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Understanding Attachment Transitions Through the Lived Experiences of Young Black Gay and Bisexual Men

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We conducted a mixed-methods study to identify factors that influence transitions in attachment style between childhood and adulthood among 28 young Black gay and bisexual men (YBGBM) in the United States. We used a phenomenological approach to data integration, with the major component to the results being garnered from the qualitative interviews. We organized our results by four attachment transition groups: stable secure (secure attachment in childhood and young adulthood), stable insecure (insecure attachment in childhood and young adulthood), secure to insecure (secure in childhood and insecure in adulthood) and insecure to secure (insecure in childhood and secure in adulthood). Within each of the typologies, two major themes emerged: social support and religion. Generally, transitions from secure to insecure attachment were related to experiences of perceived rejection by a parental figure during adolescence that corresponded with sexual orientation disclosure. Transitions from insecure to secure attachment appeared to be related to the absence of an attachment figure early in life, but with the acquisition of an attachment figure during early to late adolescence. The findings from our study suggest a need for attachment-based approaches to social support interventions, as well as for an increased understanding of social and cultural factors that impact attachment changes among practitioners who use attachment-based therapy models for YBGBM.

Developing loving and trusting relationships with others is important for health and well-being across the life course (Hazan & Shaver, 2004; Mikulincer & Shaver, 2007). Researchers have found that attachment security (i.e., the ability to develop and maintain health socio-emotional relationships) is related to one's ability to give and receive social support (Feeney, 2003; Fraley & Shaver, 2000), to cope with stressful situations

(Mikulincer & Shaver, 2007, 2012), and with better overall mental health (Mikulincer & Shaver, 2012). Although there is a considerable amount of research specifying associations between health and both childhood and adulthood attachment, there is currently very little research aimed at understanding the particular mechanisms that influence the stability or change in attachment orientation from childhood to adulthood (Jones et al., 2017). This is a key gap in the literature, considering that changes in attachment may have implications for well-being in adulthood (Cook & Calebs, 2016). Further, this gap is more severe among communities of sexual minority and racial/ethnic minority men, because

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very little research has explored the potential social, relational, and psychological stressors that may influence attachment from childhood to adulthood.

Attachment Theory and Sexual Minority Stress

Attachment theory, first introduced by Bowlby (1969) and later expanded upon by Ainsworth (1989), is one of the main theoretical frameworks for understanding how the formation of socioemotional bonds with parents during early childhood contribute to long-term development and adulthood functioning. During childhood, there are generally three attachment styles: secure attachment, anxious attachment, and avoidant attachment. Healthy proximity seeking and successful security attainment behaviors by individuals during infancy or early childhood characterize a *secure childhood attachment style*. Children or infants with an *avoidant attachment style* do not seek comfort from or contact with an attachment figure, usually a parent. Children or infants with an *anxious attachment style* feel great distress when absent from a primary caregiver and are difficult to comfort when the attachment figure returns. Both anxious and avoidant attachment are considered insecure attachment styles.

Most attachment researchers agree that two distinct dimensions—attachment avoidance and anxiety—characterize adult attachment (Hazan & Shaver, 2004). People who are low on both of these indices of adult attachment are considered to be more secure (Brennan, Clark, & Shaver, 1998; Fraley & Shaver, 2000; Mikulincer & Shaver, 2007). *Attachment avoidance* is associated with a difficulty in forming deep emotional bonds with others. Those with higher levels of attachment avoidance generally evade intimacy and are uncomfortable with interdependence (Feeney, 2003). *Attachment anxiety* is also associated with difficulty in forming emotional bonds with others. Individuals with higher levels of attachment anxiety generally have a fear of being rejected and tend to participate in dependence behaviors (e.g., "clinging" to an attachment figure), which are used to reinforce the emotional bond.

Although there is a theoretical link between childhood and adult attachment, empirical research examining the stability of attachment styles across different developmental stages is limited (Cook & Calebs, 2016; Hazan & Shaver, 2004; Mikulincer & Shaver, 2007). However, Cook and Calebs (2016) provided a theoretical framework for understanding the process through which attachment across several developmental domains can change in the context of sexual minority stress (i.e., the social stress experienced by sexual minorities due to their sexual minority status), as well as how this process is associated with health and well-being in adulthood. This model, the integrated model of attachment and sexual minority stress (IASMS) posits that, along the developmental continuum between childhood and adult attachment, several factors can reinforce or contribute to a change in an existing attachment style. In one

component of the IASMS, Cook and Calebs (2016) posit that transitions in attachment may be more pronounced among sexual minority youth due to the unique social and interpersonal stressors they experience. The authors further point to key developmental moments in which attachment transitions are more likely to occur. One key moment is the sexual identity development process. To exemplify how a transition may occur, the authors use the example of young man who may initially be securely attached with a primary caregiver but transition to a more insecure attachment style in adulthood due to rejection from the primary caregiver after disclosure of his same-sex sexual orientation.

Moreover, the IASMS assumes there are key intersections between sexual orientation–related social stress and race/ethnic-related social stress that impact potential changes in attachment from childhood to adulthood among young sexual minority men. Emerging research has begun to conceptualize how intersecting minority stressors impact attachment functioning specific to the cultural and social lived experiences of YBGBM (Young, 2013). As compared to their heterosexual peers, YBGBM are exposed to a greater number of adverse experiences, such as abuse, rejection from family and peers, and homelessness (Wade & Harper, 2017). It is argued that YBGBM's exposure to such negative experiences interferes with later social and relationship functioning in adulthood (Cook & Calebs, 2016; Fields et al., 2015). For instance, negative experiences with sexual orientation disclosure have been associated with an increased risk for social isolation among YBGBM as compared to their White gay and bisexual peers (Fields et al., 2015). Interferences in social and relationship functioning are posited to be even more pronounced among YBGBM with anxious or avoidant adult attachment styles. Heightened levels of sex work, homelessness, and risky sexual behaviors may be related to poor attachment functioning that emerges from early exposure to adverse experiences (Young, 2013). However, at present very few studies explore the specific developmental pathways underlying childhood and adult attachment style among YBGBM.

Intersectionality

Minority stressors for YBGBM are linked to social contexts and identities. YBGBM report strenuous social pressures related to gender-role expectations and heteronormativity (Bowleg, 2013; LaSala & Frierson, 2012; Wade & Harper, 2017). Further, research consistently documents that homophobic attitudes are more pervasive within Black communities as compared to White communities (Lemelle & Battle, 2004; Lewis, 2003; Quinn et al., 2015). As such, researchers have found that Black communities may define and exhibit masculinity in ways that may be restrictive for the identities of Black gay and bisexual men (Hammond & Mattis, 2005; McClure, 2006; Malebranche, Fields, Bryant, & Harper, 2009; Mincey, Alfonso, Hackney, & Luque, 2015). For instance, in a sample of 35 YBGBM, Fields and

colleagues (2015) found that many of the young men reported social pressures from the expectations placed on masculinity and heteronormativity within the Black community. These pressures, in turn, led to increased levels of psychological stress among the young men and also led to overt attempts to mask their sexual orientation. In addition, Bowleg (2013) found in a qualitative study interviewing 12 YBGBM that participants used masculinity as a means to mask their sexual orientation from others due to heteronormative social pressures. Taken together, these studies support the idea that cultural expectations surrounding masculinity and heterosexuality may be more pronounced among Black men in response to systemic oppression (Bowleg, 2013; Fields et al., 2015).

