

# TRAUMA AND STIGMA AMONG BLACK GAY AND BISEXUAL MEN

*Sean Smith*

In this lesson, participants will engage in interactive activities and discussions centered on the impact trauma and stigma have on Black gay and bisexual men. Participants will be able to reflect on how traumatic and stigmatizing experiences they have endured currently influence and impact their identities, relationships, and social well-being.

## KEYWORDS

---

Emotional  
Intelligence  
Emotions  
Mental Health  
Stress Management  
Trauma

## THEME

---

Discrimination  
& Bias

## FORMAT

---

Workshop

## TIME

---

120 minutes





# PREPARATION

The facilitator(s) should use this section to prepare for the lesson.

PREPARATION

## WHY THIS LESSON IS IMPORTANT FOR BLACK MEN

---

In 1998 the Centers for Disease Control and Kaiser Permanente pioneered a study to examine how traumatic experiences in childhood impact individuals later in life. The Adverse Childhood Experiences or ACE Study surveyed 17,000 people and discovered that early childhood exposure to trauma was linked to greater health risks later in life (*Felitti et al., 1998*). Across the lifespan, trauma can exert effects on one's physiology, emotions, learning, impulse control, self-image, and relationships, and is linked to experiences of addiction, chronic illness, depression and anxiety, self-harm, and aggression (*The National Child Traumatic Stress Network, 2016*). For Black Americans in particular, cycles of systemic racism, race-based stress, poverty, educational inequity, and abuse contribute to some of the highest rates of trauma exposure in the U.S.

Black men who identify along the LGBTQ+ spectrum face even greater ridicule and are subjected to further social and emotional trauma because of their gender and sexual identities. Gender norms and patriarchal values have contributed to a society in which all Black men, though especially those who are gay or bisexual, may struggle with creating healthful emotional responses to traumatic situations. Trauma that goes without proper recognition and resolution puts both traumatized individuals and the people with whom they come into contact at risk.

As Dr. Sean Joe said in *Black Boys and Men: Changing the Narrative*: "It's important to understand and focus on how black males are expressing their masculinity, the importance of them having safe spaces to emote, and to deal with their feelings, and their critical needs" (*McSilver Institute for Poverty Policy and Research, 2018*). Black men need to be given space to evaluate how their personal traumas have influenced their identities and impacted their intimate relationships. This lesson serves to provide participants with the tools to recognize those traumas and begin the process of effectively healing them.

## TIME

---

<b>STEPS 1–8</b>	Introductions and Opening Activity	30 min.
<b>STEPS 9–10</b>	ACES Video and Discussion	25 min.
–	Break	10 min.
<b>STEPS 11–13</b>	ACES Test and Discussion	20 min.
<b>STEP 14</b>	Stigma Triangle and Discussion	20 min.
<b>STEPS 15–17</b>	Closing Activity	15 min.

## GOAL

---

Participants will utilize skills learned within this lesson to effectively understand and address the impact trauma and stigma have on their lives.

## OBJECTIVES

---

By the end of this lesson, participants will be able to:

- Define the terms trauma and stigma, and identify key differences between both concepts.
- Explain and evaluate at least one traumatic experience that has occurred in their lives.
- Identify the four types of stigma.
- Identify of at least two resources that specifically focus on mental health and social wellbeing for Black gay and bisexual men.

## KEY TERMS

---

**Trauma:** A distressing and overwhelmingly stressful life event that can stimulate an immediate, and sometimes chronic, physical and emotional response.

**Stigma:** Disapproval or disgrace of a person based on a socially perceived characteristic or trait; something that takes away from a person’s character or reputation.

**ACE Study:** The Adverse Childhood Experiences (ACE) Study conducted by the CDC and Kaiser Permanente in 1998.

**LGBTQ+:** An acronym to describe people who identify as Lesbian, Gay, Bisexual, Transgender, Queer (Questioning).

**Social well-being:** The extent to which an individual feels a sense of belonging and social inclusion. A connected person is a supported person in society. Lifestyles, ways of living together, value systems, traditions and beliefs are all important to our social well-being and quality of life.

