Ethier & Deaux, 1994).

African Americans and other ethnic groups are known as marginalized populations (Thompson & Carter, 2013). Social identity theory suggests that African Americans will demonstrate multiple identities and these identities can come into conflict with one another. African Americans have both ethnic and individual identities (Crawford, Allison, Zambian, & Soot, 2002). African Americans who are GLBT face negative attitudes from their dominant group toward their sexual orientation (Greene & Boyd-Franklin, 1996). In other words, some African Americans have prejudiced

attitudes toward other African Americans who identify as GLBT. Chapter 2 will describe in detail African American perceptions and the social identity theory.

Nature of the Study

A survey research method was used to investigate how socio-demographics and African American cultural attitudes influence attitudes towards homosexual men and women. The instrumentation included the African American Acculturation Scale-Revised (AAAS-R) and Attitudes toward Lesbian and Gay Men Scale-R (ATLG-R). The independent variables in this study were: age, gender, education, income, religion, and subscales of the African American Acculturation Scale-Revised. The dependent variables are the subscales from the Attitudes toward Lesbian and Gay Men Scale-Revised 5 Short. The questionnaires were accessed through an online survey research website. Each participant clicked on a link to access the questionnaires via Facebook invitation. Multiple regression was used to examine the research questions using SPSS for data analysis.

Definitions of Terms

African Americans and Blacks: In 2010, the U.S Census Bureau used the U.S Office of Management and Budget definition of African Americans and Blacks. It is defined as “individuals whose origins are from any Black racial groups from Africa” (U.S. Census Bureau, 2011, p 2).

Black identity: The definition of black identity can be defined by Cross’s five stages of black identity: pre-encounter, encounter, immersion-emersion, internationalization, and internationalization-commitment (Cross, 1978).

Gender: American Psychological Association (2011) (Definition of Terms, Sex. Gender, Gender Identity, Sexual Orientation para, 2) gender refers to the “Attitudes, feelings, and behaviors that a given culture associates with a person’s biological sex. Behavior that is compatible with cultural expectations is referred to as gender-normative; behaviors that are viewed as incompatible with these expectations constitute gender non-conformity”.

GLBT: An acronym or abbreviation for gay, lesbians, bisexual, and transgender individuals (Green & Peterson, 2003-2004).

Sociodemographics: Age, education, gender, income, marital statuses, racial/ethnic background, religion, and sex (U.S Census Bureau, n.d).

Social identity: An individual’s self-concept of her social identity. Social identity is developed from the awareness of membership within a particular group or groups and within that group there is an emotional bond for that group (Tajfel, 1974).

Sexual orientation: Sexual or romantic attraction to another individual of the same sex or both sexes (American Psychological Association [APA], 2011).

Social identity theory: The individual definition of identity and social group or groups. The individual seeks positive social groups for membership in the preferred group (Taifel & Turner, 1986).

Assumptions

Since the questionnaire was online, it is assumed that participants were competent in using a computer to complete the survey. It is also assumed that participants will feel comfortable filling out an online questionnaire compared to filling out the questionnaire

in person. Lastly, it is assumed that participants will understand the statements in the informed consent letter that describes how their anonymity is protected.

Scope and Delimitations

The scope of this study was specifically limited to African Americans who have access to a computer and the Internet in order to see the invitation and follow the link to the survey. However, if participants do not have access to a computer, they can access Facebook via cell phone. Some African Americans are more likely to have Internet through their mobile phone and are less likely to have Internet access to a laptop (Lenhart, Parcell, Smith, & Zickuhr, 2010). The scope was also limited to those who are Facebook friends. It was not possible to determine the generalizability of the results because the sample is self-selected.

Limitations

There were limitations to the proposed study. These were organized into threats to internal validity, construct validity, and external validity. There are three aspects of internal validity that are of concern: Self-selection, participants' motivation to complete the survey, and multiple entries. Participants were self-selected and the researcher had no control over who completed it or how motivated each individual is to be accurate and thorough. (Heppner, Wampold, & Kivlighan, 2007). The researcher eliminated questionnaire responses from duplicate IP addresses manually.

To help establish construct validity, the selected questionnaires were developed to meet scholarly requirements of internal consistency, reliability, and validity (Herek & Mc Lomore, 2011; Klonoff & Landrine, 2000). These are reported in detail in Chapter 3.

Regarding external validity, the sampling strategy depended on people volunteering to respond to a Facebook invitation. The researcher was not able to conduct a random sample, therefore the results cannot not be generalized to the target population of adult African Americans (Heppner et al., 2007). However, the researcher was able to report the sample demographics that may help the reader understand the sample characteristics (Bhattacharjee, 2012).

Significance

People perceive sexual orientation in different ways. It is hoped that the results of this study can be distributed to local communities, as well as to academic and professional communities in order to be part of the effort to assist individuals to be themselves without feeling alienated, judged, or chastised about their sexual orientation. Therefore, working with community leaders and other professionals in the community may bring about social change and help sexual prejudices in the African American community. There are several ways to help alleviate sexual prejudices in the African American community. First, to have this dissertation published. Second, present the findings at educational and professional conferences. Third, participate in discussions of racial identity and sexual orientation at community based radio stations. Fourth, participate in forums and discussions in local community and college campuses in order to help decrease sexual stigma in the African American community. Fifth, work with spiritual leaders to provide education about sexual stigma, which may help to change individual perceptions. Spiritual leaders can create nonthreatening, safe environments filled with acceptance, diversity, and inclusion. Finally, it is hoped that the results of this

study will contribute to social change by helping to facilitate the discussion to address the sexual identity and sexual stigma in the African American community.

Summary

This study was a quantitative research design, which addressed the background, statement of the problem, purpose of the study, research and hypothesis, theoretical framework, nature of the study, assumption, scope and delimitations, limitations and significance of the study. The purpose of this study was to investigate African Americans cultural beliefs on sexual orientation and the socio-demographic influences. Past research of sexual prejudices in the African American community is a controversial issue (Caple et al., 2013; Jones & Mc Ewen, 2000). Therefore, more research is needed to investigate African Americans perceptions and acceptance of African Americans who identified as GLBT. In addition, the research and hypothesis questions were created due to the lack of research on African Americans racial and sexual identity. The results of this investigation will allow a better understanding of how African Americans accept and reject African Americans who are GLBT.

Chapter 2 will further explore the problem in the African American community and validate the need and significance of this study. Social identity theory, Black identity, African American attitudes toward GLBT, and African American acculturation will be discussed. Chapter 3 will illustrate how this study was executed and the instrumentation that was used.

Chapter 2: Literature Review

Introduction

The aim of this literature review was to explore the relationship between African American cultural attitudes and current perceptions regarding sexual orientation. Prejudicial attitudes and behaviors toward the GLBT community have severe consequences, which have been consistently reported in research studies (May, Cochran & Barnes, 2007; Meyer, 2003; Stroup, Glass, Cohn, 2014) and in the popular press. These negative attitudes and behaviors contribute to GLBT social isolation, violence against GLBT people, personal problems, and lack of family acceptance (Blosnish & Bossarte, 2012; Needham & Austin, 2010; Ryan, Russell, Huebner, Dias, & Sanchez, 2010). This study was an examination of African American identity and African Americans' perceptions of the GLBT community and the subsequent double marginalization of GLBT African Americans. The purpose of this study was to examine the extent to which demographic variables and African American cultural attitudes predict attitudes towards sexual orientation in African American Adults. Moreover, the role personal social identity plays in shaping prejudice toward GLBT community was investigated. Specific topics to be investigated include Black identity, sexual orientation, sexual identity, and social reaction to sexual orientation, as they relate to social identity theory.

Literature Search Strategy

The following databases were used for the literature search: PsycINFO, Google Scholar, LGBT Life, SocINDEX, PsychARTICLES, Thoreau, Academic Search

Complete, and MEDLINE. I also scanned the reference lists from the articles I reviewed.

The following search terms were used: *sexual orientation, blacks, African Americans, social identity theory, sexual identity, sexual orientation, Gregory Herek, double marginalization, homosexuality, discrimination, transgender, bisexual, lesbians, gays, sexual prejudices, stages, of black, identity, heterosexuality, heterosexual, gender, African American Acculturation Scale-Revised, acculturation, Hope Landrine, and Elizabeth Klonoff.*

Even though the search on the pair *African Americans* and *attitudes on sexual orientation* had a high rate of return, the return on *social identity theory, African Americans*, and *attitudes on sexual orientation* was limited. Adding the theme of social identity theory limited the literature search significantly. Peer reviewed, academic literature, and other electric resources were dated from 1986 to 2013. This literature search ended when themes repeated. Finally, the literature review will cover research questions that were addressed in Chapter 1.

History of Prejudice Against the GLBT Community in the United States

For several centuries, philosophers and psychologists have examined sexual orientation (Diamond, 2000; Hammond, 2005; Herek, 1987,1988, 1994, 2000). Sexual orientation can be described as a physical, emotional, and romantic attraction to the opposite sex or same sex (APA, 2011). There are many different categories of sexual orientation, including homosexuality, lesbianism, bisexuality, and transgender. Homosexuality is defined as an attraction to the same sex, for instance a man being attracted to another man. This attraction is defined as a gay. Lesbians are women who are attracted to other

women. Bisexuality is defined as attraction to the opposite and same sex. Transgender is defined as exhibiting individual behavior, gender identity, and gender expression not commonly associated with an individual's birth sex (APA, 2011).

Karoly Marie Kertbeny published the first instance of the term *homosexuality* in 1869 (Drescher, 2012). The momentum of publishing studies on human sexuality continued. In 1948 and 1953, Alfred Kinsey and his colleagues published two books, *Sexual Behavior in Human Men* and *Sexual Behavior in Human Women*. These two publications were society's views of human sexuality, as well as in how people act sexually. Both books discussed human sexuality and behavior from women's and men's perspectives. Kinsey and his colleagues included socio-demographics such as age, religion, occupation, marital status, and occupational class (The Kinsey Institute, 2014).

The GLBT community took a stand for their civil rights in 1969 during the Stonewall riot, a pivotal moment in gay rights. Stonewall Inn in Greenwich Village, New York was a well-known gay bar. The GLBT community was frustrated with how they were being treated during a police raid. People protested and held demonstrations for a several of days ("Stonewall Uprising", n.d). This event launched the Christopher Street Gay Liberation Day march (Wythe, 2011). This annual march marked the anniversary of the Stonewall riot.

In 1952 the APA classified homosexuality as a sociopathic personality disorder (Latham, 2011). In the late 60s, homosexuality was changed from a sociopathic personality disorder to a sexual deviation (Latham, 2011). The APA defined homosexuality as a mental health disorder as late as 1972. In 1973, the APA removed

homosexuality from the Diagnostic and Statistical Manual of Mental Disorders (DSM-II; American Psychiatric Association, 2012; Drescher, 2010) based on a challenge to APA's three criteria: ethology, syndrome, and pathogenics (Stoller, 1973). Stoller et al. (1973) concluded that the three criteria, which are generally used to define a disorder, did not apply to homosexuality. The reasons were as follows: Sexual behaviors are not necessarily signs and symptoms of illness, individuals have different sexual preferences in their sexual behavior, and individuals' experiences can contribute to their sexual behavior (Stoller, 1973). In other words, Stoller et al. concluded that diagnosing individuals who are homosexual as having a disorder is difficult because sexual behaviors and sexual preferences vary from individual to individual. Drescher (2010) categorized the three theories of homosexuality as a psychiatric diagnosis: (a) theories of normal variation, (b) theories of pathology, and (c) theories of immaturity. *Theories of normal variation* define people as being born gay, *theories of pathology* refer to homosexuality as a disease, and *theories of immaturity* refer to a phase of homosexual behaviors and feelings of individuals at a young age. Theories of immaturity suggest that homosexual individuals will eventually grow out this phase and become heterosexual when they become adults.

Incidence of Discrimination Against the GLBT Community

Through the years many GLBT organization have fought for equal rights for GLBT individuals. For instance, the American Civil Liberties Union focused on five areas of GLBT discrimination: (a) basic rights and liberties, (b) parenting, (c) relationships and marriage, (d) youth and schools, and (e) discrimination against

transgender people (American Civil Liberties Union, n.d.). An example of discrimination is the former *Don't Ask Don't Tell (DADT)* ban on gays and lesbians openly serving in the military (Human Rights Campaign (n.d.). The military also discriminated against veterans seeking employment (Pope, 2011). Veterans were dishonorably discharged under *DADT* because of (a) homosexual conduct, (b) homosexual act, and (c) homosexual admission (Pope, 2011). In 1993, President Clinton along with members of congress and military personnel came to agreement that *DADT* should be changed to *Don't Ask Don't Tell Don't Pursue*, meaning individuals who served in the military would not be asked about their sexual orientation and would not be dishonorably discharged (Herek, n.d.). In 2010-2011 President Barack Obama signed into law a repeal of *DADT* (Department of Defense, n.d.; Herek, n.d) U.S. This repeal allowed individuals to be open about their sexual orientation in the military.

Another incident of discrimination against the GLBT community involves same sex marriages. According to Pew Research (2012), some religious groups oppose same sex marriages. As of this date, 19 states in the U.S. allow individuals of the same sex to be married (Pew Research, 2014). According to Pew Research, (2012) some religious groups believe marriage is between a man and woman and homosexuality is a crime (Pew Research, 2012). However, in 2013, the U.S. Supreme Court ruled that section three of the law was unconstitutional because it prevented states from determining their own marriage statutes (American Civil Liberties Union, n.d). As a result of this ruling more and more states are acknowledging same sex couples and marriages. For instance,

Minnesota Governor Mark Dayton signed a bill that would legalize same sex marriage in 2013 (Minnesota Department of Human Rights, n.d.).

The GLBT community has made strides and continues to fight for their equal rights. To this end, governmental leaders have changed laws on a state and national level. However, discrimination against GLBT individuals continues to be a challenge (Stroup, Glass, & Cohen, 2014). Stroup, Glass, and Cohen (2014) conducted a study on sexual minorities who attended college in a rural area. Their results indicated GLB students experienced discriminated because of their sexual minority status, gender, appearance, and religion. Religion was the main factor. Past and current research focused on populations of adolescents, college students, and their attitudes towards gay men and lesbians (Baunach, Burgess, & Muse, 2009; Jenkins, Lambert, & David, 2009; Marsiglio, 1993; Poteat & Anderson, 2012; Wills & Crawford, 2008). For instance, Poteat and Anderson (2012) conducted a study on adolescents' prejudices towards gay men and lesbians. Their research design was an accelerated longitudinal study of freshmen and senior high school students who attended a public school. Poteat and Anderson (2012) postulated that adolescents would have significant changes in prejudicial attitudes towards gay men and lesbians. Poteat and Anderson's results indicated that sexual prejudices differ from the boys to girls. Twelve-year-old boys were more prejudiced compared to girls. However, the older the girls were, the fewer negative attitudes they had compared to boys. Boys' negative attitudes did not change over time.

AIDS Epidemic Age Cohort Differences in Discrimination

According to The Henry Kaiser Family Foundation (2014), 506,000 African Americans have HIV/AIDS. When reviewing previous data, in 2011, African Americans accounted for 44% of new cases of HIV and 49% of AIDS. Of note, is that in these cases African American women are more likely to be infected by HIV compared to African American men. The total age range for African Americans tested was between 18 to 64 years old. In addition, men who have sex with other men were 51% of the infected male group, and of this group age range was between 13 to 24 years old. Also, some African Americans were tested in the late stages of being HIV positive, which resulted increase in AIDS diagnosis within the year (The Henry Kaiser Family Foundation, 2014).

Herek (1999) examined why people discriminate against people with AIDS. There are certain socio-demographic factors that contribute to AIDS stigma, including age, education, interpersonal relationships with someone who had AIDS, attitudes toward homosexuality, and being informed about how HIV is transmitted. There is a difference between younger and older individuals. A young individual who is educated will tend to have less stigma toward AIDS compared to an older individual who has less education (Herek, 1999).