Black gay and bisexual men (BGBM) may also experience marginalization within the lesbian, gay, bisexual, and transgender (LGBT) community because of their race (Ward, 2008). Indeed, BGBM report receiving less social support from the LGBT community as compared to their White counterparts (Frost, Meyer, & Schwartz, 2016; Han, 2007). For instance, qualitative research by Bowleg (2013) found that most of the interviewed YBGBM were unable to separate their Black identity from their sexual orientation and that situational factors had the potential to make a certain identity more or less salient, in turn influencing the quality of their social interactions (e.g., a work environment consisting of predominantly White men versus a predominantly Black church). In another example, Arnold, Rebchook, and Kegeles (2014) found, in a qualitative analysis of interviews with 31 HIV-positive YBGBM, that homophobia and HIV-related stigma were interwoven within the wider context of racism. The young men in this study described feeling alienated from the Black community due to their sexual orientation and HIV status, as well as from within the LGBT community due to their race (Arnold et al., 2014). Thus, the intersection of marginalized identities among YBGBM may influence both their lived experiences and psychosocial development across the life course (Bowleg, 2013; Walker, Longmire-Avital, & Golub, 2015). No research is currently available that specifically examines issues of intersectionality and attachment functioning. However, the experience of being both Black and a gay or bisexual man may have significant implications for attachment functioning across the life course.

Although researchers have argued that adult attachment may be linked to a host of negative outcomes, the developmental pathways that give rise to these negative outcomes among YBGBM are unclear (Cook & Calebs, 2016; Young, 2013). Thus, the current study used a mixed-methods approach to identify key mechanisms that influence changes in or stability of attachment from childhood into adulthood among a sample of YBGBM. The study was specifically framed by the following research question: What are some potential explanatory mechanisms linking childhood attachment and adult attachment among YBGBM?

Method

Participants

The present study was part of a larger mixed-methods research project called the Brothers Connect Study (BCS), which examined psychosocial and situational factors related to HIV vulnerability. Between 2010 and 2011, a community sample of 228 YBGBM participated in the larger BCS. Of these 228 men, a subsample of 153 men who experienced at least two condomless sex episodes in the previous two months was selected from the cross-sectional component of the BCS to complete an eight-week quantitative structured sex diary. The diary involved a self-administered questionnaire that was completed on a weekly basis. Participants were asked to complete the 20-minute sex diary on the same day every seven days. Reminder e-mails were sent to participants every week to increase compliance.

A variety of recruitment methods were used, including social media outlets and community venues. Flyers and/or business cards were placed on Web sites targeting YBGBM. Flyers and study business cards were also distributed or posted in gay bars, gay clubs, college campuses, and cafés. Participants were also recruited from community-based organizations (CBOs), such as the LGBT Community Center and Callen-Lorde Community Health Center, a primary care clinic that provides health care to LGBT individuals. Participants were compensated $45 for their participation in the semistructured interview, and could additionally receive a $10 gift card for referring up to two respondents who ultimately participated in the study. Individuals who completed the quantitative components of the study were contacted by the BCS project coordinator and asked if they would like to participate in the qualitative portion. This recruitment process continued until 30 individuals completed the semistructured interview component of the study.

Participants in the current study were 28 YBGBM (30 total qualitative interviews; only 28 were included here because their information was linked to a quantitative survey). The average age of participants was about 26 years (range = 19 to 31). The majority of the sample identified as African American/Black ($n = 17$; 60%) and the rest identified as Black Latino ($n = 6$; 22%), Afro Caribbean/West Indian ($n = 2$; 7%), or as mixed race ($n = 3$; 11%). Most participants had at least a high school degree ($n = 27$; 96%). A plurality of participants reported being unemployed ($n = 11$; 42%), and the majority reported being HIV negative ($n = 20$; 74%) and single ($n = 25$; 89%). Last, most participants identified as gay ($n = 19$; 68%); the rest identified as bisexual ($n = 9$; 32%).

Mixed-Methods Design

An explanatory sequential design was used to guide the study's framework and analysis (Clark & Creswell,

2011; Creswell, 2014). The study involved two phases: a quantitative phase and a qualitative phase. The two types of data represent different levels of analysis within a common phenomenon, with the intent to form an overall interpretation of the phenomenon (Clark & Creswell, 2011; Creswell, 2014). In this design, researchers use different methods (i.e., quantitative and qualitative) to understand one particular phenomenon (Teddlie & Tashakkori, 2003). This approach incorporates the strengths of qualitative and quantitative methods through the integration of data (Kartalova-O'Doherty & Doherty, 2009). Following this approach, we collected and analyzed both quantitative (i.e., survey) and qualitative (i.e., interview) data; the majority of our study relies on the qualitative data. Rigorous procedures were used in data collection and analysis appropriate to each method's tradition, as described in the following sections.

Procedure, Measures, and Analysis Plan

The semistructured interviews were conducted between August and October 2011 by trained BCS staff members. Interviews lasted between 45 and 120 minutes, with the average interview lasting 56 minutes. The Health Sciences and Behavioral Sciences Institutional Review Board (IRB-HSBS) at the University of Michigan granted approval for our research study.

Quantitative Measures: Demographics, Health, and Attachment

Demographic and health-related information was assessed using a 24-item measure consisting of fixed-choice and fill-in-the-blank questions. Participants completed items assessing age, race/ethnicity, sexual orientation, education level, annual income, relationship status, employment status, and HIV status.

The Experience in Close Relationships Scale—Revised (ECR-R; Fraley, Waller, & Brennan, 2000), a modified 13-item version of the original 36-item scale, was used to measure the construct of adult attachment. The ECR-R is a self-report measure, consisting of two subscales that assess attachment anxiety (seven items) and avoidance (six items). During administration, respondents were instructed to evaluate statements pertaining to their thoughts and feelings in regard to a past or present romantic relationship. Statements were rated on a 7-point Likert scale ranging from a score of 1 (*Not at all like me*) to 7 (*Very much like me*). Example questions include "I do not feel comfortable opening up to romantic partners" (avoidant subscale) and "I am worried about my relationships" (anxious subscale). Cronbach's alphas for the modified scales were .82 for attachment avoidance and .83 for attachment anxiety. Responses were averaged across subscales to create composite attachment anxiety and avoidance scores between 1 and 7, wherein higher scores indicated higher

levels of either anxiety or avoidance. Last, researchers have found that scores of 2.33 on the anxiety subscale and 2.17 on the avoidance subscale suggest relative security (Fraley, 2017).