## SPECIAL CONSIDERATIONS

---

This lesson is written for 12 participants and one facilitator. It can be adapted for smaller groups, but it should not be used for groups of more than 15 participants. The ideal space is one medium- to large-sized classroom with ample space to move around the room and to mark off an area to serve as a decompression space (see *Facilitation Prep*).

## REQUIRED BACKGROUND KNOWLEDGE FOR EDUCATORS

---

The facilitator(s) should have some background knowledge of trauma and its subsequent impact on racial and sexual minorities. An ideal facilitator should be able to understand and discuss how the intersection of various social locations and their related structures may impede an individual's access to resources, their ability to recognize and respond to their personal traumatic experience, and their willingness to accept trauma as an appropriate, expected aspect of their lives.

The facilitator(s) must have the capacity to deliver the content from a trauma-informed perspective and maintain an empathy-based approach to participants engaged in the learning process. A facilitator who is trained in an area of mental health counseling is a plus, particularly someone who can effectively address unanticipated emotional discomfort among participants without derailing the lesson itself.

For more on the trauma-informed perspective, visit the Trauma-Informed Care Implementation Resource Center website at [traumainformedcare.chcs.org/trauma-informed-care-basics](http://traumainformedcare.chcs.org/trauma-informed-care-basics)

## ADDITIONAL RESOURCES

---

### Interpretations of the ACES Study:

- [nationalcrittenton.org/wp-content/uploads/2015/10/ACEs\\_Toolkit.pdf](http://nationalcrittenton.org/wp-content/uploads/2015/10/ACEs_Toolkit.pdf)
- Fields, E. L., Bogart, L. M., Smith, K. C., Malebranche, D. J., Ellen, J., & Schuster, M. A. (2015). "I Always Felt I Had to Prove My Manhood": Homosexuality, Masculinity, Gender Role Strain, and HIV Risk Among Young Black Men Who Have Sex With Men. *American Journal of Public Health*, 105(1), 122-131. [doi.org/10.2105/AJPH.2013.301866](https://doi.org/10.2105/AJPH.2013.301866)
- Brian, Z. D., Crawford, I. (2005). "Minority Stress and Sexual Problems among African-American Gay and Bisexual Men." *Archives of Sexual Behavior*. [researchgate.net/profile/Brian\\_Zamboni/publication/6689054\\_Minority\\_Stress\\_and\\_Sexual\\_Problems\\_among\\_African-American\\_Gay\\_and\\_Bisexual\\_Men/links/593a095a0f7e9b32b749bfc0/Minority-Stress-and-Sexual-Problems-among-African-American-Gay-and-Bisexual-Men.pdf](https://researchgate.net/profile/Brian_Zamboni/publication/6689054_Minority_Stress_and_Sexual_Problems_among_African-American_Gay_and_Bisexual_Men/links/593a095a0f7e9b32b749bfc0/Minority-Stress-and-Sexual-Problems-among-African-American-Gay-and-Bisexual-Men.pdf)

## HANDOUTS

---

Each participant should be provided with the following printed materials:

- H1, "Adverse Childhood Experience (ACE) Questionnaire"
- H2, "Stigma Triangle"
- End-of-Session Evaluation

## FACILITATION PREP

---

The facilitator(s) should complete the following tasks before the lesson starts:

