Black Same-Gender-Loving Male Couples' Health within an Afrocentric Psychological Paradigm: The Influences of Spirituality and Religion

Jonathan Mathias Lassiter

The most intimate interpersonal relationships that many people experience are their romantic partnerships. Several psychological and public health studies have found that the quality of one's romantic relationships may have positive and negative influences on the individual holistic health of each partner and the couple as a unit (Braithwaite & Holt-Lunstad, 2017). However, general couples research has not included Black same-gender-loving male couples (BSGLMCs) in large enough numbers so that the studies' findings are relevant for them (Lebow & Diamond, 2019). Very little research has queried Black same-gender-loving (SGL) men's lives in the contexts of their relationships (Lassiter et al., 2021). Additionally, studies have seldom focused on culturally-relevant factors, such as spirituality and religion, in BSGLMCs' lives and how those factors influence their romantic relationships (Fincham & Beach, 2014). There is also a lack of cultural specificity in the examination of BSGLMCs (Lassiter et al., 2021). Often these relationships are assessed based on white Eurocentric (and often heterosexist) relationship norms. These oversights represent major gaps in our understanding of BSGLMCs.

I have attempted to fill these gaps by presenting an analysis of the intersections of BSGLMCs' romantic relationship health, spirituality, and religion within an Afrocentric (Black) psychological paradigm. This is accomplished with three distinct tasks. First, the scholarly literature related to the Afrocentric psychological paradigm (including the Ubuntu principle), spirituality, religion, and BSGLMCs' romantic relationships was reviewed. Second, based on the review, a conceptual framework describing the potential mechanisms through which both positive and negative experiences of spirituality and religion may influence BSGLMCs' relationship health was developed. Third, a discussion of how this conceptual framework might guide future research and clinical work with BSGLMCs was explicated.

3.1   Review of the Afrocentric Psychological Paradigm, Spirituality, Religion, and BSGLMCs

3.1.1   The Afrocentric Psychological Paradigm

Afrocentric psychologists have proposed that a holistic understanding of the health of African descended people (ADP; i.e., people who are recent descendants of people who originated on the African continent, are considered Black, and treated as Black in society) can be achieved only by acknowledging the culturally specific values of African life described in precolonial African philosophy and psychology (Azibo, 1996). Afrocentric psychology asserts that the nature of reality is spiritual and sacred (Akbar, 2003), meaning that reality is influenced by a pervasive extrasensory energetic force that has been called by many names including God, the Sacred, Infinite consciousness, etc. (Myers, 1993). Thus, this force is the environment in which life happens, an energy that one embodies, and a resource that one may utilize in all aspects of life. People are considered spirit-beings whose purpose is to unfold as a sacred entity by aligning with the spiritual world in one's before-life, present (earth) life, and eventually in one's after-life when they rejoin the non-physical spiritual world after one's physical death (Akbar, 2003).

Health for ADP is dependent on how well one aligns with the spiritual. Myers (1993) and other scholars (Montgomery et al., 1990) have proposed that one achieves optimal health when they embrace a consciousness or worldview in which the spiritual and material worlds are intertwined and seek to gain oneness with the Sacred. A person that has a strong sense of themselves as aligned with the Sacred and lives their life in such a manner has a healthy spiritual consciousness. Myers (1993) has described this healthy spiritual consciousness as an optimal worldview that helps one develop a sense of themselves as the physical manifestation of the Sacred, having intrinsic self-worth and infinite potential, making decisions in life from a both/and logical perspective, valuing equitable human relationships above all else, and maintaining a carefree, resilient orientation to life. If one does not have a well-developed spiritual consciousness, they are deemed to have a suboptimal worldview. A suboptimal worldview contributes to one being individualistic, competitive, and materialistic. In sum, ADP's health is determined by the strength of their spiritual consciousness. If ADP have weakened spiritual consciousness, then their health is compromised.

3.1.1.1   *Ubuntu*

The spiritual can be embodied and expressed through relationships. From an Afrocentric psychological perspective, positive interpersonal relationships are of the highest value and one of the primary methods of societal interdependence (Myers, 1993). Many southern African societies have posited that humanity and health develop through the embodiment of *Ubuntu*. The Ubuntu principle was first articulated by Bantu and southern African people in their language of Xhosa with the saying *umuntu ngumuntu ngabantu*, which translates to "a person is a person because of other people" (Mangena, n.d., para. 1). From this perspective, one comes to know themselves only through their relationships with others and there is a reciprocal nature to relationships. Thus, relationships are fundamental to identity development as well as personal and collective health.

Ubuntu recognizes that healthy human functioning is dependent on people developing and prioritizing consciousness, connection, and competency in their interpersonal relationships. Consciousness refers to one's level of spiritual consciousness (i.e., spiritual alignment). Connection refers to one's relationships with their spiritual nature, the spiritual nature of others, and the expression of the Sacred in their actions with others. Competency is one's ability to develop, choose, and effectively implement social, cognitive, behavioral, and affective skills to create and maintain equitable relationships and health. Taken together, these three Cs can help people achieve identity, connection to ancestral and cultural roots, and emotional stability of belonging through healthy interpersonal relationships (Wilson & Williams, 2013).

