# MAKING SENSE OF INTERNALIZED ANTI-GAY PREJUDICE FROM THE PERPSECTIVE OF MEN WHO HAVE SEX WITH MEN

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A thesis submitted in partial fulfilment of the requirements of the University of East London for the degree of Professional Doctorate in Clinical Psychology

May 2018

Word count: 29, 410

## ACKNOWLEDGEMENTS

I am hugely grateful to the participants of this research, for being so open about their experiences. I would also like to express my gratitude to my supervisors, Dr. Trishna Patel who has encouraged and kept me on track from the beginning of this research endeavour, and Dr. Poul Rohleder, who has been generous with his expertise.

I feel fortunate to be part of this cohort, and count myself particularly lucky to have had the continued support of my wonderful friends and family throughout, especially my amazing wife and son Rosemary and Elvis Dreyer-Dunlea. I want to thank my Grandma Dreyer for always encouraging me to further my education as "the one thing they can never take away from you", as well as my mom, dad, sisters (Kristy and Lori) and brothers-in-law, including Matt, who joined my family, and those whose family I have joined through marriage. It is not irrelevant to the research that follows to note that this would not have been possible until a few years ago.

I also want to thank my dear friend Jose Fernandez-Gomez for his help along the way, and to express gratitude to my mentor in life, Daisaku Ikeda, who I met through one of my best friends and the ultimate shakubuku-mama, Toni Hogg. Toni has dedicated her heart and soul to fighting against anti-gay prejudice and heterosexism wherever she finds it, and in doing so, helped to inspire me to do this research.

## ABSTRACT

Internalised anti-gay stigma has both been linked with adverse mental health outcomes and criticized for being pathologizing in its individuation of sexual minority distress. The present research seeks to explore how men make sense of the construct that is commonly referred to as 'internalised homophobia', alongside the impact of and other responses to anti-gay prejudice and heterosexism, with an emphasis on socio-political context throughout.

Semi-structured interviews were conducted with ten self-identified gay men recruited via gay-affirmative and neutral spaces, including the internet, to take part in this study. A thematic analysis undertaken from a critical realist perspective identified three over-arching themes, each also consisting of three further subthemes. *"It's part of who we are": internalised anti-gay stigma as a part of identity* explored how participants who were familiar with the concept understood and related to it. *"I've never ever been homophobic": distancing the self from internalised anti-gay stigma* captured how some participants expressed ambivalence towards and/or appeared to try to distance themselves from internalised anti-gay stigma as personally relevant. *"It was on my radar": living with anti-gay stigma* describes how participants perceived and responded to overt and subtle anti-gay prejudice and heterosexism from childhood to the present day.

Results from the analysis are discussed in the context of relevant theory, in particular the Minority Stress Model (Meyer 1995, 2003, 2007), and previous research. The study highlighted the importance of a more nuanced understanding of internalised anti-gay stigma, as well as the importance of socio-political context. Implications in terms of future research and clinical practice are considered.

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## **1.0 INTRODUCTION**

## 1.1 Chapter Overview

This chapter provides a contextual overview for the present research, which includes a focus on how internalised anti-gay stigma (I-AGS, also referred to as internalised homophobia (IH)) has been conceptualised, with a brief exploration of existing evidence with regard to psychological correlates, mediators and moderators. Next consideration will be given to theoretical frameworks which seek to describe the experience of 'minority stress' more generally and specifically in relation to sexual minorities. Finally, the focus will be on re-contextualising I-AGS and a review of the evidence which prioritises the perspectives of gay men as found in qualitative studies.

## 1.2 Terminology

## 1.2.1 Sexual Minority Labels

An ongoing difficulty is in how to decide who should be defined as being a 'sexual minority'. Sexual and gender identities are often conflated, and there is a real lack of consensus regarding distinctions between these "separate but overlapping" constructs (Gates, 2011; Habarth, 2008; Herek & Garnets, 2007; Moradi, Mohr, Worthington, & Fassinger, 2009).

Indeed, evidence suggests that same-sex sexual behaviours, attractions and fantasies are widespread, even amongst a significant proportion of those who identify as heterosexual (Laumann, 1994). In the latest UK YouGov poll, only 72% of people identified themselves as exclusively heterosexual; 20% indicated that they had a sexual experience with a member of the same sex (YouGov, 2015). Unsurprisingly, it is the younger generation (18-24 year olds) who are most likely to see their sexuality as more fluid, with 46% not seeing themselves as exclusively heterosexual (YouGov, 2015). The positioning of lesbian, gay, bisexual and transgender, and/or queer (LGBTQ) people as sexual minorities could therefore be seen to distort the 'truth' about human sexuality (Nungesser, 1983). For the sake of consistency, however, use of sexual minority will be retained.

Correspondingly, relatively little is known about individual rationales for choosing various sexual-identity labels, the number of which continue to increase. Bearing in mind the results of a recent qualitative study which found that young gay men chose to label themselves differently for reasons that were described as being sexual, romantic (emotional), intellectual and related to IH (McCormack & Savin-Williams, 2017), it may

make sense to take a multi- rather than uni-dimensional approach to sexual identity, including domains of sexual attraction, behaviour, identity 'performance' and self-identified labels (Hegarty & Massey, 2006). Some may see sexuality as something that they 'do' as opposed to what they 'are' (Shaw et al., 2012) For the sake of practicality and consistency, the present research will use the umbrella term 'gay' to refer to men who sleep with other men (MSM) and/or who have self-identified as belonging to any non-heterosexual sexual identity.

#### 1.2.2 Hegemonic Masculinity and Intersectionality

It is necessary to consider power and social inequality in order to fully understand the broader context of gay men's experience. The construct of 'hegemonic masculinity', an idealised conceptualisation of masculinity that is specific to time and place (Connell, 1995), is particularly relevant here. Today in the UK, hegemonic masculinity is embodied in exclusively heterosexual, White European men who are highly educated and inhabit the upper-classes. Not only does hegemonic masculinity allow for the domination of men over women, but it also facilitates the subordination and marginalisation of certain subtypes of men over others, which can most clearly be seen along dividing lines of sexual orientation (Wilkinson, 2004). It has also been argued that politically conservative discourse seeks to separate the "good gay" (i.e. "straightacting": moderate and discrete) and the "dangerous queer" (i.e. effeminate, flagrant and militant), who is "excessively" or "too gay"; this intersects with cultural background and class such that ethnic minority and working class gay men are further marginalised (Clarke & Smith, 2015; Smith, 1994). The contemporary LGBTQ movement has also been criticized for excluding gay people from ethnic minority, low socioeconomic and working-class backgrounds (Ahlm, 2017).

#### 1.2.3 Internalised Anti-Gay Stigma

One aim of this research is to critically consider the construct that has historically been referred to IH, which will be discussed in full below. The etymological consequences of the word homo-*phobia*, which emphasises fear and implies mental illness, are increasingly recognised as problematic, however the term continues to be widely used as a catch all term, often conflating individual and systemic anti-gay prejudice and heterosexism (Dermer, Smith, & Barto, 2010; Herek, 2004). Thus, except where original terms are used with participant accounts and/or to capture historical context, alternative language will be used, and the present research will use the terms "anti-gay prejudice" and "heterosexism", to denote the enactment of prejudice against sexual minorities, and the systemic privileging of heterosexuality which is embedded within our

cultural institutions, respectively (Herek, 2007). As both anti-gay prejudice and heterosexism can be viewed as stigmatising processes, anti-gay stigma (AGS) and "internalised AGS" (I-AGS) will be used to refer anti-gay prejudice *and* heterosexism, respectively.

### 1.3 The Great British Context of Societal AGS and Associated Distress

Within the UK and in many countries across the globe there has continued to be increasing acceptance and extension of legal rights towards sexual minorities, particularly in the past ten years (Hudson-sharp & Metcalf, 2016; Liz Shaw et al., 2012). Still, however, most sexual minorities are not able to avoid stigmatisation, prejudice and discrimination, which has even been described as a "mundane fact of life" (Herek, Chopp, & Strohl, 2007; McDermott, Roen, & Scourfield, 2008), particularly outside of urban locations (Lewis, 2014; Rosser, Bockting, Ross, Miner, & Coleman, 2008). For instance, statistics from the most recent Gay British Crime Survey showed that 4/5 LGBTQ people had experienced anti-gay hate crime in their lifetimes (Antjoule, 2016), and recent research points to an increase in incidents on hate crimes committed against sexual minorities (Bachmann & Gooch, 2017). It has been suggested that the internalisation of such societal AGS is practically unavoidable (Berg, Munthe-Kaas, & Ross, 2016; Herek, Gillis, & Cogan, 2009), and I-AGS has been implicated in connection with the higher rate of adverse mental health outcomes seen within the LGBTQ population (King et al., 2008; Semlyen, King, Varney, & Hagger-Johnson, 2016).

It is widely acknowledged that there appears to be a disproportionate level of psychological distress experienced within the LGBT population (Cochran, Mays, & Sullivan, 2003; King et al., 2008; Semlyen et al., 2016; cf Savin-Williams et al., 2010) The construct of I-AGS in particular has received much attention in relation to psychological distress (Herek et al., 2009; Szymanski & Gupta, 2009; Szymanski & Mikorski, 2016) and various other adverse mental health outcomes including depressive symptoms (Feinstein, Goldfried, & Davila, 2012; Frost & Meyer, 2009; Igartua, Gill, & Montoro, 2003), anxiety (Igartua, Gill & Montoro, 2003), social anxiety (Feinstein, Goldfried & Davila, 2012), emotional regulation (Rowen & Malcolm, 2002), low self-esteem (Herek et al., 2009; Rowen & Malcolm, 2002; Szymanski & Carr, 2008; Szymanski & Gupta, 2009) and suicidal ideation (D'Augelli, Grossman, Hershberger, & O' Connell, 2001). Of note, a meta-analysis of 31 studies (including some mentioned above) found a small to moderate association between I-AGS and 'internalising' mental health problems (*r*=.27, Newcomb & Mustanski, 2010). I-AGS has also been linked to

feelings of guilt (Bonnie Moradi, Van Den Berg, & Epting, 2009) and shame (Allen & Olesen, 1999; Brown & Trevethan, 2010). Furthermore, within the published literature base there are two evaluations of cognitive behavioural (Ross, Doctor, Dimito, Kuehl, & Armstrong, 2007) and acceptance and commitment (Yadavaia & Hayes, 2012) therapeutic interventions which specifically target I-AGS.

#### 1.4 The Historical and Theoretical Contexts of I-AGS:

There are a number of sociological and psychological theories which link psychological distress within the sexual minority population to anti-gay prejudice and discrimination more generally, but I-AGS in particular. For instance, aspects of I-AGS are in many ways integral to classic models of sexual identity formation (Cass, 1979; Troiden, 1989), which describe the progressive movement through a series of more or less linear stages of gay identity development in a context of AGS, from initial recognition of same-sex attraction and difference, through to identity confusion, self-acceptance and integration. These models have been criticized for, amongst other things, being based in a reductive, essentialist stance that is overly simplistic and, as Cass (1996) herself acknowledges, neglecting the historical, social, cultural and discursive contexts of sexual identity development over the life-span (Hammack & Cohler, 2011; Horowitz & Newcomb, 2002; Rosario, Schrimshaw, Hunter, & Braun, 2006; Savin-Williams, 2001). Yet, the classic models, which imply that the development of a healthy self-concept can only be achieved in overcoming I-AGS, continue to be referred to.

The most prominent theoretical context of I-AGS has been provided by the Minority Stress model (Meyer, 1995, 2003, 2007), which extended general stress theory (Dohrenwend, 2000) to describe *minority* stress processes experienced by those within socially disadvantaged positions as positioned along a continuum in proximity to the (sexual) minority individual. Thus, psychological distress within the sexual minority population is connected to both distal, external events of prejudice, discrimination and violence and more proximal stressors, such as I-AGS.

Meyer's (1995, 2003, 2007) ideas about I-AGS were heavily influenced by Allport (1954) and Goffman (1963)'s theories of prejudice and stigma, or, in the case of sexual minorities, 'homophobia'. It is worth noting that early conceptualisations of 'homophobia' were developed within a psychoanalytic tradition which has historically (and until recently) pathologized homosexuality. Because 'homophobia', or negative attitudes and feelings about homosexuality, are inextricably bound up in a constantly changing historical and socio-political context (Liz Shaw et al., 2012), a brief summary of relevant context will also be provided here.

#### 1.4.1 Stigma

Goffman (1963) defines stigma as "an attribute that is deeply discrediting" and which reduces an individual from a whole person to a tainted, "not quite human" one, with what he refers to as a "spoiled identity" (p.13). Stigma can be seen to attract prejudice, which (Allport, 1954) described as an unwarranted judgement and unfavourable feeling towards a social group. This in turn creates a "noxious" environment", and can lead to a number of ego defences, which are described as having the potential to be both maladaptive and constructive; Allport (1954) distinguishes between those which are "extropunitive" (externalising) or "intropunitive" (internalising) in nature. Intropunitive reactions include humour and sympathy for others, as well as shame, self-hate, and denial of group membership, which clearly resonates with conceptualisations of I-AGS. Depictions of "passing" and concealment, rather simplistically interpreted as being a defence or coping mechanism associated with I-AGS, are also relevant here (Goffman, 1963). However, as will be discussed further below, more recent research recognises decisions around disclosure to be both more complicated and strategic than initially assumed, implicating a wider range of constructive stigma management responses (Siegel, Lune, & Meyer, 1998). Like Allport's (1954) extropunitive responses, these include responses characteristic of resilience and resistance, for example, enhanced striving and activism.

An essential point, which is often lost, is that there are a range of responses, and as described by Goffman (1963), each individual's response will most likely blend the two. For instance, in a qualitative study of how North American gay men negotiate AGS (Dooley, 2009) describes the activation of a set of mechanisms subsequent to realisation of "difference", associated with stigma of being gay. These ranged from and included attempting suicide on the one hand, and focusing on academic achievements and future careers on the other. Where the "burden" was too great, men are described as using a "relocation strategy", to find a more accepting environment.

Indeed, the above findings are consistent with Goffman (1954)'s assertion that it is a "language of relationships, not attributes, [that] is really needed" (p.13). He specifies that stigma is really an interaction between an attribute and stereotype, although he gives examples of social context, which is crucial; a characteristic that is denigrating in one context may be a source of pride in another, and indeed Goffman (1963) arguably depicts stigma as a social process that emerges out of both individual and group processes. The latter, however, is often lost in post stigma-enactment analysis in both clinical and research contexts (Link & Phelan, 2001).

### 1.4.2 'Homophobia'

Weinberg (1972), a New York -based heterosexual psychologist who trained in psychoanalysis, is widely attributed with developing and naming the idea of "homophobia": an irrational fear of homosexuals (Herek, 2004). In naming "homophobia", it is thought that Weinberg's (1972) intention was to move away from problematising the mental health of homosexuals and locate the 'problem' of homosexuality within "homophobes", as he considered it a form of prejudice (Hegarty & Massey, 2006; Herek, 2004).

Weinberg (1972) in turn acknowledges that his ideas were heavily influenced by what was the beginning of the modern gay and lesbian liberation movement. With the Stonewall Riots in 1969, the momentum of the liberation movement was high with a global reach (Sedgwick, 1990). In 1970, the London Gay Liberation Front developed a parallel revolutionary movement to that in the United States (Stonewall UK, n.d.) In the early 1970s, North American gay and lesbian activists who believed that anti-gay psychiatric theories were a major contributor to societal anti-gay prejudice, disrupted annual meetings of the American Psychiatric Association (Drescher, 2015), and in one of the greatest successes of the gay and lesbian liberation movements, homosexuality was removed from the Diagnostic and Statistics Manual (DSM-II) in 1973 (Hegarty & Massey, 2006). The international mental health community eventually followed suit with publication of the International Classification of Diseases (ICD-10) in 1990.

It is argued that, when psychiatry no longer provided rationalisation for discrimination, discourse about homosexuality moved into the moral and political domains occupied by religious, governmental, media and educational institutions (Drescher, 2015). In 1988 UK Prime Minister Margaret Thatcher introduced Section 28 which outlawed any local authority or school from promoting the acceptability of homosexuality as a "pretended family relationship" (Stonewall UK, n.d.) Stonewall UK formed in response to section 28 and other inequalities, including equal age of consent. In 2001, just two years after the bombing of a gay pub in Soho (which killed three and wounded 70), Stonewall was finally successful in lowering the age of consent to 16; in 2003, Section 28 was finally repealed (Stonewall UK, n.d.). It is of note, however, that there are still parts of the United Kingdom, specifically, Northern Ireland, where gay rights remain relatively limited (e.g. sexual minorities are not legally able to marry). As such, more blatant systemic heterosexism, in denial of civil rights to sexual minorities, still exists within the borders of the United Kingdom.

#### **1.5 Minority Stress Model**

As described above, the Minority Stress Model describes stress processes experienced by those within often multiple socially disadvantaged positions (Meyer, 1995, 2003, 2007). Thus, applied to the sexual minority population, the theory connects psychological distress to distal events of anti-gay prejudice and discrimination along a continuum towards the increasingly proximal stressors related to expectations of rejection, the effect of concealment or disclosure of identity, and I-AGS.

As I-AGS is often conflated with other stress processes, for example, expectations of rejection and 'concealment', the theory and evidence for each component of the minority stress model will be considered here. Because this conflation may be exacerbated by quantitative research, which has largely considered the various components of the minority stress model separately, an attempt will be made to use relevant qualitative research where possible, as a way of widening the analytic lens.

#### 1.5.1 Objective Experiences of Prejudice and Discrimination

Sexual minority individuals are more likely to experience objectively stressful environments and events, or what Herek (2007) refers to as "stigma enactments". These may take the form of both day-to-day micro-aggressions and experiences of interpersonal and structural anti-gay bias, prejudice, discrimination and violence directly related to their stigmatized status (Hatzenbuehler, McLaughlin, Keyes, & Hasin, 2010; Mays & Cochran, 2001; McLaughlin, Hatzenbuehler, & Keyes, 2010; I.H. Meyer, Schwartz, & Frost, 2008; Warner et al., 2004). Research suggests that having a sexual minority identity may be a significant predictor for physical, psychological and sexual victimisation (Balsam, Rothblum, & Beauchaine, 2005), and lifetime experience of discrimination has been shown to be higher and more frequent amongst the sexual minority population (Mays & Cochran, 2001). Prejudice and discrimination are referred to as 'objective' events because, it is important to note, their occurrence may be independent of whether an individual personally identifies with a minority status. For instance, a man may have a sexual relationship with another man but not identify as gay (Diamond, 2000). Regardless, he may be perceived as gay and experience associated prejudice.

Within the more modern Western context of relative acceptance and equality, research suggests that prejudice has become something that people generally want to distance themselves from (Sommers & Norton, 2006). It is also argued that 'old fashioned' displays of conscious, overt racial, gender and sexuality-oriented discrimination have been overtaken by increasingly subtle, and less direct "micro-aggressions". Micro-aggressions have typically been defined as brief 'everyday' insults and/or indignities

that communicate negative, derogatory or hostile ideation and/or intent, whether intentional or not (Nadal, Issa, et al., 2011; Nadal, Wong, et al., 2011; Sue et al., 2007; cf Lilienfeld, 2017). Sexuality-oriented micro-aggressions have been described as taking many forms, including use of heterosexist language, endorsement of heterosexist culture, stereotyping, and denial of societal and/or individual heterosexism (Nadal, Rivera, & Corpus, 2010). Because of their pervasiveness, it is thus suggested that 'everyday' experiences of such micro-aggressions may be at least if not more "problematic, damaging and injurious" than 'old-fashioned' discrimination (Sue, 2003, pp. 47–48)

It is important to note that, like 'homophobia', the concept of micro-aggressions has also recently been criticized on several grounds (Lilienfeld, 2017). It is beyond the scope of this paper to consider these in full, however one concern is of relevance to the present study. Although as a defining feature, inclusion of the prefix "micro" denotes that micro-aggressive acts are subtle and hard to detect, its use may also imply that such acts are so minimal as to be trivial (Lilienfeld, 2017). This possibility is further compounded by the one feature that all micro-aggressions are said to have in common: their ambiguous nature. Indeed, ambiguity is both a defining feature of microaggressions, and the one that makes them both difficult to detect and/or identify as being attributable to prejudice, as well as to challenge and/or confront. Yet, the assumption of subtlety and ambiguity is dubious for a number of purported anti-gay micro-aggressions identified within a qualitative focus group study of 26 LGB participants (Nadal, Issa, et al., 2011). For example, the use of derogatory language (e.g., using words like "faggot"), telling someone that they are "going to hell" because of their sexuality, and/or making threats are arguably overtly offensive and prejudiced. In this way, using the term "micro-aggression" risks trivializing and/or denying acts of significant and overt prejudice. Although the use of the term "micro-aggression" will be used for the sake of consistently, it is important for this risk to be borne in mind, particularly when applied to the sexual minority population, which as above has experienced extensive discrimination and pathologization.

As is highlighted above, perceptions of discrimination are subjective. Research suggests that some members of minority groups may be more vigilant in perceiving subtle prejudice, particularly if they have previously experienced discrimination, and are more sensitive to the possibility of bias more generally; others may have a tendency to minimise and/or reframe enactments of prejudice as non-discriminatory due to mitigating factors, such as attributions of unintentionality based, for example, on ignorance (Kaiser & Major, 2006; Swim, Scott, Sechrist, Campbell, & Stangor, 2003).

Evidence from research exploring constructions of racism suggest that constructing "racism" as something that 'others' do and that affects 'others' may be a way of avoiding particular identities (e.g. that of "angry black man" and "victim") and of coping (Andreouli, Greenland, & Howarth, 2016; Kadianaki, 2013).

Some research suggests that where more subtle prejudice towards stigmatised individuals is less likely to be perceived, it is more likely to be personalised and translated into negative feelings directed towards the self (Crocker & Major, 1989; Major, Quinton, & Schmader, 2003; Vorauer & Kumhyr, 2001). Although most of the empirical research examining micro-aggressions has focused on racial microaggressions, there is emerging evidence which demonstrates that sexuality-oriented micro-aggressions also negatively impact mental health (Nadal, Wong, et al., 2011; Swim, Johnston, & Pearson, 2009; Swim, Pearson, & Johnston, 2007). Yet, as per Allport (1953)'s predictions that individual responses to prejudice were likely to be both intro-and extra-punitive, a focus group study which explored how sexual minority individuals coped with micro-aggressions also showed that individuals respond in a variety of ways: in a passive, self-protective, and/or confrontational way; by conforming to heterosexist expectations or becoming empowered and developing resilience; with sadness, shame, anger and/or fear (Nadal, Wong, et al., 2011). Although it was noted that most participants seemed to react differently in various situations depending on how they were feeling at the time and the context, there were some participants who always seemed to respond more passively. The authors suggest that by not confronting these micro-aggressions, sexual minority individuals may repress their emotional reactions, which may place them at risk for developing I-AGS.

#### 1.5.2 Expectations of Prejudice and Discrimination

A further minority stressor that Meyers (1995, 2003, 2007) identified is the expectation of prejudice and discrimination, which has also been shown to be associated with various negative outcomes (McGarrity, Huebner, & McKinnon, 2013). In particular, expectations of stigma enactment is thought to lead to increased vigilance (Pachankis, 2007). For instance, gay men in a hate crime study noted that surviving anti-gay abuse "depended on not 'having your defences down'" (Dunn, 2012, p. 3459) . Gay participants across a number of different studies went so far as to imply or explicitly state that gay men who were non-gender conforming could "expect" to be attacked or that "flamboyant" men who were attacked "brought it on themselves" (M. Anderson et al., 2009; Bell & Perry, 2015; Dewaele, Van Houtte, Cox, & Vincke, 2013; Hequembourg & Brallier, 2009, p. 287). It was of note that in several studies where gay men described expectations of discrimination, they were accompanied by references to previous experiences of anti-gay violence and/or verbal abuse (Dunn, 2012; Hequembourg & Brallier, 2009; McKeown, Nelson, Anderson, Low, & Elford, 2010).

As noted by Herek and Garnets (2007), expectations of stigma enactments lead to associated appraisals and coping behaviour, whether prospective or reactive, and which it is noted are often "in tune" with social realities and highly adaptive. It seems difficult to disentangle 'adaptive' expectations of stigma enactments from those that may be construed as less adaptive, for example due to the influence of I-AGS (Herek & Garnets, 2007).

#### 1.5.3 Concealment

Minorities with 'concealable' differences have been described as having an "extra burden" in having to make decisions with regard to disclosure (Quinn, 2006) Goffman (1963) developed the concept of "passing" to refer to "hiding" and/or minimising the outward signs of stigmatised trait. Concealment was seen as a defence or coping mechanism and associated with I-AGS; it was viewed as a failure to "come out", which referenced a developmental process characterised by recognising and disclosing a gay identity, previously thought of as a discrete event. Failure to "come out" thus implied developmental arrest and I-AGS and has been linked to lesser well-being (Beals, Peplau, & Gable, 2009; Schubotz & McNamee, 2009).

However, whether disclosure is likely to be associated with better well-being has been shown to be dependent on context (Legate, Ryan, & Weinstein, 2012). In a UK survey of sexual minority individuals, it was of note that whilst younger participants (under 40), were more open with regard to their sexuality, they were also more likely to report a higher risk of mental disorder, harmful drinking and suicidal ideation (Warner et al., 2004). Although it is possible that younger people may simply be more open about these issues, it was also of note that this group were also more likely to have experienced physical attacks and verbal abuse. Therefore, although chronic concealment can have negative psychosocial consequences, attempts to pass in specific, high-risk situations can also be adaptive (Diplacido, 1998; Herek et al., 2009; Pachankis, 2007).

Considered from a perspective of power, as noted by Fassinger and Miller (1997), "disclosure is so profoundly influenced by contextual oppression that to use it as an index of identity development directly forces the victim to take responsibility for his or her own victimization" (p. 56). Thus, increasingly, a more nuanced and contextualised understanding of 'disclosure' or what is referred to as "visibility management" has been utilised, which recognises the strategies that sexual minorities make use of to continually regulate exposure of their sexual identity within public spaces, which, as described above, are acknowledged as being not just potentially dangerous or fully accepting, but more likely somewhere in between (Dozier, 2015; Fassinger & Miller, 1997; Lasser, Ryser, & Price, 2010; Pachankis, 2007; Shippee, 2011).

#### <u>1.5.5 I-AGS</u>

Although I-AGS as a construct will be further de-constructed below, here Meyer's (2007) conceptualisation as described within the Minority Stress Model will be considered. From Meyer's (2007) perspective, I-AGS represents a form of stress experienced when sexual minorities direct negative social attitudes towards themselves "in the absence of overt negative events, and even if one's minority status is successfully concealed" (p. 254). As above, this is heavily influenced by Goffman's (1963) stigma framework and sexual identity models (Cass, 1979; Gonsiorek, 1988). In what serves as a useful, contextualised operationalisation of I-AGS, Gonsiorek (1988) distinguishes between overt and covert I-AGS and, for instance, conscious accusations of inferiority because of sexuality (which may lead to engagement in selfdestructive behaviours), and less conscious, "exceedingly subtle" tolerance of discriminatory treatment. Meyer (2003) integrates ideas from models of sexual identity formation which construe I-AGS as indicating a failure to "come out" (Morris, Waldo, & Rothblum, 2001), and reiterates that, on the basis of the strength of early socialisation experiences, "gay people maintain varying degrees of residual anti-gay attitudes that are integrated into their self-perception that can lead to mental health problems" (p.14).

#### 1.5.6 Ameliorating Coping Responses

Although sexual minorities experience higher levels of psychological distress relative to the heterosexual population, most do not experience high levels of psychological distress (e.g. depression, anxiety, substance use and/or suicidality); this is an often-neglected reality, which is important to both acknowledge and question (Herek & Garnets, 2007). As Meyer (2015) notes and as described above, there are many different ways that stigmatised individuals respond to prejudice, and responses to AGS may also include increased resilience, resistance and even striving, particularly where individuals have access to the necessary social resources and support (Allport, 1954; Dooley, 2009; Goffman, 1963; Herek & Garnets, 2007; Orne, 2013).

## 1.5.7 Critique: Putting sexual minority distress in context

The construct of I-AGS has been criticized for failing to account for the wider sociopolitical context (e.g. institutional heterosexism), which both pathologizes sexual minorities and contributes to upholding a heterosexist status quo (Russell & Bohan, 2006). Regardless of the terminology used to refer to the construct, I-AGS is more or less framed as an individual, private experience or pathology, which does not adequately consider the complexity which exists at the intersection between the individual and socio-political contexts where internalised anti-gay prejudice is experienced and enacted (Russel & Bohan, 2006). Correspondingly, the diversity of actual and potential responses to anti-gay prejudice on both an individual and societal level is neglected and restricted.

Herek et al. (2009) similarly note how early heteronormative socialisation can result in negative feelings towards the self when an individual begins to develop awareness of their own nonheterosexuality. Herek and colleagues have proposed a social psychological framework that extends analysis beyond the level of the individual (Herek, 2007; Herek et al., 2007, 2009). This describes how institutional *heterosexism,* an entrenched ideology based on sexual stigma that systematically privileges heterosexuality and discredits and/or denigrates non-heterosexuality, operates through education, the media, law, religion (and historically, as described above, psychology and psychiatry) to perpetuate power imbalances in a way that impacts everyone within social interactions.

This dilemma is also addressed in an alternative proposal by Russel & Bohan (2006) which goes one step further in imploring us to consider the distinction between external and I-AGS as a false one, returning to the spirit of Goffman's (1963) recognition that stigma is better conceptualised within a "language of relationships", they suggest that the construct of I-AGS be considered not as an "intrapsychic experience but one of social exchange" in context (Russel, 2006; Russell & Bohan, 2006, p. 348).

## 1.6 Reconextualising I-AGS

The broader psychological and sociological literature base offers an increasing number of positions on what constitutes I-AGS, and authors have varied widely in how they conceptualise and operationalise the construct (Herek, 2004). Within some texts, there is no working definition provided (Ford, 2015; Jaspal, 2017; Jerome & Halkitis, 2009; McCormack & Savin-Williams, 2017; McKeown et al., 2010; K. L. Nadal, Wong, et al.,

2011; van Bergen & Spiegel, 2014), which implies that the concept of I-AGS is increasingly being positioned a having self-evident validity (Pilgrim & Bentall, 1999).

Different authors, however, emphasise particular aspects in writing about I-AGS. Weinberg (1972) described "internalised homophobia" as sexual minority's selfloathing. Shame, described as an "unspoken emotion" that leads to the urge to hide, is theorised as the failure to meet an internalised ideal (Blum, 2008; Kaufman, 2006). Hypothetically, shame has been linked to identity development (e.g. Erikson, 1959). It has also been identified as a central component of I-AGS; as described by Weinberg (1972): "a homosexual is gay when he…is free of shame, guilt, regret over the fact that one is homosexual" (p.70). Despite being considered a social emotion in relation to perceived judgment by others, and acknowledging the source of anti-gay prejudice as within a heterosexist society, Weinberg's portrayal and analysis of internalised anti-gay prejudice is highly individualistic: "the problem is not oppression but their own harsh evaluations of themselves" (preface, Weinberg, 1972).