Quantitative Data Analysis

Descriptive statistics and univariate analyses were performed to describe the adult attachment variables. Further, cross tabulations were used to examine the association between childhood and adult attachment styles. To examine transitions in attachment, we first categorized adult attachment style by using the median scores of both the avoidance and anxiety subscales from the quantitative survey. Young men were categorized as having a secure adult attachment style if both attachment anxiety and attachment avoidance subscale scores were less than the median (3.57 and 2.40, respectively). Young men were categorized as having an insecure adult attachment style if their adult attachment anxiety level was greater than the median and/or if their adult attachment avoidance level was greater than the median.

Qualitative Interviews

Trained male and female BCS staff conducted the qualitative interviews between August and October 2011. Semistructured interviews were conducted with 30 randomly selected participants who had completed the cross-sectional survey (*n* = 228) and at least six weeks of the eight-week structured diary component (*n* = 154). Four study staff members conducted all 30 interviews. Interviewers were trained in qualitative data analysis and semistructured interview data collection.

The BCS interview collected data based on five major topics: (a) childhood relationship with parents; (b) motivations for sex with partner; (c) sexual partnering and sexual behavior; (d) sexual and racial identity; and (e) barriers and facilitators to HIV prevention, testing, and treatment. For the present article, only data collected from the topic of childhood relationship with parents. An example of an interview guide question for this topic follows: "I'd like you to try to describe your relationship with your parents as a young child, if you could start from as far back as you can remember?" In addition, six questions pertaining to this topic—childhood relationship with parents—were adapted from the Adult Attachment Interview (AAI; George, Kaplan, & Main, 1985). The complete semistructured AAI asks adults about their childhood memories related to their relationship with a primary caregiver, such as "Did you ever feel rejected as a young child?" and "In general, how do you think your overall experiences with your parents have affected your adult personality?" The goal of the BCS interview was to elicit mental representations concerning early childhood attachment-relationship functioning.

Qualitative Data Analysis

Digital audio recordings were professionally transcribed, and all identifiers were removed prior to analysis. The team used a thematic analysis approach, as described by Braun and Clarke (2006), to identify themes that would help explore the relationships between childhood attachment and adult attachment. First, transcripts were read multiple times to establish familiarity with the data. After multiple readings by the qualitative research team, the transcripts were imported into NVivo 10. The interviewers met to discuss, compare, and develop codes of the entire interview protocol. Several transcripts were open-coded to develop the first draft of the codebook, which included primary and secondary codes, their definitions, and illustrative examples of each.

After codes were developed and applied to the transcripts, similar codes were grouped together to create a coding hierarchy that allowed the researchers to assess the relationships between the codes and each of the qualitative aims. First, the researchers listed each qualitative research aim and the corresponding codes from the categories in the hierarchy. This strategy resulted in four clusters of codes that helped direct the analyses. The data were then reviewed for overlapping codes within and between each cluster. Finally, using notes, memos, and the codebook, the data were further explored to look at how the qualitative themes helped explain the quantitative findings surrounding transitions in attachment among YBGBM. It was believed that theoretical saturation (Auerbach & Silverstein, 2003) was reached at 26 interviews, but the mixed-method analysis was completed with all 28 interviews.

A number of prominent themes from the qualitative interviews helped explore how childhood attachment style (as assessed through the qualitative interviews) was associated with adult attachment (as assessed by the ECR-R scale) among YBGBM. Based on the modified questions from the first interview topic (i.e., childhood relationship with parents), each completed interview was categorized as secure, avoidant, or anxious with regard to childhood attachment style. To assess childhood attachment, raters used the AAI scoring manual, which dictates a set of features (based on questions from the first topic) consistent with each of the childhood attachment styles (George et al., 1985). Because there are different levels of attachment (i.e., an individual can be more anxious and/or more avoidant), it can sometimes be difficult to classify individuals by any single attachment category. However, individuals here were categorized according to the group in which they scored highest, because one of the aims of our study was to explore childhood attachment style more broadly. Thus, if individuals were mostly avoidant, they were categorized as having an avoidant childhood attachment style. From this point forward, two coders (the first and second authors) coded all of the interviews utilizing the finalized codebook. The "spread of coding function" in NVivo was used to assess level of coding agreement for all coded interviews by determining the amount of content coded for the topic area in the original transcript. If there was a mismatch between coders ($n = 5$), discrepancies were discussed between the two lead coders and then discussed with the corresponding author until agreement was reached.

Results

The mean attachment ECR-R anxiety score was 3.97 ($SD = 1.68$) and the mean attachment ECR-R avoidance score was 2.53 ($SD = 1.45$). Based on the coding of the qualitative section of the AAI, 10 (36%) participants were coded as having a secure childhood attachment style (of whom six were also secure as adults; four insecure), eight (29%) were coded as having an anxious childhood attachment style (all scored as insecure as adults), and 10 (36%) were coded as having an avoidant childhood attachment style (with four being secure as adults; six insecure). Considering the four categorizations that we used in our analyses, six men were stable secure, 14 were stable insecure, and eight changed: four from secure to insecure, four from insecure to secure. Young men who were coded as having an insecure childhood attachment style (i.e., anxious or avoidant) were more likely to be higher on adult attachment insecurity during young adulthood (Pearson's $\chi^2(1) = 3.996$, $p = .046$).

Qualitative Themes

Although some individuals' attachment styles seemed to remain stable into adulthood, others appeared to change styles in their transition from childhood to adulthood. The young men's narratives revealed pathways that led from childhood attachment security to adult attachment security (stable secure), from insecurity to insecurity (stable insecure), from insecurity to security (insecure → secure), and from security to insecurity (secure → insecure). The variability in these transitional pathways seemed to be related to a combination of potentially stressful life events, suggesting that protective features of secure attachment during childhood may be weakened by consistent exposure to potentially stressful events. Thus, our results are organized by transition typologies: stable-secure attachment, stable-insecure attachment, insecure → secure attachment, and secure → insecure attachment. Within these attachment typologies, the data revealed the two main themes of social support and religion, and the two main subthemes of disclosure and experiences of being Black and gay or bisexual. Additional characteristics about each participant can be found in Table 1. Moreover, an overview of the themes, their definitions, prototypical quotes, and their usage across attachment categories can be found in Table 2.