Herek, Capitano, and Widaman (2002) conducted a study on AIDS stigma and the people's knowledge about how AIDS is transmitted during the 1991-1999. Herek and his colleagues found during the 1990s AIDS stigma decreased, however, people had misconceptions of how AIDS is contracted by 1999. People believed that kissing, public restrooms, and touching things that a person with AIDS touched could contract AIDS.

Also, in 1999 many people believed that a person with AIDS deserved to contract it and felt uncomfortable with a person that has AIDS and had negative feeling about them (Herek, Capitano, & Wildman, 2002).

In the United States, the Southern region has the most cases of HIV/AIDS (Adimora, Ramirez, Schoenbach, & Cohen, 2014; Herek, 1999;). Many in the South have a hard time accessing health care. Eight-one percent are diagnosed and are connected to care; however, 34% continue to have care and antiretroviral therapy is provided to only 29% (The Henry Kaiser Family Foundation, 2014). Therefore, having affordable health insurance is imperative to an individual's health.

According to researchers, aging GLBT individuals are invisible (Crisp, Wayland, & Gordon, 2008; Dentato, Orwat, Spira, & Walker, 2014). Dentato et al. (2014) examined different age cohorts in the GLBT community. For instance, leaders in the GLBT community during the 1980s advocated for an end to sexual oppression and discrimination. However, those leaders either since died or moved on to advocate for other causes (Jaffe, Valdsern, & De Cook, 2007). Therefore, young GLBT individuals have found they need to learn to advocate against sexual oppression and discrimination. Health and Goggin (2009) believe that the younger generation is exposed to more positive media images of the gay and lesbian community compared to the older generation because of the limited media exposure about gay life. The next section will discuss prejudice against the GLBT community in African American culture.

Discrimination Against the GLBT Community in African American Community

Some segments of American society have not fully accepted differing sexual orientations. For instance, Vincent et al. (2009) conducted a study on the attitudes of women, both African American and European American, toward lesbians and gay men. The authors concluded that African American women (a) had more negative attitudes towards lesbians and gay men compared to European women, and (b) had more negative attitudes toward gay men than toward lesbians. The researchers postulated that sociocultural factors could influence views on sexual orientation. For example, according to Herek et al. (2009), lesbians, gay men, and bisexual minorities struggle with discrimination in the United States. African Americans may feel as though they need to conceal their sexual orientation (Herek et al., 2009). In contrast, Battle and Lemelle (2002) investigated gender differences and attitudes towards gay men within the African American community, postulating that African American women had more tolerance for African American men who identified as gay than did African American men. They concluded that African American women had a positive reaction towards homosexuality when compared to African American men. Age and education correlated with attitudes toward homosexual men.

Consequences of Discrimination for GLBT People

Sexual Orientation Stigma

Lesbian and gay African Americans have a challenge in navigating their two identities, race, and sexual orientation (Loiacano, 1989). Sexual stigma plays a part in discrimination (Herek, 2007; Herek & Garnets, 2007; Herek et al., 2009). Many people

assume that individuals are born heterosexual and may assume that an individual is heterosexual (Herek et al., 2009; Loiancano, 1989). Herek, Gillis, and Cogan (2009) postulated three ways in which sexual stigma is manifested: Sexual stigma, felt stigma and internalized stigma. Sexual stigma can be described as antigay behaviors such as discrimination and can be demonstrated in society's view of homosexual behavior, same sex relationships, and sexual minorities. Felt stigma has an influence on individual identity. Even though the individual may be heterosexual, that individual will use self-presentation techniques. Internalized sexual stigma is when an individual accepts their sexual stigma. Sexual minorities are victims of the sexual prejudice of heterosexuals (Herek, 2007; Herek et al., 2009). Sexual minorities can reflect negative attitudes toward each other and may have a higher self-stigma because of their identities (Herek et al., 2009). Loiancano (1989), in a qualitative study on African Americans and their sexuality, found that African American lesbians and gay men have the task of bringing both identities into one identity. Loiancano concluded that the development of Black and gay identities coincide with one another. However, African American lesbians experience more obstacles compared to African American gay men in their community (Loiancano, 1989). Harkey, Stanbury, Nelson, and Espinosa (2014) discussed African American lesbians in rural areas. They described African Americans' community cultural perspective on African American GLBT people. In the African American community, individuals who identified as GLBT often believe they should remain secretive about their orientation, whereas the predominant GLBT community believe that they should be out about their orientation. The individuals were shunned by their family

members and loved one because of their sexuality. Reed and Valenti (2012) interviewed 14 young black lesbians and how they manage their sexual identity and sexual prejudices. They found that the participants in their study created ways to manage their sexual and racial identities. Some of their strategies included creating their own family support system, utilizing positive reinforcement about their identity, and using their cognitive and behavioral skills to avoid sexual prejudices.

Mental Health Issues

In a national survey of over 7,000 junior high and high school students, GLBT youth evidenced more suicidal ideation, suicidal attempts, and suicidal behaviors compared to heterosexual youth (Center for Disease Control and Prevention [CDC], 2014). In addition, GLBT youth experience more instances of bullying, substance abuse, and depression (CDC, 2014). Mays and Cochran (2001) conducted a study on lesbian, gay, and bisexual peoples' mental health and discrimination. Researchers concluded that lesbians, gay, and bisexual people were discriminated against more often than compared to heterosexuals. Forty-two percent of their participants reported that they were discriminated against because of their sexual orientation (Mays & Cochran, 2001). In addition, researchers found that homosexual and bisexual participants had a high psychiatric morbidity compared to their heterosexual peers. Grant et al. (2014) conducted a study on LGBQ college students and mental health disorders. LGBQ students had substance abuse, anxiety disorders, high stress levels, depression, sexual behaviors, and spending. Herman, Haas, and Rodgers (2014) investigated suicide behavior among transgender and gender non-confirming people. Forty-six percent of

transgender men attempt suicide compare to 42% transgender women. Amongst those percentages, people aged 18-24 had the highest attempts for suicide attempts. African Americans had a 45% of lifetime suicidal attempts. In addition, suicide attempts among HIV positive individuals were 51% (Herman, Hass, & Rodgers, 2014).

HIV Treatment and Prevention

According to World Health Organization (WHO, n.d.), 34 million people nationally and international have HIV. Human immunodeficiency virus (HIV) is a transmitted through bodily liquids with someone who is infected with HIV. These bodily fluids are blood, semen, virginal secretion, and breast milk (WHO, 2013). African American young men who have sex with other African American men have an increased chance of being infected with HIV (CDC, 2012). Sixty-three percent of African American men ages 13 to 34 old were the most infected (CDC, 2012). According to Jarama, Belgrave, Bradford, Young, and Honnold (2007), sociocultural factors impact HIV prevention and HIV information. Therefore, gender roles, sexuality, cultural norms, perceptions of relationships, and women's social status can influence sexual behaviors and HIV prevention. Brooke, Adam, Mc Cauley, and Bortolin (2010) conducted a study on lesbians, gay, and bisexual youth from Ontario about HIV prevention through several resources such as school, family, friends, Internet, peers, and sexual partners. Researchers concluded that schools were not addressing HIV prevention. Instead, schools focused on abstinence, scientific approaches, and focus heterosexual approaches. However, family, friends, Internet, and the media were resources that youth used to learn more about HIV prevention and information. Past research has indicated that prevention

programming and educating people can reduce stigma in society (Brooke, Adam, McCauley, & Bortolin, 2010; Herek & Capitanio, 1993). Malebranche et al. (2010) conducted a qualitative study on African American bisexual men who use condoms and disclose sexual behavior. Their results indicated a perception that men are at higher risk of being infected with HIV compared to women. The perception is that women are at a lower risk of being exposed to or infected with HIV. However, Schrimshaw, Siegal, Downing, and Parson (2013) conducted a study on bisexual men disclosing and concealing their sexual orientation. Also, examined were mental health, family support, and internalized homophobia. Researchers' results indicated that bisexual men's disclosure and concealment were two separate concepts. Bisexual men who concealed their sexuality had a higher income, identified as heterosexual, had sex with more women compared to men, and had a girlfriend or wife with whom they lived. In addition, participants in their study did not disclose their sexuality; they concealed it more with their friends and family.

Millet, Malebranche, Mason, and Spikes (2005) examined African American men who engage in same sex behavior, but do not consider themselves to be gay men. Behaviors such as these are referred to as being on the *down low*. There is a perception that men who are on the *down low* increase HIV infections among Black women and the African American community (Bond, Wheeler, Millet, LaPolla, Carson, & Liao, 2009; Millet et al., 2005). Researchers found that men who disclosed their sexuality as bisexual have a high chance of HIV risk compared to bisexual men who do not disclose their sexuality. Bond et al. (2009) found that their participants wanted to keep their same sex

behaviors a secret. Furthermore, men in their study were less likely to be HIV positive. In the next section, social identity theory will be discussed as the theoretical framework for this study.

Theoretical Framework

The theoretical framework for this research is Social Identity Theory (SIT). Taifel and Turner created SIT in 1986 (Taifel & Turner, 1986). This theory focuses on individuals wanting to be accepted by the dominant group.

Social Identity Theory

Since its creation in 1986 by Taifel and Turner, several theorists have advanced the investigation and conceptualization of the social identity theory. Originally, social identity theory focused on individual's interactions with other individuals or social groups and how they identify with that group (Taifel & Turner, 1986). Taifel and Turner (1986) articulated three concepts related to social identity: Interpersonal-intergroup continuum, social categorization, and social comparison. These three concepts will be explained in detail. First, Taifel and Turner specifically focused on the interpersonal-intergroup continuum, postulating two extremes. The first extreme is an individual's identity incorporating others identities (Taifel & Turner, 1979; Taifel & Turner, 1986). In this case, the individual is aligned with how other individuals act with other people. The second extreme is when individuals incorporate themselves. In other words, their interactions are based solely on the group. For instance, an African American GLBT individual may not feel comfortable with their identity within the African American

identity group. However, an African American GLBT individual may feel comfortable with other aspects of their identity within that same group.

Taifel and Turner (1986) expanded their perspective by describing social categorization. According to the authors, social categorization is a way that people create categories or socially label as part of a certain a category. Social categorization can involve some conflict within the social comparison. Social comparison refers to the capacity of any identity to create discriminatory actions by the in-group toward the out-group. In other words, this mind frame creates favoritism of the in-group versus certain members of the out-group.

According to Taifel and Turner, individuals want to accomplish three objectives described by the social identity theory. First, the individual wants to have a positive identity and maintain that identity. Second, if the individual has positive feelings about his or her connection with a particular group, the individual will privilege that positive group. They will feel favorable in that group. Third, if the individual does not have positive feelings in that group, he or she will go to another social group to maintain his or her individual identity.

Padilla and Perez (2003) expanded the conceptualization of social identity theory by adding *social cognition, cultural competence, social identity, and social stigma*. Padilla and Perez concluded that cognitive, psychological, and social components should be incorporated into the social identity theory. *Social cognition* refers to individuals' use of their social experiences and what goals they want to accomplish socially. *Cultural competence* is the ability of individuals to incorporate themselves into a dominant

culture. Immigrants can face challenges because they have to decide if they want to emerge into the dominant culture. In other words, cultural competence is a cultural belief system; components in this system include the individuals' traditional beliefs and values. Therefore, cultural competence and social identity theory go hand in hand, as social identity refers to individuals' belief systems regarding the groups or organizations they belong to. Padilla and Perez hypothesized individuals who express their acculturation will have a difficult time socially. Social identity and cultural competence both address the social and cognitive aspects of individuals' desires to feel welcome, accepted, and comfortable about the groups that represent them. This desire is an example of self-categorization.

Social stigma can be visible and nonvisible. According to Padilla and Perez, visible social stigmas are accents, race, and physical handicaps, whereas religious groups, ethnicities, and sexual orientation can be hidden, though Padilla and Perez concluded that these characteristics could be researched. These ideas provide a blue print for how individuals maneuver through societal pressures. African Americans who struggle with acceptance of their sexual orientation are oftentimes not accepted in their culture.

Ethier and Deaux (1994) conducted a study on long-term social identity with Hispanic first year college students. Ethier and Deaux postulated that new social environments require identity maintenance and change. They concluded once individuals have secured meaningful identities in new environments, they will create new supportive identities in the new social environment and will disconnect from their old identities. Ethier and Deaux concluded that participants had a strong sense of ethnic identity when

they are involved with their ethnic identity; however, once that ethnic identification is comprised because their ethnic identification may not be accepted by other group membership, the individual's self-esteem will be lowered.

Hogg (2006) described the social identity theory, stating:

Social identity theory defines groups cognitively in-terms of people's self-conception as group members. A group exists psychologically if three or more construe and evaluate themselves in terms of shared attributes that distinguish them collectively from other people. Social identity theory addresses phenomena such as prejudice, discrimination, ethnocentrism, stereotyping, intergroup conflict, conformity, normative behavior, group polarization, crowd behavior, organizational behavior, leadership, deviance, and group cohesiveness. (p. 111)

In other words, Hogg argued that social identity theory focuses on cognitive factors. In contrast, Stets and Burke (2000) postulated that SIT depends on which identity individuals allow to dominate their current situation. According to Stets and Burke (2000), individuals acquire a social identity when they share the same group perspectives, are like others, and are at one with a certain group. They strive to belong to a certain group. The individual identifies on three levels: (a) superordinate level or species, (b) intermediate level or nationality, and (c) subordinate level or regional (Stets & Burke, 2000). For example, one might simultaneously identify as human, American, and southern. Stets and Burke concluded that social identity and identity go hand in hand. Deaux (2001) defined social identity as the individual's group membership, self-

definition, and categorization. Deaux explained that the individual does not have to relate to that predictor group or interaction; however, the individual does have similar interests as that predictor category. Individuals do not need to belong to the group; however, they likely socialize with that group. According to Deaux, there are three social identity aspects: (a) cognitive, (b) emotional and motivational, and (c) behavioral. However, Deaux also explained different types of social identity: gender identity, ethnic and national identities, and sexual orientation.

Frost and Meyer (2012) postulated that people of color who identified as GLBT may not be involved with other GLBT communities because they are still struggling with connectedness to their own racial and ethnic community. Frost and Meyer (2012) defined community connectedness as having four parts: (a) belonging to a larger group; (b) relationships that benefit the individual and the group; (c) satisfying their needs; and (d) being rewarded with emotional connection. In other words, individuals seek acceptance, can feel comfortable with their identities, and may not feel the pressure of denying their identity. Frost and Meyer (2012) created an instrument that measures connectedness and GLBT community.

African Americans and Social Identity

For centuries, African Americans have experienced a multitude of challenges. In the African American community, cultural influences define an individual's identity and ethnicity. Racial-ethnic identity development may be helpful in examining the experience of double marginalization (Crawford, Allison, Zambian, & Soto, 2002). Crawford, Allison, Zambian, and Soto (2002) recognized double marginalization and

went deeper to show how marginalization affects people emotionally. For example, African American gay or bisexual men (AAGBM) have to be careful what they share with other African Americans. This constant self-monitoring makes it difficult when seeking out potential partners within and outside the African American community. This requires a substantial amount of energy and can be emotionally stressful.

As an aspect of identity development, racial and ethnic identity occurs in stages. Changes in attitudes and psychological function occur at each stage. Crawford et al. (2002) indicated that African American gay men had high self-esteem and low psychological distress. These results are pertinent to this study because African American gay men did not feel they needed to hide their identities. These participants found a balance between both identities. Past research, however, has indicated that minorities have a difficult time expressing their sexual identity especially African American youth (Szymanski & Gupta, 2009). Szymanski and Gupta (2009) analyzed relationships between African American lesbian, gay, bisexual, and questioning individuals and internalized oppressions, psychological distress, and self-esteem. A correlation between internalized racism and internalized heterosexism was not a negative predictor for self-esteem; however, internalized heterosexism with psychological distress was a positive predictor. This is important to this study because these individuals struggle with their identities. These individuals have to choose which identity they want to acknowledge and how to cope psychologically. Ford, Whetter, Hall, Kaufman, and Thrasher (2007) focused on social constructs and Black sexuality. African American men who have sex with other men may not fit the stereotypes and perceptions of

Blackness and homosexuality (Ford, Whetter, Hall, Kaufman, & Thrasher, 2007). These cognitive, psychological, and social factors of social identity can affect an individual.