Malyon (1982), a gay psychologist, is also credited with the development of the construct of "internalized homophobia", which he described as the effect of socialisation within an anti-gay society (Berg, Ross, Weatherburn, & Schmidt, 2013; Malyon, 1982). However, again, despite noting that identity develops within an interpersonal context, there is also a disconnect between his concept of internalised homophobia and the anti-gay socio-political context as revealed in his statement that : "exogenous homophobia, once internalised, usually functions as an unconscious introject with elaborations throughout the personality structure (Malyon, 1982, p. 64; Puckett & Levitt, 2015). Although Malyon (1982) acknowledges the impact that antigay attitudes and oppression has in limiting gay men's lives, his focus is restricted to the how men's internal dynamics relate to – but not challenging - those external limitations (Puckett & Levitt, 2015).

Thus, perhaps unsurprisingly, the focus on context has been lost with the focus on *'internalised* AGS; the construct is largely formulated as the internalisation of negative societal attitudes towards homosexuality (Newcomb & Mustanski, 2010). Further reflection on the construct has been limited by repetition of this simplistic formulation supported by a "restatement of presumed indices or symptoms" in isolation from context within much subsequent quantitative research, and is vulnerable to confounding I-AGS with a realistic appreciation of the challenges of being a sexual minority within a context of social oppression (Russel & Bohan, 2006; Shidlow, 1994). In a context of rapid expansion of I-AGS research (Berg, Munthe-Kass & Ross, 2013),

this process of restatement represents a potential danger of the construct being given a self-evident validity.

## 1.6.1 An alternative perspective

Russel (2006) proposes that what has been referred to as "homophobia" and "internalized homophobia", which are construed as separate and as existing within the world and individual, respectively, exist in relationship to each other such that they are indistinguishable:

"Homophobia is simply everywhere in the social world; it could not be "in" any person alone, nor could it exist solely "outside" the person. Homophobia is, in a sense, in the air; persons absorb it; persons express it" (p. 156)

Theorising about the psychologically distressing experiences of gay men is essentially rooted in and depends upon anti-gay prejudice and heterosexism, without which, so-called IH or I-AGS would be hugely diminished (if not erased). Therefore, Russel (2006) asserts that what is labelled as indicative of I-AGS, can also often be understood as an acknowledgement of actual AGS "in the world".

## 1.7 Literature Review

In a recent systematic mapping review of research on I-AGS (Berg et al., 2016), only one relevant qualitative study was identified, which investigated the lived experience of lesbians. There does not appear to be any qualitative research that specifically focused on gay men's experience of I-AGS, however, there is good reason to suggest that qualitative research methodology would be highly appropriate for examining the construct of I-AGS. Firstly, there has been only limited exploratory research prior to an explosion of quantitative research that has attempted to quantify and measure what is a subjective experience. The essence of the construct of I-AGS is captured in attitudes, feelings, and experiences which are inherently connected to heterosexist contexts across changing historical and socio-political landscapes, best captured using a qualitative research methodology.

In exploring the intersectionality of participants' multiple minority identities, Narváez, Meyer, Kertzner, Ouellette, & Gordon (2009, p. 65) note that each unique constellation of identities will confer specific psychological and social demands. It is also clear from the above descriptions that context is important in defining each individual's experience as a sexual minority. As complex as questions of intersectionality of personal and social contexts may be, asking them can shed a new light on sociopsychological theory

and protect against unintentionally perpetuating the invisibility and silencing of particular groups and an unequal status quos (Narváez et al., 2009).

Correspondingly, the importance of describing the intersection of various aspects of social identities is also increasingly recognised, which supports taking an intersectional approach to understanding the unique experiences of sexual and gender minorities from different generations, cultural backgrounds, socioeconomic classes, and essentially, different positions of power and privilege. This perspective also informed the literature review that follows.

As above, it was not possible to identify any prior qualitative research that specifically focused on I-AGS in gay men. There were, however, several examples in which the construct of I-AGS was explicitly addressed within studies of related concepts, as well as those that explored ideas that are conceptually related, although I-AGS may not be mentioned explicitly. The purpose of the following review was to identify and critically consider these, using a search strategy that privileged sensitivity over precision, which took significantly more time but increased the likelihood of identifying articles that discussed data that was relevant to but not identified as I-AGS (Lefebvre, Manheimer, & Glanville, 2011).

A systematic search for relevant literature was completed in three electronic databases, PsychInfo, MEDLINE (PubMed) and Academic Search Complete. In MEDLINE and Academic Search Complete databases, the search strategy was based on that used in Berg et al. (2016)'s systematic mapping review. PsychInfo recommended homosexuality (attitudes towards) as the search term to use for internalised homophobia, thus the PsychInfo search incorporated combinations of freetext words that related to sexual minority identities combined with attitudes, stereotypes, and different aspects of stigma. For the exact terms and combinations, and a table of the literature review process, please see Appendix A.

All searches were restricted to those articles that were in English. Given the importance of the historical and socio-political context, it was decided to only review studies published within the last ten years (i.e. between 01/01/2007 and 31/12/2017). Any study that included men aged 18+ who identified as non-heterosexual (e.g. men who had sex with men, bisexual, gay and/or queer) was considered where the research focus and/or context was not too specific (e.g. gay men in sport, or focused specifically on the experience of living with HIV) and broadly transferable (e.g. 'Western' North American and European countries with broadly equitable gay rights). Studies which

looked at gay men who were from more diverse cultural backgrounds but who were currently living in a North American or European country were also included.

The PsychInfo database search identified 2234 records; of the 401 which were qualitative, 154 were considered potentially relevant after reviewing the title and abstracts with respect to the criteria described above. A similar search process was completed using the MEDLINE and Academic Search Complete databases, which identified 634 further articles, 141 of which were qualitative. Thirty two further articles were identified as potentially relevant after reviewing the title and abstracts. After full text consideration of the combined 186 articles, it was identified that 39 texts addressed concepts which related to and/or explicitly addressed I-AGS. Given the importance of geographical location and socio-political context, it was decided to only focus on research studies that studied populations based in the UK, which narrowed the pool of studies for review to 6. An additional 4 articles which considered concepts related to I-AGS within a UK-based sample were identified through citation search. A table with a summary of each of the individual studies can also be found in Appendix B.

### 1.7.1 Description of Individual Papers

1.7.1.1 McDermott, Roen and Scourfield (2008): The first study explored the connections between sexual identity and self-destructive behaviours by taking a discourse analytic approach to data from interviews and focus groups with 27 LGBTQ people aged 16-25 in the North West of England and South Wales. Although I-AGS is not explicitly referred to, it is implied in the description of polarised shame-pride discourses that limit the available subject positions available to LGBT people as they negotiate heterosexist contexts: either the "proud" or "ashamed" selves who can either cope with or are distressed by AGS. Rather than assuming that young people internalise anti-gay prejudice and heterosexism, McDermott et al. (2008) note multiple ways that young people resist the shame associated with it through strategies including: normalising and minimizing AGS, responding in an emotionally controlled manner as a rational adult, and positioning themselves as proud, which enabled them to occupy positions of more or less situational pride. The authors also note that sustaining proud gay identities requires resilience, which in turn requires access to resources beyond the individual.

The McDermott et al. (2008) paper represents an important attempt to access young LGBTQ peoples' views on how sexual minority identities are connected with extreme distress and self-destructive behaviours. Reflexivity is implied in the consideration of

the potential for the research to further pathologize LGBTQ identities, a risk which is mitigated by emphasising the heterosexist context. Unfortunately, despite aiming to recruit participants from a diverse range of ethnic and socioeconomic backgrounds in rural and urban locations, only White youth engaged with LGBTQ support groups were recruited, and therefore the transferability of the data is limited.

1.7.1.2 Taulke-Johnson (2008): Taulke-Johnson (2008) conducted interviews with university students (*N*=6) in their final year of university who self-identified as gay. Similar to McDermott et al. (2008), the author not only expresses an awareness of limited portrayal of LGBTQ university students from the pathologizing position of a shamed victim within a "Martyr – Target - Victim model", but takes its aim as detailing counter-narratives to this. The study utilised a thematic analysis of data using a constant comparative method, and interpreted the data as demonstrating an overarching theme of making positive sense of their experiences of negotiating gay identifies. This is described in sub-themes that capture students' anticipation and experience of university as a "golden opportunity" to explore their sexuality and where they "had fun", despite any anxieties associated with the experience of "coming out". Again, I-AGS is not explicitly referred to, but there is a focus is on AGS and compulsory heterosexuality, which the author suggests the gay participants risk unintentionally perpetuating by passively responding to anti-gay and heterosexist discourses and humour.

A limitation of the study is that there is no information provided about the recruitment strategy, and like other studies, the findings have limited transferability. Although the paper is important in that it achieves its aim of providing a counter-narrative, there is no indication of personal reflexivity, and the extent to which the researcher maintained neutrality and/or their own position may have influenced the research process does not appear to have been considered.

1.7.1.3 Schubotz and McNamee (2009): This research aimed to investigate the extent to which existing developmental models of gay identity formation applies to a social context that is distinct from the rest of the UK with regards to its socio-religious and political context, especially in relation to gay rights, and of exploring the impact of that context. In-depth semi-structured, "problem-focused" interviews were conducted with young gay men aged 14-25 (N=20) years old within two large-scale mixed methods studies.

The focus of both studies was generally on young men's sexuality and the experience of "coming out" in Northern Ireland. The data was analysed using techniques based on grounded theory and the principles of the biographical narrative interview method developed to explore individual and collective lived experiences (Strauss & Corbin, 1998; Wengraf, 2008). The narrative of the longest interview that contained a rich description of a 19-year old's "coming out story" was used to relate identify formation in Northern Ireland to that described by the Cass (1979) model and which, the researchers suggest, shows "essentially the same patterns as everywhere else" (p. 200), with additional dimensions of difficulties were further explored through "particular incident narratives", excerpts of which describe the "almost exclusively" negative influence of the church within the educational system. This paper does not explicitly refer to I-AGS, but rather focuses on "enforcement" of "social expectations" and "disadvantage" experienced by gay people in Northern Ireland generally but particularly in more rural areas (p.202).

There was specific funding available for this research, and the recruitment strategy of this research was extensive, using virtual and material promotional tools including targeting young people through LGBTQ organisations and commercial spaces, gay and mainstream press, universities, and youth drop-ins. The insights it offers into the experience of young gay men within a distinct socio-political context are important. The study is limited, however, by a lack of evidence of reflexivity outside of an acknowledgement that the interviews were "problem-focused", which implies the research is approached from a particular perspective that is not shared and therefore cannot be considered by the reader.

1.7.1.4 Doyal, Paparini, and Anderson (2008): This study is based on the experiences of migrants from Sub-Saharan Africa (*N=8*) aged 18-40 living in London. Its aim was to fill the "major gap" that exists in the research base in relation to the well-being of gay/bisexual African migrants. It utilised semi-structured interviews, which were carried out by a white female researcher, to explore the narratives of black African MSM, with a particular emphasis on the development of their sexual identities. Again, I-AGS was not referred to explicitly, although again it is implied in more specific descriptions in retrospective accounts of associating "sexual difference" with "negative self-images...making them feel guilty and abnormal" when growing up (Doyal et al., 2008, pp. 176–177). The central themes relate to how the tension between cultural, religious, social and sexual identities are resolved differently by different men, and challenges the idea of a "true universal gayness" usually associated with white, middle class men in the Western world.

Again, the transferability of the research is limited, predicated on a small convenience sample of Black African men who were relatively well-educated relative to the general UK population, and who had the resources to emigrate to London. Still, the research provided initial insights into a population which is described as "hard-to-reach". Furthermore, although the researcher showed personal reflexivity in acknowledging her gender and cultural background in the recruitment process, there is no evidence of how this was considered within data analysis.

#### 1.7.1.5 Anderson, Elam, Gerver, Solarin, Fenton and Easterbrook, 2009

Anderson et al. (2009) conducted in-depth structured interviews with first or secondgeneration Caribbean self-identified gay/bisexual men (*N=10*) aged 26-61 and HIV positive as part of the LIVITY study, the first HIV-related epidemiological research project to focus on the black Caribbean community within the UK (Anderson, et al., 2009). Aware of potential challenges to recruiting participants, the researchers utilised several strategies to optimise recruitment including the establishment of a multidisciplinary community advisory group of Caribbean sexual health professionals. The aim was to explore gay/bisexual Caribbean men's sexual identities, which are characterised as being in a "liminal" or "unresolved" state due to AGS. AGS is said to prevent these men from "complete acceptance" of their sexuality, which is associated with initial feelings of difference, as well as guilt, shame and regret. The researchers describe the research as following Herek's (1996) lead in distinguishing between "homophobia", as referring to the internalization of anti-gay prejudice, and "heterosexism", as an ideological system that stigmatises nonheterosexuality. Their analysis of the data interprets gay men as using a number of strategies to reduce what they describe as a consequent cognitive dissonance associated with their "unstable" identities, through overt and covert, external and internal "policing" of their own behaviour and that of other gay men.

The research methodology is not explicit although it appears to be thematic analysis. Although this detracts from the overall coherence of the research, it remains an important paper because of the initial insights it provides into the experience of Black Caribbean gay men. A further limitation is that the themes which were developed may have been influenced by the LIVITY study's focus on HIV, which may have led participants to focus on particular aspects or interpretations of their experience.

1.7.1.6 McKeown, Nelson, Anderson, Low and Elford (2010): One of the aims of McKeown et al. (2010) was to explore common themes related to being gay and from an ethnic minority background, through comparison of the experiences of South Asian, Black African and/or Caribbean men. Participants were recruited as part of the Men and Sexual Health (MESH) Project, a national study examining the sexual health of ethnic minority MSM, and again much thought and strategizing was put into recruiting what is considered a "hard-to-reach" group using convenience samples from multiple on- and off-line sources (Elford et al., 2010). The study utilised an email interview method, thought to both decrease power imbalances and increase readiness and a reflective approach to discussing sensitive topics over a series of email exchanges with the researcher. The analysis is based on 230 emails received from 47 participants aged 18-52 who responded to the questions of two emails or more. It is described as using an analytic approach based on content analysis (Ryan & Bernard, 2000) thematic analysis (Braun & Clarke, 2006) and grounded theory (Strauss & Corbin, 1998), although claims to the latter appear to be more aspirational as there is no indication of any attempt at theory generation.

An over-arching theme was ethnic minority men's view that their experiences as sexual minorities were more problematic and challenging compared to their white counterparts because of more intracultural policing of heteronormative transgressions (Anderson et al., 2009; Jaspal, 2012). The construct of I-AGS is used but again, it is not defined. Among the Black African and Caribbean men within their study, McKeown et al. (2009) describe a major theme of gay sexual identity as challenging cultural representations of masculinity, associated with emotional experiences consistent with I-AGS, namely personal shame. Amongst the South Asian men, a major theme was gay sexual identity as problematic because of cultural expectations to marry, which was

associated with experiences of regret in relation to perceptions of letting family members down. Unlike Jaspal (2012), reviewed below, no differences were detected between British Pakistani and Indian men.

Whilst the above difference with the Jaspal (2012) study may simply represent a different perspective developed in relation to a more heterogenous, age-diverse study sample taken from across the UK, it may also be an artefact of the McKeown et al. (2010)'s study design, which does not facilitate rapport and allow for more nuanced understandings that rely upon cues that are only available face-to-face. As a larger study the findings may have increased transferability, but again themes may have been influenced by the focus on sexual health within the broader study.

### 1.7.1.7 Jaspal (2012)

Like the McKeown et al. (2010) study above, one of the aims of the Jaspal (2012) study was to explore the relationship related to holding a gay and ethnic minority identity. Specifically, Jaspal (2012) sought to compare how British Indian and Pakistani gay men made meaning and cope with identity threat in relation to their sexual, religious and ethnic identities. He used a snowball sampling method to recruit self-identified South Asian gay men (N=15) beginning with his own social networks and contacts established in his previous research. Data from semi-structured interviews were analysed using thematic analysis (Braun & Clarke, 2006) through the lens of identity process theory (Breakwell, 1986), which was used to explore identity management.

Similar to other studies of gay men from ethnic minority backgrounds (Anderson et al., 2009; McKeown et al., 2010), participants generally describe a perception that it is more difficult to be from an Asian background and gay relative to their white counterparts. Within descriptions of thematic areas related to "incompatibilities in the self-concept" and "family, culture and interpersonal relations", Jaspal (2012) describes the experience of shame differently between British Pakistani and British Indian gay men. I-AGS is not explicitly referred to within this study, although the construct is consistent with some of the experiences described particularly by British Pakistani gay men (and the author uses it to describe the findings of this 2012 study in a later paper (Jaspal, 2017)). The experience described by British Pakistani gay men was similar to that described by McKeown et al. (2010)'s British South Asian participants; shame was characterised as being more intrapsychic in nature, accompanied by experiences of [dirtiness], guilt and self-hatred (Jaspal, 2012; McKeown et al., 2010). Amongst British

Indian gay men, however, shame appeared to be experienced within a more familyoriented, social context.

As noted by Jaspal (2012), a strength of the in-depth, small scale study is that it was able to provide sensitive and nuanced insights into British South Asian gay men's experiences, which again may relate to the differences that were detected between British Pakistani and British Indian gay men. Jaspal's (2012) paper would have been further strengthened by evidence of reflexivity.

1.7.1.8 Mole, Parutis, Gerry, and Burns, 2014: The aim of this study was to explore the extent to which the sexual behaviour and understanding of risk of Central and Eastern European (CEE) gay/bisexual men in London was influenced by migrating to the UK. This was also part of a larger study examining sexual attitudes and lifestyles of CEE migrants of heterosexual men and women and gay/bisexual men. Purposive sampling was used to recruit a total of 17 participants who completed a semi-structured interview that explored the attitudes and behaviours of MSM, which was highly relevant to the present research, even though the overall aim of the research was less so. The analysis used Fisher's Information-Motivation-Behavioural Skills model (1992) and a Framework Approach (Ritchie & Spencer, 1994) to identify various themes.

Although much of the data was not directly relevant to the present research, "factors increasing frequency of sexual activity", which captured participants' description of the impact of anti-gay prejudice and heterosexism in their home countries, was more so. Men provided retrospective descriptions of having to present a "normal" image of themselves as conforming to traditional gender norms and entering heterosexual marriage to avoid suspicion and "outright hostility." Although I-AGS is not specifically referred to, it is consistent with a participant description of being "internally 'paralysed' in my brain by the influence of the church", lifted by escaping systems of social control in the UK.

Like other studies above, this research is limited in its transferability, and data may again have been influenced by the focus on sexual health of the larger scale study.

1.7.1.9 Clarke and Smith (2015) This study explored how a convenience sample of 20 self-identified gay (18) and bisexual (2) men aged 18-41, mostly White British (but also including one participant who identified as mixed race, and one as Chinese) men made sense of their visual identities in relation to sociocultural pressures using an online qualitative survey. A thematic analysis (Braun & Clarke, 2006) based on a social constructionist epistemology (Burr, 2003) identified an overarching theme of men cultivating visual identities influenced by a number of competing pressures. These included the "coming out imperative" to be "out" as a "happy, healthy homosexual" (Kitzinger, 1987; Rasmussen, 2004), but also respected heteronormative boundaries as men attempted to position themselves as "gay, but not too gay." The concept of I-AGS is explicitly referred to as one possible explanation of the negative attitudes towards more feminine men (anti-effeminacy), which is not specifically defined but offered as a synonym for "negative feelings about being gay" (Clarke & Smith, 2015, p. 26)

Like other previous research, despite being designed to enable collection of data from geographically dispersed and "hidden" populations (recruiting participants through online sources, to complete an online survey), the transferability of the findings is limited by the reliance on predominantly young, white, middle-classed men who self-identified as gay.

1.7.1.10 Greenland and Taulke-Johnson (2017): The aim of this study was to explore the complexities in and boundaries between what is considered "discrimination" and "not discrimination" using a dialogical analysis that involved identifying and contrasting multiple accounts of the self. The researchers explore the above in relation to what they refer to as the "identity work" of 15 self-identified undergraduate students attending university in a medium-sized UK city, recruited through on and off-line advertisements through university channels (as described in Taulke-Johnson, 2010). From a perspective that views identity as socially constructed and performative (e.g. Gillespie, Howarth, & Cornish, 2012) interpretation of the analysis identified that the ways that participants constructed discrimination varied across four main identity positions which men shifted between: "I- as authentic individual, I-as what I am not (not camp and not a victim), and I- as powerful"; as participants moved between identity positions, so too was "discrimination" transformed into "not discrimination".

Again, I-AGS was not specifically referred to, although it is consistent with the position of the "shamed gay", which is described as one potential identity position that gay men

seek to distance themselves from in their performances of the "good gay" (Smith, 1994). It is also consistent with description of the anti-effeminacy attitudes which were expressed from the position of "I- as not camp", in which gay men were seen to be "performers of discrimination" as they distanced themselves from the position of the "dangerous queer" (Smith, 1994). Similar to the findings of Clarke & Smith (2015), it is suggested this is an attempt to claim a more moderate identity as a "good gay" (Smith, 1994), who is "gay, but not too gay". It was noted that men only directly spoke about discrimination from positions of power, in which they were active in challenging the discrimination (e.g. through education).

This research is also noted as being limited by the characteristics of the study sample: all participants were in their late teens or early 20s, were white and well-educated. Given the impact of intersectionality on gay men's experiences, the researchers suggest that participants' experiences of discrimination may be relatively narrow, excluding incidences of structural heterosexism related to experiences further along the lifespan.

#### 1.7.2 Summary of Papers

Personal accounts offered by gay male participants within the above qualitative research which explores topics related to gay identity, anti-gay prejudice and heterosexism contain descriptions of experiences which resonate with theoretical understandings of I-AGS. A number of gay men endorsed feelings consistent with I-AGS, including an early awareness of difference (Anderson et al., 2009; Doyal et al., 2008; Schubotz & McNamee, 2009; cf Clarke & Smith, 2015) and feelings of shame, "dirtiness" and guilt (Anderson et al., 2009; Doyal et al., 2008; Jaspal, 2012; McKeown et al., 2010). Similar to the White British gay men living in working class communities described above (Flowers & Buston, 2001), feelings of confusion, alienation and isolation were also described across other social contexts (McDermott et al., 2008; Schubotz & McNamee, 2009), as men attempted to reconcile their same-sex desire with their understanding of what it meant to be a 'man' (Doyal, Paparini, & Anderson, 2008). Although these findings were true across culture, class, and contexts, the roots of these feelings and their manifestations varied. That is, the different ways that gay men negotiated the tensions between various aspects of their identities, as well as the degree to (and the mechanisms by) which these are privileged or oppressed, all had an impact on the attitudes and feelings that men from diverse cultural backgrounds and locations had about being gay.

The majority of papers reviewed above did not, however, make explicit references to I-AGS, with the construct often poorly (if at all) defined when it was used. Despite identifying themes and experiences that were conceptually similar to I-AGS, most authors did not categorically reference the construct and instead used the language, for example, of "shame" (Greenland & Taulke-Johnson, 2017; Jaspal, 2017; McDermott et al., 2008). Whether this was a deliberate omission (e.g. based on taking a nonpathologizing, anti-deficit stance) or not was often difficult if not impossible to establish, particularly where the epistemological and theoretical perspectives informing the research were not made explicit. This was further complicated where there was not access to consideration given to personal reflexivity, which left the reader to question the extent to which the research process and data analysis had been influenced by the researcher, and how.

Despite not taking I-AGS as their research focus, the above papers provided initial insights in relation to how men relate to being gay across varying contexts and intersecting social identities within the UK. Although ethnic minority groups are usually underrepresented in the research literature, several of the papers explored the experiences of gay men from different cultural backgrounds. It was of note that the study populations of all three papers that focused on the experiences of gay men living in London were based on ethnic minorities and/or migrants and were more much more culturally diverse than the UK gay population itself. It was also promising to see that several papers examined gay men's experiences *in* context, and included both examples of easily recognisable and 'everyday' acts of resistance to AGS (Wade, 1997), through education of others and activism, to refusing to wish to have been born straight, continuing to act on same-sex attraction and just 'having fun' (Doyal et al., 2008; Jaspal, 2012). Although some explored both intra-psychic and socially oriented distress associated with gay men's sexual identity, the focus was usually on the internal or external; it was rarely both.

## 1.8 Research Rationale

Despite occupying a central position with theories and models of identify formation and psychological distress within the LGBTQ population, there is no one agreed upon conceptualisation of "internalised homophobia" or even its most salient aspects (Frost & Meyer, 2009; Williamson, 2000). Because of this conceptual ambiguity, it is difficult to ascertain where externalised AGS ends, and I-AGS begins; indeed, it is unclear whether it is even possible to meaningfully separate the two (Russel, 2006). Correspondingly, it is also difficult to distinguish between I-AGS and other responses to

and/or consequences of anti-gay prejudice and heterosexism. Furthermore, although the idea of I-AGS is important and widely accepted, concern has been expressed that the concept has primarily been defined by clinicians and researchers, and not the sexual 'minority' individuals who are said to be affected by it. As the above review of the literature demonstrates, when these voices are heard, and the context of their experiences listened to, our understandings of experiences that are labelled as "internalised" AGS are enhanced and may change.

Thus, this research aims to explore, clarify and re-contextualise the construct of what is referred to as I-AGS, from the perspective of gay men themselves, through answering the following research questions:

- How do gay men make sense of the concept of internalised AGS?

- What are the impacts of (and other responses to) anti-gay prejudice and heterosexism?

### 1.8.1 Clinical Relevance:

It is well-established that there is a higher rate of adverse mental health outcomes amongst the sexual minority population. A recent meta-analysis (Semlyen et al., 2016) pooling sexual orientation data from 12 UK population surveys showed results consistent with those of a frequently cited systematic review and meta-analysis, which indicated that that sexual minorities were one and a half times more likely to have depression, anxiety, and substance misuse issues and were twice as likely to attempt suicide in their lifetime compared to heterosexuals (King et al., 2008). To the extent that I-AGS has both been linked with adverse mental health outcomes and criticized for being pathologizing in its individuation of sexual minority distress, it is crucial that we develop our understanding of how men relate to the construct, in context; our understanding of the problem, particularly its location, will determine the appropriate focus for intervention.

### 2. METHOD

#### 2.1 Overview

This chapter introduces the epistemological position of the study. This is followed by an outline of the research procedure and analytic approach, concluding with the researcher's consideration of ethical issues and personal reflexivity in relation to the research process and analysis.

#### 2.2 Epistemology

The present research adopts a critical realist epistemological position as the most appropriate way of addressing the research questions. Critical realism exhibits a realist ontology, which acknowledges that there is a real world and that real processes, for instance those which relate to power, inequality, anti-gay prejudice and heterosexism, mould and generate observable phenomena, which can become better known, although there is an independent existing reality that cannot be directly experienced (Harper, 2012; Pilgrim & Bentall, 1999). In this way it differs from a realist position, which assumes that there is an objective reality and/or a single 'truth' that can be discovered through research, and which exists independently of the mind. It is also in keeping with a "moderate" social constructionistic perspective which views reality as mediated by history, culture and language; a subjective reality is constructed, with multiple perspectives of that reality possible (Burr, 2003; Maxwell, 2010). A critical realist epistemology was chosen for the present research because it offers a way of exploring the assumptions of universality and inevitability within both the theories that have influenced the concept of I-AGS, as well as the construct itself.

It is also worth noting that different 'critical' approaches take a different view on why criticism of traditional realism is warranted: "For Bhaskarians criticism is warranted on the basis of the analyst's privileged understanding of the oppressive aspects of the social condition and those responsible for it. For Campbell, criticism is something that scientists apply to each other, and this 'competitive cross-validation' is the means by which they get closer to the truth" (Pawson, 2006, p. 20). The position towards criticism taken within the present research spans both. From this position, there is value within the findings of previous research related to I-AGS, which taken together, compete to develop and improve our understanding of gay men's experience. Thus, not only is more than one perspective possible, it is also likely, given the meaning that people

make from their experiences is interconnected with the social contexts they are formed in.

A critical realist perspective recognises that societal oppression of sexual minority individuals does exist and can cause real discomfort and distress (e.g. shame), and that this may be mediated by internalization of anti-gay prejudice and heterosexism. It also, however, remains critical of reified psychiatric nosology, and the potential for further reification of socially constructed understandings of the roots of that distress (i.e. as a primarily internal, de-contextualised process) (Pilgrim & Bentall, 1999). It therefore acknowledges that our representations of I-AGS are socially constructed and have developed within particular historical contexts.

This position thus enabled taking a questioning approach to the taken-for-granted assumption that all gay men would experience I-AGS and/or relate to the construct as one that was meaningful, whilst also acknowledging the possibility that they do.

## 2.3 Design

## 2.3.1 Qualitative Approach

The present research specifically took a qualitative approach to allow for the exploration of the experiences that are labelled as I-AGS in gay men, with an emphasis on subjective meaning and context (Yardley, 2000), an approach which has the "potential to provide unexpected insights ... and valuable details of the personal and social context which impact on the meaning attributed to experiences" (Wilkinson, Joffe, & Yardley, 2004, p. 40). A qualitative approach also permitted the adoption of a broader lens with which to focus on how participants related to their sexual identity, *in relation* to historical and socio-political contexts (Midlands Psychology Group, 2012). This enabled the researcher to accept but not privilege or limit understandings of distress within sexual minority individuals as being linked to the internalisation of anti-gay prejudice and heterosexism, or as just an intrapsychic experience, and to consider whether and to what extent gay men connected their distress to other, external influences.

## 2.4 Participants

## 2.4.1 Recruitment

This study utilised both convenience and snowball sampling approaches in an attempt to maximise recruitment of gay men from diverse cultural and class backgrounds in an endeavour to reach a point at which conceptual generalisations could be made (Mays & Pope, 2005). Ten men were recruited through a combination of word of mouth, and physical and virtual advertisements placed in both gay affirmative and neutral spaces (shops, cafes and bars) in Central London and at the University of East London, as well as two popular social media platforms (Facebook and Twitter).

## 2.4.2 Inclusion Criteria

This research aimed to be as inclusive as possible, and recruitment utilised both identity labels and descriptions of same-sex attraction and behaviour (Savin-Williams, 2001). The inclusion criteria were anyone:

- ≥18 years
- who identified as gay, bisexual and/or queer,
- and/or identified as male and has been attracted to and/or has had sex with another man (MSM),
- lived in the UK
- communicated fluently enough in English to be able to describe their experiences

## 2.5 Procedure

## 2.5.1 Initial Contact

As mentioned, the research utilized many recruitment strategies. Participants indicated their interest by contacting the researcher using a private message on Facebook Messenger (to an account specifically created for the research) and/or by email. Upon contact, the researcher sought permission to provide a participant information sheet (PIS) to each individual via their preferred form of electronic communication (Appendix C). Time was given to allow consideration of the information before the researcher followed up to enquire whether the individual had any questions and/or was interested in participating, and if so, an interview was arranged at a convenient date, time and place, with the option of meeting over Skype or face-to-face. Where an individual was known to the researcher (personally or via a trusted third party), the option to meet in a private, confidential space either at the participants' home or workplace was given (as described in a different PIS; see Appendix D). All other interviews took place at UEL.