Overall, nearly all of the men in the sample reported stressful life circumstances during adolescence regardless of attachment style ($n = 26$; 93%). Participants often discussed issues of stressful life events in the form of parental support (absence or presence) and rejection from family due

Table 1. *Characteristics of 28 Interviewed Young Black Gay and Bisexual Men in New York City*

ID	Age	Education	Sexual Orientation	Relationship Status	Childhood Attachment	Adult Attachment	Transition Type
1	29	Some college	Gay	Single	Avoidant	Insecure	Stable insecure
2	25	Some college	Gay	Single	Secure	Insecure	Secure → insecure
3	21	High school diploma	Gay	Married/in a relationship	Secure	Insecure	Secure → insecure
4	22	Some college	Gay	Single	Secure	Secure	Stable secure
5	25	Some college	Bisexual	Single	Avoidant	Insecure	Stable insecure
6	25	High school diploma	Bisexual	Single	Secure	Secure	Stable secure
7	25	Less than high school diploma	Bisexual	Married/in a relationship	Anxious	Insecure	Stable-insecure
8	31	High school diploma	Gay	Single	Anxious	Insecure	Stable-insecure
9	23	Some college	Gay	Single	Secure	Secure	Stable-secure
10	24	High school diploma	Gay	Single	Avoidant	Insecure	Stable-insecure
11	24	High school diploma	Bisexual	Single	Secure	Secure	Stable-secure
12	23	Some college	Gay	Married/in a relationship	Anxious	Insecure	Stable-insecure
13	21	High school diploma	Gay	Single	Secure	Secure	Stable-secure
14	28	Some college	Gay	Single	Anxious	Secure	Insecure → secure
15	21	High school diploma	Bisexual	Single	Secure	Insecure	Secure → insecure
16	23	High school diploma	Gay	Single	Avoidant	Secure	Insecure → secure
17	19	High school diploma	Gay	Single	Avoidant	Insecure	Stable-insecure
18	29	Some college	Gay	Single	Secure	Insecure	Secure → insecure
19	28	High school diploma	Bisexual	Single	Anxious	Insecure	Stable-insecure
20	30	High school diploma	Gay	Single	Avoidant	Secure	Insecure → secure
21	23	High school diploma	Bisexual	Single	Anxious	Insecure	Stable-insecure
22	30	High school diploma	Gay	Single	Anxious	Insecure	Stable-insecure
23	19	High school diploma	Gay	Single	Avoidant	Insecure	Stable-insecure
24	21	High school diploma	Gay	Single	Avoidant	Secure	Insecure → secure
25	24	High school diploma	Bisexual	Single	Avoidant	Insecure	Stable-insecure
26	22	High school diploma	Gay	Single	Secure	Secure	Stable-secure
27	23	Some college	Bisexual	Single	Avoidant	Insecure	Stable-insecure
28	31	High school diploma	Gay	Single	Anxious	Insecure	Stable-insecure

Table 2. *Themes in the Transition From Childhood Attachment to Adult Attachment Among 28 YBGM in New York City*

Theme and Subtheme	Definition	Example Quote	Attachment Transition Categories			
			Stable Secure (n = 6)	Stable Insecure (n = 14)	Insecure to Secure (n = 4)	Secure to Insecure (n = 4)
1. Social support	The act of giving support; someone who serves as a foundation	"I mean, back in Charlotte, there's like this—I was a part of a little thug group, per se, you could say. And I felt accepted, I guess. They didn't know I was gay, though. But I felt accepted." (Participant #15)	Social support from secure attachment relationships seemed to help participants cope with life stress	Lack of attachment figure seemed to relate to difficulty forming relationships and coping with stressful events	Social support appeared to help participants transition from insecure → secure	Social support ambiguously related to transition from secure → insecure
1a. Sexual orientation disclosure	Disclosing of sexual attraction or orientation to another person	"I came out to both of my parents at the same time when I was in college. So, they both know that I'm attracted to men, and I—we don't talk about it. We don't talk about it, but I wouldn't." (Participant #19)	Securely attached participants had more positive disclosure experiences	Insecurely attached participants described negative disclosure experiences	Positive disclosure experiences appeared to help participants transition from insecure to secure	Positive disclosure experiences ambiguously related to transition from secure to insecure
1b. Intersection of sexual orientation and racial identities	Experiences based on both sexual orientation and racial identities	"I've struggled to feel like I fit into the Black community because I'm [gay].... When I'm trying to get to know someone, it's 'Are they gonna accept me as Black? And then are they gonna accept me as gay?'" (Participant #19)	Participants describe experiences of rejection from Black and/or gay communities	Participants describe experiences of rejection from Black and/or gay communities	Participants describe experiences of rejection from Black and/or gay communities	Participants describe experiences of rejection from Black and/or gay communities
2. Religion	Discussion of participant's religious life, attitudes toward religion	"My whole family is deeply religious. Every time you turn around, it's 'God this, God that.' My Facebook is full of Bible verses from aunts and uncles posting it. 'Oh, you should pray for them.'" (Participant #20)	Religion played both a positive and a negative role for securely attached participants	Religion played both a positive and a negative role for insecurely attached participants	Negative experiences with religion were ambiguously related to transition from insecure to secure	Not applicable

to religious beliefs. Thus, our findings suggest that the dynamics of attachment in childhood and young adulthood are configured in a larger framework of social and institutional factors.

Stable-Secure Attachment

Social support.   All of the young men in the stable-secure group maintained close, loving relationships with one or both parents in early childhood. Participants reported feeling safe and loved by one or more parents. Further, evidence emerged suggesting that the maintenance of attachment security with one or more parents during early childhood could have been protective within the context of potential life stressors experienced in early adolescence through young adulthood. In particular, social support from a parent or primary caregiver seemed to be associated with sexual orientation disclosure experiences. For instance, one young man found social support from his father to be important for his well-being. While his mother continued to tell him "[Your sexual behaviors] are not right," his father was more accepting. He said:

> My dad … I've been like, "Listen, Dad. You know I'm gay. I'm gay. I'm gay, I'm gay, I'm gay." And he's like, "I know you're gay." And I would say he realizes it to the point where he's like, "I think you'd be better suited if you stay in the United States to work, 'cause Bahamas not really an open place right now. You'd be so much more happy, and your partner …" (Participant #4)

Though this young man felt less accepted by his mother, he reported that his father consistently tried to be supportive of his sexual orientation. Although there continued to be discussions of perceived lack of social support in the context of sexual orientation disclosure, this group repeatedly reported feeling accepted and loved by at least one of their parents or an extended family member. This pattern highlights the importance of having a supportive parent or family member as an attachment figure throughout adolescence and late adolescence.

In addition to the potential stressors concerning relationships with parents, young men in the stable-secure group experienced a host of additional potential stressors related to friction in the family environment. For instance, one young man reported that in addition to his father being incarcerated throughout most of his childhood, he was sent to live with family members because his stepfather rejected him for identifying as gay in late adolescence. However, he still continued to maintain a close connection with his mother. He said, "Although my mother had her times when she was completely unable to be worked with, she's always been there for me in my younger years. She's always been there for me" (Particpant #6). This young man's quote supports the notion that young men in the stable-secure group continued to have a reliable and stable attachment figure despite exposure to stressful circumstances due to their sexual

orientation from childhood throughout young adulthood. Thus, the young men who had a secure childhood attachment style seemed to have stable supportive figures that extended throughout the sexual orientation disclosure process (e.g., at least one parent or primary caregiver). This was evidenced by the fact that more than half ($n = 4$; 67%) of the young men with a secure childhood attachment style reported that a parent, primary caregiver, and/or a close family member during childhood was supportive of their sexual orientation.