Factors that Impact Social Identity

Researchers have investigated factors that impact individuals' social identity. For instance, Eldridge, Mack, and Swank (2006) investigated attitudes toward homosexuality in rural communities. Their results indicated that their participants did not feel comfortable being around gay people in different social settings. However, some participants felt comfortable in an environment that was predominately heterosexual. Personal relationships in various social settings influence how comfortable those individuals are with homosexuality. Therefore, it is possible that those participants could understand the struggle of how other people treat and react to other people. Herek and Glunt's study is an example of how individuals' attitudes can influence people. Herek and Glunt (1993) concluded the degree of interpersonal contact, along with cultural influences, could determine how heterosexual men and heterosexual women react toward gay men. Herek and Glunt (1993), however, acknowledged their failure to measure participants' sexual orientation.

Marsiglio (1993) investigated heterosexual adolescents' attitudes toward sexual orientation. The research was a reevaluation of the 1988 data that were used for the National Survey. Marsiglio (1993) concluded there are no data supporting the theory that being religious equates to greater homophobic attitudes. On the other hand, Herek and Glunt (1993) concluded that negative attitudes toward gay and lesbian populations were a

result of social factors, such as being highly religious and politically conservative.

Heterosexuals who were more accepting of homosexuals were highly educated, female, younger, and held liberal political views (Herek & Glunt, 1993). They also found that personal contact with someone who is gay or lesbian was a “powerful predictor” and a determining factor of heterosexuals’ positive attitudes toward gay men and lesbians (Herek & Glunt 1993, p. 242). These research studies reflect various populations and cultures. These factors influence individuals’ attitudes.

People explore who they are during adolescence. Adolescents’ ethnic and sexual identities can be in conflict because of society’s view of them. For instance, Chung and Katyama (1998) postulated that during the adolescent stage, individuals develop and belong to various groups and identities such as ethnic and sexual identities that will reflect their adult identity (Jamil, Harper, & Fernandez, 2009, p. 203). Jamil, Harper, and Fernandez (2009) focused on sexual identity and ethnic identity in African American and Latino youth. Jamil, Harper, and Fernandez claimed, “no published empirical research has examined the specific processes of both ethnic and sexual identity development among gay youth of color” (p.204). Jamil et al. (2009) concluded that four major ideas play a role in the participant’s sexual and ethnic identity: Sexual and ethnic identity allow individuals to experience societal oppression, recognize their communities, affect their awareness of who they are, and develop their identities.

Jamil et al. (2009) determined that the sources of sexual and ethnic oppression were different. Family and friends influenced ethnic identity. The Internet community, programs, and peers influenced sexual identity. Jamil et al. (2009) determined that the

sources of sexual oppression and ethnic oppression were different. Ethnic oppression reflected racism. Sexual oppression emanated from heterosexuals of any ethnicity, including the participant's ethnic community. Ethnic identity is affected by living in neighborhoods with which participants could identify or connect with their ethnic identity. Sexual identity is influenced by learning how to monitor one's sexual identity within society.

Jamil et al. (2009) concluded that ethnic and sexual identities develop during adolescence. According to the researchers, some individuals who had same sex relationships did not identify themselves or their relationships as gay or bisexual. Wilson (2008) discussed African American men's ethnicity, sexual behavior, and masculinity (ESM). Wilson postulated African American men engaging in bisexual activities might have trouble among their peers who do not accept homosexuality. They also have difficulties with their sexual identity that is not heterosexual. Wilson postulated that African American men who identified themselves as gay will minimize their African American identity in order to decrease the GLBT community stigma. Therefore, these African American men will use certain techniques to reduce stigma in their community. For instance, an openly gay African American man could maximize or minimize his racial identity in relation to his sexual orientation (Wilson, 2008).

Black Identity

Black identity is not synonymous with African American; instead, Black identity is made up of several different populations. For instance, Afro-Brazilian, Haitian, and Latin Blacks all fit within the category of Black identity. According to Cross (1978),

there are five stages of Black identity: precounter, encounter, immersion-emersion, internationalization, and internationalization-commitment. *Precounter* refers to an individual's belief that the dominant culture's claims of his or her identity being negative are true (Cross, 1978). Next, *encounter* refers to an individual's experience of racism because of how he or she is viewed by the dominant race (Cross, 1978). During *immersion-emersion* the individual engages with his or her culture, for example social organizations, history, values, and traditions (Cross, 1978). *Internalization* refers to an individual developing a sense of identity and feeling comfortable about his or her identity. He or she is able to resolve conflicts that society has attributed to him or her (Cross, 1978). *Internalization-commitment* refers to an individual transformation from their personal identity to expressing their Black identity by taking a stand about their racial concerns in their community (Cross, 1978). These stages of Black identity are a continuous part of African Americans' experiences.

Certain stages of Black identity are continuous challenges on a daily basis, specifically encounter and internalization. The individual's Black identity will vacillate between these two stages. For instance, Sullivan and Winbush (2010) studied Black identity and Black legislators and their voting behaviors. Their results indicated participants' had a strong sense of their Black identities, however, when it came to voting, their other identities emerged. They were able to be selective in which identity emerged and which one did not in certain situations. Icard (1986) concluded that African Americans had to develop techniques in order to deal with racism with the support of the Black community and family. African Americans are able to use their defense

mechanisms when it comes to societal situations. For instance, Harper and Quaye (2007) conducted a qualitative study on Black identity with African American men who attended predominately White academic institutions and held leadership positions in student organizations. Their results indicated that African American men held student positions with their own culture group or another minority group. However, African American men in their study were passionate about promoting a positive image of the African American community and creating opportunities for other African Americans.

Black identity is embedded in the African American community, but it is difficult to define and conceptualize. Considering African American history, Black identity has evolved. During slavery, African Americans were called Negro. During the civil rights movement, African Americans were called Negro or colored. In the present time, African Americans are called Blacks or African Americans.

African American Acculturation Concepts

Landrine and Klonoff (1996, 1994, 2000) dissected African American traditional cultures and belief. According to Landrine and Klonoff (1996), it is important for individuals to understand their cultures. Acculturation can be measured in several ways. Landrine and Klonoff (1996) took on the challenge of creating an African American acculturation scale. According to the authors, no African American acculturation scale previously existed because earlier researchers believed African American history had little to no culture due to slavery, and in the field of psychology, African Americans are a race, not an ethnic or culture group. Researchers obtained seven participants from different walks of life and geological areas. These participants were asked to create a list

of what constitutes African American culture (Landrine & Klonoff, 1996). In 1994, Landrine and Klonoff created the African American Acculturation Scale (AAAS). Researchers described eight concepts of African American culture. The first concept is traditional African American family structures and practices. This dimension describes traditional family practice in the African American culture. The second dimension is traditional African American religious beliefs and practices. This dimension describes spirituality in the African American culture and involvement in church. The third dimension is traditional African American socialization. This factor describes African American childhood experiences. The fourth dimension is preparation and consumption of traditional foods. The fifth dimension is preference for African American things. This dimension describes preferences for African American culture, for example African Americans having preferences for their own culture such music, products, and magazines. The sixth dimension is the interracial attitudes/cultural mistrust. This dimension describes African American attitudes towards European Americans and European American institutions. The seventh dimension is superstitions. This dimension describes African Americans' traditional superstitions and beliefs taught by previous generations. The last dimension is the traditional African American health beliefs and practices. This dimension describes African American spirituality that was passed on from African roots and African Americans' involvement in church. Three relationships exist within these concepts. Those relationships are family practice, health beliefs and practices, and socialization.

Some of the research conducted using the AAAS includes studies on cigarette smoking, health issues such as stress, coping, eating disorders, AIDS knowledge, and neuropsychological tests (Klonoff & Landrine, 2000). However, this scale has not been used in studies that focus on sexual orientation. Klonoff and Landrine (2000) revisited the African American Acculturation Scale. Each dimension will be described below.

Religious Beliefs and Practices

Religious beliefs and practices are important to the African American community. Historically, Black churches were the grassroots of the civil rights movement. They are staple in the African American community promoting equal rights for all and decreasing oppression. However, some black churches have a double standard when it comes to the African Americans in GLBT community. Some churches continue to oppress certain members in their congregation due to their sexual orientation (Griffin, 2000).

Christian beliefs. Eighty-eight percent of Americans believe that there is a God (Pew Research, 2009). Seventy-eight percent of African Americans are Protestants (Pew Research, 2009). Twelve percent are not affiliated with a religion (Pew Research, 2009). Christians believe that the Bible is the word of God (Pew Research, 2006). In addition, some Christians believe in God as the father; good and evil; heaven and earth; demons and angels; the Holy Trinity (BBC, 2009). Prayer is a powerful tool for some Christians to talk to God. Klonoff and Landrine (1996) examined African Americans' beliefs in the power of prayer to cure diseases, health related behaviors, and socioeconomics. Researchers found that 62% of African American had a strong believe system in prayer. Furthermore, it is a strong indication that prayer is a part of the African American culture.

Religious involvement. In 2009, 53% of African Americans attended church service once a week (Herek, 2002;Pew Research, 2009). In addition, African American women in the church have a high religious commitment. Eight-four percent believe religion is important to them and 59% attend religious services at least once a week (Pew Research, 2009). In addition, African Americans are more likely to attend church (Gallup, 2010). Miller (2007) investigated the religious involvement in Black churches of African American gay men diagnosed with acquired immunodeficiency syndrome (AIDS). According to Miller (2007), African American gay men engaged with church believed that homosexuality was not condemned in the Bible, and some pastors will accept congregants who are gay.

Preference for Things African American

In the past, products specifically designed for African Americans were rare. Preference for things African American describes African Americans' preferences such as magazines, music, and cultural products associated with the African American community. African American consumers are influential in society. According to Nielson Report (2013), \$75 billion were spent on television, Internet, magazines, and radio advertising. However, \$2.24 billion were targeted at African American audiences (Nielson Report, 2013). Thirty-seven percent of African Americans watched television that included diverse programming. However, there is a struggle to capture black businesses, media, and agencies of the African American consumers (Nielsen Report, 2013). The African American community has grown 64% since 2001 (Nielsen Report, 2013). African Americans have a tremulous impact on pop culture (Nielson Report,

2013). African American consumers spend 9 times more on hair and grooming products (Nielson Report, 2013).

Bush, Smith, and Martin (1999) conducted a study on African Americans and their influence and attitudes on advertising. Researchers found that African American college students spent more time watching television and had a positive attitude about advertising. Researchers believed that African Americans and women should be targeted more because of their ability to spread information, open minds to advertising, and their expertise in the marketplace. However, Smith (2013) had a different outlook on media such as television. Smith investigated college students' portrayal on a predominantly African American cable station, Black Entertainment Television (BET), specifically on a show called *College Hill*. Smith asserted that African American women were portrayed in a negative light compared to the African American men on the show. In addition, African American men were darker than their counterparts (Smith, 2013). In another study, Rogoonan, Shrestha, and Smith (2005) investigated African Americans consumer behavior and advertisements with predominantly African American media such as *Black Enterprise*, *Ebony*, and *Essence* magazines. Researchers concluded that African American models in advertising and ads are effective because they reflect the African American racial identity, especially, in the top five categories in which African Americans spend the most money. In addition, African Americans have trust with certain advertising, ads, and media compared to other media outlets (Smith, 2005).

White Privilege

One of the major challenges that African Americans face daily is White privilege. Wildman and Davis (2008) postulated two views of privilege. The first is the dominant social norm benefiting the privileged group. The second is that the privileged group can depend on their privilege because they can avoid oppression. According to McIntosh (1988), White privilege includes the advantages that White people have, while other people, such as African Americans, are oppressed. She described her ease of living in today's society, for instance not being able to worry if someone is following her around in stores and how easily she can buy products such as cards, toys, picture books, and children magazines. African Americans, on the other hand, often struggle trying to find certain products such as greeting cards with African Americans on them, positive media images, and books. Some African Americans may not have the resources to have a computer in their home. Instead, they might have to go to community spaces such as a local library to use a computer.

Historically Black Colleges and Universities (HBCU) were created to give African Americans the opportunity to receive an education despite discrimination. Peterson and Hamrick (2009) conducted a study of White students who attended HBCUs and their White racial consciousness. In other words, White privilege was investigated in a predominately African American environment. Peterson and Hamrick (2009) identified three themes: (a) classroom environment, (b) social environment, and (c) greater awareness of race and privilege were factors. Participants admitted it was difficult to navigate their classrooms. Some participants felt uncomfortable and challenged in the

classroom due to certain topics discussed in the classroom. The researchers coined the term *hypervisibility*. Second, some participants described their social environment as compartmentalized, whereas some participants who socialized at the university and attended parties described their experience as different but comfortable. Lastly, greater awareness of race and privilege had underlying factors. For instance, participants experienced what African Americans experience interpersonally and socially. Some of these interpersonal and social factors were discrimination, stereotypes, and a sense of self-worth (Peterson & Hamrick, 2009). Interracial attitudes will be discussed in the next section.

Interracial Attitudes

Interracial attitudes are a concept of African Americans' attitudes about racism in the European American community and African Americans' distrust of European Americans. For instance, Freimuth, Quinn, Thomas, Cole, Zook, and Duncan (2001) conducted a study that focused on African Americans and their mistrust of the medical community. Researchers argued that African Americans continue to have cultural mistrust of European American people (Whaley, 2001). Townes, Chavez-Korell, and Cunningham (2009) conducted a study on Black racial identity attitudes, cultural mistrust, help seeking, and preference for Black counselors. Black participants in their study preferred a Black counselor compared to a White counselor because of the cultural mistrust, racial identity, and help seeking attitudes. In addition, researchers found three major predictors for a preference of Black counselors: a high cultural mistrust, low

assimilation attitudes, and high Afrocentric attitudes. Another example of interracial attitudes towards Europeans is the Tuskegee Experiment.

Historically, many African Americans have a sense of mistrust of European Americans. For instance, the Tuskegee syphilis study is an example of African Americans' mistrust in European American medical providers. In 1932, 600 African American men participated in the Tuskegee study (Tuskegee University, 2013). African American men were under the impression that they were getting free medical services. Three hundred and ninety-nine had syphilis and 201 did not. For several years, medical doctors injected syphilis into African American men (Tuskegee University, 2013).

Garber, Hanusa, Switzer, Mellows, and Arnold (2007) conducted a study of the willingness of African Americans to participate in an HIV treatment trial and designed a questionnaire of African Americans' attitudes about HIV and the treatment. Two hundred African Americans who were HIV positive participated in this study. Garber et al. (2007) explained that 57% of African Americans in their study were asked to participate in the HIV treatment trials and 87% accepted participation. In regards to mistrust or distrust, there was no relationship between the participants and researchers. In fact, participants were willing to participate in the future research. This research study could be indication that African Americans are starting to gain trust. Family practices will be discussed in the next section.

Family Practices

African American family practice is described as traditional African American family practices and values (Klonoff & Landrine, 1996; Landrine & Klonoff, 1994).

Traditional African American family practice and values include respecting elders, believing that family comes first, co-sleeping, and child keeping (Klonoff & Landrine, 1994). These traditional practices and values were introduced during slavery (Boyd-Franklin, 1995), and include a sense of looking after each others' children. African Americans have extended families such as aunts, uncles, grandparents, and other family members (Boyd-Franklin, 1995; Landrine & Klonoff, 1994; Landrine & Klonoff, 1996).

Informal Adoption. Information adoption is a part of the African American cultural compare to social class (Landerine & Klonoff, 1996). Sixty-four percent of African American were adopted informally and lived in Black neighborhoods (Landrine & Klonoff, 1996). Traditional African American families often have extended family assisting in the child rearing. At times, this extended family could include neighbors, church members, and friends (Boyd-Franklin, 1995). Waiter (2009) concluded that African American families are constituted of many generations, providing strength for each generation. For instance, Black families tend to be religious, the roles of family members are important but flexible, their connections to kin are often strong, and work and achievement are highly valued (Hill, 1999).