## 2.5.2 Semi-structured Interview

Prior to commencing the interview, participants were given the opportunity to ask any questions about the PIS and asked to read and complete the consent form, which included specific items in relation to audio recording and inviting participants to opt-in to

a prize draw for a £25 Amazon voucher, as an expression of gratitude for taking part. Consent was obtained for each item by marking a separate tick box, either in writing or by completion of a mandatory response item online (using the Qualtrics online survey platform), prior to the commencement of the interview (Appendix E)

This research utilised individual semi-structured interviews that took approximately 60 -90 minutes in total, approached in a way that was focused and flexible. Thus each interview began from and ended in the same position, but did not take the same path through the interview schedule, which was intended to generate deep and reflective exploration of specific aspects of gay men's lived experiences (Frith & Gleeson, 2012; Wilkinson et al., 2004). The interview schedule was developed with input from both of the researcher's supervisors, one of whom is a gay male psychologist with expertise in sexuality research. The schedule began with more general questions related to descriptions and evaluations of participants' sexual identities over time, and any life experiences that may have influenced these evaluations, before ending with questions that related to the concept of internalised AGS more specifically. A series of prepared probes were also used to supplement questions if participants struggled to elaborate in their responses (see Appendix F). Each interview concluded with a debrief, described further below (also, see Appendix G).

Power imbalances are inherent between researcher and participant, and the researcher drew upon clinical skills gained as a trainee psychologist to minimise these. The researcher was aware of the potentially sensitive nature of the topic of sex and sexuality, and took a straight-forward approach to discussing this to avoid embarrassment (Bellamya, Gotta, & Hinchliffb, 2011). The researcher was also sensitive to the disclosure of potentially difficult and/or shaming experiences. These were responded to in a way that was empathetic and normalising, and gave the participant control with regard to whether they wanted to continue the interview. Issues of power imbalance between the researcher and participant are considered further below.

### 2.5.3 Data Governance

As described in the PIS all data collected within the research process was treated in accordance with the Data Protection Act 1998. Personal details received within recruitment were stored within password-protected accounts, and were deleted after completion of the prize draw. Consent forms were scanned and held as electronic data on a password-protected computer. All audio-recorded information was immediately transferred to a password-protected computer file on a secure network using an

encrypted memory stick and deleted from the recording device. At transcription of the interview material, any identifying material was anonymised adopting a code of enhanced anonymity: use of lengthy passages was restricted, each participant was given a pseudonym and any potentially identifying details mentioned, therefore age ranges are used, and job titles and/or names of places, were also changed (Thompson & Chambers, 2012). All information was saved on a password-protected computer file on a secure network that only the researcher had access to. All personal information and contact details will be destroyed at completion of data collection; all collected data will be destroyed within 3 years.

### 2.5.4 Transcription

The audio material was transcribed word for word by the researcher using conventions in line with those recommended by Banister et al. (2011). Transcripts have been punctuated for readability, and, as per Bannister et al. (2011)'s view that pauses are only of limited analytical value, only pauses of more than approximately one second were transcribed. Pseudonyms were used for names and any identifying details were replaced with words within (). Where part of the extract is ambiguous, contextual information is provided in []. As described above, enhanced anonymity guidelines were used to attain a level of anonymity that would protect the identities of participants whose partners also participated in the study (and would therefore have knowledge of their participation).

## 2.6 Ethics

Ethical approval was sought from the University of East London (UEL), and was obtained subsequent to minor amendments as requested by the committee (see Appendix I and J), before commencement of the research. In order to remove unnecessary barriers to participation, a successful amendment request was made to interview participants who were known to the researcher in a confidential space outside of UEL (see Appendix K), as described above. The design of the study was informed by the British Psychological Society's (BPS, 2014) *Code of Human Research Ethics*.

### 2.6.1 Informed Consent

Informed consent was obtained by providing all potential participants with a PIS prior to arranging to meet in person and/or on Skype, to give participants time to read and consider detailed information about the nature and potential benefits of the research, what they could expect if they participated and/or wanted to withdraw, and how their data would be used and protected. Within the PIS, participants were advised that the

researcher would use quotes from their individual interviews within the final report, but these would be anonymised and the participant not be identifiable. Participants were given the opportunity to ask questions prior to completing the consent form.

## 2.6.2 Possible Distress

The PIS explicitly acknowledged the possibility that participants may find talking about issues related to their sexuality difficult and potentially distressing, particularly for those who had experience of anti-gay prejudice, discrimination, and/or violence, which often came up in conversation although not specifically asked about. At the beginning of the interview, participants were encouraged to let the researcher know if there was a question that they preferred not to answer, and care was taken throughout to conduct the interview in a sensitive manner. It was acknowledged that participants were encouraged to 'open up' within the interview, and may disclose information they had not planned to, and/or may have revisited potentially distressing experiences. The researcher adapted a "process consent" approach in which verbal consent to continue to talk about distressing experiences and/or to continue to interview was continually sought, reminding participants of the voluntary nature of the study and right to withdraw information (Polit & Beck, 2006). Participants were additionally provided with a list of national and local organisations which offered support to MSM (Appendix H)

## 2.6.3 Debrief

As per ethical guidelines (BPS, 2014), time was allocated at the end of each interview for a debrief in which the participant was given an opportunity to reflect with the researcher on how they had found the research experience and raise any concerns, as well as to revisit consent (reminding participants of their rights to withdraw their data) and the list of available support.

## 2.7 Analytic Approach

## 2.7.1 Justification for Thematic Analysis

As a method for identifying and analysing patterns of meaning, thematic analysis (TA; Braun & Clarke, 2006) was the most appropriate analytic approach to answer the study's research questions. As described by (Joffe & Yardley, 2004), TA is well-suited to explicating a particular group's conceptualisation of a particular phenomenon. In the present research, for instance, this was achieved through a process of illustrating which themes were important and meaningful to gay men in describing I-AGS (Daly, 1997), with the aim of highlighting the most salient "constellations of meanings present" across multiple dimensions (Joffe, 2012); the present research anticipated a focus on but was not be limited to exploring affective, attitudinal, and contextual domains.

The researcher's overall aim in interpreting the data was to gain a fuller understanding of participants' intended meanings, using a self-conscious, reflexive, and ethical approach throughout (Willig, 2012). The analysis took an inductive and deductive approach, in which codes, themes, and interpretations were generated from a close reading of the data, which was also informed by existing theory and research. Given the theoretical understanding of the unconscious and shaming nature of I-AGS, the possibility of other significant, 'unspoken' and/or latent meanings were borne in mind. At the same time, the researcher was also aware of ethical concerns that have been raised in relation to the potential for "pathologization through interpretation" using a "suspicious" lens (which, for instance, seeks to reveal hidden meaning) in relation to research involving gay men specifically (Willig, 2012)

The researcher thus sought to negotiate this tension by taking a more "empathic" approach which attempted to elucidate, amplify and understand potential implicit meanings in the data (Willig, 2006, p. 29), whilst also being curious about (rather than suspicious of) other possible implied interpretations. Particular attention was paid where participants were seen to describe specific experiences in a different and/or contradictory way, which suggested the possibility of internal conflict. As another way of guarding against "pathologization through interpretation", the researcher was also sensitive to how potential meanings of such experiences may also have been influenced by particular historical, social and political contexts (Joffe, 2012). As per the critical realist position the data was analysed from, where interpretations are offered, it is emphasised that this was done tentatively, and as only one possible reading of the data.

## 2.7.2 Analytic and Interpretive Process

Given qualitative research has been criticized for omitting 'how' analysis was done (Attride-Stirling, 2001), Braun & Clarke's (2006) six phase guidelines were considered prior to any data analysis, in order that decision-making process be made explicit. Below is a more detailed account of the analytic process summarised above: 2.7.2.1 Data immersion: As the researcher had both conducted and transcribed the interviews, the researcher had already begun the immersion process. After an initial reading of the entire data set, each interview transcript was 'actively' read and re-read several times, searching for meaning and patterns, whilst making handwritten notes to capture ongoing thinking and reflection in a more flexible way before moving on to formal coding.

2.7.2.2 Generating Initial Codes: The entire data set was coded using NVivo (10) software. This facilitated a generous approach to coding, making it easy to code many possible patterns; in keeping with a binocular approach, these were both data- and theory-driven. Data was coded inclusively, retaining relevant contextual data, and individual data was often coded many times to capture rather than ignore tensions within the dominant stories. For a list of initial codes, please see Appendix L.

2.7.2.3 Searching for themes: A flexible approach was taken in identifying themes across the data set, with consideration given to prevalence but not rigidly so. This flexibility allowed priority to be given to a group of themes that were particularly relevant to the research questions, allowing a more detailed and nuanced account of gay men's meaning making and experiences to be developed. Although NVivo (10) was used for coding, handwritten notes were also used to aid more fluid and reflective thinking in considering how codes could be combined to form overarching themes (an act which was self-consciously treated as an interpretive one), before returning to arrange themes and codes into hierarchies within NVivo (10) to facilitate their refinement.

2.7.2.4 *Reviewing themes:* Each theme and subtheme was reviewed with regards to coherence within and distinctiveness between them before re-reading and further coding the entire data set. For a list of intermediate coding/themes, see Appendix M.

2.7.2.5 Defining themes: In an iterative process of conducting a detailed analysis of each theme by breaking it into hierarchies of sub-themes, and shaping each into a 'story' within the larger "story" being written in relation to the research questions, the "essence" of each was determined, named, and given structure.

2.7.2.6 Producing the report: In writing the report, vivid and easily identifiable examples thought to capture the essence of each subtheme were embedded within a narrative that, as described above, took an empathic approach to going beyond description of the data.

## 2.7.3 Reflexivity: Researcher's position

Reflexivity is considered an essential part of both a critical realist approach and the qualitative research process more generally. Personal reflexivity refers to how our own values, experiences, and social identities have shaped the research, and how the research in turn has influenced us as researchers and lay people (Willig, 2001). The former will be considered here, whereas the latter will be addressed within the discussion.

In order to continue to remain aware of the influence of my own experiences in relation to AGS and I-AGS, I began and continually added to a reflective journal as a way of creating and maintaining a reflective space. The following represents a summary of those aspects of my identity and experience that seemed relevant to the present research, and which I continued to hold in mind:

- middle aged white North American who moved to the UK in my early 20s, and consider myself to be from a middle-class background
- have 'left-wing' socio-political views, and as a trainee clinical psychologist at University of East London (UEL) have been further influenced by the more critical and social constructionist ideas which emphasise the importance of context in understanding distress
- have first-hand experience of anti-gay prejudice, violence and heterosexism as a gay female. I was familiar with the concept of 'internalised homophobia' prior to psychology training, and perhaps in part due to the extent of the systemic heterosexism I have experienced (especially in interactions with institutions based in the United States), prior to commencing this research, was resistant to the idea of internalised homophobia

Attention has been drawn to the complex power dynamics operating between researchers and participants (Willot, 1998). Throughout each interview, I was situated in different positions in relation to the participants; despite ostensibly sharing the category of 'sexual minority', our identities intersected in different ways with regards to gender, age, education, cultural background and class. As a gay female conducting research with gay men, the boundaries between shared "insider" and "outsider status"

were complex and in constant flux (Sherif, 2001). Evidence suggests that the shared experience of 'marginality' can be influential in building rapport and facilitating openness (Bellamya et al., 2011). It did not seem important for me to explicitly identify myself as gay, and indeed I was aware that although doing so explicitly would highlight a shared aspect of identity, it would also draw attention to difference. Instead, as a way of building on the shared status of sexual minority, where opportunities presented themselves, I responded to men's descriptions of experiences in a way that made my sexual identity more explicit.

# 3. ANALYSIS

This chapter provides the main findings of the data interpretation and analysis. A summary of the sample demographics is followed by a thematic map with an overview of the main themes and subthemes, which are each discussed and illustrated with raw data samples.

## 3.1 Sample Demographics

Table 1 summarises the demographic details of the ten participants. The names are pseudonyms and other identifying details have been changed to maintain confidentiality.

Name	Age	Cultural	Location	Years Identified
		Background		as 'Gay'
Dennis	65-69	White British	Rural -> City	10-15
Larry	65-69	White British	Town	20
Michael	50-54	White British	Town -> City	25
Bruce	45-49	White British	Town -> Town	5
Ryan	45-49	White British	Town -> City	20
Shaun	40-44	White British	Rural -> City	25
Jason	40-44	White British	Town -> City	5
Nick	35-39	Black British	City	20
Anthony	35-39	White British	Rural -> City	20
Sam	20-24	Mixed White	City	5
		British/Black		
		Caribbean		

# Table 1: Sample Demographics

All participants self-identified as gay. Most described 'knowing' they were attracted to men and/or were gay from an early age but waited until they were an adult to publicly identify as such. Before "coming out", half initially identified as bisexual, and two had entered heterosexual marriages and had children but were either divorced or in the process of divorcing. A majority had relocated to more urban contexts for reasons directly attributed to their sexuality.

## 3.2 Thematic Map

The results can be conceptualised visually in the thematic map in Figure 1. Three overarching themes were identified, each which contained several sub-themes:

The majority (9/10) of participants were familiar with the concept of I-AGS, however it was almost exclusively recognised by reference to 'internalised homophobia'. The term IH will therefore be used in places within the results. Words in italics represent the interviewer's words.

# 3.3 Providing the Context

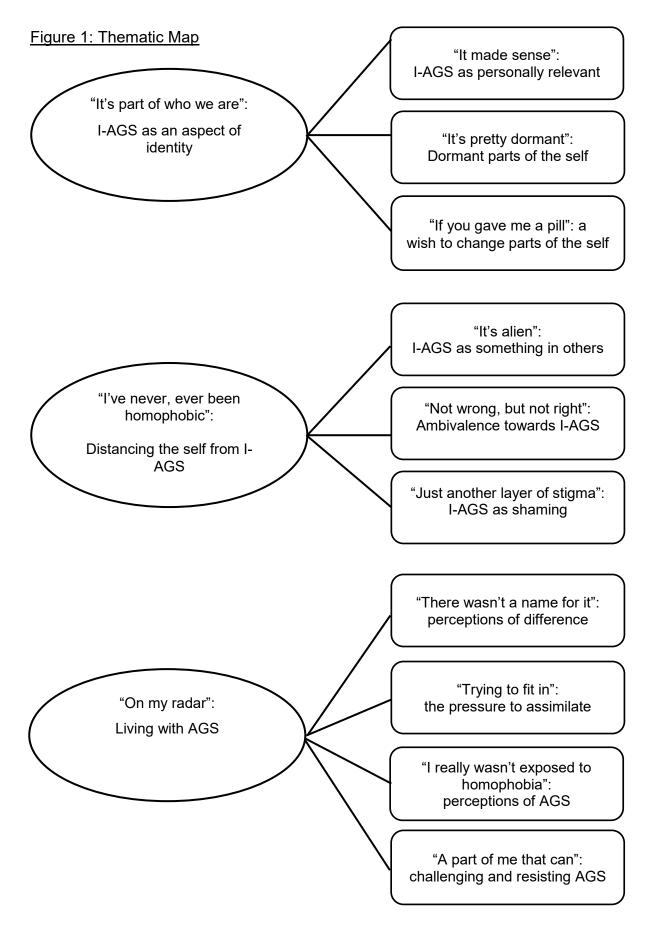
One intent of the interview was to attend to the context around the men's experiences and feelings in relation to growing up gay, as the source of I-AGS. It was of note that descriptions of context, particularly in relation to the time or 'era' and the relevant cultural (e.g. hegemonic masculinity and heteronormativity), social (e.g. as captured in the lack of positive representation, and particularly in relation to HIV), political and legal signifiers (particularly Section 28 and age of consent), were often provided before any probing by the interviewer. It was also of note that 'era' was identified as an important influential factor in participants from a range of ages, including the youngest.

## 3.4 Theme 1: "It's part of who we are": I-AGS as a part of identity

The first overarching theme relates to how participants who were familiar with the concept of internalised homophobia understood and related to it.

## 3.4.1 "It made sense": IH as personally relevant

The majority of men described a "culture of homophobia" (Michael) and most men made direct or indirect references to IH, or talked about ideas conceptually similar to "internalising" aspects of cultural homophobia, as they acknowledged experiences consistent with IH throughout the interview. About half of the men readily



acknowledged I-AGS as personally relevant, albeit in different ways. Michael described the moment he came across the concept of I-AGS whilst reading some personally relevant research about gay men and substance use said that I-AGS "made sense; it was like a penny-dropping moment".

Some used derivatives of the word 'internalise' as an explanation for why they felt a particular way in a given situation:

My...worry about disclosing [my sexuality] is ... to an extent which doesn't come from people actually responding negatively to me, but it's something I've internalised from <pause> kind of wider culture and my parents (Anthony)

Here the word 'internalise' can be seen to describe and connect an understanding of their own and others' personal experiences to a wider heterosexist context or cultural narrative.

Spontaneous use of a form of the word 'internalise' implies greater familiarity with the construct of I-AGS, and it is unclear to what extent the construct might be retrospectively applied in defining a particular experience. However, other participants also referred to ideas that were conceptually similar to 'internalising' homophobia, but using novel language to describe how ideas, feelings – particularly shame - and experiences related to heteronormativity and AGS are "installed" (Jason) or "embedded" (Shaun) from the environment and society. Other participants referred to I-AGS as "learned" (Nick).

It is also of note that the way these men spoke about both their experience of homophobia and I-AGS indicated a greater awareness of both overt and more subtle AGS.

## 3.4.2 "It's part of me": I-AGS as a "dormant" part of the self

Not only did some participants describe I-AGS as something that they identified with, some described it as something that they incorporated into their identity. Here Michael describes I-AGS as part of a personal but also collective identity:

It's a part of who I am really... how could you change that, it's like denying it's part of our history, it's part of who we are (Michael)

Michael, for instance, goes on to describe feeling connected to a collective struggle after he refers to the effect of an increase in hate crime and mass violence against gay men abroad

on how he feels as a gay man: "we can't sit and rest and take things for granted, we still, there's still a fight to be had."

This sense of I-AGS is also seen, to an extent, in Jason's explanation that the shame that he described as "installed" in him was something he has "had to live with, it's part of me and it's something I've had to sort of challenge...a lot." In some contrast to Michael, although Jason acknowledges an experience of internalised shame, as do several other participants, he does not connect this to I-AGS, or any kind of collective gay identity.

Participants who experienced I-AGS as personally meaningful spoke of it as something that is still present more or less consciously; as "dormant" but capable of being "triggered" on a day to day basis by external factors:

I think it's really hard to grow up in this society and not have a sense of what you are is shameful or, or wrong in some way

Moving back to the, um, present, is that still there?

<pause> uh probably somewhere I mean I think it's pretty <pause> um <pause> dormant but I think in certain situations...it can still be activated (Shaun)

Michael also elaborates on how the I-AGS that he sees as a small part of himself interacts with both his emotional state and the surrounding context, both of which he describes as capable of acting as a trigger that "pulls out" fear of external negative reactions and threat, and feelings associated with I-AGS:

You see those hateful comments or you see something on the news then and you look at what's happening in Chechnya and things like that it's horrific... and that then triggers out those things, like that could be me...

Is there still a part of you that still has those, um, you know, you talked about that self-hatred that shame, is that still with you?

A little bit, but it's not all of me you know, it's not all of me. When I'm ...not feeling confident ...if I was feeling a bit low, if I was feeling down...you know, feeling stressed then maybe that yeah because those vulnerabilities are there you know ... they're neatly packed away but they're there (Michael)

In contrast, Sam describes I-AGS less as something that lies dormant and is "triggered" but as a more active susceptibility:

If you don't really like the way that you feel, you're more susceptible to getting upset about it... unless you really are 100% yep pro-gay I am what I am, you're gonna be bothered by it (Sam)

Most participants spoke about common stereotypes, with the most frequently referenced related to effeminacy and promiscuity. Here a participant describes how stereotypes can act both act as a "trigger" and is a manifestation of I-AGS:

There are stereotypes that fly around, and when those stereotypes come back at you, you start to internalise some of the feeling that goes with it (Nick)

Stereotypes related to effeminacy were situated in relation to overarching gender hierarchies within larger society. Here Sam offered a description of his experience as a gay man within a male-dominated work environment:

I think in corporate world, it was men, masculine men, normal men, women. Like they were always at the bottom ... but to then be a gay man, you'd then become below women, because you're seen as the lowest of the low sort of thing. So in a corporate environment I'd always <pause> identify as a straight man (Sam)

Michael also described how being "obviously effeminate" led not only to experiences of anti-gay, misogynistic abuse, but being blamed for them:

I was one of the obvious effeminate ones, you know, I could never hide it, and I remember somebody being attacked and somebody saying to me, it's your fault, because you were mincing up the street, do you know what I mean? It wasn't my fault that they got attacked...

### So somebody actually said that to you?

Yeah ... so it's kind of carrying those things, you think, well you know, sometimes you, you know, you can feel a bit silly and flippant ... you're aware of mannerisms and things like that and, but I'm much better [at] challenging that and think, well yeah this is where I am, this is who I am, it's fine (Michael)

The implication that Michael should have hidden his effeminacy, or at least tried to, and his description of carrying things, is consistent with Nick's description of stereotypes as a potential trigger for I-AGS. Michael's awareness of his I-AGS, however, enables him to recognise and assert that it was not his fault, as way of challenging it.

## 3.4.3 "If you gave me a pill": a wish to change parts of the self

This subtheme captures how some participants described I-AGS using more pathologizing language. For instance, some men almost referred to I-AGS as a chronic condition that they think they "have" (Shaun), or "suffer" from (Sam). Many participants also made historical references that they would have been "one of those people who said if you gave me a pill to become straight I would do that in a flash" (Shaun).

I know that the likelihood of pill coming out tomorrow or within my lifetime is very, very low and very slim, and even if a pill did come out there'd be enough media frenzy against it that it probably would never materialise

## Hmm

So, it's accepting that... making the best of a bad situation (Sam)

Implied within narratives of 'magic' pills and wands that would allow individuals the ability to choose to change their sexuality is an essentialist assumption that sexuality is biologically predetermined, and being gay was not perceived as a preferred choice – which Sam was very clear remained his position. For some, this was explicitly connected to real stressors associated with being a member of an "oppressed" minority group:

Right up until you know the present day although less so, so it's, it's quite a <pause> see still I think it would be foolish just to let go of <laughs> the idea that you know gay people aren't oppressed and it's not a disadvantage,

Yeah

because it is (Shaun)

Most of the time, however, this wish was less connected to overt internalised anti-gay prejudice than more subtle heterosexism, expressed in statements that referred to perceptions of being heterosexual as being "easier" (Sam, Shaun, Larry). For instance,

in recalling how an experience of unrequited love as a young adult may have led to him entering a heterosexual marriage, Larry recounted:

Did [the experience of rejection] have an impact on how you felt as a, a gay man ... or was it more just something that had such an impact on the course of your life?

I would think it did affect my thoughts about my sexuality that being gay was too hard um, and you're not gay anyway cause you've got girlfriends, you know. So go that way you know, don't you know, forget it, um. But of course I never did forget it, and it you know, I was always playing one side and then the other and leading a double life (Larry)

Other participants expressed similar sentiments:

[A girl and I] kind of got together for a little while, but it was kind of drug fuelled, and I thought, oh this would be great if I was straight, you know, or if I was bisexual. Because it just makes life easier, so I kind of like bought into the idea (Shaun)

Where most participants talked about these ideas being more dominant in the past, Sam still spoke of them as dominating in the present.

> If you think about a wedding, well, who walks down the aisle and who waits there when it's two men, how does that work? It's like having to adjust a life, traditional life, to a new normal ... there's so many alternations that you've got to make to live a certain life when it would be, for myself, much easier for the things that I want to be living a traditional life <pause> of a man and woman (Sam)

Also, with the exception of Sam, none of the other men who retrospectively identified themselves as possibly wishing to become heterosexual said that they would still do so, which implies that their I-AGS has grown less pronounced over time. Sam's experience is consistent with coming out models, and also indicates that his attitude towards being gay is changing in a way that he sees as a positive direction for him:

When I talk about my partner now I look at the future and I do see us getting married and at one point maybe having a child (Sam)

### 3.5 Theme 2: "I've never ever been homophobic": distancing the self from I-AGS

This theme captures how some participants expressed a particular understanding of and ambivalence towards I-AGS, and the ways that some gay men appeared to try to distance themselves from I-AGS as personally relevant to them.

## 3.5.1 "It's alien": I-AGS as something in "others"

Those participants who did not hold a more traditional understanding of I-AGS or IH, hypothesised that it referred to people who are homophobic towards others.

## What would you understand internalised homophobia to be?

Can people that are out be homophobic? ... I've never ever, I've never ever been homophobic it's never

## Mm hmm

It's never pause it it was never something that that bothered me. I was never <pause> 'em, I knew I was gay within myself and I was never prejudiced ... but I have heard of it, people 'em, who are in that boat (Bruce)

Like Bruce, other participants also spoke of IH in a way that suggested they did not register the 'internalised' aspect, or conceptualised of IH as indistinguishable from 'just' homophobia.

It was frequently suggested that others were (internally) homophobic because the individual was gay themselves but not aware of and/or struggling to "accept" their own sexuality:

## What do you understand internalised homophobia to refer to?

A person who, um, may possibly be gay themselves but don't necessarily know it, but are reflecting that on other people ... because of what they're suppressing themselves (Dennis)

Ryan describes a similar understanding of IH, but like the participants above, invokes a pathologizing language in describing IH, implying IH as a mental disorder.

Not knowing the clinical definition for it, what I've always understood [IH] to kind of be is <pause> somebody that is gay that's not accept-, that you know, that can actually be homophobic themselves (Ryan) Another common theme across all participants was the idea that people who are homophobic are coming from a place of "ignorance or stupidity." (Michael)

> I don't feel like I have internal homophobia and I think when I see it and hear it in other people it is exactly that: either they are latent homosexuals who are trying to hide it or they're uneducated and you know not sort of people that I want to be around anyway (Larry)

Through descriptions of "homophobic" others, participants could be seen to put further distance between themselves and IH, and which may have served to strengthen a certain amount of resistance against IH as relevant to them. The connection of AGS to ignorance and lack of education was also accompanied by a slight change in tone, as participants appeared to invoke feelings more akin to pity rather than fear, as illustrated in the examples below:

It's totally alien to me, so yeah, I find it quite interesting, quite alarming that people are <pause> in that position suffering in that way (Dennis)

Similarly, another participant says:

I think it's quite sad if people have it or feel that way.

Mm hmm

Um, you know I think it's quite disappointing (Ryan)

## 3.5.2 "Not wrong, but not right": ambivalence towards I-AGS

There were many participants who spoke of some experiences that were consistent with traditional understandings of I-AGS, describing emotions (particularly shame) and internal conflict associated with I-AGS, but who (at least in hindsight) at other times still appeared to express ambivalence towards some more fundamental aspects of I-AGS. Some participants, for example, did not recall ever believing prejudiced narratives, at least not necessarily. For instance, Bruce, who was going through a divorce from his wife whom he is separated from, described his early experiences as characterised by emotional conflict:

Especially in the early years before I came out, I was fighting it and I was trying to resist it and I was angry at it and I didn't want, I didn't want it to be me, whereas now I don't care...

...can you recall what feelings you had at that time about being gay?

I think there was a bit of fear mixed in with the shame (Bruce)

Yet, in the passage below, he can be seen (at least initially) to resist the idea that he ever believed the anti-gay messages that he received from his dad or society:

Was there ever any part of you that believed the messages that you got from your dad or society?

Nope, no, <pause> no, what ... that it was wrong to feel the, I don't know, that's a difficult question to answer, now ... I suppose <pause> I suppose I don't ever think that what I was feeling was right

### Mm hmm

I think ... I think I just did what I did because I thought it was what was expected of me, 'em <sigh> (Bruce)

Here Bruce can be seen to acknowledge emotional experiences associated with I-AGS, but he attributes these to the expectations of others. Other participants also endorsed having experienced feelings associated with IH in relation to their sexuality, particularly shame, as well as fear. Like Bruce, they were also clear this was in the past, and they placed more emphasis on external pressure rather than internal factors, related to the historical context they were living in.

Here, Larry talks about how his feelings intersected with his personal circumstances, specifically, being in a marriage with children and having no way of "exploring [his] sexuality", and the wider context:

It sounds like your sense is that your feelings were very much tied up in the circumstances that you were you were in?

In the circumstances, the age that I was born into, um you know the 80s, with the AIDS thing, you know all that was really, really hard. And it, it enforced the fact that being heterosexual and being normal was by far the easier and better path to go ... to be gay was to be, uh, you know, it was a shameful thing and it was dirty and it was, uh, you'd get a disease from it, a deadly disease... yeah very, very different, different times (Larry) The homophobia described by these participants was overwhelmingly overt, and the feelings of fear and shame expressed is described as a reaction to a hostile social environment:

# What effect if any would you say internalised homophobia might have had in your life?

<Pause> um, I think it's that <pause> when you hear it <pause> it's, it rings alarm bells <pause> and it's that, that shame and guilt and embarrassment and, um, you know, that somehow you're different, and they can point the finger, and um, you know laugh or

### Hmm

worse, and so it's like you know, you've got to hide and you've got to keep quiet and you know, not put your head about the parapet (Larry)

Rather than activating a 'dormant' homophobia that exists within him, here Larry describes experiencing shame and other distressing emotions as a more acute reaction to the external homophobia that he heard.

Other participants also refer to societal expectations of compulsory heterosexuality and a lack of social acceptance towards identifying as gay men, but were not particularly aware of having perceived having sex with men and/or being gay as a stigma in and of itself, and/or experiencing distressing emotions associated with I-AGS:

You say that you kind of carried on living a gay 'lifestyle' but you also suppressed it, ... that kind of, if you had [been openly gay] you might have been out of a job...would there have been any other reasons?

Um, subconsciously that it would be seen as socially unacceptable **then**, uh the 1960s ...

## Do you think you at any time believed that it was unacceptable?

That's a good question...I can't honestly answer that, I can't say to you yes, I did, and I can't say to you no I didn't. Put it- I suppose it's not in my head as something I saw as a stigma, particularly (Dennis) Some participants also reported the importance of having a "good upbringing" as a potential buffer against AGS. Although having "tolerant" parents did not appear to necessarily make it easier initially "come out", it did mean that participants experienced more supportive reactions when they did.

## 3.5.3 "It's just another layer of stigma": the concept of I-AGS as shaming

Some participants also appeared more oriented to the imperative of pathologizing gay men:

I wasn't like sexually active <pause> up until my 20s... and then y y you start to kind of have more fear about what you're doing / not doing. But I think also some of the kind of negative experiences aren't connected to necessarily being gay, they're connected to the people you meet

Right

You know, and I think it's important to make the distinction

Similarly, whilst some participants appeared to distance themselves from the concept of I-AGS because it was alien to them, others appeared to resist it because they experienced it as shaming:

...is there anything that doesn't fit for you about this idea of internalised homophobia?

It's just like it's just another layer of stigma actually

## Mm hmm

<pause> it's like you get stigmatised for being gay, and then all of those horrible labels society throws on you that you internalise, then you get stigmatised for internalising them too

## <laughs>

So it's like lose/lose, so it's just like another, another thing to feel ashamed of (Shaun)

## 3.6 Theme 3: "It was on my radar": living with AGS

This theme attends to the different ways participants described growing up with an early sense of difference, and of perceiving and responding to the pressure of overt

and subtle anti-gay prejudice and heterosexism, which was more or less on their radar from childhood to the present day.

## 3.6.1 "There wasn't a name for it": perceptions of difference

The most commonly reported perception that gay men had of themselves growing up was of being "different" or a sense of "otherness". Within many retrospective accounts, men usually connected this to an awareness of being attracted to the same sex, but not yet necessarily equating that with being gay.