Consciousness. Consciousness is a state of awareness. Within the Afrocentric psychological paradigm, one's level of spiritual consciousness —or awareness and alignment with the spiritual—is most important and has implications for their holistic health. Holistic health is conceptualized to encompass both non-Western (e.g., interconnectedness, cultural knowledge) and Western (e.g., happiness, absence of disease) components of that combine in distinct ways to induce optimal functioning, quality of life, and well-being (Saylor, 2004). Spiritual consciousness may fluctuate along a continuum with optimal worldview (i.e., strong spiritual consciousness) at one end and suboptimal worldview (i.e., weak spiritual consciousness) at the other (Obasi et al., 2009), thus having differential influences on holistic health. An optimal worldview has been found to be associated with positive health outcomes. For example, the relationship between stress and depressive symptoms was weaker for Black Americans who endorsed higher levels of optimal worldview compared to those who endorsed

having higher levels of a suboptimal worldview (Neblett et al., 2010). Additionally, optimal worldview was also found to be negatively associated with avoidant coping (e.g., denying one's stressors and their affective consequences) and depressive symptoms (Neblett et al., 2010). These findings indicate that having a well-developed spiritual consciousness may not only prevent poor health but also protect ADP from the negative effects of stress. Black SGL men's health is dependent on their ability to develop a spiritual consciousness and allow that consciousness to inform their actions, emotions, and thoughts. Given the fluid nature of spiritual consciousness, Black SGL men's health may change depending on their fluctuating levels of spiritual consciousness. Thus, maintaining health would depend on retaining an optimal worldview.

Connection. Healthy connection requires that one recognizes and honors the Sacred within themselves and others. It may be manifested in many ways. This chapter explores two Afrocentric articulations of healthy connection: interconnectivity/self-extension and the principle of *Ma'at*.

Interconnectivity/self-extension. From an Ubuntu perspective, people are direct extensions of the Sacred and are simultaneously connected to the living, the yet-to-be-born, ancestors, community of spirits, and the divine Sacred (Azibo, 1996). Given this paradigm, the self is an "unbroken circle . . . encompassing an infinite past, an infinite future" (Azibo, 1996, p. 52) and all ADP. The self is a "collective phenomenon while respecting the uniqueness of the individual self as a component of the collectivity" (Akbar, 2003, p. 68). Thus, one's individual personality and goals are similarly as important as the characteristics of one's collective history and cultural roots. The health of the individual is tied to the health of one's community and the community's health relies on the individual being holistically healthy. This position within one's spiritual and cultural community provides a foundation for one to cultivate an identity as an integrated spiritual, cultural being with infinite potential for power and empowerment. Power and empowerment comes from being connected to the Sacred, embodying one's deep cultural roots of precolonial African values, and the ability to transcend the physical limitations of the present circumstances by projecting one's self forward into a psychological or spiritual moment of transcendence, which could then provide a vision for self/collective-enhancing action. Such a powerful and empowered, integrated identity can sustain the self and the collective (e.g., romantic relationship).

Principle of Ma'at. The principle of Ma'at is derived from the mythology related to the Kemetic goddess of the same name. Ma'at is the

daughter of the sun god Ra and her name means "that which is straight" (Mark, 2016, para. 2). She is believed to be the personification of order, justice, and harmony. The principle of Ma'at is considered by many Afrocentric psychologists to be "a code of conduct and a standard of aspiration" that can be applied as a model of human transformation (Parham et al., 2016, p. 143). This model of human transformation, which is tied to the spiritual, requires that one live by seven virtues: truth, justice, harmony, righteousness/propriety, order, balance, and reciprocity (Mark, 2016; Parham et al., 2016). These virtues are thought to underlie the Sacred that interconnects all living things. Thus, as one lives according to the principle of Ma'at, one will live in a way consciously connected to the Sacred.

Several scholars have defined the virtues of Ma'at (Parham et al., 2016; Pinch, 2002). Truth is honesty in words, actions, and personality. Justice is interacting with others in a way that promotes fairness and equity. Harmony is alignment with the totality of the Sacred in one's self and in others so that interactions are authentic, mutually beneficial, and well functioning. Righteousness/propriety refers to living life in a way that is free from causing harm to self and others. Order requires that one arrange their life in a way that is free from emotional, physical, spiritual clutter that may impede one from fulfilling their divine purpose. Balance is a state of existence where one's internal and external processes are aligned with the Sacred and others so that new possibilities and ways of being can be generated (Lee, n.d.). Reciprocity entails giving as much as one receives in all ways. Black SGL men's ability to cultivate and express these virtues has health implications for themselves and their romantic relationships.