According to Boyd-Franklin (1995), informal adoption is a part of the African American community. Informal adoption was established during slavery due to separation of families (Boyd-Franklin, 1995). An example of informal adoption is extended family members and a created community.

Cosleeping. Cosleeping occurs not only the African American culture, but in other cultures as well (Lozolf, Wolf, & Davis, 1984). Sixty percent of African

Americans had experience cosleeping in Black neighborhoods (Landrine & Klonoff, 1996). Landrine and Klonoff (1996) explained that cosleeping does not reflect socioeconomic level; however it does reflect the African American culture. Lozolf, Wolk, and Davis (1984) found that 70% of Black participants in their study practiced cosleeping compared to 30% Whites. In addition, cosleeping helped parents to have a bedtime routine, body contact, and parent involvement. The next dimension, health beliefs and practices, will be discussed in the next section.

Health Beliefs and Practices

Traditional health practices. Health beliefs and practices are traditional practices that originated in West Africa and evolved from the time of slavery until now (Landrine & Klonoff, 1996; Mbiti, 1975). One characteristic is the belief that minor illnesses result from natural causes, which in turn need a natural cure, while major illnesses are caused by something else that is supernatural, requiring a supernatural cure (Landrine & Klonoff, 1994, 1996; Mbiti, 1975; Welch, 2003). The common practices for these illnesses are herbs, religious rituals, and healers. The African American community continues to use health practices of drinking tea and saying prayers. However, many African Americans do not take the proper steps to update their health beliefs and practices. Health disparities in the African American community are still alarming. Certain health disparities have more of an impact on the African American community than others, including HIV/AIDS, diabetes, and obesity (Welch, 2003).

HIV/AIDS. A good example of African American health disparities would be the HIV/AIDS epidemic. In 2006, U.S. Centers for Disease Control (CDC) investigators

documented 56,300 new cases of HIV infection (CDC, 2008), a 40% increase from the previous year; African Americans made up 83.7% of new cases (CDC, 2008). According to the CDC, in 2006, African Americans were seven times more likely to be infected than European Americans or Hispanic Americans. European Americans constituted 35% of individuals with HIV. Other ethnicities and races constituted 1 to 2 % (CDC, 2008).

African Americans are confronted with substantial barriers to health care compared to other ethnic or racial groups (Henry Kaiser Foundation [HKF], 2006). In 2002, HIV was the third leading cause of death among African Americans (HKF, 2006). The HKF (2006) study indicated African Americans constituted 55% of HIV-related deaths and 40% of AIDS cases in 2002, although African Americans made up 13% of the U.S. population. African American men who had sex with other men are the most infected population (HKF, 2006). In 2002, African American women aged 25-34 were in the most cases of HIV infection compared to women of other ethnic backgrounds (HKF, 2006).

Research in 2004 indicated 46% of African American men who have sex with men were infected with HIV, compared to 21% of all European Americans and 17% of European American men who have sex with men (HKF, 2006). A majority (67%) of African Americans are likely not to report to lack of an HIV test, but 21% consider HIV testing to be part of their routine medical examinations (HKF, 2006). However, Klonoff and Landrine (1999) found that some African Americans believed HIV/AIDS is a government conspiracy against African Americans. According to researchers, there has not been any empirical evidence of a government conspiracy, but other information

obtained from health workers and the Southern Christian Leadership Conference (SCLC) surveys indicated that many African Americans feel this way about the government conspiracy. Klonoff and Landrine used the African American Acculturation Scale-Revised and Schedule of Racist Events. They found that 27% of African Americans believe that there is government conspiracy against African Americans; however 23% were undecided. They also found that age and income was not a predictor of conspiracy belief. However, they did find that traditional, educated black men who experienced a significant amount of racial discrimination believed that there is HIV/AIDS conspiracy.

Diabetes. Diabetes in the African American community is more common than in other ethnic cultures. Some African Americans have traditional ways of preparing their food, which can lead to higher rates of diabetes. To shed light on this issue of African Americans and diabetes, Polzer and Miles (2007) postulated that African American diabetes intervention should include African American cultural beliefs and values. For instance, Polzer and Milles (2007) focused on African Americans' diabetes, self-management, and spirituality. Their results indicated that African Americans' spirituality was a factor in self-managing their diabetes (Polzer & Milles, 2007). African Americans are disproportionately diagnosed with type 2 diabetes in the United States (Marshall, 2005; Welch, 2003). According to National Diabetes Education Program (2011), type 2 diabetes accounts for 90 to 95% of adults diagnosed with diabetes. Four point five million African Americans who are 20 years and older were diagnosed and undiagnosed with diabetes (National Diabetes Education Program, 2011). Two of the major challenges that African Americans face with diabetes are obesity and health management

(Welch, 2003). African Americans traditionally passed down their health beliefs and diets from generation to generation (Kulkarni, 2004). The next dimension is cultural superstitions. This dimension will be discussed in the next section.

Cultural Superstitions

Superstitious beliefs. Landrine and Klonoff (1996) wanted to capture African Americans' cultural superstitions. African Americans continue to pass down their cultural superstitions from generation to generation (Landrine & Klonoff, 1994; Landrine & Klonoff, 1996). Cultural superstitions in the African American community are described as magical, voodoo, old, and superstitious beliefs (Landrine & Klonoff, 1994, 1996). Some African Americans practice their cultural superstitions. For example, some African Americans believe cooking black eyed peas will bring them luck and cooking collard greens will bring them money (Samuels, 2008). Another superstition is watch night service. Watch night service occurs when individuals bring in the New Year at church. The service often includes a man who is tall, dark, and handsome carrying an evergreen as he walks through the front door. This person sets the tone for the New Year (Smith, 2008).

Voodoo. The history of voodoo came from the combination of African religion and Catholicism (Wilkie, 1995). African slaves brought over their traditions, way of life, religions, and languages including the practice of voodoo (Wilkie, 1995). Voodoo is most commonly practiced in the South particularly in the state of Louisiana (Wilkie, 1995).

Racial Segregation

Childhood experiences. Racial segregation refers to African American childhood experiences. For instance, African American childhood games, being involved with their church, and association with their African American community. In the African American community childhood games were homemade (Miller, 2008). Some of the African Americans childhood experiences are playing cards and jumping double-dutch (Landrine & Klonoff, 1994). Also, storytelling amongst adults to children were common (Miller, 2008).

Community involvement. In the African American community, there is a connection between Black churches and serving their community (Mattis, Jagar, Hatcher, Lawhorn, Murphy, & Murray, 2000). For instance, some African American parents had their child sing in their church choir (Landrine & Klonoff, 1994). For African Americans, establishing a sense of family, spirituality, emotional support, and community outreach are important factors for them (Chaney, 2008). In the next section, family values will be discussed.

Family Values

In the African American community establishing kinship bonds, strong religious background, and respecting one's elders are important (Adopt Us Kids, n.d; Hill, 1999; Hines & Boyd-Franklin, 1996). Kinships bonds are categorized as extended family. In other words, it takes a village to raise a child. Establishing a strong religious background is also important. For instance, Holland (2014) conducted a study on African American college students who attend a public high school and what influenced their college

endeavors. In addition, religion, spirituality, and places of worship were examined. Holland's results indicated the participants had support from their church members. The participants describe how their religion and spirituality helped them through their college endeavors. In other words, what their family, friends, and church members instilled in them about their religion and spirituality carried into the academic life.

African Americans' Acculturation and Attitudes toward Sexual Orientation

In this section, age, religion and spirituality, and gender are examined. Sullivan (2003) examined three components, cultural, religious, and sociological, of homophobia and the acceptance of homosexuality. Sullivan found that people are accepting of homosexuality. However, people who lived in certain regions, such as the Southern and Mid-South regions, are less tolerant of homosexuality, but other regions such as the Atlantic and Pacific are more tolerant of homosexuality. Sexual minorities have a more difficult challenge in terms of acceptance. Hill (2013) examined homophobia in the Black community, focusing on cultural aspects such as racism, sexism, class, and religious practices. Hill believed that homophobia not only comes from blacks that are heterosexuals but also from blacks that are GLBT. Age play an important part in the African American culture and the acceptance of sexual orientation.

Age

In the African American community there is belief system of respecting one's elders (Landrine & Klonoff, 1994). However, some GLBT individuals may not have the same respect because of their sexual identity. Past research has indicated age influences negative attitudes and acceptance of homosexuality (Lewis, 2003). Some African

American gays and lesbians associated themselves more with the gay culture, while keeping a fine line between their African Americans community and a larger gay community (Martinez & Sullivan, 1998). On the other hand, according to Pew Research (2013), individuals who are younger and GLBT were more likely to disclose their sexual orientation compared to older individuals who are GLBT. Gates and Newport (2012) had the same results in their poll. Younger GLBT people are three times more likely to identify as GLBT compared to individuals 65 years and older.

Religion and spirituality. Coleman (2003) examined the relationships between African American spirituality, sexual orientation, and the effect of concealing one's sexual identity from one's ethnic community. Other outside factors will not allow individuals to reach their full potential because of the conflict between individual sexual identity and acceptance of the African American community. Crisp, Priest, and Togerson (1998) conducted a quantitative and qualitative study of four African American gay men. The results indicated that participants struggled with finding a balance between their ethnicity, sexual orientation, and religion. However, participants acknowledged that religion and spirituality are important in their lives. African American women were more accepting of participants' sexual orientation. These results are important to this study because African American men are still being oppressed. They continue to have to choose to expose their sexual orientation. Also, organized religion can make a difference. Less traditional practices are more accepting of sexual orientation (Crisp, Priest, & Togerson, 1998).

Cutts and Parks (2009) studied religious involvement among African American gay men and found different attitudes. Cutts and Parks investigated public and private religious involvement. They found that participants did not feel their sexual orientation or race affected their overall identity. This research may be an indication that the times are changing for African American gay men. More and more African American men who self-identify as gay do not feel discriminated against concerning their race and sexual orientation identity. They reported receiving positive messages that the church supports different races and sexual orientations.

Negy and Eisenman (2005) found contradictory results among African Americans who immerse socially into their culture and community. There was an increase of homophobia compared to Whites. The more African Americans committed to religious faith, the more likely they would respond negatively toward the LGB community. The more African Americans attend church the more negative attitudes they have towards LGB. Individuals' perceptions, along with cultural beliefs regarding sexual orientation, had an impact the African American community.

Gender. Gender plays a role in the acceptance of African Americans in the community. Traditionally, in the African American community, men are the providers and women are the caregivers (Boyd-Hines, 1996; Wade, 1996). Researchers believed gender differences are due to the social construction of gender. Men who are heterosexual are more likely to stress traditional gender roles compared to women (Guittar & Pal, 2014). In addition, women are becoming less traditional because of their opportunities in society (Guittar & Pal, 2014). According to Gallup (2012), 3.4% of

adults in the United State identified as GLBT. In addition, women are more identified as GLBT (Gallup, 2012). Furthermore, GLBT more African American women are raising children compared to their European counterparts (Gallup, 2012). Guittar and Pal (2014) examined gender and age and gender and religiosity regarding homosexuality.

According to researchers, gender roles were predictors of negative attitudes of homosexuality (Guittar & Pal, 2014; Kerns & Fine, 1994; Whitley, & Ægisdóttir, 2000; Basow, & Johnson, 2000; Herek, 1988). In regards to age, the older the individual the more negative their attitudes towards homosexuality compared to younger individuals. In addition, women who had a high religiosity were more likely to have traditional gender roles compared to women who had a low religiosity.

Summary and Conclusion

In conclusion, in spite of changes in federal and state laws and the growing acceptance of a person with alternative lifestyles, discrimination towards persons with alternative sexual preferences or lifestyles persists. Discrimination has been observed in the mental health professions, (American Psychiatry Association, 2012; Drescher, 2010, May & Cochran, 2001; Stoller, 1973) education, (Grant et al 2014; Stroup, Glass & Cohen, 2014), and civil rights organizations (American Civil Liberation Union, n.d.; Herek ,n.d; Pope, 2011; Stonewall, n.d; Wythe, 2011). More recent studies suggest that socio-demographic variables like religious beliefs, age, gender, and education influence the extent to which alterative sexual preferences are accepted (Baswow & Johnson, 2000; Coleman, 2003; Crisp, Priest & Togerson, 1998; Cutts & Parks, 2009; Guittar & Pal,

2014; Herek, 1988; Hill, 2013; Kerns & Fine, 1994; Miller, 2007; Pew Research, 2013; Sullivan, 2003; Whitley & Ægisdóttir, 2000).

Social identity theory suggest that part of one's identity is derived from membership in social groups, and that group membership allows the individual to *sort* or categorize others into preferred and non-preferred attitudes (Padilla & Perez, 2003; Taifel & Turner, 1986; Taifel & Turner, 1979). Thus, positive or negative attitude towards the GLBT are influenced not just by socio-demographics, but the preferences and attitudes of the social or cultural groups to which one belongs (Deaux, 2000; Frost & Meyer, 2012; Stets & Burke, 2000). There is some research to suggest that the African American community has unique cultural and ethnic qualities that may explain differences in attitudes towards members of the GLBT community (Battle & Lemelle, 2002; Coleman, 2003; Harkey, Stanburg, Nelson, Espinosa, 2014; Herek et al. 2009; Loianco, 1989; Reed & Valent, 2012; Sullivan, 2003; Vincent, et al. 2009). Also, the social identity illustrated how African Americans navigate through their racial and sexual identities (Szymanski & Gupta, 2009). In addition, some research suggests that certain social settings, stigmas and misconceptions can influence individuals' interactions with individuals who are GLBT (Herek & Glunt, 1993). However, more research is needed in order to understand the extent to which African American cultural attitudes influence attitudes towards sexual orientation. Furthermore, the historical standpoint of sexual orientation from a psychological, generational, and African American perspectives are important aspect of further understand sexual prejudices. It is evident that individuals who identified as GLBT can experience discrimination in their own community (Battle & Lemelle, 2002;

Herek, Cogan, & Gillis, 2009; Vincent et al. , 2009). The consequences of discrimination are sexual orientation stigma and mental health problems, as well as complications with HIV treatment and prevention (Bond et al, 2009; Herek et al, 2009; Jarama, Belgrave, Bradford, Young & Hannold, 2007; Loiacano, 1989; Mays & Cochran, 2001).

The eight concepts of African American acculturation symbolized African Americans values, beliefs, experiences, and practices in their culture (Landine & Klonoff, 1994, 1996, 2000). Furthermore, age, religion and spirituality and gender were components of negative attitudes towards GLBT (Cutts & Parks, 2009; Gates & Newport, 2012; Guittar & Pal, 2014; Lewis, 2003; Sullivan, 2003). Social change agents can be influential in reducing sexual prejudices in the African American community.

In Chapter 3, the methodology for examining the extent to which demographic variables and African American cultural attitudes predict attitudes towards sexual orientation in African American Adults.

Chapter 3: Research Methods

The purpose of the investigation was to examine the extent to which demographic variables and African American cultural attitudes predict attitudes towards sexual orientation in African American Adults. This chapter presents the methodology, which includes a description of the population, sample, demographic characteristics, consent form, ethical procedures, and instrumentation.

Research Design and Rationale

A quantitative survey research design was utilized. This was a suitable design for this study, as it allowed the researcher to examine the predictive relationships between several independent variables and a dependent variable (Babbie, 2012). Previous research in this field has consistently used cross-sectional survey methodology to investigate these constructs and conduct multivariate analyses in order to test the predictive influences of one variables or variables on a dependent variable (Bostwick, & Everett, 2014; Creswell, 2002; Mustanski et al., 2006; Williams, 2007). With regards to the sampling frame, social media such as Facebook is becoming more prevalent in survey research methods where random sampling is not possible. Recent studies have described the demographics of Facebook users, and suggest that its user may be more comfortable answering sensitive questions about their cultural attitudes and their sexual orientation (Christofides, Muise, & Desmarais, 2009; Gross & Acuisti, 2005; Zhao, Grasmuck, Martin, 2008). It is recognized that the resulting sample is limited in generalizability but efforts will be made to compare the sample demographics with the demographics of similar studies.