I didn't know what this thing was, there wasn't a name for it so before that it was just like this, I just didn't feel the same (Michael)

It became apparent within interviewing the men that many held different attitudes and feelings about being attracted to and/or having sex with men, versus identifying as gay. For some men, they had always been comfortable with and "enjoyed" having sex with men, and any internal conflicts focused more on identifying as gay, personally and/or publicly. For instance, Sam, who "hates" being gay, "loves" and does not experience any conflict in relation to having sex with men:

How do you feel about being attracted to and sleeping with men?

Ok, love it

Love it...

... it's what I'm attracted to, so I'm going to enjoy it. It doesn't repulse me, and I don't feel like disgusting afterwards or anything like that (Sam)

For others, the opposite was true:

Having sex with men is not to be celebrated... that's like the worst part of it, uh, but the other stuff like... being part of a, you know an alternative social scene

## Mm hmm

to me is to be celebrated. But obviously, that's where the shame comes, it's like it is the sex part, probably (Shaun)

Often the sense of difference was more in relation to perceptions of traditional masculine ideals and gender conformity, which was unsurprisingly exacerbated for those men who described themselves as being more effeminate when younger:

I was a minority or I was different to the norm. I [wasn't] like, sort of like, macho (Jason)

People were always mistaking me for a you know a girl I was very kind of like different I had long hair and even I had a very my voice didn't break until I was much older and that was horrible (Michael)

This perception of being different was further confusing for men who did not see themselves as identifying with any of the available and/or dominate representations of gay men and culture:

I think <pause> it was such a taboo thing to be gay to be homosexual...it almost was as if it didn't exist, and that the people on television who were supposedly gay, Larry Grayson and Dick Henry, you known, these different characters <pause> they were portraying a sort of pantomime version of it, and I never identified with that

Ok

So I couldn't, I never saw <pause> a gay person who, who I could identify with. So putting a label on it was really, really difficult (Larry)

Another participant describes how the general lack of representation of sexual diversity was accompanied by a lack of discussion or silence that also served to perpetuate it.

There was never a kind of balance of representation, so in the culture whether it was media or whether it was, you know, newspapers, or the discussions in our immediate area where we lived: it just was not discussed in the same way, and when it came up 'gay' it was always this super campy or sexualised version of a gay man and that was never something that was discussed in our immediate family. So then as a teenager I never ... brought that up because also that didn't represent me (Nick)

Indeed, silence was another prominent theme in participants' retrospective accounts: referring to growing up in the 60's, Dennis said that being gay is "not something you would go around talking about". Similarly, a younger participant also described how same-sex behaviour "was kind of like ok, but it was kind of like you know an unspoken thing that you did" (Jason)

The above examples highlight how the experience of "difference" can be exacerbated by lack of positive representation of sexual diversity and a language with which to talk about and make meaning of sexual difference. For many men, this absence of representation and dialogue left a lot of ambiguity for men to question the reality of and develop negative understandings about their difference:

### And how did you make sense of that otherness at that time?

In very negative terms: odd, freak, poof, queer, those sorts of things really (Michael)

Participants also described experiencing uncertainty and mental conflict. This also led some men to question whether to "believe" that they were different:

I can remember kind of having this mental conversation with myself of saying well I can't accept that I'm gay because or I can't say that I'm gay or you know even mentally I couldn't say to myself oh I think you're gay because then that would bring it that would make it real (Ryan)

I was very conflicted by it kind of about whether I kind of whether I believed this was true (Anthony)

Men also described their sense of being different as leading to a sense of loneliness:

You'd feel like you are all alone, cause ... you think no one else is, is feeling that or experiencing that (Anthony)

Another participant describes a sense of "imprisonment":

It's like imprisonment, I guess

### Hmm yeah

It's like you can see through the barbed wire to the world that you'd sort of think would be quite a nice place to be but there's no way out, no, no escape you - there is no way out um unless you, you know give up everything, give up family and move away and you know just become an anonymous person in a big city like London um which I did contemplate, I did think about doing that, but I just wasn't brave enough really to to to move away (Larry) Considering these experiences and isolation, it is not surprising that some men attempted to resolve this conflict by "[pulling] back" from identifying as gay (Shaun), by identifying as bisexual (Shaun, Larry, Sam), entering into heterosexual marriages (Bruce, Larry), and in the case of one participant, becoming an evangelical Christian and choosing not to act on their same sex desires (Anthony), in an attempt not to be different. Several participants also emphasised that their sexuality and/or gay identity was not the "whole" (Michael) but "just a part" of them:

"it's just who I am, my sexuality is not me, it's just a part of me" (Larry)

### 3.6.2 You try to fit in": the pressure to assimilate

A minority of participants described expectations of personal threat or violence if their sexuality was discovered. Retrospective accounts, however, focused more on social threat. Perhaps because of its simplicity and genericity, I was struck by how many participants referred to the desire to simply "fit in":

I know it sounds really simple but you kind of do see it, you know... the weakest kid is the one that gets picked on or the geek- you know or the one that gets bullied and it's the same thing. You take that thing of going well, if I'm going to be different, I'm then going to be that one that takes the abuse. So you try, you know, in small environments like that you try to fit in, and and be middle of the road as much as you can so you're not (Ryan)

Although here Ryan is speaking about the experience of being at a school in a smaller town, the sentiment can be found across participant accounts and ages.

I also increasingly became aware of participants expressing themselves in ways suggestive of patterns of thinking that appeared to reflect societal changes in acceptability of expressing overt anti-gay prejudice over time. For instance, whereas several participants recall and have since consciously rejected ideas, for instance, that being gay is shameful, it was still possible at times to detect more subtle endorsements of heteronormativity, consistent with descriptions of the "good gay" (Smith, 1994):

I think I've self-censored a lot ... I think I've kind of have a s- kind of self-pressure to not <pause> to be open about being gay without being too gay <pause>

Right, what do you mean by that?

<Laughs> I don't know, to be like, to not make a big deal of it, you know kind of that that you kind of get that narrative about <pause> kind of it's ok, if I don't make an issue of it <laughs> kind of thing

Yeah, yeah. Yeah, yeah.

And I think I've internalised a lot of that

This statement from another participant also suggests the internalisation of heteronormativity and ideals of the 'good gay', drawing comparisons between the assimilation of other oppressed groups and gay men:

You know, people will assimilate and everything will be fine, and I think the same with uh, you know, gay marriage. People at the time thought, you know, it's going to be the end of the world, but actually it's fine, and um you know people get on with it (Larry)

Similarly, other men could be seen to represent being gay as unremarkable, or "normal":

"I don't have any real strong feelings about [being gay], it just seems, I'm quite, I think I'm quite normal in my gayness" (Ryan)

To *not* have any strong feelings about identifying as gay or to be "normal" is, as described by the participant below, in many ways a hard-fought right:

There's a certain amount of appreciation for the history of those sort of pioneers within the gay movement who have gone forth and made real changes, made real strides for <pause> me to be able to be in a situation where I can live my life quite, you know, proudly, quite out and also in a way where I'm not necessarily flying a flag every single day you know, it's just my version of normal (Nick)

Later in life, as participants describe becoming more confident in themselves and their sexuality, however, difference is seen in more positive terms and becomes something that is highly valued.

3.6.3 "I really wasn't exposed to homophobia": overt homophobia as less common

Although a minority of participants described experiencing overt and violent anti-gay hate crimes, the majority of the participants regarded themselves as not having personally experienced anti-gay prejudice:

I really wasn't exposed to homophobia because growing up as a child, it didn't exist where I was, you know what I mean? There wasn't, um, I don't ever remember anyone in the town being considered gay, or there was no homophobia, because it just wasn't a topic (Ryan)

Thinking about any particular life experiences that you've had that you think influenced the way that you feel [about being gay]...

I've never been shouted at or queer bashed or anything, but that may be just as much luck as anything else I don't know

### Mmm

Um, so I never had any experience that particularly turned me away from being gay ... (Dennis)

An understanding of homophobia as overt, recognisably abusive and personal is implied within the participants' descriptions. This understanding appears dominant, even for participants who are aware of other, more subtle forms of anti-gay prejudice, and may have the effect of undermining perception of and/or minimising anti-gay prejudice and discrimination.

Ryan also wonders whether he may be "oblivious to it", and, just as some participants appear to be ambivalent or resistant with regard to recognising I-AGS, the same appears to hold for recognising anti-gay prejudice more generally, which may offer some explanation for why Dennis appears to go on to slightly contradict himself when he says:

I can think of one occasion when a group of us got confronted in London with y'know, and we ended up in a bit of a tussle, but nothing particularly strong or objectionable at any time (Dennis)

Additionally, what may be objectively perceived as anti-gay prejudice, is not always subjectively perceived as such. For instance, Anthony, who says that he has been "pretty lucky in that the overt homophobia I've faced has been relatively little" goes on to describe his experience within a Christian context: Whilst the kind of Christian groups I went to <pause> believed that sex outside of a heterosexual marriage was wrong, there was no prejudices against me for identifying as gay. I mean, they kind of believed that two men shouldn't or two women shouldn't have sex with each other, um, but they were not, they were not what I would call homophobic (Anthony)

In this description, Anthony could potentially be seen to minimise and resist identifying the Christian groups that he was part of (and which, by defining sex out of heterosexual marriage as wrong, are essentially condemning just non-heterosexual sexual relations) as "prejudiced".

Some participants attribute their lack of experience of overt homophobia to being "self-confident" (Dennis) or "not" fitting a particular (effeminate) stereotype:

Do you think you're doing something that's enabled you to avoid [overt homophobia]? Do you think you're just lucky? ...

I don't, it's probably because I don't, um, without sounding derogatory, you know, I'm not like a real kind of flaming gay man, do you know what I mean? So I probably don't necessarily stick out in a crowd

### Hmm, ok yeah

I don't think you know if I'm walking you know just walking down the street or whatever, I don't get hurled abuse probably because people just don't, I'm just, they, they probably just don't even you know, I don't know, I don't really think I kind of ah mince around ... (Ryan)

Shaun also talks about how stereotypes can be an effect of I-AGS, in describing his awareness of a fear of being associated with other, more effeminate gay men, in a description of a hypothetical situation in which an unknown 'other' shouts:

> Oh look, it's just a bunch of <pause> you know, screaming queens or something like that, you know, all these words are like horrible homophobic words but ...it's like my, you know, internalised shame isn't it, like how I would perceive that I might be experienced ... it's just the fear of being kind of ridiculed or shamed or rejected, all of those things... talking about it is making me think actually I want to take positive action the opposite way (Shaun)

Although described as an effect, given the difficulty in differentiating between imagined and real threats, the fear of being shamed attached to such stereotypes as Shaun describes may also act to trigger it. Shaun's awareness of potential I-AGS, however, enabled him to recognise and have the opportunity to challenge it.

From this perspective, it is possible that participants' descriptions of themselves as 'non-stereotypical' may also relate to IH, and represent a form of self-censorship that, as described by Shaun, may enable them to negotiate anti-gay or heterosexist terrains more easily:

We all have to adjust ourselves to fit in to whatever social group we find ourselves in and often they're <pause> straight, you know the the dominant, uh the dominant group is the straight group, and if you want to fit in then you have to do a good job of mimicking it or being like that (Shaun)

Some (but not all) participants, however, described having a sense or awareness of the potential for experiencing more subtle forms of homophobia in the form of "off-the-cuff remarks" or micro-aggressions:

People realise that eh you know this is 2017 where we can't ... I think it's still installed in other people, but they don't really project it so overtly ... because they know it's wrong to do that. But there's still, I still sense that as a gay man (Jason)

When I was at school it wasn't acceptable to be gay, and so there was always the, the um <pause> like the poof, or faggot, or just in comment, oh that's so gay. It was so blasé, that it just, it was what it was (Sam)

Participants can be seen to minimise these micro-aggressions as "little things", and "blasé" or normal, and expected. Yet, as Jason describes, he still "picks up" on these. Other participants also described also having a vigilance or "radar" for such anti-gay remarks:

I overheard [a conversation] because it was on my radar that ... someone said...oh well at least she's not gay, as if that's something really terrible (Larry)

I still pick people up on little things sometimes you know what I mean, you know, I'm just thinking like, oh that's gay, isn't it

### Yeah, you hear that a lot

Well, actually you shouldn't say that, it's quite derogatory, isn't it. It's what teenagers say, do you know what I mean? (Jason)

Jason further goes on to describe how micro-aggression can create "an environment where actually [it] feels difficult being a gay man". Another participant spoke about how the 'off the cuff remarks' his father made when younger had the effect of "bolt[ing] the door even more shut"

When I think back there was shame and fear when he would comment on I don't watch Coronation Street any longer but are you familiar with Coronation Street?

### I am yeah

Shaun the barman in Coronation Street <pause> well he's been in it he's been in it for years, and my dad would always make negative remarks about him...anybody who was on the television that was effeminate or could be possibly gay in any way my dad would always make a negative remark afterwards

Yeah

and at that, I was ashamed of how I felt, fearful of the reprisals if he found out <pause> about me, and angry with him for being like that (Bruce)

Bruce does not identify himself as experiencing I-AGS, but indirectly connects his experience of his father's micro-aggressions to having entered a heterosexual marriage:

It was just off-the-cuff remarks, but all too often it's the off-the-cuff remarks that do the harm (Bruce)

Ironically, Bruce has come to realise that he does not believe his dad believed the things he said about gay people:

I don't think for a minute now that my dad has got any, any issues with gay people, cause I've came out he's been fine with me. I now have a partner who he gets on very well with (Bruce)

Regardless of his father's intent, Bruce describes these remarks and implied expectations as influencing his decision to enter a heterosexual marriage, and the

distress experienced by Bruce by not feeling able to live openly as a gay man led him to two serious suicide attempts just before "coming out".

Other participants also described "off-the-cuff" remarks in the form of "teasing". In talking about his experience with his friends in school, here, Anthony talks about how his friends teased him as being gay, before he identified as such. Like Bruce, he seems to suggest that his friends did not have the intent to bully him, in his statement that "it wasn't a kind of bullying sense." He also says, in relation to friends and the school environment:

They definitely form your kind of feeling of whether it's ok to be um kind of gay or not um and like all kind of early adolescent boys the general message was that it was not, certainly not in the early mid 90s (Anthony)

Again, regardless of whether there is an *explicit* ant-gay intent, "blasé" microaggressions from a variety of sources appear less likely to be detected as such, and possibly, therefore, more likely to be internalised.

### 3.6.4 "[A part of me] that can": challenging and resisting homophobia

Participants who acknowledged I-AGS also almost always described the importance of being aware of, but especially *challenging* I-AGS:

becoming aware of it and thinking of what this is and challenging it has helped me think well to deal with those things and sort of you know realize well you don't need to be turning to those things and those that way of thinking anymore cause you've got better I've got better at more adaptive ways of thinking and coping (Michael)

Often individuals' accounts of challenging I-AGS made direct links to externalised AGS. Here, a participant makes the link between lack of awareness of I-AGS and the continuing transmission of "homophobia" within the gay scene:

internalised certain behaviours traits language ... refeed into their own homophobia without saying it out loud and managing it (Nick)

Another participant describes how challenging the AGS he encounters in the world provides him with opportunities to challenge his own I-AGS:

there's a part of me that's you know ashamed and wants to hide it, but there's a another part of me which is um <pause> angry and <pause>

### hmm

and <pause> uh yeah angry and aggrieved about the state of things which will speak, which can speak out... I do stand up, but it's usually <pause> advocating you know, I do you know. And I'm sure it's about myself as well; I feel like rage when I hear these things um, and so I feel I try to temper it, but I feel I can't help but [say] something (Shaun)

Similarly, although some participants described not feeling able to directly express their sexuality, particularly when they were younger, they nonetheless found other opportunities to "be allowed to be a bit more expressive" (Larry), through engaging with music and culture that provided an "excuse" (Michael) or alternative explanation for their transgressions of gender norms that was unrelated to their sexuality:

I was at a hu-, a massive David Bowie fan

Ok

Still am, so that gave me the opportunity to express myself

Right

and say well, you know, I'm a Bowie fan, so of course I look like this, you know (Larry)

It is of note, however, that most participants expressed more positive evaluations of their gay identity over time, often described in terms of increased self-acceptance, comfort, and confidence. As above, for some, this appeared related to challenging I-AGS. The majority of participants also connected this to external factors, and particularly societal change:

I think society has moved in a particular direction where, where kind of there is especially with younger people, there's kind of I think ... there's almost an expectation that no one's going to have a have a problem with it um, now um certainly if you, the public discourse kind of it is definitely a massive taboo to be homophobic now

### Hmm

So, so kind of yeah that inevitably makes it feel more comfortable (Anthony)

Another participant describes how social change has enabled him to care less about being seen to be gay, also alluding to the difference in experience between smaller towns and more rural areas:

I'm a bit like fuck it, do you know what I mean, you know? But you know, and <pause> I think you know s- I do think things, even in Wales in small towns and stuff, well small towns in the UK or villages is, is getting a bit more socially, it is probably more socially acceptable now than it was then (Jason)

Several participants also described physically relocating and creating more gay-friendly environments or "bubbles". It was of note that the majority of participants in the current study had relocated to more urban locations associated with being gay-friendly (London in particular) from smaller towns and more rural areas. Some linked this to going to university or their work, but the primary reason was usually connected to their sexuality:

in Brighton ... you know people I meet ... they're not going to abuse me...you know I moved to Brighton and then I moved to London, so it's kind of a bit stereotypical behaviour. Cause you move to areas that are safe, to find people like you (Michael)

I think the fact that I lived away from home therefore I was making my own way in life and gradually moving away from the close family that didn't or it became a decreasing issue if you like (Dennis)

As described above, relocating often appeared to have the effect of relieving the threat of anti-gay prejudice and abuse, and some of the pressures of heterosexism. One participant recalled being advised by a gay helpline volunteer to relocate to a more urban area:

I remember the um, they said yeah, I need to live in a city...[now] I live in London so I'm in a multicultural multi-everything society you know so so maybe I'm in a bit of a bubble there you know (Jason)

It was also of note that participants frequently commented on choosing to enter particular professions as a way of creating a work context that was more comfortable to them as gay men:

the jobs I've chosen like air steward, social care, are full of gay men you know, and I think that's, that's not, um <pause> by accident either...I'm putting myself in situations that will make life smoother (Shaun)

As above, men described choosing careers where sexuality was likely to be accepted and unremarkable, and/or used to champion for the rights of others. For some, this was a natural extension from becoming involved in political activism:

> when I left uni probably and came to London I think I started to get involved in activist groups in London um, and then a lot of some of those were kind of explicitly around sexuality...

Ok

I think there was a lot of kind of the beginnings of the concepts of intersectionality...where kind of people saw that one struggle wasn't isolated from another (Anthony)

Others described deciding to become more visible as a way of influencing their work context:

people like myself that have came through, we need to be visible (Bruce)

Many participants expressed an awareness that their positive evaluations of being gay were connected to having access to the financial resources needed to exert influence on their external environments:

I mean it's easy you know I live in a nice area I work (in healthcare) I kind of I can choose my social life, I can go to London and go you know hang out in (Soho), I live in a bubble but there are still people who cannot live their life like that, you know (Michael)

Another participant also describes how being in a "fairly comfortable position" influences how he perceives being gay:

[I'm] perhaps looking at it from more rose-tinted glasses than people who are in a disadvantaged position

*mm hmm yeah, it sounds like you have a sense that that might also be* 

yeah

## a factor?

it is a factor, I think. Yeah, being blunt, I think it is. How would I feel if I was this age <pause> on the dole, and nowhere to live and gay? I don't know, I might view the world very differently (Dennis)

## 4.0 DISCUSSION

In this final chapter, the main findings of the research are considered in relation to the research aims and existing literature. This will be followed by a critical appraisal which considers implications for future practice, policy and research before concluding with the researcher's personal reflections.

## 4.1 Summary of the Results

Research suggests there may be a disproportionate level of distress experienced within the sexual minority population, which has been linked to I-AGS. The current findings expand on previous research by specifically exploring how participants make sense of I-AGS, offering a perspective of the concept based on the lived experiences of gay men. This study also aims to engender a better understanding of men's perspectives on both the impact of and problems caused by AGS, which includes an exploration of how men have coped, which could help inform the target and nature of future interventions. Thematic analysis identified three overarching themes, each of which help to better understand how gay men relate to the experience of AGS, both internalized and in the world, and which will be considered in relation to the research aims: *I-AGS as a part of identity, Distancing the self from I-AGS,* and *Living with AGS*.

## 4.1.1 Situating the Research

Approaching from a critical realist perspective, where links are made to theory, these should be seen as one possible understanding of the data. Without presuming accuracy in the interpretation of participants experiences, the intent of the discussion is to make sense of gay men's experiences, particularly in relation to I-AGS (Russel, 2006).

## 4.2 How do gay men make sense of the concept of I-AGS?

In some contrast to ideas of I-AGS as inevitable (Malyon, 1982; Meyer, 1995, 2003, 2007), many participants were ambivalent about identifying themselves as ever experiencing I-AGS. Some participants readily acknowledged and endorsed I-AGS as a concept, whereas others moved between positions of partial acknowledgement and resistance towards it, in part influenced by their understanding of I-AGS. The themes of distancing the self from and ambivalence towards I-AGS are also consistent with previous research in which gay men were seen to reframe "discrimination" as "not-discrimination" dependent upon the personal context they were speaking from

(Greenland & Taulke-Johnson, 2017), and as will be explored below, may also be relevant here.

Some described I-AGS in line with traditional understandings as predominantly a sense of shame learned through a socialisation process, as a result of AGS (Malyon, 1982). Other men understood I-AGS to relate to gay men who are prejudiced towards others, some (but not all) of whom also acknowledged shame. Different understandings had different implications with regards to whether men related to internalised homophobia as personally relevant or not.

As predicted by the minority stress model, for those men who described I-AGS as meaningful and personally relevant, there was a sense of it being enduring (Meyer 1995, 2003, 2007). This could be seen to resonate with Anderson et al. (2009)'s description of gay men being thwarted from reaching a state of "complete acceptance" of their sexuality. Men who described I-AGS as personally relevant to them referred to it in terms of a chronic condition, and/or as a part of their identity. Most men described it as becoming less intense with time and self-acceptance. A subtle difference in relation to Anderson et al. (2009) is that the current participants described I-AGS as remaining dormant and capable of being triggered by environmental factors, which suggests the possibility of acceptance that remains vulnerable to shame caused by external AGS (Kaufman, 2006; Kaufman & Raphael, 1997).

Indeed, although I-AGS was described as an internal, intra-psychic experience, participants also consistently emphasised experiences, or expectations based on experiences, of external AGS; sometimes overt, but more often subtle, these were reported in varying degrees of proximity to their accounts of I-AGS. These results support the understanding of internal and external AGS as inseparable and interdependent, as per Russel's (2006) description, as opposed to separate and independent, as portrayed within the Minority Stress model (Meyer 1995, 2003, 2007).

Participants who acknowledged I-AGS also almost always described the importance of being aware of, but especially *challenging* AGS, both internally and externally. This is also consistent with previous research in which gay men only directly talked about experiences of discrimination from positions of power in which they were able to construct themselves as active participants, as opposed to passive subjects (Greenland & Taulke-Johnson, 2017)

Conversely, the remaining participants did not seem to relate to I-AGS as a concept that was personally relevant to them. Overall, they appeared to distance themselves

from and were ambivalent towards I-AGS, which was 'othered' in their conceptualisation of it as pertaining to *other* gay men, who are themselves prejudiced towards others. The description of I-AGS as something that only affects gay men is not inconsistent with how it has historically and commonly been portrayed (e.g. Meyer, 2007). However, this finding also appears to mirror findings of a previous study in which young people of different cultural backgrounds are seen to 'other' racism (Andreouli et al., 2016) Correspondingly, it was of note that participants who did not refer to themselves as experiencing I-AGS tended to also be less likely to describe themselves as having experienced AGS more generally, a finding which will be discussed further below.

There was also a pattern amongst men who 'othered' I-AGS to associate the construct with "latent homosexuals" and people who were "uneducated". This was also consistent with other studies that show how people construct and/or reframe prejudice as "ignorance" (Andreouli et al., 2016; Greenland & Taulke-Johnson, 2017). Although reframing prejudice as ignorance can in and of itself represent a coping strategy (Kadianaki, 2013), it can also be connected with the "good gay" identity and, specifically, internalised heterosexism (Greenland & Taulke-Johnson, 2017; Smith, 1994; Wilkins, 2012). In this way, internalised heterosexism may get in the way of recognising and/or talking about both internalised and external AGS; to do so is "too gay" (Clarke & Smith, 2015).

There are a number of possible explanations for gay men's apparent resistance to I-AGS, the first being that it really is an experience that is not relevant to them; they really are not (internally) 'homophobic'. The accounts of participants who are aware of and actively challenge any I-AGS would be consistent with models of gay identity formation. The accounts of those who were resistant to the idea that they had ever experienced I-AGS, however, would trouble the assumptions of both traditional and more critical social and psychological theories: if AGS is part of the "air that we breathe" (Russel, 2006), how have these men avoided it?

More generally, it has been suggested that people generally seek to distance themselves from prejudice (Sommers & Norton, 2006), thus another explanation may be that these men are motivated to disassociate themselves from any aspect of the labels of homophobia or prejudice which is, increasingly, shamed by society. In a sense, the concept of I-AGS risks being doubly shaming for gay men: they risk the shame associated with being prejudiced, and the shaming effects of being the target of the same prejudice. It is additionally of note that, as the opposite of shame, pride is central to cultural ideas about being gay; gay pride has become a form of resistance against the shaming of AGS (Halperin & Traub, 2009; Taulke-Johnson, 2008). Whilst on the one hand, to admit I-AGS has become associated with a gay identity, on the other, it threatens it: it is difficult (again, even shaming) for many gay men to acknowledge I-AGS, and indeed some participants described the concept of I-AGS as pathologizing, as another potential stigma.

Further complicating the matter, considered outside of a psychoanalytic context, internalising could be seen to imply agency. Within a psychoanalytic context, ideas of internalising relate to the socialisation of the unconscious (e.g. Malyon, 1982); outside of this context, however, ideas like learning imply active participation (Neisen, 1990). The implicit assumption that I-AGS may be relevant to them specifically and individually, as a gay man, may therefore have been perceived as unsupportive and undermining (Rofes, 2004), a concern that is addressed by the assumption that AGS, internal and external, affects everyone.

Shame is considered an unspoken emotion (Kaufman, 2006), and it felt significant that the majority of participants spoke of shame, regardless of whether they spoke of I-AGS. Even though, as above, it may be particularly difficult for gay men to acknowledge shame, there are reasons it may be easier to acknowledge than I-AGS. Not only is shame part of a gay discourse (Halperin & Traub, 2009), but it does not have the same connotations of being internalised, or as permanent; it is experienced in the moment, and is situational. It is also, however, more individualistic, and not essentially connected to a collective gay identity and experience like I-AGS is – which may also have important implications.

Even where men described what could be seen as 'recognisable' I-AGS (e.g. by selfregulating their behaviour to "appear more straight"), it was not always clear that this indicated I-AGS. Men's descriptions of their lived experiences show how any understanding of how I-AGS may or may not be present and/or meaningful, was clearly dependent on an understanding of the extent of AGS present in the external world at a specific point in time (Russel, 2006).

#### 4.3 What is the impact of anti-gay prejudice and heterosexism?

The findings of the current study are consistent with others which suggest that heterosexist pressure to assimilate as more moderate "good gays" has an impact on how gay men view and/or perform their sexual identities (Clarke & Smith, 2015;

Greenland & Taulke-Johnson, 2017). As above, some men emphasised individual authenticity more than others, and there were several references to sexuality as "just a part of me", as well as representations of gay sexual identity as "normal" and unremarkable. As above, this can be seen as a gay-affirmative position, and is consistent with the final stages of gay identify formation, for example of "identity synthesis", in which gay identity is integrated with other aspects of the self (e.g. Cass, 1979). However, there are also similarities between both the attitude expressed here and other studies where gay men were conceived of as working to position themselves as "gay but not too gay", in response to heterosexist pressure to assimilate and a tendency to minimise AGS (Greenland & Taulke-Johnson, 2017).

In line with previous research, a significant experience several participants had in common related to perceptions of difference associated with being attracted to men and being gay (Anderson et al., 2009; Doyal et al., 2008; Schubotz & McNamee, 2009), which implies heteronormative and heterosexist ideals were learned at an early age. These were described as transmitted through silence and absence of positive representation in relation to sexual diversity, both on a micro-familial, local, and national level, which several participants described as being filled by a deluge of negative representation in the context of the AIDS epidemic and the criminalisation of being gay. Difference was often accompanied by a sense of wanting to "fit in". Although typical for the age and developmental stage, there is also a sense that for some gay men who become defined by difference in a "culture of homophobia" and heterosexism, this was exacerbated and perpetuated by isolation. Feelings of isolation were influenced but not determined by geography; as expected, indications were that levels of AGS varied between urban and rural areas, but it was also of note that feelings of isolation were also endorsed by those participants who grew up in London (Lewis, 2014).

Regardless of whether participants explicitly endorsed experiences of I-AGS, consistent with previous theory (Cass, 1979; Gonsiorek, 1988; Malyon, 1982; Meyer, 2007) and research (Anderson et al., 2009; Doyal et al., 2008; Jaspal, 2012; McKeown et al., 2010), many participants did retrospectively describe perceiving their difference as negative, often with "shame mixed with fear" (as described by Bruce). The finding that men felt differently about different aspects of being gay, for example, in relation to being attracted to and/or having sex with other men, and taking on a gay cultural identity, is consistent with the suggestion that I-AGS should be viewed as multi-dimensional (Hegarty & Massey, 2006). A minority of participants described not having any particularly strong feelings about being gay when they were younger, despite (or

perhaps because) of the lack of social acceptance towards being gay. Described within a context of the criminalisation of being gay, this support's Crocker and Major's (1989) proposition that because more overt discrimination towards stigmatised individuals is more likely to be perceived and attributed to prejudice, it may be less likely to be personalised and translated into negative feelings directed towards the self, for instance, in the form of I-AGS.

Indeed, as expected, these men's accounts suggest that it is not possible to fully escape objective homophobia heterosexism in the UK, whether it is perceived as such or not. Consistent with McKeown et al. (2010), where reports of overt anti-gay violence were less common, exposure to anti-gay micro-aggressions and heterosexist discourses were described (by some participants) as more routine. Participants also described being more likely to be exposed to anti-gay micro-aggressions when their sexual identity was not known (whether deliberately concealed or not), when others who otherwise might have refrained from engaging in anti-gay rhetoric were not inhibited by the presence of a known gay person from doing so.

Overall, men described anti-gay prejudice as either being on or off their "radar", consistent with research which suggests that individuals experience vigilance and minimising biases towards perceiving discrimination (Kaiser & Major, 2006). As above, some men describe a general tendency to be more sensitive to detecting and actively challenging prejudice. Although some of those who were more highly attuned to anti-gay prejudice had experienced overt anti-gay prejudice and violence in the past, this was not always the case. Others, often the same participants who were less likely to describe experience of I-AGS, appeared less likely to experience, perceive and/or label experiences as being prejudiced or discriminatory.

Again, there are several explanations for this finding. It may be the case that, as one participant put it, these men were genuinely "oblivious" to it. Consistent with Sommers & Norton's (2006) explorations of lay theories of racism, 'old-fashioned', overt homophobia remained the dominant prototype of homophobia for these participants. As in other studies, the current participants also appeared to weigh up others' hypothetical intentions, in a way that appeared to give others the benefit of the doubt (Greenland & Taulke-Johnson, 2017; Swim et al., 2003; Taulke-Johnson, 2008). An important difference within the present study, however, is that participants seemed less likely to weigh up the harm that was caused by others' words and/or actions in making attributions of prejudice. This suggests a level of self-doubt and tolerance towards discrimination that has been associated with I-AGS (Gonsiorek, 1988; Russel, 2006),

which may have led some men to get and stay 'stuck' within various binds of compulsory heterosexism (e.g. through marriage to other-sex partners or religious institutions), a realisation implied in some men's expressions of regret over "wasted years."