Competency. Competency may be interpreted as one's ability to develop, choose, and use social, cognitive, behavioral, and affective skills to effectively form and maintain healthy relationships and outcomes. Such skills can help Black SGL men make meaning of their lives, define reality, make decisions, and cope in ways that are spiritually aligned. When competency is high, one can develop and maintain a holistic identity (e.g., integrated spiritual, racial, sexual, gender identities) and Afrocentric cultural practices (e.g., prioritizing the Sacred in all of one's thoughts and actions; Wilson & Williams, 2013). Black SGL men have demonstrated competency in several ways in their lives and relationships.

Culturally-relevant social, cognitive, behavioral, and affective skills that help Black SGL men achieve competency via holistic identity development and Afrocentric cultural practices have been studied more in recent

decades (Graham et al., 2009; Lassiter et al., 2020; Lassiter & Mims, 2022; Pitt, 2010a, 2010b; Walker et al., 2015). Scholars have found that Black SGL men demonstrate competency in their development of strong racial identities, which are associated with a range of positive health outcomes at the individual level such as higher levels of self-efficacy and emotional awareness (English et al., 2020). Furthermore, Black SGL men with higher levels of racial and sexual identity integration have reported lower levels of psychological distress compared to those with lower levels of integration (Crawford et al., 2002). Other scholars have found that cultivating integrated sexual and spiritual identities contributed to lower levels of identity fragmentation (e.g., tension between one's racial/cultural, religious/spiritual, and sexual identities) and cognitive dissonance (Lassiter, 2015; Pitt, 2010b). Recently, Lassiter and Mims (2022) examined psychological and behavioral mechanisms associated with Black SGL men's health within an Afrocentric framework. Black SGL men in their study reported that having higher levels of spiritual consciousness contributed to them being able to (a) cultivate more emotional awareness, (b) embrace their emotions without judgment, (c) regulate their emotions, (d) develop sacred motivations for health behavior, and (d) engage in health-promoting behaviors. This research suggests that several Afrocentric forms of consciousness, connection, and competency are evident in Black SGL men's lives.

3.1.2   Spirituality in the Lives of Black SGL Men

Given the spiritual nature of ADP's lives, it is not surprising that spirituality and religion are two significant cultural factors in Black SGL men's lives. References in this chapter to spirituality and religion are meant to describe one's experiences of the Sacred through a personal relationship (i.e., spirituality) and collective, institutional modalities (i.e., religion). These experiences have been found to contribute to both positive and negative outcomes for Black SGL men's individual and couple health (Lassiter, 2014).

Black SGL men have reported significantly higher levels of spiritual identification, beliefs, and practices compared to their sexual minority counterparts of other races and ethnicities (Lassiter, Saleh, Starks, et al., 2017). In addition, some Black SGL men have defined spirituality in both universal and culturally-specific ways that emphasize their African and Black American heritages. For example, Lassiter and his colleagues (2020) found that Black SGL men defined spirituality as "(a) relationship with something greater than themselves, (b) part of the themselves, (c) a

guiding force in their lives, and (d) multidimensional in nature. The culturally-specific aspects of their spirituality were identified as being (a) an energetic union of masculine and feminine energy within their physical body, (b) a connection to their ancestors, (c) an integration of the divine and the sensual, and (d) the use of spirituality to combat intersectional oppression" (p. 27). This spirituality, grounded in Afrocentric values, has positive implications for Black SGL men's health.

Research studies have indicated that spirituality informs Black SGL men's lives by engendering positive health outcomes and by protecting them from the negative consequences of life stressors (Lassiter, Saleh, Grov, et al., 2019; Miller, 2005). In racially diverse samples of SGL men, spirituality has been found to be associated with higher levels of resilience and social support and negatively correlated with depressive symptoms and rejection sensitivity (Lassiter, Saleh, Grov, et al., 2019). Furthermore, spirituality buffered the negative effects of religion on mental health so that those with higher levels of spirituality and religion had better mental health outcomes than those with low levels of spirituality and high levels of religion. A few studies have found a negative association between spirituality and health among Black SGL men. For example, Carrico and colleagues (2017) found that higher levels of spiritual and religious activities were associated with greater odds of reporting stimulant use. Although the authors found a significant association, it should be interpreted with caution as the questions about spirituality activities were conflated with religious activities (i.e., how often did you consult a spiritual or religious leader). This conflation is common in psychological and public health research (Lassiter & Parsons, 2016). Thus, that study may not be purely measuring spirituality but some amalgamation of spirituality and religion. The overwhelming body of health research suggests that spirituality is a central component in Black SGL men's lives that helps them make meaning of their experiences and act in ways that bolster their health.

3.1.3   Religion in the Lives of Black SGL Men

Religion can be both a positive and negative influence in Black SGL men's lives. Scholars have highlighted the positive aspects of religion for Black SGL men (Foster et al., 2011; Quinn et al., 2016). These scholars have emphasized that religion and religious institutions can be a source of social support, financial assistance, and vocational training. Many religious organizations in Black communities provide examples of effective coping with anti-Black racism such as communal activism (Lassiter, 2014). However,

for all their assets, religion and religious organizations can be detrimental to Black SGL men's health.