This study was conducted using an online survey tool. There are several advantages to online survey design (Bourque & Fielder, 2003; Couper, 2000; Evans & Mathur, 2005; Sax, Gilmartin, & Bryan, 2003). Online surveys are less expensive and more efficient to conduct than printed surveys. Participants can complete the questionnaire on their own time, and may feel more comfortable disclosing sensitive information like attitudes towards sexual orientation. The participants may be more willing to give truthful answers (Bourque & Fielder, 2003; Fricker & Schohlau, 2002). Researchers can collect ample data and have a quick turnaround time, making it one of the most cost-efficient methods of data collection (Couper, 2000; Evans & Mathur, 2005; Gjestland, 1996).

There are also several disadvantages to online survey research. Participants can mistakenly identify the email as spam and not see it or delete it. (Evans & Mathur, 2005; Fricker & Schohlau, 2002). Participants who are not familiar with the Internet and related technology may have technical difficulties, or may they feel that their data is not secure. These problems can contribute to a lowered response rate (Bourque & Fielder, 2003; Evans & Mathur, 2005). Another disadvantage is the need to depend on the anonymous person to correctly fill in the complete survey; participants may make errors in data entry and/or not complete the survey (Couper, 2000; Evans & Mathur, 2005).

From a methodological perspective, the ease of collecting data from many participants is offset by threats to internal and external validity. These issues are discussed later in the chapter.

The eight subscales of the African American Acculturation Scale-Revised (Klonoff & Landrine, 2000) comprise the independent variables of interest. These subscales include: Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial Segregation, and Family Values.

Demographic variables: Gender, age, education, income, and religion.

The dependent variable is attitudes towards alternative sexual preferences, and is measured by the Attitudes toward Lesbian and Gay Men Scale (Herek, 1998; Herek & Mc Lemoire, 2011). The two subscales include: Attitudes towards Lesbians and Attitudes towards Gay Men. This is a 20 item Likert scale, ranging from 1 (“*strongly disagree*”) to 5 (“*strongly agree*”).

Research Questions and Hypotheses

Since the ATLG Scale creates two subscales, two sets of research questions are proposed for each dependent variable:

Research Question 1: Are self-reported demographic variables (gender, age, education, income, and religion) among adult African Americans significant predictors of attitudes towards gay men, as measured by the ATG-R-S5 subscale, Attitudes towards Gay Men?

*H*₀₁: Demographic variables (gender, age, education, income, and religion) will significantly predict the ATG-R-S5 subscale Attitudes towards Gay Men.

*H*₁₂: Demographic variables (gender, age, education, income, and religion) will not predict the ATG-R-S5 subscale Attitudes towards Gay Men.

Research Question 2: Is African American Acculturation (as measured by the eight subscales of the African American Acculturation Scale) among adult African Americans significant predictors of attitudes towards gay men, as measured by the ATG-R-S5 subscale, Attitudes towards Gay Men?

H₀2: The eight subscales of the African American Acculturation Scale-Revised (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial Segregation, and Family Values) will significantly predict the ATG-R-S5 subscale Attitudes towards Gay Men.

H₁2: The eight subscales of the African American Acculturation Scale-Revised (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial Segregation, and Family Values) will not predict the ATG-R-S5 subscale Attitudes towards Gay Men.

Research Question 3: Are self-reported demographic variables (gender, age, education, income, and religion) among adult African Americans significant predictors of attitudes towards gay women, as measured by the ATL-R-S5 subscale, Attitudes towards Lesbians?

H₀3: Demographic variables (gender, age, education, income, and religion) will significantly predict the ATL-R-S5 subscale Attitudes towards Lesbians.

H₁3: Demographic variables (gender, age, education, income, and religion) will not predict the ATL-R-S5 subscale Attitudes towards Lesbians.

Research Question 4: Is African American Acculturation (as measured by the eight subscales of the African American Acculturation Scale) among adult African Americans significant predictors of attitudes towards gay women, as measured by the ATL-R-S5 subscale, Attitudes towards Lesbians?

H₀4: The eight subscales of the African American Acculturation Scale-Revised (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial Segregation, and Family Values) will significantly predict the ATL-R-S5 subscale Attitudes towards Lesbians.

H₁4: The eight subscales of the African American Acculturation Scale-Revised (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial Segregation, and Family Values) will not predict the ATL-R-S5 subscale Attitudes towards Lesbians.

Methodology

Population

For this study, the target population was adult African Americans. The accessible population was African Americans aged 18 years old and older who were on Facebook and belonged to predominantly African American organizations.

Sampling and Procedures

The sampling strategy for this research was a convenience sample. The sample was recruited through Facebook. The researcher provided a post on her Facebook page

about the study which included a link to the Survey Monkey webpage which contained the Informed Consent Agreement and survey questionnaires.

While this sample was nonrandom and the probability of sampling error is unknown, the current expert opinion suggests that utilizing Facebook as a vehicle to solicit survey participants is justified because of its increasing use by more of the Internet-using U.S. population (Duggan & Smith, 2013; Kraut et al., 2004). However, the results were interpreted with caution since external validity is limited.

Participants were self-selected based on the criteria presented in the invitation. For this study, participants had to be 18 years and older, African American, and live in the United States. Any person under the age of 18 was excluded from the study. G*Power (version 3.1.7) was used to calculate sample size, based on a small effect size, and standard alpha and power ($f^2 = .10$, $\alpha = .05$, $\text{power} = .80$; = number of predictors = 12, $n = 185$). (Faul, Erdfelder, Lang, & Buchner, 2013).

Procedures for Recruitment

An invitation was posted on my Facebook page containing a link to the survey (Appendix A). Persons were able to respond anonymously to the invitation by clicking on that link, which took them to the Informed Consent Agreement (Appendix B). If the participant agreed, a button indicating, "I agree" was clicked and the individual was progressed to the survey questions. Each participant filled out a demographic questionnaire, the African American Acculturation Scale-Revised and Attitudes toward Lesbians and Gay Men Scale- 5 Short (Appendix C). Participants could exit the study at any time. After the participants were finished with the survey they clicked "done" to end

the survey. At the end of the survey, Survey Monkey stored each person's anonymous data in a password-protected .csv file. In this study, there was no follow-up of the participants by the researcher. However, participants could request results from the study by contacting the researcher. The contact information was located on the Informed Consent Agreement (Appendix B).

Instrumentation and Operationalization of Constructs

African American Acculturation Scale-Revised (AAAS-R). In 2000, Klonoff and Landrine created the African American Acculturation Scale-Revised (AAAS-R). They identified eight dimensions that are thought to capture the essential acculturation experience of African Americans. These dimensions are: 1) religious beliefs and practices, 2) preferences of things African Americans, 3) interracial attitudes, 4) family practices, 5) health beliefs and practices, 6) cultural superstitions, 7) racial segregation, and 8) family values. High scores indicate high cultural immersion and low scores indicate low cultural immersion. Each of the dimensions is discussed below regarding their conceptual importance for this study. This scale has 47 items compared to the original 74 items in the AAAS. Past participants felt as though certain items of the AAAS should be deleted, and some felt the scale was racist (Klonoff & Landrine, 2000). Five hundred and twenty African Americans (200 women and 243 men) participated in Klonoff and Landrine's research to improve their scale. In the sample, 65 had a college degree, 254 had some college, 140 graduated from high school, and 57 did not finish high school. Also, 183 had a full time employment, 81 were full time students, 73 were part time students, 63 worked part time, 13 were housewives, 68 were supported by other

means of income, and 9 were retired (Klonoff & Landrine, 2000). Certain items were dropped from the original scale. Those items included all cultural food items, health beliefs and practices (numbers 41, 44, 46, 50, 51, and 52), childhood socialization (numbers 62, 64, 66, 67, and 69), family values and practices (numbers 1, 5, and 12), and preference for things (numbers 13 and 23). The cultural superstitions and interracial attitudes items were not dropped.

The AAAS-R has good internal consistency reliability of the total score of .93 and a split half reliability of .79. Each subscale has an internal consistency ranging from .67 to .89. The new version of the AAAS-R consist of 47 items, and it was compared with the original scale of which consist of 74 items and found that there was a high reliability with the original of $r = .97$ on a $p = 005$.

In order for researchers to establish concurrent validity, 520 participants were separated into three groups based on their score on the segregated subscale. The first group that scored 4-11 on the scale was categorized as a low score group. The second group that scored 17-21 was categorized as the moderated group and the third group that scored 22-28 was the high group. Researchers used the 33rd and 66th percentiles as the cut off. A MANOVA was conducted to compare the other subscales. The results of this MANVO was Hotelling's trace=0.368, $F(14,952) = 12.52$, $p = .00005$. The scores indicated that participants that score high on the segregation subscale were more traditional and participates who scored lower were more acculturated. Participates' scores on the AAAS-R were significant to the level of segregation. For instance, African American that grew up in predominately Black neighborhoods and associated themselves

with other Black people and their cultural were more traditional in their culture compared to African Americans/Black who lived in White neighborhoods.

The next phase of establishing concurrent validity is to compare scores of Blacks with other racial groups. Klonoff and Landrine (2000) went to their sample population of 520. The scores were recalculated from the original AAAS and AAAS-R scores were compared with African Americans and other racial groups with a MANOVA (Hotelling's $\text{trace}=1.403$ $F(8,175) = 30.69, p.0005$) and ANOVA was conducted. The results concluded African American that had a high score were cultural immerge into their culture compared to the other racial groups within the eight subscales. In addition, a t test results indicated African Americans score 100 points more than any other racial groups.

The last phase was to test the level of acculturation and amount of alcohol use among Blacks. The original sample population was asked questions about their alcohol use such as, how much did they drink per week. Researchers had two groups, a group for drinkers and non drinkers. Their results indicated 38% were non drinkers, 53.3% were drinkers and 8.6% did not respond to the question. Individuals that were non drinkers were more culturally traditional compared to drinkers. Furthermore, Religious Beliefs and Practices and Family Values subscales scores were elevated with non drinkers compared to drinkers. In addition, non drinkers had higher cultural traditional health beliefs compared to drinkers. And drinkers had more cultural traditional with interracial attitudes.

Klonoff and Landrine (2000) established the discrimination validity by comparing education, income, and age. Researchers conducted a one way ANOVA of four levels of

education. For example, less than high school, $n = 50$; high school graduate, $n = 131$; some college, $n = 224$ and college graduate or higher, $n = 63$. Their results indicated that there was no significant relationship with their scores on the AAAS-R on educational level. Also, scores on the AAAS-R was not a significant to their income and social class. Participants' age had a slight significance on certain subscales such as Preference for Things African Americans, $-.13$; Interracial Attitudes $-.09$; Racial Segregation $.12$ and Family Values $.16$. However, scores did not impact the total score of the AAAS-R. Last, a gender analysis was conducted. A MANVO and an ANOVA revealed women had six out of the eight subscale scored higher on the scale compared to African American men. A t test results showed that African American women were more culturally traditional compared to African American men. Therefore, the reliability and validity of the AAAS-R is valid.

Several researchers have used the AAAS-R in other studies, including research on mental health such as, depression and stress coping skills (Landrine & Klonoff, 1996), smoking and AIDS (Klonoff & Landrine, 1997), and cognitive and neuropsychological assessments (Klonoff & Landrine, 2000). Klonoff and Landrine (2000) stated, "We encourage further studies to use our scale and extended our permission to researchers who wish to do so" (p. 225) (Appendix D). Examples of the subscales are presented below.

Religious Beliefs & Practices. This subscale has 10 items and accounted 24% of the variance in the psychometric study (Landrine & Klonoff, 2000). Examples of the

items include: “I believe in the Holy Ghost” and “The church is the heart of the Black community”.

Preference for things African American. This subscale has 9 items and accounted for 9% of the variance in the psychometric study (Klonoff & Landrine, 2000). Examples of the items includes: “Most music I listen to is by Black artists” and “When I pass a Black person (a stranger) on the street, I always say hello or nod at them” (Klonoff & Landrine, 2000).

Interracial attitudes. This subscale has 7 items and accounted for 6.5 % of the variance in the psychometric study (Klonoff & Landrine, 2000). Examples of the items include: “I don’t trust most White people” and “IQ tests were set up purposefully to discriminate against Black people” (Klonoff & Landrine, 2000).

Family practices. This subscale has 4 items and accounted for 5.6% of the variance in the psychometric study (Klonoff & Landrine, 2000). Examples of the items included: “When I was young, I shared a bed at night with my sister, brother, or some other relative” and “When I was young, my parent(s) sent me to stay with a relative (aunt, uncle, grandmother) for a few days or weeks, and then I went back home again” (Klonoff & Landrine, 2000).

Health Beliefs & Practices. This subscale has 5 items and accounted for 4% of the variance in the psychometric study (Klonoff & Landrine, 2000). Examples of the items included: “Illnesses can be classified as natural types and unnatural types” and “Some old Black women/ladies know how to cure diseases” (Klonoff & Landrine, 2000).

Cultural superstitions. This subscale has 4 items and accounted for 3.5% of the variance in the psychometric study (Klonoff & Landrine, 2000). Examples of the items included: “When the palm of your hand itches, you’ll received some money” and “I eat black-eyed peas on New Year’s Eve” (Klonoff & Landrine, 2000).

Racial segregation. This subscale has 4 items and accounted for 3.3 % of the variance in the psychometric study (Klonoff & Landrine, 2000). Examples of the items included: “I grew up in a mostly Black neighborhood” and “I currently live in a mostly Black elementary school” (Klonoff & Landrine, 2000).

Family values. This subscale has 4 items and accounted for 2.8% of the variance in the psychometric study (Klonoff & Landrine, 2000). Examples of the items included: “A child should not be allowed to call a grown woman by her first name, ‘Alice’ The child should be taught to call her ‘Miss Alice’” (Klonoff & Landrine, 2000).

Attitudes Toward Lesbians and Gay Men Scale (ATLG). The Attitudes Toward Lesbians and Gay Men Scale (ATLG) was created by Herek (1988). This questionnaire is designed measure heterosexuals’ attitudes towards lesbians and gay men (Herek, 1988; Herek, 1994; Herek & McLemore, 2011). The scale originally had 20 items (Herek, 1988; Herek, 1994; Herek & McLemore, 2011); however, it has been revised to 20 items. This scale has two subscales, 10 items measuring attitudes toward gay men and 10 items measuring attitudes toward lesbians (Herek & McLemore, 2011; see Appendix G). The results of the earlier study (Herek, 1988) indicated strong internal consistency for the total score ($\alpha = .90$) and good internal consistency for the subscales ($\alpha = .89$ and $.77$ for the ATG and ATL subscales, respectively). The

common factor emerged during this study was identified as condemnation-tolerance.

Herek (1988) termed this factor homophobia.

The current Attitudes Toward Lesbians and Gay Male Scale (ATLG) has a good internal consistency for college students ($\alpha = .85$) and for non-college students ($\alpha = .80$) (Herek, 1988). The test-retest reliability is .80. High scores on the scale were associated with religiosity; gender roles attitudes; family traditional beliefs; limited gay and lesbians relationships; and discrimination policies for sexual minorities. In addition, discriminative validity was demonstrated using samples of members in the gay and lesbian community, nonstudents who supported gay rights, and individuals who opposed gay and lesbian rights. Members of the gay and lesbian community scored highest on the scale, followed by nonstudents who publicly supported gay right measures; followed by community residents who opposed gay rights (Herek, 1983; 1987; 1988). Gil, Collins, Lucey, & Schultz (2006) found similar reliability and validity estimates. In addition, short and longer versions of the scale have established good reliability and validity; and it has been translated in other countries and languages (Herek, 1998; Herek & Mc Lomore, 2011).