There is also evidence to suggest that not labelling an experience as prejudiced may act to abate the need to make a decision with regard to whether to challenge it (Kitzinger & Thomas, 1995). As has been noted, when gay men meet with anti-gay stigma, neutrality is not an option; they are forced to make a choice, each of which carries emotional consequences and in some circumstances, risk (Gonsiorek, 1988). Research further suggests that recognising prejudice can be psychologically costly, in that it challenges adaptive beliefs such as those that the world is controllable, and ultimately fair (Kaiser & Major, 2006).

Finally, the way that participants attributed avoiding prejudice to being confident or *not* effeminate again matched descriptions in a previous study (Greenland & Taulke-Johnson, 2017). Whilst appealing to common sense (previous research suggests that that "looking gay" increases the risk of experiencing discrimination (e.g. Cameron, Collins, & Hickson, 2009)), it is also possible that positioning themselves as not effeminate and not subject to discrimination may again be a way of resisting shame (McDermott et al., 2008), and of positioning themselves more in line with a hegemonic masculine ideal. Additionally, not complaining about discrimination has become associated with being a "good gay" (Smith, 1994). Instead of putting themselves at more risk of experiencing and having to make the decision to challenge anti-gay prejudice and heterosexism, some gay men may self-censor and regulate their behaviour in order to avoid it (Anderson et al., 2009)

It is also important to recognise that, upon identifying as men who were attracted to men and/or as gay, in addition to endorsing experiences consistent with I-AGS, participants also reported enlisting a number of strategies that they used to cope, and like men described in other studies, many appeared able to question and challenge AGS, both internal and external. Many participants described focusing on education, academic achievement and future careers which perhaps meant, as one participant described it, that men's gay identity was not "at the forefront" of their minds. Participant's described the importance of re-educating themselves, not limited to but particularly in relation to HIV and AIDS in a way that challenged their "learned" anti-gay prejudice and heterosexism. This is similar to the process described in other studies where young gay men, particularly from different cultural backgrounds, can be seen to

question the perceived incompatibilities between various aspects of assumed identities (Jaspal, 2012), and again, this implies a more active participation in socialisation processes than that implied by Malyon (1982).

In line with another study exploring how gay men negotiate stigma (Dooley, 2009), the majority of participants both described consciously relocating to environments that they perceived as being more affirming, and expressed a sense of awareness that they were fortunate to have had access to the financial resources to be able to. Participants described how relocating enabled them to explore their sexuality and connect with other gay men, but also to live amongst more "liberal" others in what were described as more gay-friendly "bubbles". Within these safer spaces, men also noted that they had chosen careers where sexuality was likely to be accepted and unremarkable, and/or used to champion for rights of others. Yet, despite describing themselves as generally "comfortable" and "confident" in their sexuality, many also expressed being less so when they left the safer "bubbles" they created, which against suggests support for Russel (2006)'s recommendation that internal and external homophobia be considered, simply, as the impact of one homophobia.

# 4.4 Critical Review

The quality of the present research was assessed using Yardley's (2008; 2000) principles, both because it is theoretically flexible, and it has been noted as broadly covering the core domains identified within a systematic review of 29 sets of published criteria (Cohen & Crabtree, 2008).

## 4.4.1 Sensitivity to Context

The present research is grounded in a broad literature review, which included an exploration of the historical context of the previous research and constructs relevant to the present research. Additionally, the theoretical context has been elaborated upon, and the implications of some of the assumptions explored in relation to the accounts of gay men's lived experience. In data analysis and reporting, both the context of the theory and the participants was borne in mind, and the researcher was sensitive to this in deciding how to represent their experiences.

## 4.4.2 Commitment and Rigour

As a way of ensuring rigour, the researcher took a reflective approach to the research design and process throughout. From before data collection until the end of writing the research, the researcher consulted with supervisors, gay colleagues and peers. This

was particularly important in the beginning in order to inform the language and content used both within recruitment materials and interviews. Unfortunately, although the researcher had hoped to pilot the interview with members of the university LGBTQ group, various attempts at communication were not successful. However, perhaps because of the extent of prior and continued consultation (e.g. with gay men throughout the recruitment process, for example, in the process of seeking permission to display posters in various venues), the researcher was able to obtain thorough, rich data from the beginning and throughout data collection. It is of note that an attempt was made to recruit gay men with a variety of other intersecting social identities to access a range of perspectives across social contexts (Mays & Pope, 2006), which was particularly important considering the research's emphasis on contextualising I-AGS. A conscious attempt was made to represent and understand the complexity and variation observed within participants accounts based on in-depth engagement with the data, alongside life-long engagement with the topic.

## 4.4.3 Transparency & Coherence

The researcher made a conscious effort to stay alive to the effect of her own actions and status as a gay female, academic and trainee clinical psychologist, who has a particular understanding of I-AGS, and used a reflective journal to facilitate this throughout. Suffice it to say that the researcher's prior understandings of I-AGS have been challenged throughout this research process, often in unexpected, and at times even quite painful ways. Again because of active efforts to remain reflexive throughout, the researcher was able to use genuine expressions of empathy to both open up conversations, and to keep the inevitable power imbalance between researcher and interviewee in check. A balance was attempted between preserving enough context to enable the reader to satisfy themselves that the conclusions drawn follow the data, and preserving anonymity (Thompson & Russo, 2012). A detailed description of the data collection process can be found in Chapter 2.

## 4.4.4 Impact and Importance

The present research achieved its aim of understanding how gay men make meaning out of the construct of I-AGS, and offers a more nuanced understanding of I-AGS that emphasises the importance of context as a defining dimension of I-AGS. This also questions the heavy reliance on the use of quantitative measures, particularly in isolation. Additionally, it describes the multiple and sometimes subtle impacts of antigay prejudice and heterosexism, also attending to the ways that gay men challenge and resist AGS. Below, the strengths and limitations of the current research design are considered.

### 4.4.5 Strengths and Limitations

Using a qualitative approach enabled the exploration of gay men's experiences of I-AGS within the context of external anti-gay prejudice and heterosexism and wider socio-political factors. The gathering of rich, descriptive data enabled the researcher to capture a more nuanced understanding of how gay men make sense out of the concept of I-AGS. Importantly, it captured participants' ambivalence towards defining their experiences as related to AGS, whether internal and/or external, and highlighted other responses to AGS, which would have been impossible using quantitative methods. It also highlighted the possibility that the process of labelling gay men's experiences as I-AGS may be experienced as shaming and pathologizing. This finding has important implications for both clinical practice and future research.

The present research was originally intended to be a two-phase study that followed up individual interviews with focus groups to expand on themes developed within analysis, and to think together about what needs to change in order for anti-gay prejudice and discrimination to reduce. Despite the relevance of a qualitative approach to exploration of gay men's experience in relation to AGS, there is a risk it remains divorced from the "context of real-world action" (Yardley, 2000). The researcher is therefore personally committed to following through with the focus groups in the future.

Another strength was the rigorous approach to the study, particularly the attention to transparency and the adoption of a reflexive approach as described within the methods chapter. Qualitative research depends on the use of aptly chosen examples from the participant data, with adequate context. One limitation of the present study is that some detail was removed in order to maintain confidentiality, and in order to comply with university proscriptions with respect to a word-count of 28,000. Nonetheless, the analysis chapter includes multiple quotations, and given the deliberate attention to contextual factors throughout the research, quotes hopefully contain enough surrounding detail to satisfy the reader that examples were not lifted out of context.

An attempt was made to balance providing enough demographic information about the participants to facilitate transferability of the results and protection of confidentiality. It is of note that only men who self-identified as gay are represented in the present research, which represents an important limitation that was not successfully overcome despite use of a variety of recruitment tools and materials that were used in an attempt

to target gay men across a spectrum of social identities. Additionally, men from minoritized cultural backgrounds are under-represented. Another potential limitation is that gay men who have both relocated (i.e. from smaller towns and more rural areas to more gay-friendly, urban environments) and importantly, had access to the material resources to do so, are over-represented in the current study.

Thus, the themes described above might not be representative of gay men who have sex with men but do not identity as gay, and those from minoritized cultural and lower socio-economic backgrounds. As suggested by the participants, had it been possible to recruit men who had less access to financial resources and were still living in environments where it "felt" more difficult to be gay, they may have emphasised different experiences. There are, however, also likely to be some aspects of their experiences that are likely to be shared with those in this paper.

#### 4.5 Implications and Recommendations

#### 4.5.1 Research

The above limitations suggest that the present research is the beginning of an important area of qualitative study that explores how gay men make sense of the constructs that are used to qualify their experiences as a sexual minority group. The finding that gay men wanted to distance themselves from and were ambivalent towards IH, and that it may have the potential to be experienced as shaming is an important one that requires further exploration. Given the emphasis that gay men placed on perceptions of difference in early life, both within present and previous research, future research might also seek to explore the intersection of I-AGS with essentialist views of sexuality. Future research could also further explore the impact of taking different identity positions in relation I-AGS, which may provide potentially useful information with regards to the implications of the use of the ideas of internalised homophobia within clinical practice, as will be discussed more below.

Present findings also emphasise the importance of social-political context in relation to gay men's experiences of identifying and living as gay men, and which has and continues to change at a rapid rate. This further supports previous recommendations that quantitative measures used to try to evaluate men's experience of anti-gay prejudice and heterosexism (both internalised and in the world) be critically reviewed (Grey, Robinson, Coleman, & Bockting, 2013). Knowledge of which environments gay men find it easier to 'be gay' in may be useful in informing efforts to prevent and reduce the impact of anti-gay prejudice and heterosexism. Given the links that were made

between developing a more positive gay identity, access to resources and an increased ability to relocate and access spaces that are perceived as more gay-friendly, future research might seek to further explore the construct of I-AGS and the impact of anti-gay prejudice and heterosexism in samples of men with limited access to financial resources and, for instance, those who continue to live, study and/or work locally to where they grew up. Using a participatory action approach would enable such research to simultaneously contribute to knowledge production and act as a potential resource for gay men, which has the potential to develop gateways that could lead to positive change, via but not limited to collective action (Bloor, 2011; Greenland & Taulke-Johnson, 2017)

The next step would be to study larger groups of men that can include a greater intersectionality of social identities. It is important to note here that it would be equally important to explore how I-AGS is made sense of by gay women, amongst whom representation within the research literature is even less adequate. Gay women were not included in the present research as I-AGS in women is treated as distinct within what is a much smaller literature base (Clarke, Ellis, Peel, & Riggs, 2010; Grey et al., 2013; Szymanski & Chung, 2001). There are, however, likely to be some important and similarities *and* differences, which, as above, warrant separate, in-depth review.

#### 4.5.2 Practice

Regarding clinical practice, the finding that some gay men endorsed experiences of I-AGS, but others were more ambivalent towards the concept supports Newcomb and Mustanski's (2010) recommendation that clinicians evaluate the relative importance of I-AGS to gay men in relation to their experience, rather than making assumptions about its existence and/or consequences. This is also in line with British Psychological Society's (2012) guidelines for working with Sexual and Gender Minority Clients, who also assert the importance of how the process and history of anti-gay stigmatisation may affect both their clients and themselves, and which may lead to the internalisation of negative attitudes for *some* [all emphasis added] individuals (Shaw et al., 2012) Although clinicians following good practice may take such an approach in formulating and understanding aspects of any individual's presenting difficulties, it is also of note that evidence suggests that sexuality-specific training within clinical psychology and continuing development courses is inconsistent and lacking in many specific areas (Anderson, 2012; Shaw et al., 2012). A survey of 23 UK-based courses found only 57% of courses reported dedicated more than two hours to specifically learning about working with LGB clients (Shaw, Butler, & Marriott, 2008), which is unlikely to facilitate

the nuanced understanding of I-AGS that the present research suggests is likely to be required to work with gay men effectively.

Returning to the finding that gay men may experience the suggestion of I-AGS as specifically relevant to them as shaming, unsupportive and/or undermining highlights just how sensitive clinicians need to be. This is especially true for those working from epistemological positions and theoretical approaches which position them as the "expert" within the therapeutic encounter. The potential for use of I-AGS to be experienced as pathologizing is minimized by use of Russel's (2006) framework; the emphasis that everyone experiences I-AGS is normalising. It has been suggested that "the most powerful treatment for the emotional concerns of gay and lesbian youth is to normalise their experience as adolescents" (Gonsiorek, 1988). This is also likely to be true across the lifespan. The use a narrative approach (the framework for Russel (2006)'s description of internalised homophobia) which uses therapeutic techniques such as externalising, may also be helpful in "returning" I-AGS and shame to its interpersonal, social context (Kaufman, 2006)

Thus, the current findings underline how important it is that anti-gay prejudice and heterosexism not just be considered an LGBTQ issue, but a human issue, which potentially has a limiting effect on everyone and anyone. In order to cultivate the nuanced understanding of the experiences of sexual minorities and I-AGS required to work compassionately and effectively, training on I-AGS and issues that are relevant to competent work with LGBTQ individuals could be woven throughout the curriculum (Burnes, Singh, & Witherspoon, 2017) It is also important to acknowledge that everyone - including clinicians - and regardless of their sexuality, is at risk of participating in perpetuating the heterosexist status quo. Thus, "there is no reason to single out those who identify as lesbian, gay, bisexual, transgender, queer, samegender-loving, or spectrum from those who are heterosexual...for any special inference of pathology" or inclination towards I-AGS (p. 151). This inference, however, is borne out in the restriction of consideration of the concept of I-AGS to LGBTQ-specific training, texts and spaces. It is not to discount that anti-gay and heterosexist discourses will be differentially salient to non-heterosexual and heterosexuallyidentified people. It is, rather, to question the seemingly logical tendency of many heterosexuals' relationship to such discourses as one that applies to 'others'. This questioning would be best supported by a critical approach to clinical training that creates the necessary reflective space to facilitate the challenging of such taken-forgranted assumptions beyond the intellectual level (Davidson, Harper, Patel, & Byrne, 2007).

The emphasis that the current participants placed on both socio-political context (in relation to their experiences of I-AGS and/or distress), and the importance of challenging AGS also suggests that the possibility for engagement in social action within therapeutic approaches is an important consideration. An example of a model that could be used to achieve this is Holland's psychotherapy and social action model (Holland, 1991). Clinicians can also work to challenge and inform discriminatory policies on a more immediate an and national level. For instance, some policy recommendations that follow from the findings in relation to the impact of lack of representations of sexual diversity and the exacerbating effect of silence would be to campaign for a statutory requirement for inclusive sex education, and for the creation of identifiable (physically and psychologically) safe places in schools and communities where young LGBTQ students and adults alike can 'fit in' and access support when needed. Such spaces might also serve as another gateway that could lead on to engagement in collective action.

#### **4.6 Reflective Account**

As alluded to above, one of the reasons that led me to do this research was a discomfort with the concept of I-AGS as another potential and insidious mechanism for pathologizing LGBTQ people. This was born out of my own experience of increasingly being reluctant to accept being informally labelled as 'having' I-AGS by gay peers, which then intersected with an increasing awareness of the power of labels - particularly when applied by "experts" in positions of power - throughout my training at UEL. It was empowering to discover that this concern was validated as I began my literature review. However, I was also keenly aware of the potential, in challenging existing ideas about I-AGS, of the risk of overlooking the very real distress associated with the internalisation of negative understandings of (in particular, but not limited to) gay male identities. It became clear to me throughout interviewing that for some men, their awareness of the potential for I-AGS to raise its head was empowering and indeed life changing.

It was more challenging to interpret the accounts of participants who were more ambivalent about identifying their experiences using the frame of I-AGS. This ambivalence was sometimes accompanied by ambiguity, and at these times I was aware of the potential for me to influence participants by projecting the frame of I-AGS and/or my own resistance towards it onto their accounts, both within our interactions and subsequently, in interpretation. Empathic but curious interpretation required the balancing of curiosity based upon different theoretical perspectives (which suggest that it is unlikely that I-AGS can, simply, be avoided), my own experiences and understandings as a gay female and psychologist, and respect for each individual to define and label their own experiences afforded by a critical realist perspective. Here the use of a reflective journal to maintain a space to explore *my* evolving awareness of my own experience of I-AGS as a way of 'boxing' it (and associated feelings) in was invaluable, as was exploration with and input from gay peers, academics and both of my supervisors.

The research process was also complicated by my dual identities of psychologist and researcher. I became particularly aware of the tension between facilitating a research-versus therapeutically-oriented environments when men were describing particularly painful experiences of AGS. At times, I refrained from what may have been further lines of illuminating enquiry because of a sense of ethical responsibility towards participants. It was helpful to consult with my supervisors when the above dilemmas arose.

As above, I did not explicitly disclose my own sexuality within the research process. A few participants knew of me as a female in a long-term same sex relationship prior to the research, however I am aware that the majority may or may not have perceived me as a gay female researcher. In hindsight, my own I-AGS may have led me to assume that participants would have "known" from the point of meeting. As it was not explicitly considered, it is not possible to know the effect that being aware of my dual "insider/outsider" status would have had. Some men may have felt more or less comfortable in describing their experiences, particularly those of a more intimate nature, with a female - regardless of how my sexual identity was perceived - and this may have influenced their evaluations of their same-sex attraction, behaviours and identity. This is particularly relevant given the hypothesis that I-AGS is created and exists within social interaction in context. It was significant, though, that participants generally expressed experiencing the research process as positive and even empowering. Some commented that it had given them space to think and talk about things that are difficult to voice, which some suggested would lead them to taking different, more positive (anti-heterosexist) actions in the future.

As far as having had the opportunity to think and do differently, I realise this has equally come to apply to me, too. As a result of this research, I have also become more aware of and question previously taken-for-granted assumptions that, I would now more confidently assert, could and must be equally framed as internalised *and* external AGS, a position that will continue to inform my future research and practice. 5.0 References:

- Ahlm, J. (2017). Respectable promiscuity: Digital cruising in an era of queer liberalism. Sexualities, 20(3), 364–379. https://doi.org/10.1177/1363460716665783
- Allen, D. J., & Olesen, T. (1999). Shame and Internalised Homophobia in Gay Men. Journal of Homosexuality. https://doi.org/10.1300/J082v37n03
- Allport, G. W. (1954). The Nature of Prejudice. Oxford, UK: Addison-Wesley.
- Anderson, D. (2012). To what extent are UK clinical psychologists adequately trained to work confidently and effectively with lesbian, gay or bisexual clients. *Clinical Psychology Forum*, 230(February), 16–19.
- Anderson, M., Elam, G., Gerver, S., Solarin, I., Fenton, K., & Easterbrook, P. (2009). Liminal identities: Caribbean men who have sex with men in London, UK. *Culture, Health and Sexuality*, *11*(3 SPEC. ISS.), 315–330. https://doi.org/10.1080/13691050802702433
- Anderson, M., Solarin, I., Gerver, S., Elam, G., MacFarlane, E., Fenton, K., & Easterbrook, P. (2009). The LIVITY study: Research challenges and strategies for engaging with the black caribbean community in a study of HIV infection. *International Journal of Social Research Methodology*. https://doi.org/10.1080/13645570701708584
- Andreouli, E., Greenland, K., & Howarth, C. (2016). 'I don't think racism is that bad any more': Exploring the 'end of racism' discourse among students in English schools. *European Journal of Social Psychology*, *46*(2), 171–184. https://doi.org/10.1002/ejsp.2143

Antjoule, N. (2016). *The hate crime report*. Galop.org.uk.

- Attride-Stirling, J. (2001). Thematic networks: an analytic tool for qualitative research. *Qualitative Research*, *1*(3), 385–405. Retrieved from http://journals.sagepub.com/doi/abs/10.1177/146879410100100307
- Bachmann, C. L., & Gooch, B. (2017). LGBT in Britain Hate Crime and Discrimination. Retrieved from

https://www.stonewall.org.uk/sites/default/files/lgbt\_in\_britain\_hate\_crime.p df

- Balsam, K. F., Rothblum, E. ., & Beauchaine, T. P. (2005). Victimization over the life span: a comparison of lesbian, gay, bisexual, and heterosexual siblings. *Journal of Consulting and Clinical*, 73(3), 477–487. Retrieved from http://psycnet.apa.org/journals/ccp/73/3/477/
- Banister, P., Dunn, G., Burman, E., Daniels, J., Duckett, P., Goodley, D., ... Whelan, P. (2011). Qualitative methods in psychology : a research guide (Second). Maidenhead: Open University Press. Retrieved from https://books.google.co.uk/books?hl=en&lr=&id=gjBFBgAAQBAJ&oi=fnd&p g=PP1&dq=Qualitative+methods+in+psychology:+A+research+guide.+2nd +edition&ots=CATzKiUKV1&sig=E0ZJYyEx8DiebgYdLkJjS8Al5xE#v=onep age&q=Qualitative methods in psychology%3A A research guide.
- Beals, K. P., Peplau, L. A., & Gable, S. L. (2009). Stigma Management and Well-Being: The Role of Perceived Social Support, Emotional Processing, and Suppression. Personality and Social Psychology Bulletin. https://doi.org/10.1177/0146167209334783
- Bell, J. G., & Perry, B. (2015). Outside Looking In: The Community Impacts of Anti-Lesbian, Gay, and Bisexual Hate Crime. *Journal of Homosexuality*, 62(1), 98–120. https://doi.org/10.1080/00918369.2014.957133
- Bellamya, G., Gotta, M., & Hinchliffb, S. (2011). Controversies and contentions: A gay man conducting research with women about their understandings of sexuality, sex and sexual problems. *Culture, Health and Sexuality*. https://doi.org/10.1080/13691058.2011.567339
- Berg, R. C., Munthe-Kaas, H. M., & Ross, M. W. (2016). Internalized
  Homonegativity: A Systematic Mapping Review of Empirical Research. *Journal of Homosexuality*, 63(4), 541–558.
  https://doi.org/10.1080/00918369.2015.1083788
- Berg, R. C., Ross, M. W., Weatherburn, P., & Schmidt, A. J. (2013). *Structural* and environmental factors are associated with internalised homonegativity in men who have sex with men: Findings from the European MSM Internet

*Survey (EMIS) in 38 countries. Social Science and Medicine.* Elsevier Ltd. https://doi.org/10.1016/j.socscimed.2012.11.033

- Bloor, M. (2011). Addressing social problems through qualitative research. In D. Silverman (Ed.), *Qualitative research: issues of theory, method and practice* (3rd ed., pp. 399–415). Los Angeles, CA: Sage.
- Blum, A. (2008). Shame and guilt, misconceptions and controversies: A critical review of the Literature. *Traumatology*, *14*(3), 91–102. Retrieved from http://web.b.ebscohost.com/ehost/pdfviewer/pdfviewer?vid=1&sid=3e547aa 3-cc62-4e29-abb5-956329c5751c%40pdc-v-sessmgr01
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. Qualitative Research in Psychology, 3(2), 77–101. https://doi.org/10.1191/1478088706qp063oa
- Breakwell, G. (1986). *Coping with threatened identities*. Retrieved from https://books.google.co.uk/books?hl=en&lr=&id=Yo3wCQAAQBAJ&oi=fnd &pg=PP1&dq=coping+with+threatened+identities&ots=dOnyxoTgTT&sig=v 0IBI3mVZRmnar93xo28BkpbbVo
- Brown, J., & Trevethan, R. (2010). Shame, internalized homophobia, Identity formation, Attachment style, and the connection to relationship status in gay men. *American Journal of Men's Health*, *4*(3), 267–276. https://doi.org/10.1177/1557988309342002
- Burnes, T., Singh, A., & Witherspoon, R. (2017). Sex positivity and counseling psychology: An introduction to the major contribution. *The Counseling Psychologist*, *45*(4), 470–486. Retrieved from http://journals.sagepub.com/doi/abs/10.1177/0011000017710216
- Burr, V. (2003). Social Constructionism. London, UK: Psychology Press.
- Cameron, S., Collins, A., & Hickson, F. (2009). Metal signals and labour market disadvantage. *Equal Opportunities International*, 28(8), 646–659. https://doi.org/10.1108/02610150911001689
- Cass, V. C. (1979). *Homosexuality identity formation: A theoretical model*. *Journal of Homosexuality*. https://doi.org/10.1300/J082v04n03

- Cass, V. C. (1996). Sexual orientation identity formation: a western phenomenon. In R. Cabaj & T. Stein (Eds.), *Textbook of homosexuality and mental health* (pp. 227–251). Arlington, VA, US: American Psychiatric Association.
- Clarke, V., Ellis, S., Peel, E., & Riggs, D. (2010). *Lesbian, gay, bisexual, trans and queer psychology: An introduction*. Retrieved from https://books.google.co.uk/books?hl=en&lr=&id=ot8UW1qzi4kC&oi=fnd&pg =PR5&dq=V.+Clarke,+S.J.+Ellis,+E.+Peel+%26+D.W.+Riggs.+Lesbian,+G ay,+Bisexual,+Trans+%26+Queer+Psychology:+An+Introduction.+&ots=40 42Q9dRYX&sig=JGyfVLNWtnGdq\_-EmCp3yGd4Q3c
- Clarke, V., & Smith, M. (2015). "Not Hiding, Not Shouting, Just Me": Gay Men Negotiate Their Visual Identities. *Journal of Homosexuality*, 62(1), 4–32. https://doi.org/10.1080/00918369.2014.957119
- Cochran, S. D., Mays, V. M., & Sullivan, J. G. (2003). Prevalence of mental disorders, psychological distress, and mental health services use among lesbian, gay, and bisexual adults in the United States. Journal of consulting and clinical psychology. https://doi.org/10.1037/0022-006X.71.1.53
- Code of Human Research Ethics. (2014). Retrieved from https://www.bps.org.uk/sites/beta.bps.org.uk/files/Policy - Files/BPS Code of Human Research Ethics.pdf
- Cohen, D. J., & Crabtree, B. F. (2008). Evaluative criteria for qualitative research in health care: controversies and recommendations. *Annals of Family Medicine*, *6*(4), 331–339. https://doi.org/10.1370/afm.818
- Crocker, J., & Major, B. (1989). Social stigma and self-esteem: The selfprotective properties of stigma. Psychological Review. https://doi.org/10.1037/0033-295X.96.4.608
- D'Augelli, A. R., Grossman, A. H., Hershberger, S. L., & O' Connell, T. S. (2001). Aspects of mental health among older lesbian, gay, and bisexual adults. Aging & Mental Health. https://doi.org/10.1080/13607860120038366

Daly, K. (1997). Re-Placing Theory in Ethnography: A Postmodern View.

*Qualitative Inquiry*, *3*(3), 343–365. https://doi.org/10.1177/107780049700300306

- Davidson, S., Harper, D., Patel, N., & Byrne, A. (2007). Drawing Back the curtain: maintaining a critical approach. *The Journal of Critical Psychology, Counselling and Psychotherapy*, 4201–10.
- Dermer, S. B., Smith, S. D., & Barto, K. K. (2010). Identifying and Correctly Labeling Sexual Prejudice, Discrimination, and Oppression. Journal of Counseling & Development. https://doi.org/10.1002/j.1556-6678.2010.tb00029.x
- Dewaele, A., Van Houtte, M., Cox, N., & Vincke, J. (2013). From Coming Out to Visibility Management-A New Perspective on Coping With Minority Stressors in LGB Youth in Flanders. *Journal of Homosexuality*, 60(5), 685– 710. https://doi.org/10.1080/00918369.2013.773818
- Diamond, L. M. (2000). Sexual identity, attractions, and behavior among young sexual-minority women over a 2-year period. *Developmental Psychology*, 36(2), 241–250. https://doi.org/10.1037/0012-1649.36.2.241
- Diplacido, J. (1998). Stigma and Sexual Orientation : Understanding Prejudice against Lesbians , Gay Men , and Bisexuals Minority Stress among Lesbians , Gay Men , and Bisexuals : A Consequence of Heterosexism , Homophobia , and Stigmatization.
- Dohrenwend, B. P. (2000). The role of adversity and stress in psychopathology: Some evidence and its implications for theory and research. *Journal of Health and Social Behavior*, *41*(1), 1–19. Retrieved from http://www.jstor.org/stable/2676357?casa\_token=ZISNNjS6GfoAAAAA:\_P2 dKG3xzhyK19PCCjaJxOahvYTYpS7VccYayl7OkBRH\_lxghbDzE0HnSTI9U 9ERSJ5XmDd3UnJrznttjiP1Y4prjrzuvgGFaehb3N7AOaV0-xaMhg
- Dooley, J. (2009). Negotiating stigma: Lessons from the life stories of gay men. *Journal of Gay and Lesbian Social Services*, *21*(1), 13–29. https://doi.org/10.1080/10538720802494784

Doyal, L., Paparini, S., & Anderson, J. (2008). "Elvis died and i was born": Black

african men negotiating same-sex desire in London. *Sexualities*, *11*(1–2), 171–192. https://doi.org/10.1177/1363460707085469

- Dozier, R. (2015). A view from the academe: Lesbian and gay faculty and minority stress. *Psychology of Sexual Orientation and Gender Diversity*, 2(2), 188–198. https://doi.org/10.1037/sgd0000105
- Drescher, J. (2015). Out of DSM: Depathologizing Homosexuality. *Behavioral Sciences*, *5*, 565–575. https://doi.org/10.3390/bs5040565
- Dunn, P. (2012). Men as Victims: "Victim" Identities, Gay Identities, and Masculinities. *Journal of Interpersonal Violence*, 27(17), 3442–3467. https://doi.org/10.1177/0886260512445378
- Elford, J., Mckeown, E., Doerner, R., Nelson, S., Low, N., & Anderson, J. (2010). Sexual health of ethnic minority MSM in Britain (MESH project): design and methods. *BMC Public Health*, *10*(1), 419. https://doi.org/10.1186/1471-2458-10-419
- Erikson, E. (1959). Identity and the life cycle: Selected papers. *Psychological Issues*, *1*, 1–171.
- Fassinger, R., & Miller, B. (1997). Validation of an Inclusive Modelof Sexual Minority Identity Formation on a Sample of Gay Men. *Journal of Homosexuality*, 32(2), 53–78. https://doi.org/10.1300/J082v32n02
- Feinstein, B. A., Goldfried, M. R., & Davila, J. (2012). The relationship between experiences of discrimination and mental health among lesbians and gay men: An examination of internalized homonegativity and rejection sensitivity as potential mechanisms. Journal of Consulting and Clinical Psychology. https://doi.org/10.1037/a0029425
- Flowers, P., & Buston, K. (2001). "I was terrified of being different": exploring gay men's accounts of growing-up in a heterosexist society. Journal of adolescence. https://doi.org/10.1006/jado.2000.0362
- Ford, O. (2015). From Navigation to Negotiation: An Examination of the Lived Experiences of Black Gay Male Alumni of Historically Black Colleges and Universities. *Journal of Homosexuality*, 62(3), 353–373.

https://doi.org/10.1080/00918369.2014.972814

- Frith, H., & Gleeson, K. (2012). Qualitative data collection: asking the right questions. In D. Harper & A. Thompson (Eds.), *Qualitative Research Methods in Mental Health and Psychotherapy* (pp. 55–68). West Sussex.
- Frost, D. M., & Meyer, I. H. (2009). Internalized homophobia and relationship quality among lesbians, gay men, and bisexuals. Journal of Counseling Psychology. https://doi.org/10.1037/a0012844
- Gates, G. J. (2011). How many people are lesbian , gay , bisexual , and transgender ? The Williams Institute. https://doi.org/10.1080/13691058.2012.673639
- Gillespie, A., Howarth, C. S., & Cornish, F. (2012). Four problems for researchers using social categories. *Culture and Psychology*, *18*(3), 391– 402. https://doi.org/10.1177/1354067X12446236
- Goffman, E. (1963). *Stigma: Notes on the Management of Spoiled Identity.* London: Penguin. https://doi.org/10.2307/2091442
- Gonsiorek, J. C. (1988). Mental health issues of gay and lesbian adolescents. *Journal of Adolescent Health Care*, *9*(2), 114–122. https://doi.org/10.1016/0197-0070(88)90057-5
- Greenland, K., & Taulke-Johnson, R. (2017). Gay men?s identity work and the social construction of discrimination. *Psychology & Sexuality*, 8(1–2), 81– 95. https://doi.org/10.1080/19419899.2017.1311934
- Grey, J. A., Robinson, B. B. E., Coleman, E., & Bockting, W. O. (2013). A systematic review of instruments that measure attitudes toward homosexual men. Journal of Sex Research. https://doi.org/10.1080/00224499.2012.746279
- Group, M. P. (2012). DRAFT MANIFESTO FOR A SOCIAL MATERIALIST
  PSYCHOLOGY OF DISTRESS THE MIDLANDS PSYCHOLOGY GROUP.
  Journal of Critical Psychology, Counselling and Psychotherapy, 122, 93–
  107. Retrieved from https://www1.bps.org.uk/system/files/user-files/Division
  of Clinical Psychology Annual Conference 2013/manifesto\_jcpcp.pdf

- Habarth, J. M. (2008). *Thinking "Straight": Heteronormativity and Associated Outcomes Across Sexual Orientation*.
- Halperin, D. M., & Traub, V. (2009). Gay shame. University of Chicago Press. Retrieved from https://books.google.co.uk/books?hl=en&lr=&id=6HPW3qPp8\_QC&oi=fnd& pg=PR5&dq=gay+and+shame&ots=MmK18J67GH&sig=biYxsyK2rDlnX2w LDr4efAg2lek#v=onepage&q=gay and shame&f=false
- Hammack, P. L., & Cohler, B. J. (2011). Narrative, identity, and the politics of exclusion: Social change and the gay and lesbian life course. *Sexuality Research and Social Policy*, 8(3), 162–182. https://doi.org/10.1007/s13178-011-0060-3
- Harper, D., & Thompson, A. R. (Andrew R. (2012). *Qualitative research methods in mental health and psychotherapy : a guide for students and practitioners*. John Wiley & Sons.
- Hatzenbuehler, M. L., McLaughlin, K. A., Keyes, K. M., & Hasin, D. S. (2010).
  The impact of institutional discrimination on psychiatric disorders in lesbian, gay, and bisexual populations: A prospective study. *American Journal of Public Health*, *100*(3), 452–459. https://doi.org/10.2105/AJPH.2009.168815
- Hegarty, P., & Massey, S. (2006). Author Preprint. Hegarty, P., & Massey, S. (2006). Anti-Homosexual Prejudice...as Opposed to What? Queer Theory and the Social Psychology of Anti-Homosexual Attitudes. Journal of Homosexuality, 52, 47-71.
- Hequembourg, A. L., & Brallier, S. A. (2009). An exploration of sexual minority stress across the lines of gender and sexual identity. *Journal of Homosexuality*, *56*(3), 273–298.
  https://doi.org/10.1080/00918360902728517
- Herek, G. M. (2004). Beyond "Homophobia": Thinking about sexual prejudice and stigma in the twenty-first century. Sexuality Research and Social Policy. https://doi.org/10.1525/srsp.2004.1.2.6

Herek, G. M. (2007). Confronting Sexual Stigma and Prejudice: Theory and

Practice. Journal of Social Issues, 63(4), 905–925.