- ❑ This lesson includes the video, “How childhood trauma affects health across a lifetime”, which can be found online at [ted.com/talks/nadine\\_burke\\_harris\\_how\\_childhood\\_trauma\\_affects\\_health\\_across\\_a\\_lifetime/transcript?language=en](https://ted.com/talks/nadine_burke_harris_how_childhood_trauma_affects_health_across_a_lifetime/transcript?language=en). Enable closed captions on the video to ensure accessibility to all participants. Consider printing copies of the transcript from the videos for any participants who find it hard to follow along with the visuals. It is strongly suggested you use a facility with access to WiFi; however, if a computer, projector, and screen are unavailable, or you do not have WiFi access, encourage participants to use any smart devices present in the space to access the video on the TED website. Check your space 30 minutes in advance to ensure everything is set up and working properly. Have the video queued up and ready to go prior to the beginning of the session.
- ❑ Arrange participant seating in a circle or semi-circle facing the front of the room. If you do not have seating with desks or table space, be sure to provide clipboards for participants to use while they work.
- ❑ Prepare two separate sheets of flip chart paper with the word “Trauma” and its definition, and the word “Stigma” and its definition (*see Key Terms*). Fold the sheets up and keep them out of sight until the appropriate time during the session.

- ❑ Prepare a sheet of flip chart paper with the heading “Decompression Space,” making sure it has ample space underneath to write responses. Adhere the sheet to the wall in a location outside of the general activity area, so that participants who wish to use it may experience a reasonable level of privacy.
- ❑ Prepare a sheet of flip chart paper with the following websites written on it:
  - **Black Emotional And Mental Health Collective (BEAM):**  
[www.beam.community](http://www.beam.community)
  - **Get Some Joy Wellness Network:**  
[gogetsomejoy.com](http://gogetsomejoy.com)

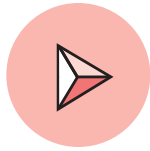
Show the sheet towards the end of your session for available mental health resources.

## MATERIALS

---

The facilitator(s) should have the following materials for the lesson:

- ❑ Flip chart paper
- ❑ Markers (*one per participant*)
- ❑ Lined paper (*2-3 sheets per participant*)
- ❑ Writing utensils (*one per participant*)
- ❑ Clipboards (*optional—see Facilitation Prep*)
- ❑ Computer
- ❑ LCD projector, screen, and connector cables
- ❑ Speakers



# PROCEDURE

The facilitator(s) should follow the steps in this section to facilitate the session, and use the margin for notes and prompts.



## Introductions and Opening Activity

### STEP 1

Welcome participants to your session, and thank them for coming. Conduct brief introductions (name, pronouns, fun personal fact—optional) with the group as needed. Take an emotional temperature of the group by engaging in the following question prompts:

- “How are you feeling about being with this group today?”
- “What were you thinking about or feeling coming to group?”

### STEP 2

Review all established group agreements and reaffirm consent from the group. If group agreements have not been completed, please create them at this time (*use the Community Agreements lesson, if necessary.*)

### STEP 3

Introduce the session topic by informing the group that it will be covering personal and potentially sensitive subject matter that may cause some mild to moderate adverse emotional response (e.g., sadness, fear, anxiety). Explain to participants that not everyone will have the same response, but that whatever response occurs is valid. Encourage participants to, as they need, care for themselves, and take breaks as they may deem it appropriate. Introduce and explain the function of the Decompression Space to participants as well.

### STEP 4

Distribute a sheet of paper and writing utensil to each participant, and then ask them to consider the following question:

- “When you think about your childhood, and what it was like growing up in your family and/or neighborhood, what experiences come to mind?”

Give participants 30 seconds to think quietly. Encourage them to think not just about experiences, about emotions, thoughts, and physical sensations that come

up as well. After 30 seconds, **instruct** participants to write their thoughts down on the sheet of paper. **Encourage** them to be as transparent as possible, as their answers will not be shared with others. **Give** participants 3–5 minutes to write.

**STEP 5** After 5 minutes, **solicit** a show of hands for individuals who listed an experience, thought, or feeling that they believe could be labelled as traumatic. If anyone raises their hand, **solicit** one participant to explain what they believe the word “trauma” means, and, without giving details, how they see their identified experience, thought, or feeling as fitting that definition.