The participants will chose responses from a Likert Scale with categories of “*strongly disagree, disagree somewhat, neither agree nor disagree, agree somewhat, and strongly agree*”. Herek (1994; Herek & Mc Lomore, 2011) gave doctoral- level social and behavioral scientists, students and researchers permission to use the ATLG in non-for-profit research that is consistent with the American Psychological Association Ethical Principles of Psychology (see Appendix F).

Data Analysis Plan

The latest version of Statistical Package for the Social Sciences (SPSS) 21.0 software was used to analyze the data. Preliminary analyses of the collected data were conducted (frequency distributions, descriptive statistics, and bivariate correlations to determine if the data meet the assumptions of normality for univariate and multivariate parametric analyses. Four stepwise multiple regression analyses were conducted. These allowed me to examine the predictive effect of the independent variables on the dependent variables. The strategy for the analysis was to examine the predictive effect of the demographic variables first, then the predictive effects of the AAAS-R subscales; and then test a final model to identify the variables most useful in explaining the variance in each of the dependent variables.

Threats to Validity

Internal Validity

The threats to validity are self-selection, individuals' motivation to complete the survey, and multiple entries. Self-selection means that the researcher has no control over the selection and completion of the survey. Further, the researcher did not give incentives to the participants, so some may drop out before the survey was completed, leading to missing and incomplete data. Last, participants may attempt to complete more than one survey. Survey Monkey can eliminate the participant's IP address from the study (Survey Monkey, 2013).

Construct Validity

Construct validity is the degree to which a measure reflects the construct. As described above, both measures were selected because of their strong psychometric properties. The researcher tested for internal consistency of the sub-scales to verify that the scale is consistent with published psychometrics.

External Validity

As with most survey research of this kind external validity is weak because sampling error cannot be estimated in a non-random sample. However, demographics of the sample were reported and discussed in relation to other survey samples of this kind. (Bhattacharjee, 2012).

Ethical Procedures

An application to Walden University's Institutional Review Board (IRB) was submitted (Appendix G) to make sure that the study is in compliance.

The informed consent process communicated to the participants the following important ethical guidelines to protect their interests:

1. At any time, participants can withdraw from this study.
2. There is minimal physical, psychological, and emotional risk in participating in this study. Participants may feel some distress or discomfort and can discontinue at any time. Also, participants will be provided contact information for the researcher.
3. Personal information will be kept separate from survey data so that no one person can be identified in the data file.

4. Study results will be reported in groups of no less than 5 responses.
5. All files will be password protected on the researcher's home computer.
6. Each participant will receive the researcher's contact information along with the supervisor contact information should any questions or concerns arise.
7. The Informed Consent Agreement also provided contact information to request a summary of the results.
8. There is no financial gain from participating in this study.
9. Results of this study were stored electronically for five years. After five years, the original data and associated files for this study will be destroyed.

Summary

This study used online survey research methods to collect data in order to answer the research questions. The research questions were as follows: Research question 1: Are self-reported demographic variables (gender, age, education, income, and religion) among adult African Americans significant predictors of attitudes towards gay men, as measured by the ATG-R-S5 subscale, Attitudes towards Gay Men? Research Question 2: Is African American Acculturation (as measured by the eight subscales of the African American Acculturation Scale) among adult African Americans significant predictors of attitudes towards gay men, as measured by the ATG-R-S5 subscale, Attitudes towards Gay Men? Research Question 3: Are self-reported demographic variables (gender, age, education, income, and religion) among adult African Americans significant predictors of attitudes towards gay women, as measured by the ATL-R-S5 subscale, Attitudes towards Lesbians? Research Question 4: Is African American Acculturation (as measured by the

eight subscales of the African American Acculturation Scale) among adult African Americans significant predictors of attitudes towards gay women, as measured by the ATL-R-S5 subscale, Attitudes towards Lesbians?

This chapter described how this study was executed, including the research purpose, questions, and hypotheses. This chapter addressed research and design, rationale, methodology, population, sample and procedures for recruitment, independent variables, dependent variables, data analysis plan, instrumentation, data collection, threats of validity, and ethical procedures. This quantitative survey research was beneficial to examine several independent and dependent variable (Babbie, 2012). The target population was adult African Americans, and Facebook was utilized to recruit participants in this study. Survey Monkey contained the Inform Consent agreement along with the questionnaires. The AAAS-R and ATLG-R-S5 questionnaires had a good reliability, discrimination, and internal validities. The ethical procedures were Walden University Institutional Review Board guidelines. The results of this study were analyzed by SPSS 21.0 software. In addition, the results will be published and share with other professionals in the field of psychology. In Chapter 4, the results of this study will be discussed.

Chapter 4: Results

The purpose of this research was to investigate African Americans' cultural attitudes on sexual orientation. This study was a quantitative research design. The independent variables were the eight subscales of the AAAS-R and socio-demographics (age, gender, income, education, and religion). The dependent variables were the two subscales of the ATLG. The following research questions and hypotheses were examined:

Research Question 1: Are self-reported demographic variables (age, gender, income, education, and religion) among adult African Americans significant predictors of attitudes towards gay men, as measured by the ATG-R-S5 subscale, Attitudes towards Gay Men?

H_01 : Demographic variables (age, gender, education, income, and religion) will significantly predict the ATG-R-S5 subscale Attitudes towards Gay Men.

H_12 : Demographic variables (age, gender, education, income, and religion) will not predict the ATG-R-S5 subscale Attitudes towards Gay Men.

Research Question 2: Is African American Acculturation (as measured by the eight subscales of the African American Acculturation Scale) among adult African Americans significant predictors of attitudes towards gay men, as measured by the ATG-R-S5 subscale, Attitudes towards Gay Men?

H_02 : Demographic variables (age, gender, education, income, and religion) will significantly predict the ATL-R-S5 subscale Attitudes towards Lesbians.

H₂: Demographic variables (age, gender, education, income, and religion) will not predict the ATL-R-S5 subscale Attitudes towards Lesbians.

Research Question 3: Are self-reported demographic variables (age, gender, education, income, and religion) among adult African Americans significant predictors of attitudes towards gay women, as measured by the ATL-R-S5 subscale, Attitudes towards Lesbians?

H₀₃: Demographic variables (age, gender, education, income, and religion) will significantly predict the ATL-R-S5 subscale Attitudes towards Lesbians.

H₁₃: Demographic variables (age, gender, education, income, and religion) will not predict the ATL-R-S5 subscale Attitudes towards Lesbians.

Research Question 4: Is African American Acculturation (as measured by the eight subscales of the African American Acculturation Scale) among adult African Americans significant predictors of attitudes towards gay women, as measured by the ATL-R-S5 subscale, Attitudes towards Lesbians?

H₀₄: The eight subscales of the African American Acculturation Scale-Revised (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial Segregation, and Family Values) will significantly predict the ATL-R-S5 subscale Attitudes towards Lesbians.

H₁₄: The eight subscales of the African American Acculturation Scale-Revised (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial

Segregation, and Family Values) will not predict the ATL-R subscale Attitudes towards Lesbians.

Each participant answered a socio-demographic survey (age, gender, education, income, and religion). Two surveys were distributed through this researcher's Facebook page and friends of friends of the researcher's Facebook page. The first questionnaire was the *African American Acculturation Scale Revised*. There were eight dimensions that measured African American culture (Religious Beliefs and Practices; Preferences for Things African American; Interracial Attitudes; Family Practices; Health Beliefs and Practices; Cultural Superstitions; Racial Segregation, and Family Values). The second questionnaire was the *Attitudes toward Lesbian and Gay Men Scale* short version. This scale measured attitudes towards lesbians and gay men. In this chapter, data collection, discrepancies in the data collection, descriptive statistics, statistical analyses, results, and summary of this study are discussed.

Pre-test of Survey

I created a Survey Monkey account and created my research survey using the verbatim items and responses from each of the approved measures. I was able to select on Survey Monkey one response per computer. By selecting this option, I was able to eliminate duplicate Internet Protocol (IP) responses from my study. Once, I received approval from Walden's IRB to collect my data. I pre-selected three people to give me feedback on my survey. These three individuals were not in my population criteria. The first person noticed a missed spelled word and asked for clarification on one of the statements on the ATLG. The second reviewer stated, "I was able to review that start of

the survey and it looked professional”. The third reviewer believed my survey was easy enough to work though. Once, I received their feedback I posted my link on Facebook.

Data Collection

Walden University Institutional Review Board (IRB) approved this research on December 26, 2014. From January 13 through the 21, 2015, I posted a Facebook invitation, a link on my Facebook page, and other Facebook groups to participate in this study. Each day I kept track of the total responses of my participants. These response times are shown in Table 1.

Table 1

Participants Response Times

Date	Number of Responses
January 13, 2015	14
January 14, 2015	36
January 15, 2015	29
January 16, 2015	24
January 17, 2015	18
January 18, 2015	6
January 19, 2015	15
January 20, 2015	76
January 21, 2015	11
January 22, 2015	8
January 23, 2015	3
January 24, 2015	4
January 25, 2015	2

On January 16, 2015, I applied for a change of procedure to Walden's IRB to increase the number participants in my study. Also, an email was sent to Walden's Participant Pool to request use of Walden's Participant Pool. On January 23, 2015, I received notification from Walden's IRB that my request was granted to access Walden's Participant Pool.

However, the researcher did not use Walden's Participant Pool because the targeted number for the study was obtained through social media. Also, people shared the link and emailed the research survey link to other people outside of Facebook to increase the number of participants in the study.

Results

Characteristics of the Sample

Descriptive statistics (frequency distributions and percentages) were calculated for all of the demographic variables. There were 85% of the sample was female, and the age ranged from 26 to 45 years of age (72.9%). Participants in this study identified as heterosexual (93.6%) and (84.7%) were single/never married/married/domestic relationship. Participants' income ranged from \$30,000-\$90,000 (64.8%) and identified as Christians (87.7%). Participants' education level ranged from 4 years to Masters level (72.2%). Individuals identified themselves as Black to African American (94.9%). A post hoc analysis was conducted. G*Power (version 3.1.7) was used to calculate sample size, based on a small effect size, and standard alpha and power ($f^2 = .15$, $\alpha = .05$, $\text{power} = .80$; = number of predictors = 13, $n = 131$ (Faul, Erdfelder, Lang, & Buchner, 2013). These are presented in Table 2.

Table 2

Characteristics of the Sample

Variable Name	N	Category	Frequency	Percent
Age	236	18 to 25 Years	7	3.0
		26 to 35 Years	78	33.1
		36 to 45 Years	94	39.8
		46 to 55 Years	40	16.9
		56 or More Years	17	7.2
Gender	233	Female	197	84.5
		Male	36	15.5
Sexual Orientation	235	Heterosexual	220	93.2
		Lesbians	4	1.7
		Gay	3	1.3
		Bisexual	6	2.5
		Other	2	.8
Marital Status	235	Single/Never married	112	47.5
		Married/Domestic partnership	87	36.9
		Widowed	2	.8
		Divorced	28	11.9
		Separated	6	2.5
Income	236	Less than 30,000	29	12.3
		30,000-60,000	84	35.6

(table continues)

Variable Name	N	Category	Frequency	Percent
		60,000-90,000	69	29.2
		91,000-120,000	29	12.3
		120,000 and more	25	10.6
Religious Affiliation	235	Christian	206	87.3
		Other	29	12.3
Education	234	HS/GED/Some college	23	9.8
		2 year college	16	6.8
		4 year college	74	31.4
		Master	95	40.3
		Doctoral/post doctoral	26	11.0
Ethnicity Identity		Black	126	53.4
		African American	95	40.3
		Black/Hispanic	6	2.5
		Other	6	2.5

Frequency distributions and measures of central tendency were calculated for the ATLG for Gay Men and Lesbians and the AAAS-R sub-scales. The results are presented in Tables 3 and 4, respectively. Both ATLG measures appear normally distributed (ATLG – Gay Men $M = 14.77$, $SD = 5.61$; ATLG – Lesbian $M = 14.29$, $SD = 5.39$), and Cronbach's alpha = .845 and .826, respectively, demonstrating good internal consistency.

These values are also consistent with previously published results (Herek & McLemore, 2011; Klonoff, & Landrine, 2000). Inter-item correlations ranged from .373 to .653.

Table 3

Descriptive Statistics for the ATLG

	ATLG - Gay Men	ATLG - Lesbians
Valid	223	221
Missing	13	15
Mean	14.76	14.29
Median	15.00	15.00
Mode	15.00	15.00
Std. Deviation	5.61	5.39
Skewness	0.01	0.07
Std. Error of Skewness	0.16	.016
Kurtosis	-.79	-.59
Std. Error of Kurtosis	0.32	0.33
Minimum	5.00	5.00
Maximum	25.00	25.00
Cronbach's Alpha	0.85	0.83

Table 4

Descriptive Statistics for the AAAS-R

	Relig. Prac's and Beliefs	Pref for Things AA	Interracial Attitudes	Family Practice	Health Beliefs and Practices	Culture and Super- stitutions	Racial Segre- gation	Family Values
Valid n	213	213	217	230	224	234	230	232
Missing	23	23	19	6	12	2	6	4
Mean	25.83	43.03	12.23	7.43	24.20	7.62	7.90	9.94
Median	27.00	45.00	12.00	7.00	24.00	8.00	8.00	10.00
Mode	30.00	37.00	9.00 ^a	4.00 ^a	29.00	8.00	10.00	10.00 ^a
SD	4.04	11.61	3.54	2.58	6.35	2.49	2.74	1.67
Skewness	-1.48	-0.48	0.42	0.30	-0.31	0.15	0.00	-0.79
SE Skew.	0.17	0.17	0.17	0.16	0.16	0.16	0.16	0.16
Kurtosis	2.18	-0.58	-0.64	-1.06	-0.41	-1.01	-1.33	0.25
SE Kurt.	0.33	0.33	0.33	0.32	0.32	0.32	0.32	0.32
Min.	11.00	14.00	7.00	4.00	6.00	4.00	4.00	4.00
Max.	30.00	63.00	21.00	12.00	35.00	12.00	12.00	12.00
Alpha	.795	.827	.835	.649	.672	.698	.768	.453

a. Multiple modes exist. The smallest value is shown.

The AAAS-R subscales also appear to be fairly normally distributed (Religious Beliefs and Practices $M = 57.63, SD = 11.29$; Preferences of Things African American $M = 43.04, SD = 11.62$; Interracial Attitudes $M = 24.40, SD = 9.17$; Family Practices $M = 14.52, SD = 7.34$; Health Beliefs and Practices $M = 24.21, SD = 6.36$; Cultural Superstitions $M = 15.52, SD = 6.67$; Racial Segregation $M = 16.31, SD = 7.57$; Family Values $M = 22.12, SD = 4.35$) with Cronbach's alpha ranging from .453 to .835. Four of the scales (Religious Practices and Beliefs; Preference for Things African American; Interracial Attitudes and Racial Segregation) were well within good ranges of internal consistency (.768 to .827);

three of the scales were acceptable (Family Practices; Health Beliefs and Practices; Cultural Superstitions; .649 to .698); and one scale internal consistency was well below range (Family Values: .453). The weaker scales are more likely to evidence unstable relationships with the dependent variables, and therefore these relationships will be presented with caution and discussed in Chapter 5.

Research Question 1: Are self-reported demographic variables (gender, age, education, income, and religion) among adult African Americans significant predictors of attitudes towards gay men, as measured by the ATG-R-S5 subscale, Attitudes towards Gay Men?

Prior to testing the first the first hypothesis, the categorical variable Religious Affiliation was recoded into a 2 category nominal scale, where 1 = Other affiliation and 2 = Christian. The correlations among the independent and dependent variables were examined. The results are presented in Table 5.