- Herek, G. M., Chopp, R., & Strohl, D. (2007). Sexual Stigma : Putting Sexual Minority Health Issues in Context. The health of sexual minorities. https://doi.org/10.1007/978-0-387-31334-4\_8
- Herek, G. M., & Garnets, L. D. (2007). Sexual orientation and mental health. Annual review of clinical psychology. https://doi.org/10.1146/annurev.clinpsy.3.022806.091510
- Herek, G. M., Gillis, J. R., & Cogan, J. C. (2009). Internalized stigma among sexual minority adults: Insights from a social psychological perspective. *Journal of Counseling Psychology*, *56*(1), 32–43. https://doi.org/10.1037/a0014672
- Holland, S. (1991). From Private Symptoms to Public Action. *Feminism & Psychology*. https://doi.org/10.1177/0959353591011007
- Horowitz, J. L., & Newcomb, M. D. (2002). A Multidimensional Approach to Homosexual Identity. *Journal of Homosexuality*, *42*(2), 1–19. https://doi.org/10.1300/J082v42n02
- Hudson-sharp, N., & Metcalf, H. (2016). *Inequality among lesbian , gay bisexual and transgender groups in the UK : a review of evidence*.
- Igartua, K. J., Gill, K., & Montoro, R. (2003). Internalized Homophobia: A Factor in Depression, Anxiety, and Suicide in the Gay and Lesbian Population. *Canadian Journal of Community Mental Health*, 22(2), 15–30. https://doi.org/10.7870/cjcmh-2003-0011
- Jaspal, R. (2012). "I never faced up to being gay": Sexual, religious and ethnic identities among British Indian and British Pakistani gay men. *Culture, Health and Sexuality*, *14*(7), 767–780. https://doi.org/10.1080/13691058.2012.693626
- Jaspal, R. (2017). Coping with perceived ethnic prejudice on the gay scene. Journal of LGBT Youth, 14(2), 172–190. https://doi.org/10.1080/19361653.2016.1264907

- Jerome, R. C., & Halkitis, P. N. (2009). Stigmatization, stress, and the search for belonging in Black men who have sex with men who use methamphetamine. *Journal of Black Psychology*, *35*(3), 343–365. https://doi.org/10.1177/0095798409333620
- Joffe, H. (2012). Thematic Analysis. In D. Harper & A. Thompson (Eds.), Qualitative Research Methods in Mental Health and Psychotherapy (pp. 209–224). West Sussex, UK: Wiley-Blackwell. Retrieved from https://www.dawsonera.com/readonline/9781119973256
- Joffe, H., & Yardley, L. (2004). Content and thematic analysis. In D. F. Marks &
  L. Yardley (Eds.), *Research methods for clinical and health psychology* (pp. 56–68). London: Sage.
- Kadianaki, I. (2013). The Transformative Effects of Stigma: Coping Strategies as Meaning-Making Efforts for Immigrants Living in Greece. *Journal of Community & Applied Social Psychology*, 25. https://doi.org/10.1002/casp
- Kaiser, C. R., & Major, B. (2006). A social psychological perspective on perceiving and reporting discrimination. *Law and Social Inquiry*, *31*(4), 801– 830. https://doi.org/10.1111/j.1747-4469.2006.00036.x
- Kaufman, G. (2006). The psychology of shame : theory and treatment of shame-based syndromes. Springer Pub. Co. Retrieved from https://books.google.co.uk/books?hl=en&Ir=&id=YZFEzI4SuU4C&oi=fnd&p g=PR7&dq=the+psychology+of+shame+theory+and+kaufman&ots=slcFh8 0Ezu&sig=0uK6EDySu2O1RXgiprr-2NYd31k#v=onepage&q=the psychology of shame theory and kaufman&f=false
- Kaufman, G., & Raphael, L. (1997). Coming out of shame : transforming gay and lesbian lives. Main Street Books/Doubleday. Retrieved from https://books.google.co.uk/books/about/Coming\_Out\_of\_Shame.html?id=E hPJAAAACAAJ&source=kp\_cover&redir\_esc=y
- King, M., Semlyen, J., Tai, S. S., Killaspy, H., Osborn, D., Popelyuk, D., & Nazareth, I. (2008). A systematic review of mental disorder, suicide, and deliberate self harm in lesbian, gay and bisexual people. *BMC Psychiatry*, *8*(1), 70. https://doi.org/10.1186/1471-244X-8-70

- Kitzinger, C., & Thomas, A. (1995). Sexual Harassment: a Discursive Approach. In S. Wilkinson & C. Kitzinger (Eds.), *Feminism & Discourse: Psychological Perspectives* (pp. 32–48). London: Sage.
- Kitzinger, P. C. (1987). *The Social Construction of Lesbianism*. https://doi.org/10.1177/0959-353504046863
- Lasser, J., Ryser, G. R., & Price, L. R. (2010). Development of a lesbian, gay, bisexual visibility management scale. *Journal of Homosexuality*, 57(3), 415–428. https://doi.org/10.1080/00918360903543154

Laumann, E. (1994). The social organization of sexuality: Sexual practices in the United States. Retrieved from https://books.google.co.uk/books?hl=en&lr=&id=3RbyuQAYsdMC&oi=fnd& pg=PR19&dq=The+social+organization+of+sexuality:+sexual+practices+in +the+United+States.&ots=B7oqSF1RbW&sig=M6myeRVc6N2rTcsnZMcw OFyHU1Y

- Lefebvre, C., Manheimer, E., & Glanville, J. (2011). Chapter 6: Searching for studies. In J. Higgins & S. Green (Eds.), *Cochrane Handbook for Systematic Reviews of Interventions Version 5.1.0 (updated March 2011)*. The Cochrane Collaboration. Retrieved from www.handbook.cochrane.org
- Legate, N., Ryan, R. M., & Weinstein, N. (2012). Is Coming Out Always a "Good Thing"? Exploring the Relations of Autonomy Support, Outness, and Wellness for Lesbian, Gay, and Bisexual Individuals. Social Psychological and Personality Science. https://doi.org/10.1177/1948550611411929
- Lewis, N. M. (2014). Rupture, resilience, and risk: Relationships between mental health and migration among gay-identified men in North America. *Health and Place*, 27, 212–219. https://doi.org/10.1016/j.healthplace.2014.03.002
- Lilienfeld, S. O. (2017). Microaggressions: Strong Claims, Inadequate Evidence. Perspectives on Psychological Science, 12(1), 138–169. https://doi.org/10.1177/1745691616659391

Link, B. G., & Phelan, J. C. (2001). Conceptualizing tigma. Annu. Rev. Sociol,

27(Lewis 1998), 363-85. https://doi.org/10.1146/annurev.soc.27.1.363

- Major, B., Quinton, W. J., & Schmader, T. (2003). Attributions to discrimination and self-esteem: Impact of group identification and situational ambiguity. *Journal of Experimental Social Psychology*, *39*(3), 220–231. https://doi.org/10.1016/S0022-1031(02)00547-4
- Malyon, A. K. (1982). Psychotherapeutic Implications of Internalized Homophobia in Gay Men. *Journal of Homosexuality*, 7(2–3), 59–69. https://doi.org/10.1300/J082v07n02
- Maxwell, J. a. (2010). What Is Realism, and Why Should Qualitative Researchers Care? A Realist Approach for Qualitative Research. https://doi.org/10.1017/CBO9781107415324.004
- Mays, N., & Pope, C. (2006). Quality in qualitative health research. *Qualitative Research in Health Care*, 82–101.
- Mays, V. M., & Cochran, S. D. (2001). Mental Health Correlates of Perceived Discrimination Among Lesbian, Gay, and Bisexual Adults in the United States. *Core.Ecu.Edu*, 91(11), 1869–1876. Retrieved from http://core.ecu.edu/soci/vanwilligenm/mays.pdf
- McCormack, M., & Savin-Williams, R. (2017). Young men's rationales for nonexclusive gay sexualities. *Culture, Health and Sexuality*, *1058*(January), 1– 16. https://doi.org/10.1080/13691058.2017.1398349
- McDermott, E., Roen, K., & Scourfield, J. (2008). Avoiding shame: Young LGBT people, homophobia and self-destructive behaviours. *Culture, Health and Sexuality*, *10*(8), 815–829. https://doi.org/10.1080/13691050802380974
- McGarrity, L. A., Huebner, D. M., & McKinnon, R. K. (2013). Putting stigma in context: Do perceptions of group stigma interact with personally experienced discrimination to predict mental health? *Group Processes and Intergroup Relations*, *16*(6), 684–698. https://doi.org/10.1177/1368430213475675
- McKeown, E., Nelson, S., Anderson, J., Low, N., & Elford, J. (2010). Disclosure, discrimination and desire: Experiences of black and south asian gay men in

Britain. *Culture, Health and Sexuality*, *12*(7), 843–856. https://doi.org/10.1080/13691058.2010.499963

- McLaughlin, K. A., Hatzenbuehler, M. L., & Keyes, K. M. (2010). Responses to discrimination and psychiatric disorders among black, hispanic, female, and lesbian, gay, and bisexual individuals. *American Journal of Public Health*, *100*(8), 1477–1484. https://doi.org/10.2105/AJPH.2009.181586
- Meyer, I. H. (1995). *Minority stress and mental health in gay men*. *Journal of Health and Social Behavior1*. https://doi.org/10.2307/2137286
- Meyer, I. H. (2003). Prejudice and Discrimination and Social Stressors (pp. 674–697).
- Meyer, I. H. (2007). Prejudice and discrimination as social stressors. The Health of Sexual Minorities. https://doi.org/10.1007/978-0-387-31334-4\_10
- Meyer, I. H. (2015). Resilience in the Study of Minority Stress and Health of Sexual and Gender Minorities. *Psychology of Sexual Orientation and Gender Diversity*, 2(3), 209–213. https://doi.org/10.1037/sgd0000132
- Meyer, I. H., Schwartz, S., & Frost, D. M. (2008). Social patterning of stress and coping: does disadvantaged social status confer mores stress and fewer coping resources? *Social Science and Medicine*, 67(3), 368–379. https://doi.org/10.1016/j.socscimed.2008.03.012.Social
- Mole, R. C. M., Parutis, V., Gerry, C. J., & Burns, F. M. (2014). The impact of migration on the sexual health, behaviours and attitudes of Central and East European gay/bisexual men in London. *Ethnicity and Health*, *19*(1), 86–99. https://doi.org/10.1080/13557858.2013.789829
- Moradi, B., Mohr, J. J., Worthington, R. L., & Fassinger, R. E. (2009).
  Counseling psychology research on sexual (orientation) minority issues:
  Conceptual and methodological challenges and opportunities. *Journal of Counseling Psychology*, *56*(1), 5–22. https://doi.org/10.1037/a0014572
- Moradi, B., Van Den Berg, J. J., & Epting, F. R. (2009). Threat and Guilt Aspects of Internalized Antilesbian and Gay Prejudice: An Application of Personal Construct Theory. *Journal of Counseling Psychology*, 56(1), 119–

131. https://doi.org/10.1037/a0014571

- Morris, J. F., Waldo, C. R., & Rothblum, E. D. (2001). A model of predictors and outcomes of outness among lesbian and bisexual women. *The American Journal of Orthopsychiatry*, *71*(1), 61–71. https://doi.org/10.1037/0002-9432.71.1.61
- Nadal, K. L., Issa, M. A., Leon, J., Meterko, V., Wideman, M., & Wong, Y. (2011). Sexual orientation microaggressions: "Death by a thousand cuts" for lesbian, gay, and bisexual youth. *Journal of LGBT Youth*, 8(3), 234– 259. https://doi.org/10.1080/19361653.2011.584204
- Nadal, K. L., Wong, Y., Issa, M. A., Meterko, V., Leon, J., & Wideman, M. (2011). Sexual orientation microaggressions: Processes and coping mechanisms for lesbian, gay, and bisexual individuals. *Journal of LGBT Issues in Counseling*, *5*(1), 21–46. https://doi.org/10.1080/15538605.2011.554606
- Nadal, K., Rivera, D., & Corpus, M. (2010). Sexual orientation and transgender microaggressions. In D. W. Sue (Ed.), *Microaggressions and Marginality: Manifestation, Dynamics, and Impact* (pp. 217–240). Hoboken, N.J.: John Wiley & Sons.
- Narváez, R. F., Meyer, I. H., Kertzner, R. M., Ouellette, S. C., & Gordon, A. R. (2009). A Qualitative Approach to the Intersection of Sexual, Ethnic, and Gender Identities. Identity: An International Journal of Theory and Research. https://doi.org/10.1080/15283480802579375
- Neisen, J. (1990). Heterosexism : Redefining homophobia for the 1990s, (January 1990), 21–35. https://doi.org/10.1080/19359705.1990.9962143
- Newcomb, M. E., & Mustanski, B. (2010). Internalized homophobia and internalizing mental health problems: A meta-analytic review. Clinical Psychology Review. Elsevier Ltd. https://doi.org/10.1016/j.cpr.2010.07.003
- Nungesser, L. G. (1983). Homosexual acts, actors, and identities. New York, NY: Praeger. Retrieved from http://www.worldcat.org/title/homosexual-actsactors-and-identities/oclc/9759386?page=citation

- Orne, J. (2013). Queers in the Line of Fire: Goffman's Stigma Revisited. Sociological Quarterly, 54(2), 229–253. https://doi.org/10.1111/tsq.12001
- Pachankis, J. (2007). The psychological implications of concealing a stigma: a cognitive-affective-behavioral model. Psychological bulletin. https://doi.org/10.1037/0033-2909.133.2.328
- Pawson, R. (2006). *Evidence-based policy: A realist perspective*. London: Sage.
- Pilgrim, D., & Bentall, R. (1999). The medicalisation of misery: A critical realist analysis of the concept of depression. *Journal of Mental Health*, 8(3), 261– 274. https://doi.org/10.1080/09638239917427
- Polit, D. F., & Beck, C. T. (2006). *Essentials of nursing research : methods, appraisal, and utilization*. Lippincott Williams & Wilkins.
- Puckett, J., & Levitt, H. (2015). Internalized Stigma Within Sexual and Gender Minorities: Change Strategies and Clinical Implications. *Journal of LGBT Issues in Counseling*, 9(4), 329–349. https://doi.org/10.1080/15538605.2015.1112336
- Quinn, D. (2006). Concealable versus Conspicuous Stigmatized Identitie. In S. Levin & C. Van Laar (Eds.), *Stigma and group inequality: social pscyhological perspectives* (pp. 83–103). The Claremont Symposium on Applied Social Psychology. Retrieved from https://www.researchgate.net/profile/Colette\_Laar/publication/268743305\_ Stigma\_and\_group\_inequality\_Social\_psychological\_approaches/links/54d 348d90cf250179181dc11/Stigma-and-group-inequality-Socialpsychological-approaches.pdf#page=102
- Rasmussen, M. Lou. (2004). The Problem of Coming Out. Source: Theory Into Practice, 43(2), 144–150. Retrieved from http://www.jstor.org/stable/3701550
- Ritchie, J., & Spencer, L. (1994). Qualitative data analysis for applied policy research. In A. Bryman & R. G. Burgess (Eds.), *Analyzing Qualitative Data* (pp. 173–194). London: Routledge. Retrieved from

https://www.dawsonera.com/readonline/9780203413081

- Rofes, E. (2004). Interrogating Narratives of Persecution and Suffering among Queer Youth. In *Youth and Sexualities* (pp. 41–62). New York.
- Rosario, M., Schrimshaw, E. W., Hunter, J., & Braun, L. (2006). Sexual Identity Development among Gay, Lesbian, and Bisexual Youths: Consistency and Change Over Time Margaret, *43*(1), 46–58. https://doi.org/10.1080/00224490609552298.Sexual
- Ross, L. E., Doctor, F., Dimito, A., Kuehl, D., & Armstrong, M. S. (2007). Can Talking About Oppression Reduce Depression? Modified CBT Group Treatment for LGBT People With Depression. Journal of Gay & Lesbian Social Services. https://doi.org/10.1300/J041v19n01
- Rosser, B. R. S., Bockting, W. O., Ross, M. W., Miner, M. H., & Coleman, E. (2008). The relationship between homosexuality, internalized homonegativity, and mental health in men who have sex with men. Journal of homosexuality. https://doi.org/10.1080/00918360802129394
- Rowen, C. J., & Malcolm, J. P. (2002). Correlates of Internalized Homophobia and Homosexual Identity Formation in a Sample of Gay Men. *Journal of Homosexuality*, 43(2), 77–92. https://doi.org/10.1300/J082v43n02
- Russel, G. (2006). Internalized homphobia: lessons from the Mobius Strip. In C. Brown & T. Augusta-Scott (Eds.), *Narrative therapy : making meaning, making lives* (pp. 151–172). Sage Publications. Retrieved from https://books.google.co.uk/books?hl=en&lr=&id=rCEx7bZ7RT0C&oi=fnd&p g=PT195&dq=internalised+homophobia+lessons+from+the+mobius+strip& ots=\_QwJnMtPgf&sig=8Ke4iB6fctTVOAbnfyEFvkL3x4#v=onepage&q=internalised homophobia lessons from the mobius stri
- Russell, G. M., & Bohan, J. S. (2006). The Case of Internalized Homophobia: Theory and/as Practice. Theory & Psychology. https://doi.org/10.1177/0959354306064283

Ryan, G., & Bernard, H. (2000). Data management and analysis methods.

Retrieved from https://www.rand.org/pubs/external\_publications/EP20000033.html

- Savin-Williams, R. C. (2001). A critique of research on sexual-minority youths. Journal of adolescence. https://doi.org/10.1006/jado.2000.0369
- Savin-Williams, R. C., Cohen, K. M., Joyner, K., & Rieger, G. (2010). Depressive symptoms among same-sex oriented young men: Importance of reference group. Archives of Sexual Behavior. https://doi.org/10.1007/s10508-010-9658-4
- Schubotz, D., & McNamee, H. (2009). "I knew i wasn't like anybody else": Young men's accounts of coming out and being gay in Northern Ireland. *Child Care in Practice*, *15*(3), 193–208. https://doi.org/10.1080/13575270902890976
- Semlyen, J., King, M., Varney, J., & Hagger-Johnson, G. (2016). Sexual orientation and symptoms of common mental disorder or low wellbeing:
   Combined meta-analysis of 12 UK population health surveys. *BMC Psychiatry*, *16*(1), 1–9. https://doi.org/10.1186/s12888-016-0767-z
- Shaw, L., Butler, C., Langdridge, D., Gibson, S., Barker, M. J., Lenihan, P., ... Richards, C. (2012). *Guidelines and Literature Review for Psychologists Working Therapeutically with. Continuing Professional Development.*
- Shaw, L., Butler, C., & Marriott, C. (2008). Sex and sexuality teaching in UK clinical psychology courses. *Clinical Psychology Forum*, *187*, 7–11.
- Sherif, B. (2001). The Ambiguity of Boundaries in the Fieldwork Experience: Establishing Rapport and Negotiating Insider/Outsider Status. *Qualitative Inquiry*, 7(4), 436–447. https://doi.org/10.1177/107780040100700403
- Shippee, N. D. (2011). Gay, straight, and who i am: Interpreting passing within the frames for everyday life. *Deviant Behavior*, 32(2), 115–157. https://doi.org/10.1080/01639621003748514
- Siegel, K., Lune, H., & Meyer, I. H. (1998). Stigma management among gay/bisexual men with HIV/AIDS. *Qualitative Sociology*, 21(1), 3–24. https://doi.org/10.1023/A:1022102825016

- Smith, A. (1994). Thatcherism's promotion of homosexuality. In New Right discourse on race and sexuality (pp. 183–239). Cambridge, UK: University Press.
- Sommers, S. R., & Norton, M. I. (2006). Lay theories about white racists: What constitutes racism (and what doesn't). *Group Processes and Intergroup Relations*, *9*(1), 117–138. https://doi.org/10.1177/1368430206059881
- Stonewall UK. (n.d.). Key dates for lesbian, gay, bi and trans equality. Retrieved May 11, 2018, from https://www.stonewall.org.uk/about-us/key-dateslesbian-gay-bi-and-trans-equality
- Strauss, A., & Corbin, J. (1998). Basics of qualitative research: Procedures and techniques for developing grounded theory. Retrieved from https://scholar.google.co.uk/scholar?hl=en&as\_sdt=0%2C5&q=Basics+of+ qualitative+research%3A+Procedures+and+techniques+for+developing+gr ounded+theory&btnG=
- Sue, D. W. (2003). Overcoming our racism: the journey to liberation. John Wiley & Sons.
- Sue, D. W., Capodilupo, C. M., Torino, G. C., Bucceri, J. M., Holder, A. M. B., Nadal, K. L., & Esquilin, M. (2007). Racial microaggressions in everyday life: Implications for clinical practice. *American Psychologist*, 62(4), 271– 286. https://doi.org/10.1037/0003-066X.62.4.271
- Swim, J. K., Johnston, K. E., & Pearson, N. B. (2009). Daily experiences with heterosexism: Relations between heterosexist hassles and psychological well-being. Journal of Social and Clinical Psychology. https://doi.org/10.1521/jscp.2009.28.5.597
- Swim, J. K., Pearson, N. B., & Johnston, K. E. (2007). Daily Encounters with Heterosexism: A Week in the Life of Lesbian, Gay, and Bisexual Individuals. *Journal of Homosexuality*, *53*(4). https://doi.org/10.1080/00918360802101179
- Swim, J. K., Scott, E. D., Sechrist, G. B., Campbell, B., & Stangor, C. (2003). The Role of Intent and Harm in Judgments of Prejudice and Discrimination.

Journal of Personality and Social Psychology, 84(5), 944–959. https://doi.org/10.1037/0022-3514.84.5.944

- Szymanski, D. M., & Carr, E. R. (2008). The roles of gender role conflict and internalized heterosexism in gay and bisexual men's psychological distress: Testing two mediation models. Psychology of Men & Masculinity. https://doi.org/10.1037/1524-9220.9.1.40
- Szymanski, D. M., & Chung, B. (2001). The Lesbian Internalized Homophobia Scale The Lesbian Internalized Homophobia Scale : A Rational / Theoretical Approach. *Journal of Homosexuality*, *41*(2), 37–52. https://doi.org/10.1300/J082v41n02
- Szymanski, D. M., & Gupta, A. (2009). Examining the Relationship Between Multiple Internalized Oppressions and African American Lesbian, Gay, Bisexual, and Questioning Persons' Self-Esteem and Psychological Distress. *Journal of Counseling Psychology*, *56*(1), 110–118. https://doi.org/10.1037/a0012981
- Szymanski, D. M., & Mikorski, R. (2016). External and internalized heterosexism, meaning in life, and psychological distress. Psychology of Sexual Orientation and Gender Diversity. https://doi.org/10.1037/sgd0000182
- Taulke-Johnson, R. (2008). Moving beyond homophobia, harassment and intolerance: gay male university students' alternative narratives. Discourse: Studies in the Cultural Politics of Education. https://doi.org/10.1080/01596300701802813
- Taulke-Johnson, R. (2010). Assertion, regulation and consent: Gay students, straight flatmates, and the (hetero)sexualisation of university accommodation space. *Gender and Education*, 22(4), 401–417. https://doi.org/10.1080/09540250903341104
- Thompson, A. R., & Chambers, E. (2012). Ethical Issues in Qualitative Mental Health Research Introduction : Codes, Principles and Laws are Useful. Qualitative ResearchMethods InMental Health and Psychotherapy: A Guide for Students and Practitioners, 23–37.

https://doi.org/10.1002/9781119973249.ch3

- Thompson, A. R., & Russo, K. (2012). Qualitative Research in Psychology Ethical Dilemmas for Clinical Psychologists in Conducting Qualitative Research Ethical Dilemmas for Clinical Psychologists in Conducting Qualitative Research. *Qualitative Research in Psychology*, 9(9), 32–4632. https://doi.org/10.1080/14780887.2012.630636
- Troiden. (1989). Troiden 1989 The Formation of Homosexual Identities. *Journal of Homosexuality*, *17*(1–2), 43–74.
- van Bergen, D. D., & Spiegel, T. (2014). 'Their Words Cut me Like a Knife': coping responses of Dutch lesbian, gay and bisexual youth to stigma. *Journal of Youth Studies*, *17*(10), 1346–1361. https://doi.org/10.1080/13676261.2014.918249
- Vorauer, J. D., & Kumhyr, S. M. (2001). Is this about you or me? Self-versus other-directed judgments and feelings in response to intergroup interaction. *Personality and Social Psychology Bulletin*, 27(6), 706–719. https://doi.org/10.1177/0146167201276006
- Wade, A. (1997). SMALL ACTS OF LIVING : EVERYDAY RESISTANCE TO VIOLENCE AND OTHER FORMS OF OPPRESSION \*. Contemporary Family Therapy, 19(March), 23–39.
- Warner, J., McKeown, E., Griffin, M., Johnson, K., Ramsay, A., Cort, C., & King, M. (2004). Rates and predictors of mental illness in gay men, lesbians and bisexual men and women: Results from a survey based in England and Wales. The British journal of psychiatry : the journal of mental science. https://doi.org/10.1192/bjp.185.6.479

Weinberg, G. H. (1972). Society and the healthy homosexual. MacMillan.

- Wilkins, A. (2012). "not out to start a revolution": Race, gender, and emotional restraint among black university men. *Journal of Contemporary Ethnography*, *41*(1), 34–65. https://doi.org/10.1177/0891241611433053
- Wilkinson, S., Joffe, H., & Yardley, L. (2004). Qualitative Data Collection:Interviews and Focus Groups. In D. F. Marks & L. Yardley (Eds.), *Research*

*Methods for Clinical and Health Psychology* (pp. 39–55). 1 Oliver's Yard, 55 City Road, London England EC1Y 1SP United Kingdom: SAGE Publications, Ltd. https://doi.org/10.4135/9781849209793.n3

- Wilkinson, W. W. (2004). Authoritarian hegemony, dimensions of masculinity, and male antigay attitudes. *Psychology of Men and Masculinity*, *5*(2), 121– 131. https://doi.org/10.1037/1524-9220.5.2.121
- Williamson, I. R. (2000). Internalized homophobia and health issues affecting lesbians and gay men. Health education research. https://doi.org/10.1093/her/15.1.97
- Willig, C. (2001). Introducing qualitative research in psychology Adventures in theory and method. Retrieved from https://www.mheducation.co.uk/openup/chapters/0335205356.pdf
- Willig, C. (2012). *Qualitative interpretation and analysis in psychology*. Open University Press.
- Willot, S. (1998). An outsider within: a feminist doing research with men. In K. Henwood, C. Griffin, & A. Phoenix (Eds.), *Standpoints and Differences: Essays in the Practice of Feminist Psychology* (pp. 174–190). London: SAGE Publications.
- Yadavaia, J. E., & Hayes, S. C. (2012). Acceptance and commitment therapy for self-stigma around sexual orientation: A multiple baseline evaluation. Cognitive and Behavioral Practice. https://doi.org/10.1016/j.cbpra.2011.09.002
- Yardley, L. (2000). Dilemmas in qualitative health research. *Psychology and Health*, *15*(2), 215–228. https://doi.org/10.1080/08870440008400302
- Yardley, L. (2008). Demonstrating validity in qualitative psychology. In A. Smith (Ed.), *Qualitative Psychology: A Practical Guide to Research Methods* (Second, pp. 235–251). London: Sage. Retrieved from https://books.google.co.uk/books?hl=en&lr=&id=lv0aCAAAQBAJ&oi=fnd&p g=PA257&dq=demonstrating+validity+in+qualitative+psychology+a+practic al+guide+to+research+methods&ots=eNHJkyenRy&sig= P1WVn2eQHUN

# Wo\_sEIQ5ZYNsRS0

YouGov, U. (2015). 1 in 2 young people say they are not 100% heterosexual.