Religion may be used to hurt Black SGL men when it is interpreted in ways that promote homonegativity. Fifty-one percent of Black American people reported believing religious texts should be taken literally (Pew Research Center, 2014). This practice contributes to some Black people developing a negative view of same-sex attraction and sexual behaviors based on conservative interpretations of a few passages (Helminiak, 2000). Religious organizations that engage in literal (or fundamentalist) interpretations of religious texts often promote hostile environments for Black SGL men. Religious leaders and participants in these settings may condemn and berate Black SGL men via sermons, exclusion from religious events and rituals, direct and indirect homonegative comments (e.g., "God hates gays"), and pressure to suppress one's sexual attractions and behaviors (Lassiter, 2014). These religion-based homonegative experiences can have negative effects on Black SGL men's health directly by causing psychological distress and indirectly through diminishing the positive aspects of religion (Griffin, 2006; Poteat & Lassiter, 2019). Previous literature (Super & Jacobson, 2011; Ward, 2005) has identified two specific forms of religion-based minority stress (e.g., religious abuse, spiritual genocide) that can contribute to identity fragmentation and other negative health outcomes. Overall, religion can be a double-edged sword for Black SGL men.

3.1.3.1   Religious Abuse

Black SGL men are religiously abused when they are subjected to religious pressure to conform to heteronormative expressions of sexuality and gender (Super & Jacobson, 2011). Religious people and organizations may justify the use of force, threats, rejection, condemnation, and manipulation with homonegative interpretations of religious scripture that categorize same-sex attraction and behaviors as sin. Many Black SGL men have reported receiving messages that indicated that they could not be both a religious or spiritual person and a SGL person (Lassiter, 2015). Homonegative interpretations of religion have been found to contribute to loss of social and familial ties (Garrett-Walker & Torres, 2017; Quinn et al., 2016), rejection, social isolation, loneliness (Griffin, 2006), refusal of participation in sacred rituals, and denial of access to material resources provided by religious organizations such as food pantry services (Lassiter et al., 2019). Additionally, many Black SGL men have reported experiencing violence at the hands of relatives, peers, and community members who

used homonegative interpretations of religious doctrine to justify their cruelty (Wilson et al., 2011). These religion-based homonegative acts are a form of religious abuse that can harm Black SGL men's understanding of themselves and their ability to trust and care for others.

Black SGL men's identities are often fragmented when they grow up in religiously abusive environments. They may develop beliefs that they are sinful, defective, and unlovable by others including the Sacred. This may contribute to internalization of a negative identity. Black SGL men may also come to think of themselves as not fitting in with the people around them who are rejecting them (e.g., Black, religious, communal) and they may reject those people and the characteristics they possess. This rejection of the ones who rejected them may serve to protect themselves from the emotional harms of being condemned and not accepted. Although being critical of people who cause harm upon one's self can be a healthy adaptive strategy, rejecting all characteristics associated with those people may result in Black SGL men rejecting the parts of themselves that they share with those persons. If Blackness, the Sacred, and communal bonds are devalued, then Afrocentric values (e.g., interconnectivity/self-extension) found in healthy forms of religion and spirituality may go undiscovered or perceived as suspect and averse. Religious abuse that promotes Black SGL men viewing themselves as sexually perverted religious outcasts and as adversarial to Blackness, the Sacred, and community ultimately leads to disconnection and an individualistic orientation.

3.1.3.2 Spiritual Genocide

Religious abuse may impede Black SGL men's ties to religious people and organizations as well as hinder their creation of holistic identities and genuine interdependent connections with romantic partners. Religious abuse can also lead to spiritual genocide. Ward (2005) described spiritual genocide as the ways in which homonegativity in religious institutions harm Black SGL men. I build on Ward's conceptualization and offer that spiritual genocide, fostered by religious abuse, is the psychospiritual disconnection from the Sacred that strips Black SGL men of their (conscious or unconscious) will to live through a process of subtle and overt attacks to their spirit-hood. Spiritual genocide leaves Black SGL men hollow and makes it difficult for them to cultivate or even acknowledge an understanding of themselves as part of the Sacred and inhibits development of loving relationships with themselves and others.

Spiritual genocide is more severe than religious abuse in its impact on Black SGL men. Whereas religious abuse contributes to Black SGL men

perceiving themselves as sinful, defective, and unlovable, spiritual genocide leaves Black SGL men in an existential crisis where their value orientations and purposes are nebulous. Religious abuse could prompt Black SGL men to have a negative, anti-self identity. Spiritual genocide prompts a non-identity, one without roots in the Sacred. This could lead to a suboptimal worldview that is materialistic, individualistic, consumed with escaping or avoiding pain, and death focused (Myers, 1993). In sum, religion may be a positive force that helps Black SGL men develop more fully integrated identities and spiritual consciousness, or a negative force that fragments their identities and acts as a barrier to them developing a strong spiritual consciousness.