Table 5

Correlations of the Dependent Variable ATG-R-S5Gay Men with Demographics (n=219)

	ATLG - Gay Men	Gender	Age	Education	Income	Religious Affiliation
ATLG - Gay Men	1.000					
Gender	.003	1.000				
Age	.075	.060	1.000			
Education	-.043	-.129*	-.001	1.000		
Income	-.099	.022	.261***	.306***	1.000	
Religious Affiliation	.172**	.006	-.054	.072	.001	1.000

*p<.05; **p<.01; ***p<.001

Correlations of the dependent variable ATG-R-S5 – Gay Men and the demographic independent variables revealed that only Religious Affiliation was statistically significant ($r = .172, p < .01$). Therefore, only Religious Affiliation emerged as a significant predictor of attitudes toward gay men ($R^2 = .030, F(1, 217) = 6.598, p = .011$), suggesting that persons who identify themselves as Christian are more likely to have negative attitudes towards gay men.

Research Question 2: Is the African American Acculturation Scale-Revised (as measured by the eight subscales of the African American Acculturation Scale) among adult African Americans a significant predictor of attitudes towards gay men, as measured by the ATG-R-S5 subscale, Attitudes towards Gay Men?

Prior to testing the second hypothesis, the correlations among the independent and dependent variable were examined. The results are presented in Table 6.

Table 6

Correlations of the Dependent Variable ATG-R-S5 Gay Men with the AAAS-R (n=219)

	1	2	3	4	5	6	7	8	9
1. ATLG - Gay Men	1.000								
2. Religious Practices and Beliefs	.264	1.000							
3. Preference for Things African American	.064	.185**	1.000						
4. Interracial Attitudes	.004	.062	.508***	1.000					
5. Family Practices	-.087	-.058	.028	.104	1.000				
6. Health Beliefs and Practices	.139	.26***	.251**	.210**	.195**	1.000			
7. Culture and Superstitions	.146	.253**	.302**	.256**	.097	.362***	1.000		
8. Racial Segregation	.146	.096	.195**	.178*	.125	.327***	.194**	1.000	
9. Family Values	.032	.308***	.182**	.191**	.221**	.324***	.173*	.178*	1.000

*= $p < .05$; ** $p < .01$; *** $p < .001$

Correlations of the dependent variable ATG-R-S5 – Gay Men and the subscales of the AAAS-R revealed that four of the subscales were significantly associated with the dependent variable. Religious Beliefs and Practices ($r = .264$, $p < .001$) and Health Beliefs and Practices ($r = .259$, $p < .001$), Cultural Superstitions ($r = .362$, $p < .001$) and Racial Segregation ($r = .324$, $p < .001$) were significant independent variables correlations. Significant correlations range from .139 to .264. Correlations among the independent variables suggest no risk of multicollinearity (Tabachnick & Fidell, 2001).

The results of the step-wise regression analysis revealed that only Religious Practices and Beliefs had a strong enough relationship to emerge as a significant predictor, $R^2 = .069$, $F(1, 162) = 12.094$, $p = .001$, suggesting that participants who have stronger religious beliefs and practices are more likely to have negative attitudes towards gay men.

Research Question 3: Are self-reported demographic variables (gender, age, education, income, and religion) among adult African Americans significant predictors of attitudes towards gay women, as measured by the ATL-R-S5 subscale, Attitudes towards Lesbians?

Prior to testing the third hypothesis, the correlations among the independent and dependent variable were examined. The results are presented in Table 7.

Table 7

Correlations of the Dependent Variable ATLG-RS5-Lesbians with Demographics (n=217)

	ATLG - Lesbians	Age	Gender	Income	Education	Religious Affiliation
ATLG – Lesbians	1.000					
Age	.097	1.000				
Gender	-.040	.056	1.000			
Income	-.042	.272	.038	1.000		
Education	.013	-.008	-.090	.351	1.000	
Religious Affiliation	.178**	-.034	.038	.055	.077	1.000

*p<.05; **p<.01; ***p<.001

Correlations of the dependent variable ATLG – Lesbians and the demographic independent variables revealed that only Religious Affiliation was statistically significant ($r = .178$, $p < .01$). Strong correlations among the independent variables included income and age ($r = .272$, $p < .001$) and income and education ($r = .351$, $p < .001$). The step-wise regression analysis resulted in only Religious Affiliation emerging as a significant predictor of attitudes toward lesbians ($R^2 = .032$, $F(1, 215) = 7.057$, $p = .008$), suggesting that persons who identify themselves as Christian are more likely to have negative attitudes towards lesbians.

Research Question 4: Is African American Acculturation (as measured by the eight subscales of the African American Acculturation Scale) among adult African Americans significant predictors of attitudes towards gay women, as measured by the ATLG-R-S5 subscale, Attitudes towards Lesbians?

Prior to testing the fourth hypothesis, the correlations among the independent and dependent variables were examined. The results are presented in Table 8.

Correlations of the Dependent Variable ATL-R-S5-Lesbians with the AAAS-R (n = 164)

Table 8

	1	2	3	4	5	6	7	8	9
1. ATLG - Lesbians	1.000								
2. Religious Beliefs and Practices	.373***	1.000							
3. Preference for Things African American	.081	.183*	1.000						
4. Interracial Attitudes	.025	.059	.487***	1.000					
5. Family Practices	-.076	-.062	.009	.059**	1.000				
6. Health Beliefs and Practices	.168*	.259**	.266***	.194*	.183*	1.000			
7. Culture and Superstitions	.063	.249**	.301***	.224**	.097	.358***	1.000		
8. Racial Segregation	.063	.088	.198**	.203*	.136**	.350***	.156	1.000	
9. Family Values	.049	.300***	.161**	.182**	.213**	.302***	.141*	.176**	1.000

*p<.05; **p<.01; ***p<.001

Correlations of the dependent variable ATL-R-S5 – Lesbians and the subscales of the AAAS-R revealed that two of the subscales were significantly associated with the dependent variable. Religious Beliefs and Practices ($r = .373$, $p < .001$) and Health Beliefs and Practices ($r = .266$, $p < .001$) were significant independent variable correlations. Significant correlations range from .025 to .487. Correlations among the independent variables suggest no risk of multicollinearity (Tabachnick & Fidell, 2001).

The results of the step-wise regression analysis revealed that only Religious Beliefs and Practices had a strong enough relationship to emerge as a significant

predictor, $R^2 = .139$, $F(1, 162) = 26.173$, $p < .001$, suggesting that participants who have stronger religious beliefs and practices are more likely to have negative attitudes towards lesbians.

Summary

Four research questions were investigated in this study in order to examine the influences of socio-demographics in adult African Americans cultural attitudes on sexual orientation. A total of 256 persons replied to the survey link, 20 of those were not used leaving a total sample size of 236. Eighty-five percent of the participants in this study were female. The participant's ages ranged from 26-45 years old. Ninety-four percent identified as African American or Black. Six percent identified as Black/Hispanic or other. Most participants in this study had an income of \$30,000-\$90,000; identified as Christians; and had advanced degrees.

The reliabilities in this study were within acceptable range for both the AAAS-R and ATLG (Herek & McLemore, 2011; Klonoff, & Landrine, 2000), with the exception of the AAAS-R Family Values scale (Cronbach's alpha = .453). Research questions 1 and 3 found that of the demographics only Religious Affiliation was significantly predictive of attitudes towards gay men and women. Research question 2 and 4 had only one variable Religious Practices and Beliefs was significant. The results of the study will be discussed in light of previous literature, followed by a discussion of study limitations and directions for future research in chapter 5.

Chapter 5: Discussion, Conclusion, and Recommendations

The purpose of this study was to investigate adult African Americans' cultural attitudes and the socio-demographics: (age, gender, income, education, religious affiliations) that influenced negative attitudes towards lesbians and gay men. The nature of study was an online survey using social media via Facebook. The two questionnaires that were used were the African American Acculturation Scale-Revised (AAAS-R) and Attitudes towards Lesbians and Gay Men Scale (ATLG-R-S5). The independent variables were socio-demographics, including age, gender, income, education, and religious affiliation, and the eight subscales of the AAAS-R: Religious Beliefs and Practice, Preference for Things African American, Interracial Attitudes, Health Beliefs and Practices, Cultural Superstitions, Family Practices, Racial Segregation, and Family Values. The dependent variables were the two subscales of the ATLG-R-S5: Attitudes toward Lesbians and Attitudes toward Gay Men.

Two hundred fifty-six participants submitted their online survey; however, only 236 surveys were used. The majority of the participants were female who identified themselves as Christians and African American/Black. Their age range was 26-45, they earned incomes between \$30,000-\$90,000, and they had, at least, a Master's degree or higher. SPSS 21.0 software was used to analyze the data using descriptive statistics and correlation and regression analyses. There were two significant variables in this study: Religious Affiliations and Religious Beliefs and Practices. Religious Affiliations and Religious Beliefs and Practices were predictors of negative attitudes towards lesbians and gay men. The one significant predictor with demographics and ATG-R-S5-Gay Men

subscale was Religious Affiliation. In this study, participants who identified themselves as Christians had negative attitudes toward lesbians and gay men. Four subscales were correlated with AAAS-R and ATG-R-S5-Gay Men subscale. Religious Beliefs and Practices, Health Beliefs and Practices, Cultural Superstitions, and Racial Segregation had strong correlations. As previously stated, Religious Beliefs and Practices were the significant predictors in this research. In addition, the strong correlations with demographics and ATL-R-S5-Lesbians, were age and income and age and education. Consequently, only Religious Beliefs and Practices were significant factors, which indicated that participants who had strong religious beliefs and practices had negative attitudes towards lesbians and gay men. Furthermore, the AAAS-R and the ATL-R-S5-Lesbians scales had two correlations: Religious Beliefs and Practices and Health Beliefs and Practice. However, only Religious Beliefs and Practices was the significant predictor in attitudes towards lesbians and gay men. These variables will be discussed in the interpretation of results.

Interpretation of Results

Comparison of Questionnaire Psychometrics to Literature

The results of the current study reported internal consistency indicators for the AAAS-R subscales that were fairly consistent with those reported in the development and use of this scale in previous literature (Klonoff & Landrine, 2000). Religious Beliefs and Practices, Preferences of Things African American, Interracial Attitudes, Family Practices, Health Beliefs and Practices, Cultural Superstitions, and Racial Segregation were consistent with previous studies (Klonoff & Landrine, 2000). However, the

coefficient for the Family Values subscales was very low (Cronbach's alpha = .453). Family Values had only four items and the correlations among the items were very low ($r=.024$ to $.274$). It also may be that these four items occurred at the end of the questionnaire, such that answers reflected fatigue or other measurement unreliability problems (Babbie, 2012).

The current study found significant correlations among the subscales of the AAAS-R: Religious Practices and Beliefs, Health Beliefs and Practices, Cultural Superstitions, and Racial Segregation. Consequently, Religious Beliefs and Practices, Health Beliefs and Practices, Cultural Superstitions, and Racial Segregation ranged from $.672$ to $.795$. However, these were not high enough to warrant concerns about multicollinearity in the subsequent regression analyses.

The results of the current study showed internal consistency indicators for the ATLG were consistent within the published literature (Herek & Mc Lemore, 2011). However, most participants were able to easily complete the entire 10 items questionnaire compared to the 47 item questionnaire. The 47 item questionnaire had a higher number of missing data. High scores on the subscales indicated high religiosity, limited personal contact with gay men and lesbian women; traditional family attitudes, traditional gender roles, and support policies of discrimination against sexual minorities (Herek & Mc.Lemore, 2011).

Comparison of Results to the Literature

The current study found that Religious Affiliations and Religious Beliefs and Practices variables were the only significant predictors for negative attitudes towards lesbians and gay men. As described in Chapter 2, religion was identified as a major factor in understanding the discrimination against and acceptance of GLBT individuals. For example, Stroup, Glass, and Cohen (2014) found that students were discriminated against because of their sexual minority status, gender, appearance, and religion. The researchers indicated that religion was the main factor in their study, which was one of the factors in this research. Negy and Eiseman (2005) indicated that African Americans who were dedicated to their religious faith were more prone to have negative attitudes towards LGB people. However, Newman (2002) conducted a study on religious affiliations and gender attitudes towards lesbians and gay men. Newman's results indicated that Conservative Protestants had negative attitude towards lesbian and gay men. On the other hand, atheists, agnostics, Jews, and individuals reporting no religious affiliations had positive attitudes towards lesbians and gay men (Newman, 2002). In addition, Marsiglio (1993) indicated that there are no data that support the assumption that being religious equates to greater homophobic attitudes.

The hypotheses for this investigation were partially supported. However, none of demographic variables emerged as statistically significant predictors. This is in contrast to previous research findings in Chapter 2. Some of the demographics that were discussed in Chapter 2 were not significant in this investigation, such as, age and gender. Furthermore, in this study Religious Affiliation was significant with AAAS-R and ATLG

subscales. It is interesting to note that the Religious Affiliation subscale was significantly correlated with income, age, and education. In addition, the independent variable that was significantly correlated with negative attitudes toward lesbians and gay men was Religious Practices and Beliefs. The participants in this study indicated that those who strongly adhere to their religious beliefs have negative attitudes toward lesbians and gay men.

Consequently, the results of this investigation were not consistent with some aspects of the literature review. The results were slightly below the range of the AAAS-R and ATLG subscales compared to the published research. On the other hand, the published research had larger samples compared to this investigation (Herek & Capitano, 1995; Klonoff & Landrine, 2000). Thus, a smaller sample could have impacted the lower correlations of my independent and dependent variables.

Relevance to Theoretical Framework

As previously stated, Religious Affiliations and Religious Beliefs and Practices were significant predictors of attitudes towards gay men and lesbians. These two factors supported the social identity theory (SIT). The SIT was used to describe how identity is formed through affiliation with groups, and traditional religious groups have strong negative beliefs about the GLBT. African Americans in this study were able to put themselves into a certain category that was identified by Religious Affiliation and Religious Beliefs and Practices.

Therefore, Religious Affiliations and Religious Beliefs and Practices were significant. In this case, the dominant group was African Americans who had high

subscale scores on religious practices and beliefs in their African American community. Consequently, this study had implications that supported Padilla and Perez (2003) conceptualization of the social identity theory. As previously state Padilla and Perez hypothesized individuals' who expressed their acculturations will have a difficult time socially. Furthermore, social identity and cultural competence addressed the social and cognitive aspects of desires to feel welcome, accepted, and comfortable about the groups that represent them. Herek and Glunt (1993) conducted in their research that these social factors such as highly religious and politically conservative were factors that impacted social identity. Thus, Religious Affiliations and Religious Practices and Beliefs were the same factors that were significant in this study.

Limitations of the Study

Internal Validity

Self-selection, unknown motivation to complete the survey, and the risk of missing data and multiple entries were factors in this study that are threats to internal validity. First, the creation of the sample was done by asking anonymous volunteers to participate. Therefore, the consequences of self-selection and lack of control over the data gathering process was a substantive threat. Additionally, I had to assume that the participants were truthful in their answers. The second factor was motivation to complete the study. The last factor was multiple entries. There could be a possibility that participants could have taken my survey multiple times.

While the data collection process was not depreciated by problems of missing data, it is possible that the proposed model was not sufficiently specified so as to account

for more of the variance in the dependent variables. For example, participants were not asked about their religious involvement in the survey (e.g., they were not asked how often they attend church, church functions, serve on church boards, or are involved in church groups). These questions could have shed light on more of the religious aspects of African Americans.

Construct Validity

Construct validity for the independent and dependent variables included assessment of internal consistency. Except for one subscale, all measures were well within acceptable values and were consistent with previous studies. As previously stated both scales were within acceptable range. However, the Cronbachs alpha for Family Values was below the acceptable value for the AAAS-R.

External Validity

Several limitations impacted the internal and external validities of the study. First, participants were recruited using convenience sampling, so that generalizability of the results to the target population of 18 year old and above African Americans is limited. Further, this research was conducted online using social media, specifically Facebook. While there is considerable research to suggest that Facebook recruiting results in fairly robust samples (Duggan & Smith, 2013; Kraut et al., 2004), the transferability of these results to non-Facebook users is unknown.