Search: PsychInfo, MEDLINE (PubMed) and Academic Search Complete

# 01/01/2007 and 31/12/2017

Search terms: (DE "Homosexuality" OR DE "Male Homosexuality" OR DE "bisexuality" OR DE "sexual orientation") AND (DE "attitudes" OR DE "Homosexuality (Attitudes Toward)" OR DE "stereotyped attitudes" OR DE "implicit attitudes" OR DE "sexual attitudes" OR DE "internalised" OR DE "internalized" OR DE "introjection" OR DE "stigma" OR DE "prejudice" OR DE "discrimination"); internali\* AND (homonegativ\* OR homo-negativ\* OR homophob\* OR homo-phob\* OR heterosex\* OR hetero-sex\* OR heteronorm\* OR hetero-norm\*).

2, 563 papers (2,234 identified within PsychInfo; 634 unique papers identified within Medline & Academic Search Complete)

536 qualitative papers were identified

186 papers were identified as potentially relevant through reviewing titles and abstracts

39 papers were identified through full-text review as addressing concepts that were related to internalised AGS

6 of these studied populations in the UK

4 more UK-specific papers were identified through citation search

108

10 core studies were identified for review

# Appendix B: Table Summary of Papers

Study	Aim	Epistomology/ Methodology	Definition of Internalised Homophobia	Participants	Main themes/discussion points	Main Limitations/Critiques
1. McDermott et al. (2008)	Exploration of the connections between sexual identity and self-destructive behaviours	Discourse analysis; interviews & focus groups	IH not explicitly referred to but is consistent with shame as discussed in relation to the shame/pride binary.	27 White British and European LGBT people aged 16-25 recruited from LGBT support groups in NW England and South Wales; relatively highly educated	Polarised shame-pride discourses; • young people resist shame by: * normalising/minimising homophobia * responding in an emotionally controlled/rational way * positioning selves as proud • Homphobia as punishing/isolating •Focus on heterosexist context	Limited transferability
2. Taulke-Johnson (2008)	Identifying counter- narratives to homophobia, victiminsation and harassment of LGBT students in university	Thematic analysis semi-structured interviews	IH not defined but referred to	6 self-identified gay male undergraduate students at a middle sized university, of mostly White backgrounds (4 white; 1 Arab; 1 Chinese), aged 20-23, and relatively highly educated.	Students' anticipation of university as a "golden opportunity" • experiences of "a lot of fun" at university as a gay student • unintentional perpetuation of anti-gay discourses • questions of trusting others in relation to "coming out" • Focus on homophobia; compulsory heterosexuality	Limited transferability. Lack of reflexivity.
3. Schubotz & McNamee (2009)	The focus of these interviews was generally on interviewees' sexuality. This included issues such as sex education received at home, in school and elsewhere, sexual	Biographical narrative interview method; semi- structured, problem-centred interviews	IH not explicitly referred to	20 self-identified gay and bisexual young men aged 14-25 in Northern Ireland	<ul> <li>Gay identity formation • Emphasis on enforcement/social expectations • Northern Ireland as a particularly difficult social-political context for LGBTQ individuals</li> </ul>	Limited transferability. Lack of reflexivity
4. Doyal et al. (2008)	Exploratory aim in relation to the well- being of gay/bisexual African migrants	Thematic analysis; semi-structured interviews	IH discourse absent; IH implied in descriptions of retrospective accounts of "difference" (e.g. associated with negative evaluations of sexuality)	8 gay/bisexual men aged 18-40 who emigrated to the UK from Sub- Saharan African countries, and were living in London; relatively highly educated & had access to resources needed to emigrate	Racialisation of sexuality • awareness of difference • (eelings of guilt/abnormality • isolation • tension between African, religious and gay, cultural and social identities • challenges to the idea of a "true universal gayness" usually associated with white, middle class men in the Western world.	Limited transferability
5. Anderson et al. (2009)	Exploring identities of gay/bisexual Carribean men in UK	Thematic analysis? structured interviews	IH as defined by Herek, 1996 (p. 101): the internalisation of anti-gay sentiment and heterosexism as 'the ideological system that denies, denigrates, and stigmatises	10 Black Carribean self-identified gay and bisexual men aged 26-61 living in London, with mostly limited access to financial resources	Participant identities are characterised as being in a "liminal" or "unresolved" state due to heterosexism •awareness of difference • feelings of guilt, shame and regret • strategies which reduce cognitive dissonance including overt and covert, external and internal "policing" of their own behaviour and that of other gay men	Limited transferability. Potential influence of larger scale study focusing on HIV

Study	Aim	Methodology	Definition of Internalised Homophobia	Participants	Main themes/discussion points	Main Limitations/Critiques
6. McKeown et al. (2010)	To examine common themes related to being gay and from an ethnic minority background amongst		referred to	Email interviews 87 self-identified South Asian, Black African and Caribbean gay men aged 18-52, living in London, the majority of whom were identified as from higher educational and socioeconomic backgrounds	Perception of more problematic challenges that face gay ethnic minority men • gay sexual identity as challenging cultural representations of masculinity amongst black gay men gay • gay sexual identity as problematic because of cultural expectations to marry • Personal/social threat/shame	Larger study with increased generalisability but potential influence of larger scale study focusing on sexual health • Study design may have limited access to nuanced data
7. Jaspal (2012)	To compare British Indian/Pakistani meaning making via sexual, religious and ethnic identies; explore how cope with identity threat due to identity configuration		referred to within this study but a future one (2017), where mentioned	15 self identified gay British Indian and Pakistani young men (average age 21 +/- 3) of varying degrees of religiousity living in East Midlands; half of participants were still in high school, half in university	<ul> <li>perception of more problematic challenges as gay ethnic minority men • incompatibilities in self-concept</li> <li>family, culture and interpersonal relations • varying experiences of personal/social threat/shame between British Indian and Pakistani gay men • Maintaining a sense of belonging</li> </ul>	Limited transferability. Lack of reflexivity.
8. Mole et al. (2014)	The extent to which the sexual behaviour and understanding of risk of CEE gay/bisexual men in London were conditioned by migration process	Motivation/Framew ork Approach; semi-structured interview		17 self-identified White European gay/bisexual men who have migrated to London from CEE countries, and who are relatively highly educated	Retrospective descriptions of having to present a "normal" image of themselves as conforming to traditional gender and sexual identity norms • relatively hostile social environments within home countries	Limited transferability. Potential influence of larger scale study focusing on sexual health
9. Clarke & Smith (2015)	An exploration of how gay men made sense of their visual identities in relation to sociocultural pressures	Social constructionist; Thematic analysis; qualitative online survey	referred to; used as a synonym for "negative feelings about being gay"	20 self-identified gay/ bisexual young men, all but 3 of whom were 18-25, most of whom are White British (but also including one participant who identified as mixed race, and one as Chinese)	Overarching theme of gay men's identities as influenced by a number of competing pressures: •the "coming out imperative" •to be "out" as a "happy, healthy homosexual" (XXXX) •heteronormative boundaries • anti- effeminacy attitudes • "gay, but not too gay."	Limited transferability
10. Greenland & Taulke-Johnson (2017)	An exploration of the boundaries between what is considered "discrimination" and "not discrimination in realtion to "identiy work"	Social constructionist; Dialogical analysis		15 White British self-identified gay men aged 19-23, attending university in a medium-sized UK city, relatively highly educated	Four main identity positions identified, which men shifted between: "I- as authentic individual, I-as what I am not (not camp and not a victim), and I- as powerful" • anti-effeminacy attitudes • only speaking about discrimination from positions of power	Limited transferability

## Appendix C: Participant Information Sheet (for Unknown Participants):

### **Information Sheet A1**

#### Impact of AGS: as described by men who have sex with men

Jey Dreyer (email: <u>u1524906@uel.ac.uk</u>)

I would like to invite you to participate in a research study. The study is part of my Doctorate in Clinical Psychology at the University of East London. Before you decide to participate, it is important that you understand why this research is being carried out and what your participation would involve.

#### WHAT ARE THE AIMS OF THE RESEARCH?

The main purpose of the study is to explore how men who are attracted to and/or have sex with other men feel about their sexuality. Of particular interest is how this may or may be affected by living in a society in which anti-gay prejudice (i.e. homophobia) and/or discrimination can still be difficult to avoid.

#### WHO CAN TAKE PART?

Anyone aged 18+ who identifies as a male who has been attracted to and/or has had sex with another man (MSM), lives in London, and can communicate fluently in English.

#### WHAT WILL HAPPEN IF I AGREE TO TAKE PART?

You will be invited to take part in an interview, which will explore the development of your feelings towards your sexuality. The interview would take place with the researcher in person (at the University of East London) or via Skype, depending on your preference.

In order to be as accurate as possible, I will ask your permission to audio record the interview, which will be anonymised (meaning you will not be named or otherwise identifiable). Please note, you will need to provide your consent before you will be able to proceed with the interview. This will be done either in writing (if you attend UEL) or online. In total, the interview will take no more than 60 minutes.

#### WILL I BE REIMBURSED FOR MY TIME?

For those who want to be interviewed at UEL, travel costs up to £5 can be reimbursed, and coffee, tea and biscuits will be made available free of charge. As a thank you for your time, each participant will be entered into a prize draw to win a £25 voucher for <u>www.amazon.co.uk</u>. The winner will be notified via text or email at the end of data collection.

#### WHAT ELSE SHOULD I BE AWARE OF BEFORE MAKING MY DECISION?

Although this research is not designed to cause you discomfort or distress, it is possible that you may find talking about issues related to your sexuality uncomfortable or upsetting. This may more likely if you and/or those you care about have experienced discrimination, abuse and/or violence associated with your sexuality. Care will be taken to conduct the interview in a sensitive manner, and it is emphasised that you have the right to take a break and/or stop participation and have all data withdrawn from the study at any time, up until the point that your data is anonymised (at which point it will no longer be possible to link this back to you). You will be given time at the end of the interview to ask questions and/or raise any concerns, and will be provided with a list of organisations which support MSM should you wish to speak with someone after the study has ended.

## WHAT ARE THE BENEFITS OF TAKING PART?

I hope that participating in this research will offer an empowering experience, as you reflect on and make connections between your lived experience as a MSM, AGS and attitudes and beliefs about your sexuality. As part of this research, your shared experience also has the potential to inform the practice of those services which support MSM.

#### HOW WILL MY CONFIDENTIALITY BE PROTECTED?

All information about you will be treated confidentially and in accordance with the Data Protection Act 1998. Any personal contact details and signed consent forms with your information will be stored separately to interview material. Your responses to the interview will be anonymised and no identifying information will be shared with anyone. Any audio-recorded information will be immediately transferred to a password-protected computer file on a secure network and deleted from the recording device. Each participant will be given a pseudonym and any names of places mentioned will be changed during transcription. All information will be saved on a password-protected computer file on a secure network that only the researcher will have access to.

#### HOW WILL MY DATA BE USED?

Anonymised extracts from the interview might be used in my doctoral thesis and any publications in journal articles but it will not be possible to identify you from these. We may use quotes within the analysis of the research and within the final report, but again these will be anonymised and you will not be identifiable.

#### HOW LONG WILL MY DATA BE KEPT FOR?

All names and/or contact details will be destroyed after data collection and the winner of the prize draw has been identified. Any remaining data will be destroyed within 3 years.

#### Who can I contact following the study if I have any questions?

The researcher, Jey Dreyer, can be	The research supervisor, Dr Trishna
contacted at:	Patel, can be contacted at:
University of East London	University of East London
School of Psychology	School of Psychology
Water Lane,	Water Lane,
London.	London.
E15 4LZ	E15 4LZ
u1524906@uel.ac.uk	Tel: 020 8223 6392
	t.patel@uel.ac.uk

If you have any questions or concerns about how the research has been conducted please contact the research supervisor: Dr Trishna Patel

or

Chair of the School of Psychology Research Ethics Sub-committee: Dr Mark Finn, School of Psychology, University of East London, Water Lane, London E15 4LZ. Email: m.finn@uel.ac.uk

### Thank you for taking the time to read this information sheet

## Appendix D: Participant Information Sheet for Known Participants:

#### **Information Sheet A2**

#### Impact of AGS: as described by men who have sex with men

Jey Dreyer (email: <u>u1524906@uel.ac.uk</u>)

I would like to invite you to participate in a research study. The study is part of my Doctorate in Clinical Psychology at the University of East London. Before you decide to participate, it is important that you understand why this research is being carried out and what your participation would involve.

#### WHAT ARE THE AIMS OF THE RESEARCH?

The main purpose of the study is to explore how men who are attracted to and/or have sex with other men feel about their sexuality. Of particular interest is how this may or may be affected by living in a society in which anti-gay prejudice (i.e. homophobia) and/or discrimination can still be difficult to avoid.

#### WHO CAN TAKE PART?

Anyone aged 18+ who identifies as a male who has been attracted to and/or has had sex with another man (MSM), lives in London, and can communicate fluently in English.

#### WHAT WILL HAPPEN IF I AGREE TO TAKE PART?

You will be invited to take part in an interview, which will explore the development of your feelings towards your sexuality. The interview would take place with the researcher in person at a private and confidential space in a private or public residence (e.g. your workplace), at the University of East London, or via Skype, depending on your preference.

In order to be as accurate as possible, I will ask your permission to audio record the interview, which will be anonymised (meaning you will not be named or otherwise identifiable). Please note, you will need to provide your consent before you will be able to proceed with the interview. This will be done either in writing (if you attend UEL) or online. In total, the interview will take no more than 60 minutes.

#### WILL I BE REIMBURSED FOR MY TIME?

For those who want to be interviewed at UEL, travel costs up to £5 can be reimbursed, and coffee, tea and biscuits will be made available free of charge. As a thank you for your time, each participant will be entered into a prize draw to win a £25 voucher for www.notonthehighstreet.com (an online retailer selling goods, gifts and experiences). The winner will be notified via text or email at the end of data collection.

#### WHAT ELSE SHOULD I BE AWARE OF BEFORE MAKING MY DECISION?

Although this research is not designed to cause you discomfort or distress, it is possible that you may find talking about issues related to your sexuality uncomfortable or upsetting. This may more likely if you and/or those you care about have experienced discrimination, abuse and/or violence associated with your sexuality. Care will be taken to conduct the interview in a sensitive manner, and it is emphasised that you have the right to take a break and/or stop participation and have all data withdrawn from the study at any time, up until the point that your data is anonymised (at which point it will no longer be possible to link this back to you). You will be given time at the end of the interview to ask questions and/or raise any concerns, and will be provided with a list of organisations which support MSM should you wish to speak with someone after the study has ended.

### WHAT ARE THE BENEFITS OF TAKING PART?

I hope that participating in this research will offer an empowering experience, as you reflect on and make connections between your lived experience as a MSM, AGS and attitudes and beliefs about your sexuality. As part of this research, your shared experience also has the potential to inform the practice of those services which support MSM.

### HOW WILL MY CONFIDENTIALITY BE PROTECTED?

All information about you will be treated confidentially and in accordance with the Data Protection Act 1998. Any personal contact details and signed consent forms with your information will be stored separately to interview material. Your responses to the interview will be anonymised and no identifying information will be shared with anyone. Any audio-recorded information will be immediately transferred to a password-protected computer file on a secure network and deleted from the recording device. Each participant will be given a pseudonym and any names of places mentioned will be changed during transcription. All information will be saved on a password-protected computer file on a secure network that only the researcher will have access to.

### HOW WILL MY DATA BE USED?

Anonymised extracts from the interview might be used in my doctoral thesis and any publications in journal articles but it will not be possible to identify you from these. We may use quotes within the analysis of the research and within the final report, but again these will be anonymised and you will not be identifiable.

## HOW LONG WILL MY DATA BE KEPT FOR?

All names and/or contact details will be destroyed after data collection and the winner of the prize draw has been identified. Any remaining data will be destroyed within 3 years.

## Who can I contact following the study if I have any questions?

The researcher, Jey Dreyer, can be	The research supervisor, Dr Trishna
contacted at:	Patel, can be contacted at:
University of East London	University of East London
School of Psychology	School of Psychology
Water Lane,	Water Lane,
London.	London.
E15 4LZ	E15 4LZ
u1524906@uel.ac.uk	Tel: 020 8223 6392
C	t.patel@uel.ac.uk

If you have any questions or concerns about how the research has been conducted please contact the research supervisor: Dr Trishna Patel

or

Chair of the School of Psychology Research Ethics Sub-committee: Dr Mark Finn, School of Psychology, University of East London, Water Lane, London E15 4LZ. Email: m.finn@uel.ac.uk

## Thank you for taking the time to read this information sheet

## Appendix E: Consent Form

### **Consent Form**

Title of Study: Impact of AGS: as described by men who have sex with men

Thank you for considering taking part in this research. If you have any questions arising from the Information Sheet or explanation already given to you, please ask the researcher before you decide whether to join in. You will be given a copy of this Consent Form to keep and refer to at any time.

Please tick the box below to confirm:

- □ I understand the nature and purpose of the above-named study. I have been given an information sheet describing the research, and have had the opportunity to ask the researcher questions, to which I feel I have received satisfactory answers.
- □ I consent to the processing of my personal information for the purposes explained to me. I understand that such information will be handled in accordance with the terms of the Data Protection Act 1998.
- □ I consent to being recorded during the interview. Such recording will be transcribed by the researcher for use in research analysis and within the final report, within which I am assured my confidentiality and anonymity will be maintained and I will not be able to be identified.
- □ I understand that I can decide at any point, without giving any reason, to stop participation and to have all my data withdrawn until my data is anonymised (at which point we will no longer be able to link these back to you).
- □ I would like to participate in the prize draw for the Amazon voucher, and consent to being contacted by the researcher in the future to be notified if I am chosen as the winner.

Signed ......Date.....

# Appendix F: Interview Schedule with Probes:

- How do you define your sexuality now? How long have you identified as X? In the past? When did this change?
- 2. How open are you about (your sexuality) to others?

(Probes: Do you ever conceal your (sexual identity) – when? Why? How has this changed over time?)

3. How do you feel about (your sexuality) (now)?

(Probes: Do you ever have any positive/negative feelings about being attracted to and/or sleeping with people of the same sex? What are these? Have these changed over time?)

- 4. Are there any particular life experiences which you feel have shaped your feelings towards (your sexuality)?
- 5. Have you ever heard the term "internalised (AGS/prejudice; homophobia)"?
- 6. How do you/ would you understand "internalised (AGS/prejudice; homophobia')"?
- 7. How meaningful is the concept of internalising (AGS/prejudice; homophobia) to you?
  - If it is meaningful
    - what effect do you think internalised (AGS/prejudice; homophobia) has had in your life?

(Probes: An example? EG recently? On a day to day basis? If mention other emotions, probe, where did these come from)

- Is there anything that doesn't fit for you about the idea of internalised homophobia?
- If it is not meaningful- why not?
- 8. If you could send a message to your younger self in relation to growing up as a 'gay/bi/man who sleeps with men', what would it be?

# Appendix G: Debrief

## **Debrief Sheet**

I would like to thank you for participating in this interview.

Despite increasing acceptance and extension of legal rights towards same sex relationships within the UK and many countries worldwide, most men who have sex with men cannot avoid prejudice and discrimination. It has been suggested that societal AGS is almost always 'internalised'. It is well established that there are higher rates of adverse mental health outcomes amongst sexual 'minority' populations, and internalised ant-gay stigma specifically has been identified as an important link.

Although the idea of internalised AGS is important and widely accepted, concern has been expressed that the concept has primarily been defined by clinicians and researchers, and not the voices of the sexual 'minority' individuals who are said to be affected by it. It has also been criticized for seeing the problem as located within the individual, and failing to consider wider social and political factors, such as:

- the effects of historic and present anti-gay politics and legislation (including that which criminalised and criminalises MSM),
- support for the mistreatment of LGBT individuals from some religious institutions
- a lack of commitment to LGBT-inclusive sex and relationship education in schools
- minimal and stereotypical media representation.

Not only does the dominance of the idea of the *internalisation* of stigma risk neglecting the reality of the challenges of living in a more or less hetero-sexist world, it also inadvertently disregards the diverse range of potential responses to prejudice and discrimination, privileging those characterised by distress over strength.

This matters because our understanding of 'the problem' and the language we use to talk about it informs where we look to for the solution, and in turn clinical and public health interventions. Continued AGS and disproportionate representation of MSM amongst those experiencing distress suggests that current strategies have not been effective enough in reducing AGS and its impact

The present research aims to explore:

• attitudes MSM have towards their sexuality,

- whether and how this has been influenced by experiences of AGS,
- how the construct of internalised AGS is helpful and/or problematic
- alternative individual and collective responses to AGS, for example, those characterised by resilience and/or resistance.

By taking part in this study, you will contribute to the identification of unique and shared themes MSM's experience of AGS, which will enrich and expand the existing knowledge base, with implications for how the impact of anti-stigma can be understood, informing the practice of services which support men affected by AGS. Additionally, your contribution may aid development of strategies and policies to more effectively reduce and prevent anti-gay prejudice, discrimination, stigma and other negative consequences.

Once again I would like to reassure you that all information about you will be treated confidentially. In addition, you can ask to have your information withdrawn without explanation up until the point of anonymization, e.g. within 1 week of completion. If you would like to access support in relation to issues related to your sexuality and/or experiences of AGS, you can do so by contacting one of the organisations listed below: You can also access more general emotional and/or mental health support via your GP.

If you would like to find out more information about withdrawing from the study please feel free to contact the researcher whose contact details can be found below.

The researcher, Jey Dreyer, can be	
contacted at:	
University of East London	
School of Psychology	
Water Lane,	
London.	
E15 4LZ	
u1524906@uel.ac.uk	
e	

The research supervisor, Dr Trishna Patel, can be contacted at: University of East London School of Psychology Water Lane, London. E15 4LZ Tel: 020 8223 6392 t.patel@uel.ac.uk

# Appendix H: Sources of Support

## Sources of support:

## <u>National</u>

LGBT Switchboard: They are there to listen and you can speak to them about whatever is on your mind: tel: 03003300630 10-10 everyday; email: chris@switchboard.lgbt; web: https://switchboard.lgbt/

Samaritans: For 24 hour support 365 days per year call 116 123 for free

**Childline:** Childline is a private and confidential service for young people up to age 19, which can be contacted for free on 0800 1111 or people can get in touch online; see <a href="https://www.childline.org.uk/get-support/">https://www.childline.org.uk/get-support/</a> for more information.

**Terrence Higgins Trust**: For HIV support, advice and information about HIV services and campaigns: tel: 0808 802 1221; web: <u>http://www.tht.org.uk/</u>

**GALOP:** For information, advice and support about LGBT domestic violence: tel: 0300 999 5428; email: <u>help@galop.org.uk</u>

## <u>London</u>

**Antidote:** LGB & T run and targeted drug and alcohol support service: tel: 020 7833 1674 (10 am – 6pm)

**London Friend:** offers information, advice and counselling (for a low cost). They also have a number of free social and support groups: tel: 020 7833 1674; email: <u>office@londonfriend.org.uk</u>; web: http://londonfriend.org.uk/

**ELOP**: lesbian and gay mental health charity offers information, advice and counselling: tel: 020 8509 3898

# **APPENDIX I: UEL Ethics Application**

# DRAFT UEL ETHICS APPLICATION

# UNIVERSITY OF EAST LONDON

School of Psychology

APPLICATION FOR RESEARCH ETHICS APPROVAL

FOR RESEARCH INVOLVING HUMAN PARTICIPANTS

FOR BSc RESEARCH

FOR MSc/MA RESEARCH

# FOR PROFESSIONAL DOCTORATE RESEARCH IN CLINICAL, COUNSELLING & EDUCATIONAL PSYCHOLOGY

\*Students doing a <u>Professional Doctorate in Occupational & Organisational</u> <u>Psychology and PhD candidates</u> should apply for research ethics approval through the University Research Ethics Committee (UREC) and not use this form. Go to:

http://www.uel.ac.uk/gradschool/ethics/

If you need to apply to have ethical clearance from another Research Ethics Committee (e.g. NRES, HRA through IRIS) you DO NOT need to apply to the School of Psychology for ethical clearance also.

Please see details on www.uel.ac.uk/gradschool/ethics/external-committees.

Among other things this site will tell you about UEL sponsorship

Note that you do not need NHS ethics approval if collecting data from NHS staff except where the confidentiality of NHS patients could be compromised.

Before completing this application please familiarise yourself with:

The Code of Human Research Ethics (2014) published by the British Psychological Society (BPS). This can be found in the Ethics folder in the Psychology Noticeboard (Moodle) and also on the BPS website <u>http://www.bps.org.uk/system/files/Public%20files/code of human research et</u> <u>hics dec 2014 inf180 web.pdf</u>

And please also see the UEL Code of Practice for Research Ethics (2015) <a href="http://www.uel.ac.uk/gradschool/ethics/">http://www.uel.ac.uk/gradschool/ethics/</a>

# HOW TO COMPLETE & SUBMIT THIS APPLICATION

Complete this application form electronically, fully and accurately.

Type your name in the 'student's signature' section (5.1).

Include copies of all necessary attachments in the ONE DOCUMENT SAVED AS .doc (See page 2)

Email your supervisor the completed application and all attachments as ONE DOCUMENT. INDICATE '<u>ETHICS SUBMISSION</u>' IN THE SUBJECT FIELD OF THIS EMAIL so your supervisor can readily identity its content. Your supervisor will then look over your application.

When your application demonstrates sound ethical protocol your supervisor will type in his/her name in the 'supervisor's signature' section (5.2) and submit your application for review (psychology.ethics@uel.ac.uk). You should be copied into this email so that you know your application has been submitted. It is the responsibility of students to check this.

Your supervisor should let you know the outcome of your application. <u>Recruitment and data collection are NOT to commence until your ethics</u> <u>application has been approved, along with other research ethics approvals that</u> <u>may be necessary</u> (See 4.1)

# ATTACHMENTS YOU MUST ATTACH TO THIS APPLICATION

A copy of the invitation letter that you intend giving to potential participants.

A copy of the consent form that you intend giving to participants.

A copy of the debrief letter you intend to give participants (see 23 below)

# OTHER ATTACHMENTS (AS APPROPRIATE)

A copy of original and/or pre-existing questionnaire(s) and test(s) you intend to use.

Example of the kinds of interview questions you intend to ask participants.

Copies of the visual material(s) you intend showing participants.

A copy of ethical clearance or permission from an external organisation if you need it (e.g. a charity or school or employer etc.). Permissions must be attached to this application but your ethics application <u>can</u> be submitted to the School of Psychology before ethical approval is obtained from another organisation if separate ethical clearance from another organisation is required (see Section 4).

Disclosure and Barring Service (DBS) certificates:

FOR BSc/MSc/MA STUDENTS WHOSE RESEARCH INVOLVES VULNERABLE PARTICIPANTS: A scanned copy of a current Disclosure and Barring Service (DBS) certificate. <u>A current certificate is one that is not older</u> than six months. This is necessary if your research involves young people (anyone 16 years of age or under) or vulnerable adults (see Section 4 for a broad definition of this). A DBS certificate that you have obtained through an organisation you work for is acceptable as long as it is current. If you do not have a current DBS certificate, but need one for your research, you can apply for one through the HUB and the School will pay the cost.

If you need to attach a copy of a DBS certificate to your ethics application but would like to keep it confidential please email a scanned copy of the certificate directly to Dr Mary Spiller (Chair of the School Research Ethics Committee) at <u>m.j.spiller@uel.ac.uk</u>

FOR PROFESSIONAL DOCTORATE STUDENTS WHOSE RESEARCH INVOLVES VULNERABLE PARTICIPANTS: DBS clearance is necessary if your research involves young people (anyone under 16 years of age) or vulnerable adults (see 4.2 for a broad definition of this). The DBS check that was done, or verified, when you registered for your programme is sufficient and you will <u>not</u> have to apply for another in order to conduct research with vulnerable populations.

Your details

Your name:

Jenny Dreyer

Your supervisor's name:

Dr. Trishna Patel

Title of your programme: (e.g. BSc Psychology)

Professional doctorate in clinical psychology

Title of your proposed research: (This can be a working title)

Making sense of internalised antigay stigma: as described by men who have sex with men

Submission date for your BSc/MSc/MA research:

May 2018

Please tick if your application includes a copy of a DBS certificate

Please tick if you need to submit a DBS certificate with this application	but	have
emailed a copy to Dr Mary Spiller for confidentiality reasons (Chair		of
the School Research Ethics Committee) ( <u>m.j.spiller@uel.ac.uk</u> )		

Please tick to confirm that you have read and understood the <u>British</u>
<u>Psychological Society's Code of Human Research Ethics (2014)</u> and the <u>UEL</u>
<u>Code of Practice for Research Ethics</u> (See links on page 1)

## 2. About the research

The aim(s) of your research:

To explore participants' views of internalised antigay stigma and the experiences which have informed these views.

Likely duration of the data collection from intended starting to finishing date:

April 2018

## <u>Methods</u>

Design of the research:

(Type of design, variables etc. If the research is qualitative what approach will be used?)

The proposed research is a two-phased qualitative study that will utilise individual semi-structured interviews and a focus group (Morgan, 1997). Thematic analysis (Braun & Clarke, 2006) will be used to analyse the transcripts from both phases.

## 12. The sample/participants:

(Proposed number of participants, method of recruitment, specific characteristics of the sample such as age range, gender and ethnicity - whatever is relevant to your research)

The researcher will aim to recruit 8-10 men who are attracted to and/or have sex with men (from herein referred to as 'MSM') from gay-affirmative and neutral spaces, including social media forums. Inclusion criteria will specify that participants be aged 18+, living in London, and able to communicate fluently in English. No other exclusion criteria will be imposed. If recruitment problems are encountered, two options will be considered:

Inclusion criteria will be broadened beyond London, although this might mean that individuals are living in less urban contexts that differ in quality and levels of anti-gay stigma.

Broaden recruitment to include sexual minority women living in London, using similar recruitment methods.

# 13. Measures, materials or equipment:

(Give details about what will be used during the course of the research. For example, equipment, a questionnaire, a particular psychological test or tests, an interview schedule or other stimuli such as visual material. See note on page 2 about attaching copies of questionnaires and tests to this application. If you are using an interview schedule for qualitative research attach example questions that you plan to ask your participants to this application)

The researcher will require access to audio recording and transcribing equipment, and a password-protected computer. It is hoped that the researcher will be able to meet participants face-to-face, which will require available space at the University of East London. Travel costs of up to £5 per participant will be

reimbursed per phase of the study, and the researcher will self-fund a prize draw for one £25 voucher from www.notonthehighstreet.com (an ethical online retailer) per phase of the study, to express gratitude for participants giving up their time.

14. If you are using copyrighted/pre-validated questionnaires, tests or other stimuli that you have not written or made yourself, are these questionnaires and tests suitable for the age group of your participants?

YES

15. Outline the data collection procedure involved in your research:

(Describe what will be involved in data collection. For example, what will participants be asked to do, where, and for how long?)

I hope to recruit participants by advertising on social media forums, for example, Facebook, from where potentially interested participants will be redirected to the survey platform on Qualtrics, which will hold the information sheet (Appendix A). Potential participants who have any questions and or wish to express an interest in participating will be given an option to contact the researcher, and to indicate their consent for the researcher to make contact with them, and whether they prefer this to be by email or phone.

