

GRAND ROUNDS

HIV Center for Clinical and Behavioral Studies

New York State Psychiatric Institute and Columbia University

“Beyond the Down Low: New Findings on Negotiating Sexual Risk and Disclosure Among Black Men who have Sex with Men and Women”

Brian Dodge, Ph.D.

June 1, 2006

—

Brian Dodge, Assistant Professor, College of Public Health and Health Professions, University of Florida, presented results from a pilot study of attitudes, relationships, and risk behavior of black men who have sex with both men and women. In most HIV prevention research, bisexual men are combined with men who are exclusively gay. But men who have sex with men and women (MSMW) are a distinct and diverse group within public health research. Recent books on “down low” sexual behavior have raised consciousness for men and women but sensationalize black male sexuality.

The study recruited 55 men, aged 18-30, who are African-American, African, or of other black descent. Participants had sex with at least one male and one female in the past year, had inconsistent condom use, did not engage in bisexuality solely for money or drugs, did not use intravenous drugs, and had never tested HIV positive. They were recruited from gathering spots and by word of mouth. One and a half hour semi-structured interviews were conducted with 30 men from New York City (11 from Brooklyn), with a mean age of 23, 63% employed, median income of \$15,000, and an average of 5 female (range 1-20) and 10 male (range 1-60) partners within the past year. The men disclosed their bisexuality to an average of two women (range 0-15) and 6 men (range 0-36).

Eleven men (37%) had put themselves at risk for HIV through sex with partners whose HIV status was positive or unknown. Nine (30%) reported previous sexually transmitted infections (STIs) or unintended pregnancies (all terminated). Many perceived that bisexuality itself put them at greater risk because of multiple partners, especially male partners, who were considered more risky. While some expressed awareness that protection decreased risk, 57% used HIV tests as a form of protection, in some cases requiring written test results as proof of seronegativity. However, participants still agreed to sex without a negative test result.

More than half of men in the sample said they tried to consistently use condoms with women, mostly for pregnancy prevention, although they also said they would use them even if the woman was taking the pill. Nearly half used condoms consistently with men, because they felt sex with men was riskier. When not using condoms, one third said they avoided penetration or

withdrew before ejaculation with both men and women. Some also reported minimizing the number of partners and not using condoms with steady partners.

More than half said they did not use condoms sometimes or all the time because sex was better without them, and some said that not using them with women was more acceptable. Half said they did not use a condom because they did not have one available at the time, mostly for spur of the moment sex. Most participants said it was equally difficult to use condoms with men and women.

More research is needed into why MSWM perceive women to be safer, “more trustworthy,” “more natural,” and “more vulnerable,” and why they feel safer with women. Some men consistently do not use condoms with women because they think HIV is a gay male disease.

Regarding disclosure of bisexuality, 73% felt it was easier to tell men than women, and even more thought it was easier to disclose to other bisexual men. Disclosing to bisexual women was easier than to straight women. Women were considered “high maintenance,” “emotionally unstable,” or intolerant or “shocked” by bisexuality. Some men thought they were protecting women by not disclosing their bisexuality. In some cases, men felt they would be unsafe if their bisexuality were known. Men also had difficulty disclosing to gay or feminine male partners, citing some of the same reasons as for women. Disclosure was more likely within a long term or serious relationship.

While men are aware of the risks of being a bisexual black man in New York City, many have themselves internalized the stereotypes about gay men. They do not identify as gay and do not want to be categorized. They “stay low” and guard their privacy, not out of trickery or deceit but because they feel their sex lives are their own business, fear the stigma of being outed as bisexual, and resent that HIV in black women is being blamed on bisexual men. Greater public awareness and negative attention to “down low” behavior has led some men to become more secretive.

There is a wide variety of factors that influence protection practices (i.e., sex with women is thought to have less HIV risk, but condoms are used for pregnancy prevention). Disclosure is difficult and complex. There is a need for greater understanding and acceptance of male bisexuality and of the realistic current fears of MSWM concerning disclosure.

Discussion:

Although HIV-positive men were excluded from the study, it would have been useful to include them to see if there were any differences in views and behavior. However, many of the men who did participate had not been screened for HIV for some time.

The characterization of women as “vulnerable” probably refers to their emotional vulnerability and the perception of a lower HIV risk from sex with women. Men also may feel safer because they are less likely to be hurt by women.

It is easier for men to boast to other men about sex with women because that enhances male prestige. For men who do not identify as gay, it does not enhance their image to admit to sex with men. Definitions of masculinity appear to be more important in this context than sexual

identity. This idea is further supported by the fact that bisexual men do not gather where effeminate men go. They even equate the label gay with effeminate.

Misogyny may also play a role in the characterization of women as “emotionally unstable.” Anyone, male or female, would be emotionally destabilized by the news that a partner thought to be monogamous is not, whether the partner has been with a male or female. Non-monogamy, per se, is threatening. It is also difficult to envision a structural intervention to improve acceptance of bisexuality in the current context of political and social emphasis on monogamy and long term committed relationships.

Although the study did not look at social networks for bisexual men, it appears that they are not well developed. They would be an important factor in designing interventions, but many men on the “down low” seem to be very socially isolated and difficult to reach. The pilot study showed, however, that it is possible to find and engage them.

There is a need for more information on how the gender of a partner influences risk behavior and other gender issues. More attention should be devoted to establishing positive attitudes about bisexuality. Rather than being a shameful secret, it can be seen as having it all.

RELATED PUBLICATIONS:

Munoz-Laboy, M. A., & Dodge, B. “Bisexual practices: Patterns, meanings, and implications for HIV/STI prevention among bisexually-active Latino men and their partners” 2005, *Journal of Bisexuality*, 5(1), 81-100.

Dodge, B., & Sandfort, T. G. M. “A review of research on mental health among bisexual individuals when compared to homosexual and heterosexual individuals,” in B. A. Firestein (Ed.) *Becoming visible: Counseling bisexuals across the lifespan*, (In press) Columbia University Press.

Munoz-Laboy, M. A., & Dodge, B. “Which bisexual Latino men are at highest HIV/STI risk? An exploratory analysis,” (In press) *American Journal of Public Health*.

NOTE: This HIV Rounds summary is a report based on notes from an oral presentation. It is not a source document for citation. Please contact the presenter(s) and peer reviewed materials for verification of data and further information.

KEYWORDS: MSM, bisexual, down low, African American, risk behavior, sexual practice, prevention, women, condoms, sexual identity, masculinity, network, gender, stigma.

SHORT TITLE: Beyond the Down Low: Negotiating risk, disclosure