**STEP 6** **Reveal** the sheet of flip chart paper featuring the definition for *trauma*. **Ask** participants to discuss ways that the volunteer participant’s definition of trauma matched what is written on the flip chart sheet. If no one volunteered, **validate** that response while encouraging participants to consider that a person can go through trauma without recognizing it as such. **Explain** also that each individual’s experience of trauma is different, and while one person may have gone through an adverse situation they don’t perceive as trauma, someone else may go through the same situation and experience it differently. **Explain** that both types of experiences are valid.

**STEP 7** **Repeat** Step Five: **return** participants’ attention to their sheets and **solicit** a show of hands for individuals who listed an experience, thought, or feeling that they believe could be labeled as being related to “stigma”. **Solicit** one participant to explain what they believe the word means, and then, without giving details, how they see their identified experience, thought, or feeling as fitting that definition.

**STEP 8** **Reveal** the sheet of flip chart paper featuring the definition for *stigma*. **Ask** participants to discuss ways the volunteer participant’s definition of stigma matched what was written on the flip chart sheet. If no one volunteered a response, **explain** that stigma can be subtle, though it may also, in some cases, be a source of trauma for individuals as well. **Encourage** participants to keep all these ideas in mind as they proceed through the remainder of the session.



## ACES Video and Discussion

### STEP 9

Explain to participants that research has shown that trauma and stigma-related experiences can adversely impact health outcomes and social wellbeing in adulthood. Direct the group's attention to Dr. Nadine Burke-Harris's TEDTalk video, and explain to the group that she will be discussing the ACES Study, which was based on experiences of childhood trauma among adults in the 1990's. Explain that she too is an expert on understanding how childhood trauma can affect adults.



Play the video, and then proceed through the following Discussion Questions:

1. "What initial comments, questions, or reactions do you have to the video?"
2. "What was most resonant about the video?"
3. "Was there anything in the video that was new or surprising information?"
4. "Now that you've seen this video, are there any new ideas going through your mind? If so, what are they?"

### STEP 10

Conclude the conversation by raising the point that understanding an individual's relationship to trauma can help one understand some of their everyday behaviors—including why they behave the ways they do, avoid certain environments, or even become advocates for certain causes. Explain that while not everyone resonated with the video, others may have been able to relate to every aspect discussed. Close by encouraging participants to consider the point that trauma is a universal experience, though in some cases it may not reveal itself until the most inopportune moment.



## Break

Before dismissing for the break, conduct a wellness check on the group. If it appears necessary, allow some space for participants to process residual emotional reactions with the group. Encourage participants to make use of the Decompression Space as needed during the break as well.





## ACES Questionnaire and Discussion

### STEP 11

**Reconvene** the group and **explain** that they will now examine the concept of trauma in their own lives by taking the original ACES Questionnaire for themselves. **Explain** that this is meant in no way to stigmatize anyone in the room, but is a way to help participants think more critically about their childhood experiences. **Explain** that no one's answers will be shared with others, and that participants may decide which items, if any, they wish to discuss with the larger group. *(If you have any participants who express considerable challenge with the test you can allow them to abstain from completing it and have them review the items silently instead.)*

### STEP 12



**Distribute Handout H1, “Adverse Childhood Experience (ACE) Questionnaire”** along with a writing utensil to each participant. **Give** the group 7-10 minutes to complete the test. *(If you find it works best with your group, you may choose to read the questions aloud; however, in this case encourage participants to arrange themselves in a way that would avoid others seeing their responses.)* After 10 minutes, **proceed** through the following Discussion Questions:

1. “How was it completing the test?”
2. “Would anyone like to share their scores, or to discuss any items from the test in particular?” **(Remind participants that sharing is 100% optional.)**
3. “What does your ACE score say to you? How does it make you feel, and why?”
4. “Have you ever noticed something from your childhood affecting how you experience life in the present? How about your intimate relationship(s)?”
5. “Can you think of one strategy or activity you use when you feel that something traumatic from your childhood has caused an adverse emotional reaction as an adult?”