3.1.4 Romantic Relationships among BSGLMCs

Population-based statistics suggest that approximately 56,000 BSGLMCs reside in the United States (LGBT Demographic Data Interactive, 2019). This number is likely an underestimate given the complex nature of sexual orientation disclosure among Black Americans (Lassiter et al., 2019). Kastanis & Wilson (2014) found that Black SGL men tend to choose romantic relationships with other Black men slightly more than romantic relationships with white American or other racial and ethnic minority men (54 percent vs. 33 percent vs. 13 percent, respectively). Additionally, 41 percent of them (more than same-sex couples of other races and ethnicities) reported raising children with their partner. They also reported lower incomes and rates of obtaining a college degree or having health insurance compared to same-sex couples of other races and ethnicities (Kastanis & Wilson, 2014). These few statistics that we have about BSGLMCs paint a picture of couples who have limited socioeconomic resources and significant familial responsibilities. However, this socioeconomic picture does not mean that BSGLMCs' relationships cannot flourish despite hardships.

BSGLMCs often cultivate resilient romantic relationships that are characterized as loving, pleasurable, and affectionate. Calabrese and her colleagues (2015) found that 95.6 percent of the Black SGL men in their sample felt love for their main partner and 97 percent felt loved by their primary partner during their last sexual experience together. Most Black SGL men (88.9 percent) in the sample also openly verbalized their love for their partner during their last sexual experience together. It is important to note higher percentages of Black SGL men reported feeling and verbalizing love during their last sexual encounter compared to those who endorsed

they had an orgasm (86.5 percent). These findings indicate that romantic relationships between BSGLMCs who are committed to each are more characterized by their shared love than sexual pleasure.

Love and affection are but a few of the benefits BSGLMCs experience in their relationships. Some studies have highlighted racially protective benefits of Black SGL men being in romantic relationships with other Black SGL men. For example, English and his colleagues (2020) found that Black SGL men who had romantic relationships exclusively with other Black SGL men reported fewer experiences of racial discrimination in sexual encounters, and in turn reported fewer depressive symptoms than men whose romantic partners were not exclusively Black. Romantic relationships may also be opportunities for Black SGL men to model sex-positive norms and provide examples of long-term romantic partnerships for other Black SGL men who may or may not be in their own relationships (Barry et al., 2018). BSGLMCs can have a wide range of benefits.

BSGLMCs have multiple strengths and challenges just like all other couples. Applewhite and Littlefield (2015) found that BSGLMCs used several strategies to preserve and improve their romantic relationships. They found that social support from family and friends, organizational networks (e.g., church), and salient Black institutions in their communities helped BSGLMCs thrive. Being intentional and thoughtful in decision making as well as utilizing direct communication were also strategies that facilitated feelings of love, stability, and support among BSGLMCs. Dishonesty, lack of support from partner and community, and substance abuse all were identified as barriers to BSGLMCs maintaining a healthy relationship. Poor communication also limited intimacy and longevity. In addition, due to anti-Black racism in non-Black sexual minority communities, Black love is sometimes stigmatized. This is partly because Black SGL men have been described by non-Black SGL people as vectors of disease (e.g., HIV) and oversexualized (Grov et al., 2015; Matthews et al., 2016). Taken together, these findings demonstrate that several factors can impact the success and failure of BSGLMCs.

3.2   Conceptual Framework of Afrocentric Articulations of the Sacred and BSGLMCs' Health

The influence of religion and spirituality on BSGLMCs' relationship health may be understood building upon the Ubuntu principle. Based upon this framework, religion and spirituality may positively or negatively impact Black SGL men's ability to prioritize connection, consciousness,
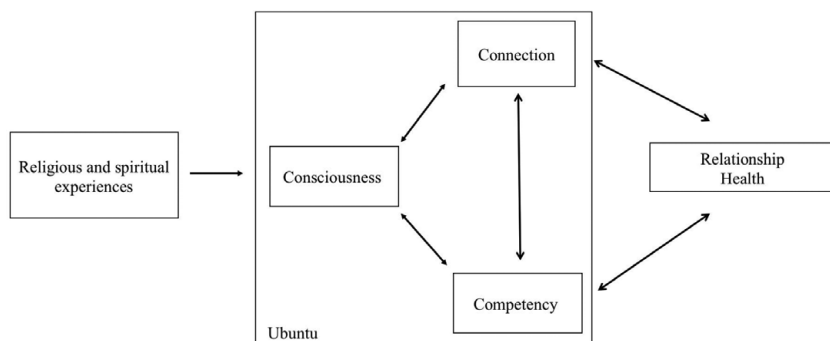
Figure 3.1   Conceptual framework of spirituality and religion's influence on Black same-gender-loving couples' relationship health

and competency in their interpersonal relationships (Wilson, Olubadewo, et al., 2016). Stated another way, religion and spirituality can promote or hinder Black SGL men's ability to cultivate integrated holistic identities that are spiritually conscious. This spiritual consciousness affects one's ability to achieve substantive connection to self and romantic partner and develop social, cognitive, behavioral, and affective skills that facilitate personal and relational functioning with one's romantic partner. These outcomes affect BSGLMCs' health.