I will also recruit from gay-affirmative and neutral public 'gay venues' in Soho, known as the home of 'London's main gay and LGBT scene' (Time Out, 2017). Advertisements (see Appendix H) once permission has been gained from the establishment will be placed in public spaces including bars, coffee shops, and gyms. If further necessary, I will seek to recruit from sites within London-based third sector organisations (e.g. East London Out Project (ELOP), London Friend, and Stonewall). All prospective participants who indicate that they wish to participate in the research will be invited by email or phone (depending on their preferred mode of communication) to meet with the researcher face-to-face or Skype. Prior to initiating the interview, participants will be asked to read an informed consent form (Appendix B), and be given a further opportunity to ask the researcher questions, to ensure they understand the purpose and nature of the study prior to giving their consent in writing or by completion of a mandatory response item online. There will be a specific request for consent to store their personal (contact) details for the purpose of a random prize draw, which will take place no later than one week after completion of data collection for each phase.

In the first phase of the research, participants will partake in a semi-structured interview exploring their attitudes towards their sexuality. Of particular interest is how this may or may not be affected by living in a society in which sexual prejudice and/or discrimination can still be difficult to avoid. A draft of the interview schedule is attached (Appendix H).

At the end of the interview, all participants will be given an information sheet (Appendix C) and invitation to return for the second phase of the study, the focus group, which will seek to expand on themes present within the collection of first phase I data. Again, prior to initiating the interview, participants will be asked to read a separate informed consent form (Appendix D). The researcher will be available to provide a further opportunity to ask the researcher any questions, to ensure they understand the purpose and nature of the focus group prior to giving their written consent.

The one-to-one interview will take approximately 60 minutes. The interviews will be piloted prior to recruitment and the interview schedule revised following any feedback. It is predicted that the focus group will run for approximately 60-90 minutes.

Following both the interview and the focus groups, participants will be debriefed individually and as a group, respectively. Participants will be provided with a verbal and written description of the nature of the research, given time to raise questions or concerns, and provided with a list of accessible supporting agencies (to be confirmed). In the context of the focus group, the researcher will be available at the end should any participant wish to debrief separately. A debrief sheet (Appendices C and F) will express gratitude for their participation, and seek to reassure them about what will happen with their data. It will also advise them that winners of the prize draw will be selected and contacted within 1 week after completion of the final semi-structured interview and focus group, respectively.

## 3. Ethical considerations

Please describe how each of the ethical considerations below will be addressed:

16. Fully informing participants about the research (and parents/guardians if necessary): Would the participant information letter be written in a style appropriate for children and young people, if necessary?

An information sheet will be provided to all prospective participants for each phase of the research, fully informing them about the research (see Appendices A & D). There is no deception at any point within the study. Participants will be given the opportunity to ask the researcher questions before agreeing to take part in the research.

17. Obtaining fully informed consent from participants (and from parents/guardians if necessary): Would the consent form be written in a style appropriate for children and young people, if necessary? Do you need a consent form for both young people and their parents/guardians?

Informed consent will be obtained in writing or by completion of a mandatory response item online, prior to the commencement of both the semi-structured interview and focus group (see Appendices B & E). As above, there will be a specific request for consent to store their personal (contact) details for the purpose of a random prize draw, which will take place no later than one week after completion of data collection for each phase.

18. Engaging in deception, if relevant:

(What will participants be told about the nature of the research? The amount of any information withheld and the delay in disclosing the withheld information should be kept to an absolute minimum.)

N/A

## 19. Right of withdrawal:

(In this section, and in your participant invitation letter, make it clear to participants that 'withdrawal' will involve deciding not to participate in your research and the opportunity to have the data they have supplied destroyed on request. This can be up to a specified time, i.e. not after you have begun your analysis. Speak to your supervisor if necessary.)

Within the information sheet, it states: "You have the right to stop participation and have all data withdrawn from the study at any time, up until the point that your data is anonymised (at which point it will no longer be possible to link this back to you)." This is also repeated in the consent forms. Participants will also be reminded that that they can withdraw without providing a reason particularly if, for whatever reason, they appear to become distressed during the interview or focus group. 20. Anonymity & confidentiality: (Please answer the following questions)

# 20.1. Will the data be gathered anonymously?

(i.e. this is where you will not know the names and contact details of your participants? In qualitative research, data is usually not collected anonymously because you will know the names and contact details of your participants)

NO

21. If NO what steps will be taken to ensure confidentiality and protect the identity of participants?

(How will the names and contact details of participants be stored and who will have access? Will real names and identifying references be omitted from the reporting of data and transcripts etc? What will happen to the data after the study is over? Usually names and contact details will be destroyed after data collection but if there is a possibility of you developing your research (for publication, for example) you may not want to destroy all data at the end of the study. If not destroying your data at the end of the study, what will be kept, how, and for how long? Make this clear in this section and in your participant invitation letter also.)

Not all of the data will be collected anonymously, however, any personal details (essentially, participants' contact details) that are collected will be kept separately in a password protected excel document on a password protected computer on a secure network, which will only be accessible to the researcher. Any names and contact details will be destroyed after the prize draw, within 1 week of the end of data collection. This information will be stored separately to audio recordings and transcripts.

As audio recordings may also contain some identifiable information, these will be immediately transferred and deleted from the recording device, and saved separately to a password protected computer on a secure network.

The audio recordings will be transcribed by the researcher. Within transcripts, each participant will be given a pseudonym, and responses to the interview and focus group will be anonymised and any potentially identifying information will be omitted or altered. The anonymised transcripts will also be stored securely, on a password protected computer that only the research team will have access to.

Selected quotes from the analysis may appear in the thesis write-up or journal articles, but these will be anonymised as described above, thus participants will not be identifiable.

Please note that the consent forms and audio recordings will be destroyed after the doctoral thesis has been examined and passed (approximately August 2018). The anonymised transcripts and any remaining data will be destroyed within 3 years.

22. Protection of participants:

(Are there any potential hazards to participants or any risk of accident of injury to them? What is the nature of these hazards or risks? How will the safety and well-being of participants be ensured? What contact details of an appropriate support organisation or agency will be made available to participants in your debrief sheet, particularly if the research is of a sensitive nature or potentially distressing?)

N.B: If you have serious concerns about the safety of a participant, or others, during the course of your research see your supervisor before breaching <u>confidentiality</u>.

Although this research is not designed to cause discomfort or distress, it is possible that talking about issues related to sexuality, particularly if a participant has experienced prejudice and/or discrimination in relation to it, may be uncomfortable or distressing. Details related to instances of prejudice and discrimination will not specifically be asked about, however it is recognised that for some participants, descriptions of any such experiences may naturally arise in discussions related to their sexuality. Additionally, within the focus group, some participants may decide to share experiences of prejudice and discrimination, which may be upsetting to hear.

Care will be taken to conduct the interview and focus group in a sensitive manner and in line with informed consent it is and will be emphasised that the participant has the right to stop participation and have all data withdrawn at any time (up until the point that the data is anonymised). Participants will also be given the option to take a break and return to the face-to-face interview or focus group. Group rules will be agreed to before participants take part in the focus group to ensure that participants are able to share experiences in a safe space. The researcher will regulate the group.

Participants will be debriefed as described above, and provided with a debrief sheet (see Appendices C and F) that will include a list of supporting agencies should they wish to speak to someone following their participation in the research.

## 23. Protection of the researcher:

(Will you be knowingly exposed to any health and safety risks? If equipment is being used is there any risk of accident or injury to you? If interviewing participants in their homes will a third party be told of place and time and when you have left a participant's house? The researcher will not be exposed to any risks. All face-to-face interviews will take place at the University of East London. The researcher's supervisor will be informed of the time and location of each interview and notified once the interview is complete. Interviews will only be conducted between 9-5pm. If interviews are arranged outside of this time, the supervisor will be informed and arrangements made to ensure that the supervisor is on campus. The focus group will be conducted at the University of East London and the same procedures will be followed. Interviews via Skype pose no risk to the researcher.

## 24. Debriefing participants:

(Will participants be informed about the true nature of the research if they are not told beforehand? Will participants be given time at the end of the data collection task to ask you questions or raise concerns? Will they be re-assured about what will happen to their data? Please attach to this application your debrief sheet thanking participants for their participation, reminding them about what will happen to their data, and that includes the name and contact details of an appropriate support organisation for participants to contact should they experience any distress or concern as a result of participating in your research.)

Participants will be given time at the end of data collection and the focus group to ask any questions and raise concerns. At the end of each phase of the research, participants will be given a debrief sheet which includes details of local support agencies for MSM (Appendices C and F).

25. Will participants be paid? YES

If YES how much will participants be paid and in what form (e.g. cash or vouchers?)

Why is payment being made and why this amount?

The researcher will partially reimburse travel costs up to £5 per participant per phase of the research. As described above, participants will also be entered into a prize draw for a £25 voucher (self-funded by the researcher) to express gratitude for their participation within each phase of the research.

These amounts were calculated based on funds available to the researcher from the University of East London and self-funded budgets (£50).

The winner of the prize draw will be randomly selected using an online third party draw service. It does not require provision of any personal information to ensure the highest security. Each participant will be assigned an identifying number against their personal information contained on an excel document (which is securely and separately stored as described above). It will be these identifying numbers which will be entered into the Random Picker (on <u>www.randompicker.com</u>; an independent service which supports non-profit draws).

26. Other:

(Is there anything else the reviewer of this application needs to know to make a properly informed assessment?)

# 4. Other permissions and ethical clearances

27. Is permission required from an external institution/organisation (e.g. a school, charity, local authority)?

If your project involves children at a school(s) or participants who are accessed through a charity or another organisation, you must obtain, and attach, the written permission of that institution or charity or organisation. Should you wish to observe people at their place of work, you will need to seek the permission of their employer. If you wish to have colleagues at your place of employment as participants you must also obtain, and attach, permission from the employer.

If YES please give the name and address of the institution/organisation:

Please attach a copy of the permission. A copy of an email from the institution/organisation is acceptable.

In some cases you may be required to have formal ethical clearance from another institution or organisation.

28. Is ethical clearance required from any other ethics committee?

NO

If YES please give the name and address of the organisation:

Has such ethical clearance been obtained yet? YES / NO

If NO why not?

If YES, please attach a scanned copy of the ethical approval letter. A copy of an email from the organisation is acceptable.

PLEASE NOTE: Ethical approval from the School of Psychology can be gained before approval from another research ethics committee is obtained. However, recruitment and data collection are NOT to commence until your research has been approved by the School and other ethics committees as may be necessary.

29. Will your research involve working with children or vulnerable adults?\*

### YES

Potentially; this research aims to be as inclusive as possible to those who are able to give informed consent, thus, individuals will not be excluded simply on the basis of 'psychiatric illness' or e.g. those living in sheltered accommodation, should such individuals respond to recruitment efforts. If YES have you obtained and attached a DBS certificate? YES / NO

If your research involves young people under 16 years of age and young people of limited competence will parental/guardian consent be obtained.

YES / NO

If NO please give reasons. (<u>Note that parental consent is always required for</u> participants who are 16 years of age and younger)

\* You are required to have DBS clearance if your participant group involves (1) children and young people who are 16 years of age or under, and (2) 'vulnerable' people aged 16 and over with psychiatric illnesses, people who receive domestic care, elderly people (particularly those in nursing homes), people in palliative care, and people living in institutions and sheltered accommodation, for example. Vulnerable people are understood to be persons who are not necessarily able to freely consent to participating in your research, or who may find it difficult to withhold consent. If in doubt about the extent of the vulnerability of your intended participant group, speak to your supervisor. Methods that maximise the understanding and ability of vulnerable people to give consent should be used whenever possible. For more information about ethical research involving children see

www.uel.ac.uk/gradschool/ethics/involving-children/

30. Will you be collecting data overseas? NO

This includes collecting data/conducting fieldwork while you are away from the UK on holiday or visiting your home country.

\* If YES in what country or countries will you be collecting data?

Please note that ALL students wanting to collect data while overseas (even when going home or away on holiday) MUST have their travel approved by the Pro-Vice Chancellor International (not the School of Psychology) BEFORE travelling overseas.

http://www.uel.ac.uk/gradschool/ethics/fieldwork/

IN MANY CASES WHERE STUDENTS ARE WANTING TO COLLECT DATA OTHER THAN IN THE UK (EVEN IF LIVING ABROAD), USING ONLINE SURVEYS AND DOING INTERVIEWS VIA SKYPE, FOR EXAMPLE, WOULD COUNTER THE NEED TO HAVE PERMISSION TO TRAVEL

5. Signatures

TYPED NAMES ARE ACCEPTED AS SIGNATURES

Declaration by student:

I confirm that I have discussed the ethics and feasibility of this research proposal with my supervisor.

Student's name: Jenny Dreyer

Student's number: u1524906@uel.ac.uk Date: 4/7/17

Declaration by supervisor:

I confirm that, in my opinion, the proposed study constitutes a suitable test of the research question and is both feasible and ethical.

Supervisor's name: Trishna Patel

Date: 05/07/2017

# **APPENDIX J: UEL Ethics Approval Letter**

School of Psychology Research Ethics Committee

# NOTICE OF ETHICS REVIEW DECISION

For research involving human participants

BSc/MSc/MA/Professional Doctorates

**REVIEWER: Lewis Goodings** 

SUPERVISOR: Trishna Patel

**COURSE**: Professional Doctorate in Clinical Psychology

**STUDENT:** Jenny Dreyer

**TITLE OF PROPOSED STUDY**: Making sense of internalised antigay stigma: as described by men who have sex with men

**DECISION OPTIONS:** 

**APPROVED:** Ethics approval for the above named research study has been granted from the date of approval (see end of this notice) to the date it is submitted for assessment/examination.

APPROVED, BUT MINOR AMENDMENTS ARE REQUIRED <u>BEFORE</u> THE RESEARCH COMMENCES (see Minor Amendments box below): In this circumstance, re-submission of an ethics application is <u>not</u> required but the student must confirm with their supervisor that all minor amendments have been made <u>before</u> the research commences. Students are to do this by filling in the confirmation box below when all amendments have been attended to and emailing a copy of this decision notice to her/his supervisor for their records. The supervisor will then forward the student's confirmation to the School for its records.

# NOT APPROVED, MAJOR AMENDMENTS AND RE-SUBMISSION

**REQUIRED** (see Major Amendments box below): In this circumstance, a revised ethics application must be submitted and approved before any research takes place. The revised application will be reviewed by the same reviewer. If in doubt, students should ask their supervisor for support in revising their ethics application.

# DECISION ON THE ABOVE-NAMED PROPOSED RESEARCH STUDY

(Please indicate the decision according to one of the 3 options above)

APPROVED – MINOR AMENDMENTS

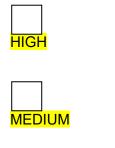
## Minor amendments required (for reviewer):

Need to clarify the interview schedule. Questions could be developed to orientate to an internalised anti-gay stigma – but that do not ask it directly. This might be more profitable in terms of data. Please confirm interview questions with supervisor before commencing this research.

Major amendments required (for reviewer):

#### ASSESSMENT OF RISK TO RESEARCHER (for reviewer)

If the proposed research could expose the <u>researcher</u> to any of kind of emotional, physical or health and safety hazard? Please rate the degree of risk:





Reviewer comments in relation to researcher risk (if any):

**Reviewer** (*Typed name to act as signature*): Lewis Goodings

Date: 12/7/17

This reviewer has assessed the ethics application for the named research study on behalf of the School of Psychology Research Ethics Committee Confirmation of making the above minor amendments (for students):

I have noted and made all the required minor amendments, as stated above, before starting my research and collecting data.

Student's name Jenny Dreyer

Student number: u1524906

Date: 12/7/17

(Please submit a copy of this decision letter to your supervisor with this box completed, if minor amendments to your ethics application are required)

#### PLEASE NOTE:

\*For the researcher and participants involved in the above named study to be covered by UEL's insurance and indemnity policy, prior ethics approval from the School of Psychology (acting on behalf of the UEL Research Ethics Committee), and confirmation from students where minor amendments were required, must be obtained before any research takes place.

\*For the researcher and participants involved in the above named study to be covered by UEL's insurance and indemnity policy, travel approval from UEL (not the School of Psychology) must be gained if a researcher intends to travel overseas to collect data, even if this involves the researcher travelling to his/her home country to conduct the research. Application details can be found here: <a href="http://www.uel.ac.uk/gradschool/ethics/fieldwork/">http://www.uel.ac.uk/gradschool/ethics/fieldwork/</a>

## **APPENDIX K: UEL Ethics Amendment Approval and Application**

## UNIVERSITY OF EAST LONDON

School of Psychology

# REQUEST FOR AMENDMENT TO AN ETHICS APPLICATION

# FOR BSc, MSc/MA & TAUGHT PROFESSIONAL DOCTORATE STUDENTS

Please complete this form if you are requesting approval for proposed amendment(s) to an ethics application that has been approved by the School of Psychology.

Note that approval must be given for significant change to research procedure that impacts on ethical protocol. If you are not sure about whether your proposed amendment warrants approval consult your supervisor or contact Dr Mary Spiller (Chair of the School Research Ethics Committee).

#### HOW TO COMPLETE & SUBMIT THE REQUEST

Complete the request form electronically and accurately.

Type your name in the 'student's signature' section (page 2).

When submitting this request form, ensure that all necessary documents are attached (see below).

Using your UEL email address, email the completed request form along with associated documents to: Dr Mary Spiller at <u>m.j.spiller@uel.ac.uk</u>

Your request form will be returned to you via your UEL email address with reviewer's response box completed. This will normally be within five days. Keep a copy of the approval to submit with your project/dissertation/thesis.

Recruitment and data collection are not to commence until your proposed amendment has been approved.

#### REQUIRED DOCUMENTS

A copy of your previously approved ethics application with proposed amendments(s) <u>added as tracked changes</u>.

Copies of updated documents that may relate to your proposed amendment(s). For example an updated recruitment notice, updated participant information letter, updated consent form etc.

A copy of the approval of your initial ethics application.

Name of applicant: Jenny Dreyer

Programme of study: Professional Doctorate in Clinical Psychology

Title of research: Making sense of internalised antigay stigma: as described by men who have sex with men

Name of supervisor: Dr Trishna Patel

Briefly outline the nature of your proposed amendment(s) and associated rationale(s) in the boxes below

Proposed amendment	Rationale
-Where an individual is recruited via	Only being able to interview those
purposeful and/or snowball sampling,	participants who are known in some
and is known to the researcher (either	capacity to the researcher at UEL seems
personally or via a trusted third party),	to be an unnecessary barrier to
the researcher may arrange face-to-	participation.
face interviews in a private,	
confidential space either at her and/or	
the participants' home or workplace.	
-The researcher's supervisor will be	
informed of the time and location of	
each interview and notified both once	
the interview begins and is complete.	
-It is estimated that the total interview	
process (including gaining informed	
consent and debrief) will take	
approximately two hours. Thus, in	
the first instance, the researcher's	
supervisor will make contact with the	
researcher if she has not had contact	
from her within two hours of being	
notified that the interview has	
commenced. If it is discovered that	
the interview takes more or less than	
two hours, the researcher and her	

supervisor will adapt the above plan	
accordingly for future interviews.	
-All face-to-face interviews with	
unfamiliar individuals will only be	
conducted at the University of East	
London between 9-5 pm.	
-Again, the researcher's supervisor	
will be made aware of all	
arrangements, be notified at the	
beginning and end of each interview,	
and make contact with the researcher	
if she has not heard from her within 2	
hours from when the interview	
commences.	
-Where interviews are arranged	
outside of 9-5, arrangements will be	
made to ensure that the supervisor	
and/or another member of the	
DClinPsych team is on site.	

Please tick	YES	NO	
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Is your supervisor aware of your proposed amendment(s)	4	
and agree to them?		

Student's signature	(please type your name):	Jenny Dreyer
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Date: 11/10/17

TO BE COMPLETED BY REVIEWER				
Amendment(s) approved	YES			
Comments	<u>.</u>			

Date: 12/10/17

# Appendix L: List of Initial Codes

	A (
1	Acceptance
2	Access to resources
3	Acknowledgement
4	Advancing rights
5	Age
6	Alone
7	Alternative explanations
8	Typical [non-sexuality specific] traumas
9	Angry
10	Disadvantages of being gay
11	Resources as a buffer to prejudice
12	Assumptions of gay as ridiculous
13	Avoiding conflict
	Awareness of self as gay or perception of
14	'obviousness'
15	Becoming aware of IH
16	Being judged
17	Being outed
18	Being silenced
19	Being straight would make life easier
20	Bisexuality
21	Black gay men
22	Blame
23	Blurred Lines
24	Camp ("effeminate flamboyant outrageous")
25	Career
26	Childhood
27	Clones
28	Comfortable
29	'Coming out' as a teenager
30	'Coming out' as an adult
	Coming to terms with [same-sex attraction/gay
31	identity]
32	Compartmentalisation
33	Completely open
34	Completely open, with few exceptions
35	Completely open, except threat danger
36	Concealment as a mechanism
37	Concerns in relation to idea of IH
38	Conditional Pride
39	Conflict
40	Connecting with gay people and friends
41	Creating comfortable situations

42	Dealing with it (or roll over)
43	Depending on the environment
44	Developing yourself
45	Did you think I was going to love you any less
46	Different
47	Direct link between concealment and homophobia
48	Direct link context to IH
49	Direct link disclosure anxiety to IH
50	Direct link microaggression to IH
51	Direct link own silence to cultural silence
	Direct links between positive context and
52	acceptance
53	Disappointing Reactions [to "coming out"]
54	Disclosure as a bombshell
55	Distress
56	Double Prejudice
57	Dressing up
58	Drip-feeding
59	Early acceptance
	Early confrontations with available gay identities
60	and culture
61	Educating yourself
62	Education
63	Effeminacy
64	Entering a relationship
65	Environments that feel unsafe
	Environments where actually I feel difficult being a
66	
67	Environments where it's easier
68	"Everybody should be able to do what want"
69	Expectations of marriage and family
70	Expectations/fear of negative reactions
71	Expectations/fear of violent reactions
72	Explicit IH
73	Expressing sexuality
74	Family
75	Family concealment
76	Fear
77	Fear of negative reactions
78	Fitting in
79	Gay and Angry
80	Gay as obvious to others
81	Gay as ok for others
82	Gay as unremarkable
83	Gay men vs women
84	Gay Pride (event)
04	Cay i nue (evenil)

85	Growing a thick skin
	Growing a thick skin
86	Hate crime
87	Have heard about IH
88	Having an external dialogue
89	Having to make a new normal all the time
90	"He gave a mass of apologies"
91	"He's piping up"
92	Heteronormativity
93	Hiding
94	Highly visible
95	HIV
96	Homophobia Radar
97	"I am a survivor"
98	"I can't be bothered"
99	"I didn't believe [those homophobic ideas]"
100	"I didn't speak to a soul about it"
101	"I just want to enjoy myself and have a nice time"
102	"I need to find people like me"
103	"I need to tell people": "coming out"
104	"I probably read something [on IH]"
105	"I really don't care [about being gay] any longer"
106	"I was aware of my sexuality"
107	"I wasn't exposed to homophobia"
108	"If it was an intimidating thing"
	[I haven't heard of] Internalised anti-gay prejudice or
109	ÂGS
110	IH as an innate homophobia
111	IH as protective
112	IH related to same-sex desire
113	"I'm not an obvious gay man"
114	Impact of IH
115	Importance of access to resources
116	Importance of others
117	Imprisonment
118	In the Family
119	Increased self-understanding
120	Increasing confidence
121	Independence
122	Information control
123	Interactions with straight men
	[I haven't heard of" internalised anti-gay prejudice or
124	AGS
	"It enforced the fact that being heterosexual and
	being normal was by far the easier and better path
125	to go you know"
126	"It just wasn't a conversation I had"

107	"It's bottor not to appear obviously gay"
127	"It's better not to appear obviously gay"
128	"I've always known"
129	just the way things were
130	Lack of visible sexual diversity
131	Legal ramifications
	Less Shame
	Life would be uncomfortable
	Limited displays of affection
135	
136	•
137	Looking after self
138	Looking for acceptance
139	Loving parents (aren't always enough)
140	Media and Television
141	Mental compartmentalisation
142	
143	Micro-aggression
144	Micro-aggressive Consequences
145	Minimising
146	Misogyny
147	Moving
148	"No idea [why I care]"
149	No one to ask
150	Normalising
151	Not at forefront of my mind
152	Not correcting or challenging
153	"Not going to change anything between us"
154	Not unhappy
155	Not wanting to acknowledge it to be true
156	"Off-the-cuff remarks"
157	Open, except back home
158	Other descriptions of IH
159	Other oppressed groups
160	Othering
161	Otherness
162	Others' need to know (and assumed privilege)
163	Our own prejudices about how people will respond
164	"Out" to rebel
165	Own homophobia
166	"Paedophiles"
167	Passing
168	Passive aggressive disengagement
169	Past homophobia
170	"People see what they want to see"
171	Perceptions of younger LGBT

172       Personal qualities enabling resilience         173       Physical violence         174       Political action         Positive about same-sex desire and sex but not gay         175       identity         176       Positive aspects of gay sexuality         177       Positive environmental factors-'liberal' people         178       Positive environmental factors-work         179       Positive reactions [to "coming out"]         180       Pride         181       Private public filter at work         182       "Promiscuous"         183       Protecting self         184       Providing support         185       Psychological consequences of violence         186       Pulling back from gay identity         187       Recognisable IH         188       Reconceptualising the world         189       Rejecting the idea of having had IH         190       Relativity of time         191       Religion         192       Resisting pathologizing gay         193       School         194       Secretive but sexually active         195       Seeking and providing support         196       Seeking the gay scene <tr< th=""><th>470</th><th>Densen el muslitica en el lis a nacilica es</th></tr<>	470	Densen el muslitica en el lis a nacilica es
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205       Small rural town         206       Socially unacceptable but not a stigma	203	Shaming of gay men
206 Socially unacceptable but not a stigma	204	Silence
	205	Small rural town
	206	Socially unacceptable but not a stigma
207 Societal change	207	
208 Society	208	Society
209 Stereotypes as triggers for IH	209	Stereotypes as triggers for IH
210 Stickability	210	
211 Stigmas	211	Stigmas
212 Susceptibility	212	Susceptibility
213 Taboo	213	Taboo
214 Taking risks, taking drugs, drinking heavily	214	Taking risks, taking drugs, drinking heavily
215 "Tell me something I didn't already know"	215	

216Teiming failing217"That didn't represent me"218"The environment around me"219The Magic Pill220"There are still people who cannot live their life"221"There are still people who cannot live their life"222"There was a culture of homophobia"222"There was a culture of homophobia"222"There was a culture of homophobia"223Threat of being found out (historic)224Toning it down at work225Toxic Masculinity226Traumatised227Turning on the camp228Type of relationship229Uncomfortable230Unconscious231Unhappy232Unspoken communications233Urban vs small town234Verbal abuse235Vicarious Violent Traumas236Vulnerability237Wanting to conceive238"We need to be visible"239"We need to change mindsets"240"What will the neighbours say?"241Won't be silenced242Work forms243Worrying244Wrong245"You can be acceptable if"246"You know people will assimilate"247"You shouldn't have to hide this"	216	Tolling family
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<ul> <li>235 Vicarious Violent Traumas</li> <li>236 Vulnerability</li> <li>237 Wanting to conceive</li> <li>238 "We need to be visible"</li> <li>239 "We need to change mindsets"</li> <li>240 "What will the neighbours say?"</li> <li>241 Won't be silenced</li> <li>242 Work forms</li> <li>243 Worrying</li> <li>244 Wrong</li> <li>245 "You can be acceptable if"</li> <li>246 "You know people will assimilate"</li> </ul>	233	Urban vs small town
236Vulnerability237Wanting to conceive238"We need to be visible"239"We need to change mindsets"240"What will the neighbours say?"241Won't be silenced242Work forms243Worrying244Wrong245"You can be acceptable if"246"You know people will assimilate"	234	Verbal abuse
<ul> <li>237 Wanting to conceive</li> <li>238 "We need to be visible"</li> <li>239 "We need to change mindsets"</li> <li>240 "What will the neighbours say?"</li> <li>241 Won't be silenced</li> <li>242 Work forms</li> <li>243 Worrying</li> <li>244 Wrong</li> <li>245 "You can be acceptable if"</li> <li>246 "You know people will assimilate"</li> </ul>	235	Vicarious Violent Traumas
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<ul> <li>239 "We need to change mindsets"</li> <li>240 "What will the neighbours say?"</li> <li>241 Won't be silenced</li> <li>242 Work forms</li> <li>243 Worrying</li> <li>244 Wrong</li> <li>245 "You can be acceptable if"</li> <li>246 "You know people will assimilate"</li> </ul>	237	Wanting to conceive
<ul> <li>240 "What will the neighbours say?"</li> <li>241 Won't be silenced</li> <li>242 Work forms</li> <li>243 Worrying</li> <li>244 Wrong</li> <li>245 "You can be acceptable if"</li> <li>246 "You know people will assimilate"</li> </ul>	238	"We need to be visible"
241Won't be silenced242Work forms243Worrying244Wrong245"You can be acceptable if"246"You know people will assimilate"	239	"We need to change mindsets"
242Work forms243Worrying244Wrong245"You can be acceptable if"246"You know people will assimilate"	240	
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244Wrong245"You can be acceptable if"246"You know people will assimilate"	242	Work forms
245"You can be acceptable if"246"You know people will assimilate"	243	Worrying
245"You can be acceptable if"246"You know people will assimilate"	244	Wrong
246 "You know people will assimilate"		
		"You shouldn't have to hide this"
248 "You were allowed to be a bit more expressive"		
249 "You were the only gay in the village"		

# Appendix M: Intermediate Codes

1	Affirmations and resistance towards prejudice
2	Acts of Anti-gay Prejudice
3	Affirmations and resistance towards prejudice
4	Anti-gay oppression is real
5	Challenging homophobia
6	'Coming Out' as (an ongoing) process
7	Compulsory Heterosexuality
8	Concealment
9	Curious contradictions
	Direct links between external context and internalised
10	homophobia
11	Disclosure Decisions day to day
12	Early evaluations of being different/gay
13	Early experiences of sexual identity
14	Era
15	Explicit descriptions of IH
16	Factors associated with positive change
17	Gay community and culture
18	I had no reference points
19	[I tell] I don't walk into a room and go I'm gay
20	Identity vs Desire
21	[if asked] I would say i was gay
22	IH as always there but dormant
23	IH as personally relevant
24	IH as something in others
25	IH-consistent descriptions [implied]
26	I've got to do something
27	Less overt homophobia
28	More Traditional Understandings of IH
	Origins of lack of and/or negative understandings of
29	gay sexual identity
30	Positive changes in relation to sexuality
31	Prejudiced Narratives
32	Reasons behind visibility decisions
33	Recommended changes
34	Re-contextualising IH
	Resistant to IH but acknowledges experiences
35	consistent with IH
36	Resisting conscious IH
37	Resisting the idea of having IH
38	Self-censorship or not being too gay
39	
40	Societal Change
41	Spiteful homophobic or daft

42	Stereotypes
43	Strategies and coping mechanisms
44	The impact of the social environment
45	The processes of IH
46	Way of thinking/ perceiving
47	When did I identify or know [that I was gay?]

## Appendix N: Coded transcript