Religion.   Religion also seemed to play a vital role in the development of ideas surrounding sexual orientation among those classified as stable-secure. Most participants reported negative experiences with religion ($n = 5$; 83%). All of the young men with a stable-secure attachment style discussed how their mothers disagreed with their sexual orientation because it went against their religion. For instance, one participant said: "So when [my mother] asked me, … I don't know. She was just like, 'You know that's a sin.' And I said, 'Everything you do every day is a sin.' I said, 'That's your opinion, if that's what you believe'" (Participant #9).

Despite the negative beliefs that Participant #9's mother held about same-sex relationships, and the potential relational stress that could have emerged, he maintained a secure attachment style. One explanation for his security maintenance could have been his reliance on alternative attachment figures. For instance, he later stated,

> If I was [not] to get emotional support from my parents, I honestly have had close friends that I'm still close friends with today when I was five, six years old, and their parents —they're like parents to me. So I got emotional support elsewhere. I was lucky to find that. But I think if I didn't, I think I probably would be different. (Participant #9)

Although participants in the stable-secure group may have continued to grapple with parental rejection due to religious beliefs, it appeared that overall there could be other alternative attachment figures or sources of social support contributing to their consistent attachment style from childhood to adulthood.

Stable-Insecure Attachment

Social support.   Most ($n = 6$; 60%) of the participants with an avoidant childhood attachment style, and all of the participants with an anxious childhood attachment style, continued to have an insecure attachment style in adulthood. Individuals classified in the stable-insecure group had a notable lack of support from either parents or other attachment figures. For instance, one participant had both an absent father and a semiabsent mother early in his childhood. He discussed how he could not feel close to his mother because he generally felt unsupported by her. Further, this young man did not have a grandparent or

other primary caregiver with whom he could develop an emotional bond. He said, "Yeah, it's just that [my mother] wasn't supportive for the time I needed her to be supportive… . You don't go sending your kid [to a group home] upstate" (Participant #17). In another example, a participant describes the distant relationship he had with his mother. He said, "I mean, there's no like emotional bond. I know a lot of people are like momma's boys and stuff, and it's not like I hate my mother, but it's like it's not —I wouldn't say close, but it's not distant. It's regular, I guess" (Participant #5).

Young men with a stable-insecure childhood attachment style also seemed to internalize negative experiences with attachment figures early in life, which seemed to extend to an inability to form emotional bonds with peers and intimate partners in young adulthood. Thus, it appears that a lack of adequate support within early development, and subsequently an inability to form secure attachment, impacted the formation and maintenance of adulthood relationships among this group. This connection between the inability to form emotional bonds in childhood and relationship functioning in young adulthood is further demonstrated by the observation made by one participant:

> [My relationship with my mother] makes it hard for me to trust and wanna be close to people… . I'd never had any friends in school. I never—everyone always picked on me when I was younger. I was the most hated. It caused me to be so afraid of people. I was so afraid of people, and that's why I have a people—person problem now. It may not seem like it, but I do. And I pride myself on intelligence, but when it comes to social skills I suck. And I need to exist in this world with people … I'm just—I've lost connection with the world, because the world gave up on me. (Participant #10)

Consistent with this young man's quote, the majority ($n = 9$; 64%) of young men in the stable-insecure attachment style group reported relationships with their primary caregiver within childhood, often their mother, to be generally disrupted or absent. Further, many ($n = 9$; 64%) of the young men in this group reported feelings of discontent that resulted from emotional or physical abandonment by a parent, and they highlighted the struggles they faced to cope with these feelings throughout young adulthood.

Religion. A lack of support and acceptance was also seen in connection with participants' descriptions of their interaction with religion. Nearly all ($n = 13$; 93%) the young men with a stable-insecure attachment style reported negative experiences with religion. Some ($n = 4$; 29%) of these men reported having a supportive parent, primary caregiver, and/or close family member throughout childhood even though the caregiver held a religious belief that homosexuality was wrong. These negative experiences reveal the complex interplay between social support from key attachment figures throughout childhood and young

adulthood, as well as the influential role of religion in participants' lives. For instance, one young man said: "[My parents] don't approve of [my sexuality]. They say you have a homophobic demon or I don't like you, you're gonna be burning in H-E-L-L" (Participant #22). Consistent with this young man's quote, most ($n = 13$; 93%) of the participants in the stable-insecure group reported similar negative experiences with parents, peers, or other family members during adolescence and young adulthood because of their sexual orientation.

However, associations between attachment and religion were more nuanced for some participants ($n = 4$; 29%). For instance, one participant described the influence that religion had on his life, and his sense of disorientation after distancing himself from religion:

> In one way, I think that because I grew up with such a strong religious background, that's how I saw the world, [and] that's how I saw other people. So, I had a reason to forgive people more readily or love people more readily or just care about morals and values … because they were in the context of a whole system. I didn't have to make anything up. It was just given to me. So, then of course, now that I've walked away from it, I have to kinda put some stuff into place, and there's plenty of things that I have not put into place yet. (Participant #19)

This participant emphasized the importance of religion, and his dedication to it, throughout his development. However, in young adulthood he distanced himself from religion, which may have led him to experience a developmental setback. He began to contemplate "the whole meaning of life, or motivations for doing certain things even in terms of sexual attraction or behavior … basically [my] whole framework is very up in the air … and it's been kind of rough laying a new one" (Participant #19).

Another participant expressed that although his religious background had a positive influence on his life, he struggled with reconciling his negative experiences with his stepfather, who was a pastor, with his desire to find a "more comfortable" church to attend as an adult:

> Being raised in a church didn't stop me from being gay, but being raised in a church definitely helped me to be more grounded. But at the same time, because I was raised in a church and my stepfather is a pastor and he's been kind of a negative example, I also left the church. And I'm trying to find my way back to a more comfortable church, but yeah, being raised in a church definitely—I feel like if I wasn't raised in a church, I don't think I would be as together. (Participant #28)

For this participant, growing up in the church was dually a source of support as well as ambivalence and alienation. Thus, religion appeared to play an influential role in attachment functioning in young adulthood among a few men in the stable-insecure group.