Figure 3.1 depicts a conceptual framework to understand how spirituality and religion may influence BSGLMCs relationship health within an Afrocentric psychological paradigm. This framework, supported by the previously reviewed literature, proposes that many Black SGL men are raised in environments where they have both positive and negative religious and spiritual experiences (Lassiter, 2014; Lassiter, Saleh, Starks, et al., 2017). These experiences influence their level of spiritual consciousness. Black SGL men who have positive religious and spiritual experiences are likely to develop strong spiritual consciousness and an understanding of themselves as integrated Black SGL men who can unashamedly embrace their racial, sexual, spiritual, and gender identities as they see fit (Lassiter, 2015). This translates to their romantic partners as well. A strong spiritual consciousness facilitates Black SGL men in understanding their partners as being reflections of the Sacred and thus worthy of compassion (Wilson & Williams, 2013). Spiritual consciousness undergirds connection and competency in the romantic partnership.

Black SGL men who recognize themselves and their romantic partners as part of the Sacred will seek deeper connection with their partners. In

fact, the Afrocentric psychological perspective would propose that Black SGL men with strong spiritual consciousnesses would perceive no separation between themselves and their partners. Thus, such spiritually conscious Black SGL men would live by a both/and logic that prioritizes both the health of his romantic partner and himself in a symbiotic manner. The romantic relationship between partners with strong spiritual consciousnesses is not only about having one's individual needs met but also focused on how each partner may serve as a model of human transformation for the other. The strengths and areas of improvement in one's partner are inspirations for growth for the other and vice versa. Such spiritual conscious orientations to the romantic relationship would result in Black SGL male partners connecting with each other in deeper, more substantive ways.

Strong spiritual consciousnesses may also translate to higher levels of competency within BSGLMCs. At the individual level, Black SGL men have utilized several skills including intellectual interrogation of nonaffirming religious messages, emotional awareness, emotional acceptance, emotional regulation, and health behaviors motivated by the Sacred to positively affect their health (English et al., 2020; Lassiter & Mims, 2022). At the couples-level, competency may look like BSGLMCs developing a relational spirituality in which the couples' relationship with the Sacred is a shared phenomenon that influences decisions related to the structure, maintenance, and evolution of their relationship (Mahoney, 2010). Competency may also look like joint decision making, direct communication that is open and honest, and joint problem-solving that leads to healthy relationship functioning (Applewhite & Littlefield, 2015; Tan et al., 2018). Other skills that may contribute to relationship health may include seeking and providing social support and words of affirmation to cope with the spiritual, racial, sexual, and gender discrimination that many Black SGL men experience simultaneously (English et al., 2020). A strong spiritual consciousness imbues Black SGL men with an understanding of themselves and their partners as reflections of the Sacred and worthy of compassion. Such a perspective provides the foundation for Black SGL men to develop competency in their romantic partnerships that contribute to BSGLMCs' relationship health.

Religious and spiritual experiences may also negatively impact BSGLMCs' relationship health. If Black SGL men experience religious abuse and spiritual genocide, they may develop anti-self and non-self identities, respectively, that either renders them averse to or disconnected

from the Sacred. This contributes to one developing a suboptimal world-view or weak spiritual consciousness. With weak spiritual consciousnesses, Black SGL men are likely to approach romantic relationships as a process of getting their individual needs (e.g., material, sexual, emotional) met without a commitment to reciprocity. In this way, Black SGL men are thing oriented (e.g., receiving money, one-sided emotional support) and not person oriented (i.e., romantic partner). This approach to romantic partnerships will likely hinder connection. Competency will also be diminished as effective skills that contribute to healthy relationship functioning are likely to be un- or underdeveloped because the focus is on the self not the couple. Overall, BSGLMCs' relationship health will suffer.

This conceptual framework explicates a system of assumptions and beliefs that highlight the spiritual nature of life and its implications for BSGLMCs' relationship health. Positive and negative religious and spiritual experiences may foster or harm BSGLMCs' ability to actualize the Ubuntu principle through three central components (i.e., consciousness, connection, competency) and achieve relationship health. Given the high prevalence and importance of spirituality and religion in Black SGL men's lives, culturally-informed care requires that social scientists and psychotherapists develop a better understanding of the influence of these factors for BSGLMCs' relationship health. Furthermore, this framework is fundamentally rooted in an Afrocentric psychological paradigm that speaks specifically to the lived experiences and cosmological reality of ADP. It does not take an adaptive or accommodationist approach to BSGLMCs by attempting to use (white) Eurocentric norms and theories to describe and assess BSGLMCs. It centers African values, Black culture, and the spiritual in its explication of BSGLMCs' health.

3.3 Recommendations for Research and Clinical Work with BSGLMCs

The conceptual framework outlined in this chapter has implications for both social scientists and psychotherapists who work with BSGLMCs. The remainder of this chapter focuses on how this framework may guide empirical and clinical work with BSGLMCs who experience positive and negative spiritual and religious experiences. The recommendations are meant to inspire social scientists and psychotherapists to develop new research and clinical questions, theories, and approaches to working with BSGLMCs.