Recommendations for Future Research

African American adults were the target population for this investigation. Past research focused on African American adolescents and their attitudes towards GLBT

people (Marsiglio, 1993; Poteat & Anderson, 2012). A younger generation's perspective may have expanded the explication of how younger African Americans perceive the acceptance of African American GLBT people. According to Health and Goggin (2009) younger generations are exposed to positive media images of the GLBT community compared to older generations. Second, there are limited assessment tools that capture minorities' perception of cultural attitudes and sexual orientation. The more people understand minorities' sexual orientation, the better people can conceptualize an individual's sexual identity by conducting: (a) quantitative research on samples that are more diverse in religious and cultural beliefs; (b) quantitative research that included other variables that describe types and frequencies of religious activities and familiarity with the GLBT community (like having a son or daughter); (c) qualitative studies that focus on church members to get their perception of their social identity regarding church and marginalized groups such as African American GLBT; and (d) quantitative research that compare religious blacks and religious whites on their attitudes towards GLBT individuals.

The results of this research can help practitioners understand African Americans GLBT in several ways: (a) to understand inter conflicts between religious beliefs and practices, cultural identity, and sexual identity; (b) to be well informed about black identity and individuals' experiences of racial and sexual prejudices in the African American community; (d) to be non-judgmental and to learn how cultural and sexual identities influence their social and interpersonal functioning.

In addition, community, religious, and church leaders can utilize these findings to

advocate for social acceptance. For instance, creating support groups or GLBT ministry to assist in their religious, spiritual, and cultural identities. Furthermore, dispelling stereotypes about the GLBT community and uplift the community in unity by preaching about positively about the GLBT individuals to reduce sexual discrimination and prejudices.

Implications for Social Change

The results of this study suggest that Religious Affiliation and Religious Practices and Beliefs were significant as predictors of negative attitudes towards lesbians and gay men. These findings have the following implications for social change. First, by sharing these results at professional conferences and meetings, it is hoped that the results will expand the thinking of sexual prejudices and discrimination and heighten awareness when working with GLBT individuals in the African American community. Second, by presenting these findings and facilitating groups at religious organizations, members can be made aware of sexual identity and sexual stigma in the African American community. Third, I plan to design programs that are age appropriate for church members, especially, the older generation to discuss and promote positive images of the GLBT community. Fourth, I plan to teach children and parents to have positive conversations about sexual orientation. Fifth, the results of the study will be shared with spiritual leaders in the African American community in the interest of creating a safe, accepting, and inclusive GLBT church ministry, and books to illustrate both identities are acceptable. It is evident that religious beliefs and practices were significant in this research; therefore, it is important to alleviate sexual prejudice visually.

Psychologists, counselors, mental health professionals, and spiritual leaders can be change agents in the community. It is imperative that both professionals and spiritual leaders appreciate and acknowledge the severity of the current problems and issues in the African American community.

It is evident that African American GLBT people are discriminated against. As stated previously there are several positive social change implications for the alleviation of sexual prejudice. It is my intent to publish and present the findings of this dissertation at educational, professional, and community institutions in order to decrease sexual prejudice and discrimination.

Conclusion

The objective of this investigation was to examine the extent to which demographic variables and African American cultural attitudes predict attitudes towards sexual orientation in African American Adults. In addition, social identity theory was incorporated into this study to illustrate the dynamics of racial identity and the rejection of African Americans sexual orientation. The key findings of my study were: Religious Affiliations and Religious Beliefs and Practices were influential in adult African American sexual prejudices. Even though socio-demographics (age and income; income and education) were correlated with AAAS-R and ATLG scales, those correlations were not significant enough to predict negative attitudes towards lesbians and gay men.

It was evident through this investigation that religion and religious beliefs and practices were significant factors in African Americans sexual prejudices in some African Americans. There are, however, indicators that religious beliefs and practices, can be

and, indeed, are being integrated into GLBT individuals' lives.

Racial and sexual identities are pertinent in an individual's life. Often, acceptance and tolerance in one's culture as was found in this study of the African American community, is a challenge. If general attitudes about GLBT individuals, especially GLBT African Americans, were more accepting, then more of these individuals might be able to express their sexual orientation more comfortably.

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Appendix A: Invitation to Participate

Greetings,

My name is Bernadette Harrell and I am a doctoral student in psychology at Walden University. I am inviting you to participate in my study called African Americans Cultural Attitudes on Sexual Orientation. This research study will focus on African Americans perception on cultural attitudes and sexual orientation. I am conducting this study and Dr. Chet Lesniak at Walden University will be supervising me.

This study is an on-line survey. For this research, I will use social media such as Facebook. A link will be attached to my Facebook page and other African Americans' websites on Facebook. I am seeking African Americans that are 18 years old and older. All information that will be submitted will be confidential.

Enclosed in this letter is a link if you agree to participate in this study. If you have any questions please feel free to contact by email bharr003@waldenu.edu. Thank for your cooperation and time.

Link: www.surveymonkey.com

Warm regards,

Bernadette Harrell

Appendix B: Consent Form

You are invited to take part in a research study of African Americans cultural attitudes on sexual orientation. You will complete questionnaires regarding African Americans cultural beliefs and sexual orientation. For each of these types of relationships you may have had you will be asked to rate. The researcher is inviting adults over the age of 18 and that are African Americans. This form is part of a process called “informed consent” to allow you to understand this study before deciding whether to take part.

This study is being conducted by a researcher named Bernadette Harrell, who is a doctoral student at Walden University. You are being selected to participate in this study because either you are Facebook friends with Bernadette Harrell or you know someone who is Facebook friends with her. You may already know the researcher as an In-Home Therapist at Associated Clinic of Psychology, but this study is separate from that role.

Background Information:

The purpose of this study is to examine the relationship of African Americans cultural beliefs on sexual orientation.

Procedures:

If you agree to be in this study, you will be asked to:

- Complete two sets of questionnaires regarding your attitudes toward lesbians and gay men and African American culture. Your participation in this study should not take more than 20 minutes.

Here are some sample questions:

- Attitudes towards lesbians and gay men, how would you rate your agreement on a scale of 1 to 7, 1 I totally disagree not true at all; 2 sort of agree/sort of true and 3 I strongly agree absolutely true.
- African American culture, how would you rate your agreement on a scale of 1 to 5, 1 sex between two men is just plain wrong; 2 Sex between two women is just plain wrong and 3 I think female homosexuals are disguising with 4 = "Strongly Agree", 5 = "Somewhat agree" 3 = "Neither Agree nor Disagree", 4 = "agree somewhat and 5 = "Strongly Disagree"

Voluntary Nature of the Study:

This study is voluntary. Everyone will respect your decision of whether or not you choose to be in the study. No one at Walden University will treat you differently if you decide not to be in the study. If you decide to join the study now, you can still change your mind during or after the study. You may stop at any time.

Risks and Benefits of Being in the Study:

Being in this type of study involves some risk of the minor discomforts that can be encountered in daily life, such as fatigue or becoming upset. Being in this study would not pose risk to your safety or wellbeing.

The potential benefit to this study is being knowing that you are contributing to the field of psychology, embracing your African American heritage, and bridging the gap between African Americans that are GLBT.

Payment:

You will not be paid for your participation in this study.

Privacy:

Any information you provide will be kept anonymous. The researcher will not use your personal information for any purposes outside of this research project. Also, the researcher will not include your name or anything else that could identify you in the study reports. Data will be kept secure by not attaching your name to your answers and by keeping the study data in only the computer of the researcher. Data will be kept for a period of at least 5 years, as required by the university.

Contacts and Questions:

You may make a copy of this dissertation for your records. You may ask any questions you have now. Or if you have questions later, you may contact the researcher via bharr003@waldenu.edu or 651-226-8901. If you want to talk privately about your rights as a participant, you can call Dr. Leilani Endicott. She is the Walden University representative who can discuss this with you. Her phone number is 1-800-925-3368, extension 1210. Walden University's approval number for this study is **IRB will enter approval number here** and it expires on **IRB will enter expiration date.**

Please print or save this consent form for your records. (for online research)

Statement of Consent:

I have read the above information and I feel I understand the study well enough to make a decision about my involvement. By clicking the link below, "I consent". I understand that I am agreeing to the terms described above.

Appendix C: Demographic Form

Please answer the following questions:

1. Age:

- Less than 18 years
- 18-25
- 26-35
- 36-45
- 46-55
- 56-66
- 67-77
- 76 and over

2. Biological Gender

- Female
- Male
- Other: _____

3. Sexual Orientation

- Heterosexual
- Lesbian
- Gay
- Bisexual
- Transgender
- Other _____

4. Marital Status

- Single, never married
- Married or domestic partnership
- Widowed
- Divorced
- Separated

3. Please indicate your household income:

- ___ Less than 30,000
- ___ 30,000-60,000
- ___ 61,000-90,000
- ___ 91,000-120,000
- ___ 120,000 or more

4. Please indicate your level of education:

- Less than high school
- High school/GED
- Some college
- 2 year college
- 4 year college
- Master's
- Doctoral/Post Doctoral

5. Religious Affiliation:

- No religious affiliation
- Christian
- Muslim
- Jewish
- Hindu
- Other (please describe)

6. Ethnicity identity

- Black
- African American
- Black/Hispanic
- Other (please describe)

Appendix D: African American Acculturation Scale Revised Permission Statement

We encourage further studies to use the scale and extend our permission to researchers who wish to do so.

Appendix E: African Americans Acculturation Scale-Revised

Instructions: Below are some beliefs attitudes about religion, families, racism, Black people, White people and health. Please tell us how much you personally agree or disagree with these beliefs and attitudes by circling a number. There are no right or wrong answers, we simply want to know your views and your beliefs.

I Totally Disagree Not True At All ↓	Sort of Agree Sort of True ↓	I Strongly Agree Absolutely True ↓
1 2 3	4 5	6 7

- | | | | | | | | |
|---|---|---|---|---|---|---|---|
| 01. I believe in the Holy Ghost. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 02. I like gospel music. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 03. I believe in heaven and hell. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 04. The church is the heart of the Black community. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 05. I have seen people “get the spirit” or speak in tongues. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 06. I am currently a member of a Black church. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 07. When I was young, I was a member of a Black church. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 08. Prayer can cure disease. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 09. What goes around, comes around. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 10. I used to sing in the church choir. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 11. Most of the music I listen to is by Black artists. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 12. I like Black music more than White music. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 13. I listen to Black radio stations. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 14. I try to watch all the Black shows on TV. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 15. The person I admire the most is Black. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 16. I feel more comfortable around Blacks than around Whites. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 17. When I pass a Black person (a stranger) on the street, I always say hello or nod at them. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 18. Most of my friends are Black. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 19. I read (or used to read) <i>Essence</i> or <i>Ebony</i> magazine. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 20. I don’t trust most White people. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 21. IQ tests were set up purposefully to discriminate against Black people. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 22. Most Whites are afraid of Blacks. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 23. Deep in their hearts, most White people are racists. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 24. Whites don’t understand Blacks. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 25. Most tests (like the SATs and tests to get a job) are set up to make sure that Blacks don’t get high scores on them. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 26. Some members of my family hate or distrust White people. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 27. When I was young, I shared a bed at night with my sister, brother, or some other relative. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 28. When I was young, my parent(s) sent me to stay with a relative (aunt, uncle, grandmother) for a few days or weeks, and then I went back home again. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 29. When I was young, my cousin, aunt, grandmother, or other relative lived with me and my family for awhile. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 30. When I was young, I took a bath with my sister, brother, or some other relative. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 31. Some people in my family use Epsom salts. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 32. Illnesses can be classified as natural types and unnatural types. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 33. Some old Black women/ladies know how to cure diseases. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 34. Some older Black women know a lot about pregnancy and childbirth. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 35. I was taught that you shouldn’t take a bath and | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

then go outside.

- | | | | | | | | |
|--|---|---|---|---|---|---|---|
| 36. I avoid splitting a pole. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 37. When the palm of your hand itches, you'll receive some money. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 38. There's some truth to many old superstitions. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 39. I eat black-eyed peas on New Year's Eve. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 40. I grew up in a mostly Black neighborhood. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 41. I went to (or go to) a mostly Black high school. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 42. I went to a mostly Black elementary school. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 43. I currently live in a mostly Black neighborhood. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 44. It's better to try to move your whole family ahead in this world than it is to be out for only yourself. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 45. Old people are wise. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 46. I often lend money or give other types of support to members of my family. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 47. A child should not be allowed to call a grown woman by her first name, "Alice." The child should be taught to call her "Miss Alice." | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

Appendix F: Attitudes Towards Lesbians and Gay Men Scale Permission Statement

Doctoral-level social and behavioral scientists, as well as students and researchers working under their supervision, may use the ATLG in non-for-profit research that is consistent with the American Psychological Association's *Ethical Principles of Psychologists*. **It is *not* necessary to obtain formal permission from Dr. Herek to use the scale in research that meets these conditions, and such permission are not provided, even upon request.** Permission to use the scale explicitly denied to individuals who have been expelled or dropped from membership in a professional or scientific association because of their violation of the organizations ethical standards.

Appendix G: Attitudes Towards Lesbians and Gay Men Scale

Instructions: For each statement indicate if you agree or disagree. There are no right or wrong answers.

1	2	3	4	5
Strongly Disagree	Disagree Somewhat	Neither agree nor Disagree	Agree Somewhat	Strongly Agree

- _____ Sex between two men is just plain wrong.
- _____ I think male homosexuals are disguising.
- _____ Male homosexuality is natural expression of sexuality in men.
- _____ Male homosexuality is a perversion.
- _____ Male homosexuality is merely a different kind of lifestyle that should not be condemned.
- _____ Sex between two women is just plain wrong.
- _____ I think female homosexuals are disguising.
- _____ Female homosexuality is natural expression of sexuality in men.
- _____ Female homosexuality is a perversion.
- _____ Female homosexuality is merely a difference kind of lifestyle that should not be condemned.

Appendix H: Institutional Review Board (IRB) Approval Letter

Dear Ms. Harrell,

This email is to notify you that the Institutional Review Board (IRB) has approved your application for the study entitled, "The Influence of Demographics and Cultural Attitudes on Sexual Orientation Attitudes in African American Adults." Please note, many of the social media sites you have identified are not considered fully public. It is your responsibility to ensure that you have obtained any necessary approval to post your study invitation from the appropriate site administrator. Letters of cooperation are not required though, as their allowing information to be posted would imply their approval.

Your approval # is 12-26-14-0024236. You will need to reference this number in your dissertation and in any future funding or publication submissions. Also attached to this e-mail is the IRB approved consent form. Please note, if this is already in an on-line format, you will need to update that consent document to include the IRB approval number and expiration date.

Your IRB approval expires on December 25, 2015. One month before this expiration date, you will be sent a Continuing Review Form, which must be submitted if you wish to collect data beyond the approval expiration date.

Your IRB approval is contingent upon your adherence to the exact procedures described in the final version of the IRB application document that has been submitted as of this date. This includes maintaining your current status with the university. Your IRB approval is only valid while you are an actively enrolled student at Walden University. If you need to take a leave of absence or are otherwise unable to remain actively enrolled, your IRB approval is suspended. Absolutely NO participant recruitment or data collection may occur while a student is not actively enrolled.

If you need to make any changes to your research staff or procedures, you must obtain IRB approval by submitting the IRB Request for Change in Procedures Form. You will receive confirmation with a status update of the request within 1 week of submitting the change request form and are not permitted to implement changes prior to receiving approval. Please note that Walden University does not accept responsibility or liability for research activities conducted without the IRB's approval, and the University will not accept or grant credit for student work that fails to comply with the policies and procedures related to ethical standards in research.

When you submitted your IRB application, you made a commitment to communicate both discrete adverse events and general problems to the IRB within 1 week of their

occurrence/realization. Failure to do so may result in invalidation of data, loss of academic credit, and/or loss of legal protections otherwise available to the researcher.

Both the Adverse Event Reporting form and Request for Change in Procedures form can be obtained at the IRB section of the Walden website:

<http://academicguides.waldenu.edu/researchcenter/orec>

Researchers are expected to keep detailed records of their research activities (i.e., participant log sheets, completed consent forms, etc.) for the same period of time they retain the original data. If, in the future, you require copies of the originally submitted IRB materials, you may request them from Institutional Review Board.