Insecure → Secure Attachment

Social support. A lack of consistent social support throughout childhood also was common among those who transitioned from insecure to secure attachment. This lack of social support appeared to be present for myriad reasons. For instance, the majority of participants (n = 3; 75%) described having a distant parent throughout childhood, being rejected by parents early in life, or having an absent parent due to drug addiction. For instance, one young man discussed his thoughts on why he and his mother lacked an emotional bond early in life:

> I did feel love from her. I tested her to see how much she loved me. And so, those are—and the fact that she wouldn't ever let me really leave her household if I even felt like I needed to, showed me that she did care, but she just didn't know how to express it. And a lot of times, I knew she didn't, because she'd always mention her experiences she felt through her—my grandmother, who she called by her first name. So, by that, I already knew—she had established that there was a disconnect between herself and her mom—my grandmother—and so, I knew that certain things that she did, maybe even said, were a kind of reflection of that kind of—that relationship. (Participant #16)

Although young men in this group reported the absence of an attachment figure in childhood, there was often discussion about the amelioration of relationships with these figures in adolescence or young adulthood. For instance, one participant said:

> I guess in the beginning, I guess I had like a normal or typical relationship, nothing too close. I feel like my mother's always been wrapped up in men, so even though she provided for us and did everything she can for us, we never really did things with our personal family. And when we did have family time, it was always catering to someone else. I feel like my mother never tried to develop a relationship with [me]… . Now I feel like she's doing a little bit better. Now that we're grown, she takes more of an initiative to ask us questions and be more involved, but back then, it was just like the only time we'll have family time was if a man was involved. (Participant #14)

Overall, the young men who transitioned from insecure to secure attachment seemed to have unstable relationships with parents throughout childhood. Although this instability led to a lack of consistent social support from early attachment figures, some (n = 2; 50%) of these individuals were able to mitigate the harmful effects of insecure attachment through the formation of emotional bonds with other figures throughout adolescence or young adulthood.

Religion. Similar to the stable-insecure group, participants who transitioned from an insecure to secure attachment also reported negative experiences with religion throughout development. For instance, one young man said:

> I think me keeping my life a secret for so long—and when I was high school I went to boarding school, and I had to keep the secret there, too—a Catholic school. So everything that I did was secretive. And when I got to college, I didn't know how to have a relationship in the open, so I was still used to sneaking around and doing it where I could. (Participant #20)

Although there seemed to be a general theme of negative experiences with religion among individuals with an insecure childhood attachment, the role religion plays in the transition from insecure to secure attachment appears to be highly dependent upon context.

Secure → Insecure

Social support. Many young men who transitioned from secure to insecure attachment described having loving relationships with either one or both parents during early childhood, but distanced themselves within adolescence and young adulthood due to the perceived lack of acceptance and/or social support during the sexual orientation disclosure process. For instance, one young man who transitioned from secure to insecure attachment said:

> As a young child, I got along with my parents. Especially my mom, 'cause I felt like I can always talk to my mom about anything. I always remember doing more activities with them when I was younger than I do now—going to the park or going places or traveling. But at one point I didn't have a good relationship. It was in my teens. (Participant #3)

Participant #3 highlighted that, at some point during his development, his close relationship with his mother became less amiable. In another part of his interview, he further noted that his mother perceived his same-sex behaviors as "promiscuous." Thus, it seems that the negative connotations implied by his mother about his sexual orientation contributed to his struggle to maintain a close relationship with his parents throughout late adolescence and early adulthood.

Other participants in this group also reported close relationships with a primary caregiver throughout early childhood and adolescence but still transitioned to an insecure attachment style in young adulthood. In one interview, a young man described having a close and supportive relationship with his mother in which he was able to disclose his sexual orientation. He said:

> [My mother is] always caring, always loving, encouraging, supportive, just the exemplar mom. Just the best. I was with her yesterday, and it was amazing how far we've come, in the things that we talk [about]. I tell her anything and everything, and she is aware of my sexuality. I told her, and she's okay with it. (Participant #18)

Although this participant experienced consistent support from his mother throughout childhood, he was unable to

COOK, VALERA, WOOD, CALEBS, AND WILSON

maintain secure attachment throughout adulthood. Thus, adult attachment may hinge upon a variety of social support sources (e.g., peers) throughout childhood and adolescence among those who transitioned from secure to insecure attachment.

Religion. Negative experiences with religion were also frequently (*n* = 3; 75%) reported among those who transitioned from a secure to insecure attachment style, and also seemed to be associated with sexual orientation disclosure. For example, one participant who transitioned to an insecure adult attachment style discussed how his relationship with his mother changed after coming out due to her religious beliefs:

> Well, it's more because of my sexuality, because my parents are religious, and my mom was brought up in church. So she doesn't—she accepts me being gay, but there's some beliefs that come from the Bible that goes against being gay and stuff. So she has her religious beliefs about it. (Participant #3)

It appears that among individuals who transitioned from secure childhood attachment to insecure adult attachment, relationship functioning may have been impacted upon disclosure of sexual orientation to key attachment figures in response to religious beliefs surrounding homosexuality. In sum, negative experiences with religion may play a role in the transition from secure childhood attachment to insecure adult attachment.

Attachment and Intersectionality

Concerns around being Black and gay or bisexual did not differ by attachment category. In fact, some young men reported no issues or concerns with being both Black and gay (*n* = 9; 32%). Among young men who did report concerns, it seemed that the possession of a racial and sexual minority identity was associated with feelings of isolation and a lack of social support from key community members in the Black and LGBT communities. For instance, one stable-secure young man reflected on his struggles with his Black and gay identities by describing a recurrent experience with his mother:

> Even sometimes my mom would—I don't talk to my mom no more, but a long time ago she would be like, "You're Black. You're supposed to be straight. You're supposed to have a wife and kids. Why are you being this way?" Being Black—they already judge you for being Black, and now you're Black and you're gay. (Participant #26)

In another example, a young man who maintained an insecure attachment orientation in childhood and adulthood described his struggles with fitting into both the Black and gay communities:

> With other Black people, … I've struggled to feel like I fit into the Black community … because I talk a certain way or people

perceive me in one way racially. So it's like a double barrier. It's like when … I'm trying to get to know someone or participate in community, … "Are they gonna accept me as Black because of the way I talk and what I talk about? And then are they gonna accept me as gay?" (Participant #19)

In sum, it appears that YBGBM felt a lack of support from the Black and/or LGBT community regardless of attachment category.

Discussion

Overall, our results suggest that the two key mechanisms linking childhood and adult attachment among YBGBM are social support and religion. In addition to these key themes, the subthemes of disclosure and intersectionality were integrated within the major themes. YBGBM who had an insecure childhood attachment style, regardless of their adult attachment style, seemed to report potentially stressful life events early in life as well as during early and late adolescence (e.g., parental substance use, a history of being in the foster care system). These potentially stressful life events seemed to negatively influence the relationship with at least one parent or primary caregiver who was supposed to be a key childhood attachment figure early in life. Maintaining an insecure attachment in adulthood, or transitioning to a secure attachment in adulthood, seemed to be related to being unable or able to gain a supportive alternative attachment figure in early or late adolescence who was accepting of their sexual orientation. However, in both of these groups there was a complex association between attachment and religion. Stressful life events seemed to frame disruptions in social support from childhood attachment figures (e.g., parents) and the religious belief systems that may be of special importance in the lives of YBGBM.