### STEP 13

**Conclude** the discussion by encouraging participants to continue thinking about how traumatic experiences in their childhood could be currently impacting them as an adult, and to continue thinking through strategies for addressing trauma as it arises. **Explain** that it's important to be able to identify and address trauma in their lives as early as possible, especially if they are racial and sexual minorities, given the added stigmas that can come with those identities. **Explain** that the next activity will provide a foundation for thinking about stigma and how it may present differently for LGBTQ folk and people of color—particularly Black gay men.



## Stigma Triangle and Discussion

### STEP 14



**Distribute** a copy of Handout H2, “Stigma Triangle” to each participant; **solicit** a show of hands of individuals who have heard about or seen the handout before. **Solicit** four volunteers to read the various sections of the Triangle, or read all of them aloud yourself. **Explain** that each form of stigma impacts us in different ways, but they can all said to be interconnected or experienced at the same time. **Ask** participants if they have any questions about the terms on the handout. After those have been discussed, **proceed** through the following Discussion Questions:

1. “Which type of stigma do you believe is most prevalent in society and why?”
2. “Does any singular stigma have a greater impact on your lives as Black gay and bisexual men than others? If so, which one, and why?”
3. “Which type of stigma do you think impacts you the most as an individual? Why?”
4. “How do you think these stigmas manifest in your daily lives as you navigate the world?”
5. “As Black gay and bisexual men, do you feel you perpetuate any of the stigmas against your peers? What about potential partners?”
6. “What’s one way you believe we can reduce stigmatizing behavior in society?”



## Closing Activity

### STEP 15

**Close** the session by thanking the participants for their honesty, vulnerability, and effort. If you are able, **offer** to stay around for a bit longer if anyone has any questions or would like to talk further about their experience.

### STEP 16

**Distribute** a copy of the End-of-Session Evaluation to each participant. **Allow** participants 5-7 minutes to complete the evaluation, and **collect** them as they are completed. After five minutes, **invite** any participants who have not completed the evaluation to do so after the next activity.

**STEP 17**

Allow participants to share any final thoughts they may have about the session or materials discussed. Affirm any final thoughts shared and reiterate to participants that trauma and stigma are universal experiences that all people have a responsibility to heal, so that they can help others show others the same path. Once all final thoughts are shared, thank participants again for their time and adjourn the session.



# HANDOUT

HANDOUT

## ADVERSE CHILDHOOD EXPERIENCE (ACE) QUESTIONNAIRE

### Directions:

Write the number "1" in the right column for every "yes" answer. Add up your "yes" answers below.

While you were growing up, during your first 18 years of life:	YES
1. Did a parent or other adult in the household <b>often</b> ... Swear at you, insult you, put you down, or humiliate you? <b>OR</b> Act in a way that made you afraid that you might be physically hurt?	
2. Did a parent or other adult in the household <b>often</b> ... Push, grab, slap, or throw something at you? <b>OR</b> Ever hit you so hard that you had marks or were injured?	
3. Did an adult or person at least 5 years older than you <b>ever</b> ... Touch or fondle you or have you touch their body in a sexual way? <b>OR</b> Try to or actually have oral, anal, or vaginal sex with you?	
4. Did you <b>often</b> feel that ... No one in your family loved you or thought you were important or special? <b>OR</b> Your family didn't look out for each other, feel close to each other, or support each other?	
5. Did you <b>often</b> feel that ... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? <b>OR</b> Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?	
6. Were your parents ever separated or divorced?	
7. Was your mother or stepmother: <b>Often</b> pushed, grabbed, slapped, or had something thrown at her? <b>OR</b> <b>Sometimes</b> or <b>often</b> kicked, bitten, hit with a fist, or hit with something hard? <b>OR</b> <b>Ever</b> repeatedly hit over at least a few minutes or threatened with a gun or knife?	
8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?	
9. Was a household member depressed or mentally ill or did a household member attempt suicide?	
10. Did a household member go to prison?	

This is your ACE score: \_\_\_\_\_



## HANDOUT

---

### STIGMA TRIANGLE