3.3.1   Research Recommendations

Previous scholars have called for more research that queries BSGLMCs (Mays et al., 2004; Wilson, Valera, et al., 2016). However, social scientists, as a whole, have yet to focus their attention on this population and its unique strengths and challenges (Jiwatram-Negrón & El-Bassel, 2014; Kousteni & Anagnostopoulos, 2020). Among studies that do center BSGLMCs, they often do so using either nonexplicit (or culturally neutral), (white) Eurocentric, or superficially culturally-adapted (e.g., inclusion of Black SGL male facilitators, inclusion of a discussion about race and racism) theories and approaches to guide their work (Applewhite & Littlefield, 2015; Tan et al., 2018). The conceptual framework described in this chapter provides myriad opportunities for empirical investigation within an Afrocentric psychological paradigm.

Although the framework presented in this chapter is bolstered by previous existing research studies that confirm individual components of it, it is still conceptual. Researchers may use the framework as a guidebook for testing and modifying the proposed associations between the constructs within it. The framework may also provide opportunities to develop culturally specific measures to operationalize the Ubuntu components (i.e., consciousness, connection, competency). With the exception of consciousness, these constructs have yet to be operationalized with an empirically-tested measure informed by the Afrocentric psychological paradigm. Although measures such as the African Self-Conscious Scale (Baldwin & Bell, 1985) and the Worldview Analysis Scale (Obasi et al., 2009) have been developed to assess consciousness, they have focused on racial and spiritual consciousness. Scales that operationalize holistic consciousnesses along the domains of spirituality, race, sexuality, and gender – as proposed by the framework – do not yet exist. Thus, there is plenty of space for researchers to engage in scale development and theory refinement related to BSGLMCs' relationship health within an Afrocentric paradigm.

There needs to be more diversity in research methods used with BSGLMCs. The conceptual framework provides possibilities for informing such use. The existing public health and psychological research has employed primarily individual-level qualitative and quantitative methods that explore BSGLMCs from the perspective of one partner (DuBois et al., 2018; Gonzales & Ortiz, 2015). There is little use of dyadic methods such as actor-partner interdependence model (Kenny & Ledermann, 2010) and dyadic qualitative analysis (Eisikovits & Koren, 2010; Morgan et al.,

2013). The use of image-based analyses is also rare. Methods such as cybercartography (i.e., the systematic observation, exploration, description, and categorization of Internet and social media websites and apps; Carballo-Diéguez et al., 2006) and photovoice (i.e., a methodology where participants are asked to photograph their daily experiences and environments as a tool for empowerment and policy change; Sitter, 2017) may also provide more expressive, non-text-based ways of understanding BSGLMCs. Mixed methods that integrate qualitative and quantitative data to provide a more comprehensive understanding of BSGLMCs are also lacking. Such diverse methods used with the conceptual framework outlined in this chapter will result in not only robust data but also a more culturally-relevant interpretation and application of that data.

Most research about Black SGL men and BSGLMCs has focused on HIV, sexual risk, and drug use (Wade & Harper, 2017). This focus on deficits continues to stigmatize these groups. The dearth of attention to cultural values, protective factors, resilience, and strengths-based approaches is conspicuous. The conceptual framework in this chapter can be used to direct future research that queries both risks and strengths among BSGLMCs. For example, this framework provides risk factors (i.e., religious abuse, spiritual genocide) and strengths (e.g., interconnectivity/ self-extension, principle of Ma'at) that can be further explored for their contribution to BSGLMCs' relationship health. The explicated conceptual framework offers a bevy of possibilities for social scientists who want to move their work beyond deficit-based, (white) Eurocentric, individual-level understandings of health.

3.3.2   Clinical Recommendations

Na'im Akbar proclaimed that "renewal of the spiritual core of the Black man is the most effective therapy for his adjustment disorders" (Akbar, 2003, p. 25). Dr. Akbar's proclamation requires mental health providers who work with BSGLMCs to become well versed in culturally specific couples' treatment that is appropriately attuned to spiritual matters in BSGLMCs' lives. According to an Afrocentric psychological paradigm, BSGLMCs' relationship problems are due to one or more partners having a weak spiritual consciousness (i.e., holistic identity) that hinders the couple's ability to connect with each other and develop competency for maintaining relationship health. Negative spiritual and religious experiences are two such factors that may contribute to a weak spiritual consciousness. Some scholars have offered suggestions for assisting clients in

healing from religious abuse and spiritual genocide so that they may build holistic identity that integrate their spiritual, racial, sexual, and gender identities (Bozard & Sanders, 2017; Lassiter, 2015). Additionally, other scholars have offered recommendations for how to utilize the Ubuntu principle in the psychotherapy room (Van Dyk & Nefale, 2005; Washington, 2010). These suggestions, while often conceptualized at the individual-level, may be modified to inform work at the couples-level.