YBGBM who had a secure childhood attachment style also experienced potentially stressful life circumstances, but many times maintained secure attachment relationships with primary caregivers. Maintaining secure relationships in early childhood could be protective against the experiences of early stressful life events. Many YBGBM who were secure in their childhood and adulthood attachment styles supported this point. However, there were also young men who transitioned from a secure to an insecure attachment style. This transition seemed to be associated with a disruption in feelings of security, which could result from rejection by a parental figure or religious institution due to sexual orientation.

Attachment and Social Support

Social support was a key component of understanding stability and changes in attachment from childhood to adulthood. It could be that securely attached young men continue to use their primary caregiver(s), as well as friends and/or

intimate partners, as a safe haven and a means of social support during the process of sexual orientation disclosure. This notion is supported by our data from the semistructured interviews. For example, the majority of the men with a secure childhood attachment indicated that they received social support throughout the sexual orientation disclosure process. Moreover, the young men with a secure childhood attachment style were more likely to report feeling grateful for the support received from their primary caregiver and their networks of friends. In contrast, participants with avoidant or anxious childhood attachment frequently expressed that they had either not disclosed to their primary caregiver or had been rejected by their primary caregiver upon disclosure.

The important role of an attachment figure is supported by a study carried out by Buttram (2015), who found that Black gay and bisexual men noted the importance of attachment figures such as parents in handling stressful situations. Further, Buttram (2015) also found that many of the Black gay and bisexual men who did not feel supported by the LGBT community were less likely to utilize social support as a buffer against stressors. However, there is still a paucity of research examining how transitions in attachment may impact the use and maintenance of social support among YBGBM. This is an important gap to address, as this could be important for understanding how the intersection of identities among YBGBM influences the development and maintenance of attachment relationships within a developmental perspective.

Further, social support surrounding disclosure experiences seemed to be a key pathway linking childhood and adult attachment. Previous studies have found that LGBT individuals who have a secure childhood and adult attachment style are generally more open about their feelings with peers and intimate partners than are individuals who are insecurely attached because of the former's comfort with attachment figures (D'Augelli, Grossman, Starks, & Sinclair, 2010; Rothman, Sullivan, Keyes, & Boehmer, 2012). Although very few studies have examined the association between attachment and the sexual orientation disclosure process, previous studies support the notion that men with a secure childhood and young adulthood attachment style have an easier time disclosing their sexual orientation to friends, family members, and peers (Jellison & McConnell, 2004). Thus, those who maintain a secure attachment throughout the life course are more likely to develop and utilize healthy coping strategies as a response to stress as compared to young men who have an insecure attachment style (Jellison & McConnell, 2004).

Although research shows that the sexual orientation disclosure process influences attachment during distinct developmental periods (Elizur & Mintzer, 2001), our study shows that the presence of a supportive attachment figure during this process may be crucial in understanding transitions in attachment among YBGBM. Rejection during this key period may constitute an intensely stressful event, which in turn can alter a young man's attachment style from secure to insecure, or it could lead to the continuation of an insecure attachment into adulthood.

Attachment and Religion

Religion seemed to play an important role in participants' lives. However, findings from the present study were mixed in regard to how religion influenced attachment transitions among our sample of YBGBM. For example, some participants discussed finding social support from members of their church or from God, whereas other participants reported being rejected by family members in the name of religion and/or by their church. Moreover, it remains unclear how the experience of support or rejection in the context of religion relates to particular attachment trajectories.

Experiences of support or rejection have also been reported by researchers examining the role of religion in the lives of Black gay men (Hill & McNeely, 2013; Kurtz, Buttram, Surratt, & Stall, 2012; Pitt, 2010; Wilson, Wittlin, Muñoz-Laboy, & Parker, 2011). In a qualitative study of 34 Black gay men conducted by Pitt (2010), regular church attendance and engagement with church members were found to be important forms of social support in the lives of participants. Thus, it may be the case that YBGBM who have a secure childhood attachment style feel more comfortable seeking out support from their religious institutions and thus may develop better coping strategies to handle potential rejection events, as compared to young men with an insecure childhood attachment style.

Other research has documented that much of the stigma related to homosexuality within the Black community stems from the close ties that the community has to religious institutions (Ward, 2005; Woodyard, Peterson, & Stokes, 2000). This research literature suggests that negative attitudes toward Black gay men can lead to feelings of isolation and alienation from the community (Glick, Winer, & Golden, 2013; Harawa et al., 2008; Kraft, Beeker, Stokes, & Peterson, 2000). The results from our study are consistent with findings from this body of research, suggesting that rejection from religious institutions and/or community members can lead to increased levels of stress among YBGBM, which may in turn be associated with attachment insecurity in young adulthood.

Young men in the insecure-stable and the insecure → secure typologies discussed positive experiences with religion that seemed to be contrary to much of the research on religion on sexual orientation among young Black men. However, upon closer examination, several key components of these young men's lives are supported by the research literature. For instance, the small number of men in the insecure-stable group who reported positive experiences with religion also reported a myriad of potentially highly stressful life events, such as the absence of a parent in childhood. Granqvist, Mikulincer, and Shaver (2010) contended there are two developmental pathways among insecure-stable and secure-stable typologies in regard to the role

of religion. First, the authors discussed the idea of a "compensation" pathway (p. 53). This pathway occurs when individuals who are insecurely attached throughout childhood and early adolescence use religion as a means by which to cope with stress. The second pathway, "correspondence" (p. 54), describes those who have a secure relationship with a religious but accepting attachment figure throughout early and late adolescence. Although these pathways are not specific to YBGBM, they may help to explain why some stable-insecure young men seek out religion as way to cope with stressful life events in the absence of key attachment figures early in life. On the other hand, for insecure → secure typologies, it could be the case that the correspondence pathway is slightly altered such that the continued support of a religious institution from early childhood through late adolescence can play a role in the transition to secure adult attachment.

In sum, there appears to be an overall tension regarding the role of religion in the lives of YBGBM. On the one hand, religious institutions can serve as supportive entities; on the other hand, religious institutions can be sources of stigma and rejection. Future research should further examine this tension and how it may affect the well-being of YBGBM.

Attachment and Intersectionality

The results of our study indicate that the association between attachment and the intersection of identities of race and sexual orientation among YBGBM warrants further exploration. Regardless of childhood or adult attachment style, the YBGBM who did report concerns reported feeling alienated and lacking social support from the Black and/or LGBT community. However, it is important to note that a large proportion of men reported no concerns with being Black and gay or bisexual. It appeared that concerns raised about the intersection of racial and sexual identities were skewed more toward social support from friends, family, and the Black community as a whole and less about rejection from the LGBT community. This finding is supported by the extant research literature (Lemelle & Battle, 2004; Lewis, 2003; Quinn et al., 2015). Overall, researchers have found a large degree of homophobia in the Black community (Quinn et al., 2015). Hegemonic homophobic ideologies within Black communities could play a key role in corroding attachment relationships between caregivers and YBGBM. The further rejection by a predominantly White LGBT community could lead to YBGBM'S having feelings of isolation. Therefore, the stress that occurs due to intersecting identities may accumulate over time and contribute to attachment transitions later in life depending on if an individual is able to maintain or develop key attachment relationships. However, further research will need to be conducted that specifically examines the experience of intersectionality and attachment across the life course.

It is important to note that a large proportion of men reported no concerns with their identity. It is unclear why some young men reported no concerns. However, it could be the case that protective mechanisms are operating to shield young men from experiencing the negative social effects of stigma and discrimination based on their identity. For instance, Buttram (2015) found that inner strengths, social relationships, diversity of experience, religion/spirituality, altruism, and creativity were all key resilience features that may protect YBGBM from experiencing poor health. Further, Buttram (2015) also found that support from other YBGBM might be a key protective mechanism. Although resilience may be one concept that could explain why some YBGBM in this study did not report any concerns with their identity, it remains unclear how perceptions about identity influence attachment across the life course for YBGBM. In the future, researchers should further explore this significant gap in the research literature.

Transitions in Attachment

The findings from the current study also support key features of the IASMS (Cook & Calebs, 2016). Congruent with this theoretical model, YBGBM who reported an avoidant or anxious childhood attachment style were more likely to experience physical or emotional distance from parent(s) and lack another primary caregiver to provide social and emotional support during adolescence. The lack of an emotional bond with early attachment figures can contribute to feelings of rejection and loneliness in young adulthood (Bowlby, 1980), which may later play a role in the development of an insecure adult attachment style. This is evidenced by the fact that all of the YBGBM participants in the current study experienced stressful life events during adolescence, which appeared to influence and be influenced by their childhood attachment styles. Thus, myriad life circumstances could potentially influence attachment style. Additional research should be conducted to further unpack how complexities in the lived experiences of YBGBM may impact transitions in attachment functioning.

The results from our interviews suggest that without the support of an early childhood attachment figure, YBGBM's experience with stressful events can contribute to both an increased vulnerability to feelings of distress and a decreased capacity to form healthy emotional bonds within early adulthood. Such experiences can be viewed as disruptions in developmental processes associated with attachment style transitions for these YBGBM. Moreover, the young men in our study with a secure adult attachment style either had new attachment figures introduced to them within childhood and/or adolescence or they continued to maintain an emotional bond with a childhood attachment figure. In sum, formation of attachment bonds in early childhood seemed to provide these men with a safe haven and a secure base, thereby allowing them to more effectively transition into adulthood with a secure attachment style as compared to the men who had an insecure childhood attachment style.

Limitations

Although the present study demonstrates considerable strengths, there are some limitations. First, the results are not necessarily generalizable to the general population of YBGBM in cities and contexts other than New York City. There may also be sample bias due to our recruitment venues (e.g., gay bars and clubs) and the study's eligibility criteria that required that men had to have condomless sex with another man in the past two months. Second, there may be differences in attachment processes based on identifying as gay or bisexual. In addition, as described by Cook and Calebs (2016), some young adult men may still be grappling with their sexual orientation and thus may experience changes in their identification during the developmental period between childhood and young adulthood. Third, we measured childhood attachment style retrospectively and adult attachment style presently. Thus, our study was not longitudinal in design and therefore some retrospective bias may have entered it. Fourth, because there were both male and female interviewers, we cannot rule out the possibility of biased responses due to interviewer gender. However, research examining interviewer gender effects are generally inconsistent and suggest that this risk can be minimized with proper training (Davis, Couper, Janz, Caldwell, & Resnicow, 2010; Durrant, Groves, Staestsky, & Steele, 2010; Liu & Stainback, 2013). Our interviewers completed a course on interviewing skills and conducted several practice interviews. Last, YBGBM are a diverse group of young men who can also have experiences of resilience which are not described in the current study but which warrant further research. Limitations notwithstanding, our study provides novel information regarding factors that may influence transitions in attachment style between childhood and adulthood among YBGBM.

The functioning of childhood attachment generally appears to be associated with adult attachment in our sample of YBGBM. Social support, religion, and identity seem to be inextricably linked in complex ways that influence transitions in attachment from childhood to adulthood among YBGBM. Taken together, results from the current study imply that attachment functioning from childhood through young adulthood may have important implications for the health and well-being of YBGBM.

Future Directions

The findings from our study suggest three additional areas of inquiry that may be important for understanding the ways in which attachment in childhood and young adulthood are related among YBGBM. First, these young men experienced a number of challenges due to their sexual orientation and other stressful life events (e.g., parental absence, drug use by a parent, abuse by a parent). These stressful life events may be key points of interest that are directly tied to transitional pathways between childhood attachment and adult attachment. Understanding how such

factors are related to attachment is important in conceptualizing how to help increase resilience and the capacity to make more positive attachment transitions within adulthood among YBGBM.

Second, attachment seemed to be important for understanding the amount of stress experienced during sexual orientation disclosure among YBGBM. Having a secure childhood attachment style and attachment-related parental and peer support seemed to help facilitate sexual orientation disclosure for YBGBM. In contrast, some YBGBM with an anxious or avoidant attachment style described a fear of disclosing their sexual orientation to others. Thus, the ability to develop emotional bonds seemed to mitigate specific challenges faced by YBGBM. This ability could, in turn, help young adults more successfully navigate the transitions between developmental stages across the life course.

Third, the role of religion continually arose as a key area of interest. Religion appeared to both facilitate bond formation in childhood and hinder the development of emotional bonds in late childhood and early adulthood. Improvements in the understanding of the role of religion —particularly the friction between religion as way to cope with stressful life events and religion as a barrier to emotional bond formation with a parent or primary caregiver—could be important for understanding attachment transitions among YBGBM. Future research should focus on the transitions between childhood and adult attachment and the factors that may contribute to these transitions among YBGBM.

Last, future research should focus on how the intersection of marginalized identities may be related to transitions in attachment among YBGBM. Attachment could play an important role in understanding how YBGBM experience their identity and respond to stress associated with social stigma around being a YBGBM.

Practice Implications

The present findings suggest that the association between YBGBM's childhood and adult attachment styles may be complex and highly situated. The young men's transitions in attachment appeared to be related to myriad acute and/or chronic stressors due to the complexity observed in their experiences with religion and support from family and peers. Our study supports the need for further longitudinal research concerning the intersection of attachment stability, as well as the intersection of sexual orientation and racial identity development for YBGBM. Study findings support the need for practitioners participating in attachment-based therapy to understand key cultural and situational factors that influence attachment changes for YBGBM. Moreover, these findings support the idea that mental health and social support interventions for YBGBM may need to incorporate an attachment paradigm to improve care. This idea is supported by the fact that the young men who were more insecure within adulthood (regardless of the pathway) were less likely to adequately give social support to and receive social support from peers, family, and romantic partners.

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