3.3.2.1 Recommendations to Enhance Consciousness

Reconciliation of conflicting and fragmented identities must be primary in work with BSGLMCs where one or both partners have been the victims of religious abuse and spiritual genocide. Lassiter (2015) proposed several strategies that clinicians may teach and practice with their clients in the couple's session. These include helping BSGLMCs gain physical and emotional distance from homonegative religious and spiritual environments so that they may engage in critical interrogation of homonegative religious messages and experiences that communicate to them that they are antithetical to and disconnected from the Sacred. This critical interrogation may include questions about the veracity and theological basis for homonegative religious messages, queries about the motivation of the speaker of the nonaffirming messages, and seeking social support from other BSGLMCs who have strong spiritual consciousnesses (Lassiter, 2015; Pitt, 2010b). If one partner has a stronger spiritual consciousness than the other, the partner with the stronger spiritual consciousness may serve as a role model for the other partner and share strategies for reconciliation that they found effective in the past. These strategies move BSGLMCs toward stronger spiritual consciousnesses.

3.3.2.2 Recommendations for Enhancing Connection

Clinicians may help BSGLMCs connect with each other in healthier ways by engaging them in therapeutic exercises that assess for the current levels of interconnectivity and the principle of Ma'at in the relationship, and then help them improve these qualities. Empathy-building exercises that help couples engage in perspective-taking could assist in increasing interconnectivity by helping partners see themselves in each other and develop a deeper respect for the other's experiences. Clinicians may also find it beneficial to help BSGLMCs distinguish between the individual needs of each partner, the shared needs of the couple, and how conflicts in these may contribute to a lack of interconnectivity (Phillips, 1990; Wynn & West-Olatunji, 2008). This clarity may lend itself to helping

BSGLMCs make more informed decisions that will contribute to the growth of the couple and not only the individual. Therapeutic strategies that draw BSCLMCs attention to the values inherent in the principle of Ma'at can also increase connection within the romantic relationship. For example, couples could be encouraged to keep a journal to track how often they interact with each other in ways reflective of the principle of Ma'at (e.g., did you act with justice today and treat your partner fairly?). These types of exercises can facilitate deeper levels of connection in BSGLMCs.

3.3.2.3 Recommendations for Enhancing Competency

Clinicians working with BSGLMCs may find it useful to engage their clients in rituals (e.g., prayer, meditation, incantations, mind-body practices) that empower couples to advocate for themselves and develop health-inducing skills. Previous research has indicated that spiritual rituals done with or for a partner can have positive effects on relationship quality, satisfaction, and commitment (Fincham & Beach, 2014). Such rituals may help BSGLMCs to cultivate social, physiological, emotional, and cognitive spaces where they can develop and utilize other action-oriented strategies (e.g., emotional regulation, spiritually-informed health behaviors) that contribute to relationship health. These rituals may also be used to remind Black SGL men that they are spirit-beings inextricably tied to the Sacred and thus have infinite potential to influence themselves, their partner, and the world around them to the extent that they stay in contact with the Sacred even in a powerless situation (Washington, 2010). Clinicians may also assist BSGLMCs in developing new behavioral skills through the process of culturalization. Nobles and colleagues (2009) described culturalization as a behavioral change process that helps clients minimize negative social interactions and engage in healthy behaviors. This process consists of three techniques that clinicians may teach BSGLMCs: cultural realignment, cognitive restructuring, and character refinement. Cultural realignment would require that clinicians engage BSGLMCs in reeducating themselves about the positive and culturally aligned history and contemporary existence of healthy Black SGL men and BSGLMCs. This could be accomplished through bibliotherapy or other media consumption that centers the stories, histories, and cultures of BSGLMCs in a way that highlights their holistic identities. Cognitive restructuring with BSGLMCs may look like clinicians challenging couples to uncover and examine the functions of nonaffirming thoughts that create tension within the couple, and then change those thoughts. Character refinement would require the

clinician to assist BSGLMCs in developing a consistent pattern of behavior that is congruent with the cultural realignment and cognitive restructuring that previously took place. These strategies are but a few examples of how competency may be enhanced within BSGLMCs.

3.4   Conclusions

BSGLMCs have seldom been the focus in public health and psychological research. When they have been included in such research, it has been overwhelmingly pathological, individual based, and informed by a (white) Eurocentric perspective. Such approaches have severely hindered our knowledge about BSGLMCs. This chapter offers an emergent conceptual framework through which to understand the influence of spiritual and religious experiences on BSGLMCs consciousness, connection, and competency that collectively influence their relationship health. This conceptual framework is rooted in an Afrocentric psychological paradigm that emphasizes the principle of Ubuntu in defining, studying, and treating BSGLMCs' relationship health. Several examples of how this conceptual framework may be leveraged in research and psychotherapeutic clinical work with BSGLMCs have been provided. This chapter represents a step toward heeding Piper-Mandy and Rowe's (2010, p. 14) directive to ADP and Afrocentric psychologists to "call ourselves into existence psychologically" through the explication of life within an Afrocentric paradigm that affirms our spiritual nature.

Discussion Questions

1. In what ways does Afrocentric psychology differ from Westernized European psychology? Why is Afrocentric psychology important?
2. How do the concepts of Ubuntu, consciousness, and connection impact BSGLMC's ability to cultivate healthy relationships?
3. Explain how spirituality and religion may influence BSGLMCs relationship health within an Afrocentric psychological paradigm.

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