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“...And Then There was the Down Low”: Introduction to Black and Latino Male Bisexualities

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Abstract

Although a recent proliferation of mass media has drawn attention to “the new Down Low phenomenon” (presumably “secretive” homosexuality among married Black men), relatively little research has explored bisexual behavior and identity among ethnic minority men in the United States or elsewhere. Although the study of bisexuality in Black and Latino men is significant in its own right, disproportionate rates of HIV/AIDS among these men make the current dearth of scientific information even more urgent and concerning. In this special section, we have compiled a diverse array of empirical and theoretical perspectives on Black and Latino male bisexualities. A wide range of information on the individual, social, and sexual lives of these men, and potential relations to risk behavior, are presented. This article introduces this new body of work and offers suggestions for future research directions for culturally appropriate interventions for Black and Latino bisexual men.

Keywords

Bisexuality; Black; Latino; Men; Down low; HIV/AIDS

Introduction

On April 16, 2004, a new episode of the Oprah Winfrey Show, “A Secret World of Sex: Living on the ‘Down Low’”, was broadcast on television screens around the world. A trailer for the episode warned viewers, “It’s a shocker. It’s called on the ‘Down Low’. Men with wives and girlfriends secretly having sex with other *men*. One man blows the lid off this sexual underground” (oprah.com, 2008). Introducing the episode, Oprah stated “J. L. King was a happily married father of two but was keeping a dark secret...living on the ‘down low’—seemingly living a ‘straight’ lifestyle with a wife and family, but secretly sleeping with men” (oprah.com, 2008). During the course of one hour, special guest King, a self-declared “HIV prevention activist, educator, and author” (as well as a “new man”) bore witness to his own 25-year experience of existing on the “Down Low” as a “secretly” bi-sexual Black man: “The desire overrode everything I knew,” King recalled. “It created this whole secret life and made me make up stories and try to cover-up my tracks. [It was] a life that destroyed my family” (oprah.com, 2008).

King was hardly the first to “blow the lid off” the existence of the apparently widespread bisexuality among Black men. On August 3, 2003, the *New York Times Magazine* preceded Oprah with an extensive report about what was called “an organized, underground subculture largely made up of Black men who otherwise live straight lives” (Denizet-Lewis, 2003). Even nearly 10 years earlier, author E. Lynn Harris had written bestselling novels, including “Invisible Life,” “Just as I Am,” and “Abide with Me,” describing the phenomenon of Black male bisexuality (Frieden, 2002). Few could have anticipated, however, the impact a single episode of Oprah could have on sexual culture in the United States and beyond.

In addition to sharing his life story on Oprah's show, King heavily publicized the sale of his new book, “On the Down Low: A Journey Into the Lives of ‘Straight’ Black Men Who Sleep with Men.” Although almost entirely autobiographical, the memoir was marketed as the “first frank and thorough investigation of life ‘on the Down Low’...drawn from hundreds of interviews, statistics, and the author's firsthand knowledge of DL behavior” (King, 2004). Such a sensational and well-researched story, endorsed by a popular culture deity like Winfrey (indeed, a link to purchase the book may still be found on her website), was bound to sell. And sell it did, along with a subsequent co-authored self-help book (King & Carreras, 2005) and a “survival guide” geared toward female partners of men on the Down Low written by King's former wife (Browder & Hunter, 2005). The anxiety and anger, resulting from the discovery of this “new” phenomenon, inspired a proliferation of writers and bloggers to recommend (and sell products on) ways to identify men on the Down Low and how to act when a woman suspects her partner of secretly engaging in sex with men (e.g., Nubia, 2005; Scott-Blanton, 2005; http://gaylife.about.com/cs/mental_health/1/qt/dltip.htm; http://users.aol.com/cheatingsigns/page_35.html).

From the very beginning, the popular construction of the “new Down Low phenomenon” was fraught with complexities and contradictions. First, a clear and consistent definition of the “Down Low” has been noticeably lacking. The term arose in African-American vernacular to describe any sort of “secretive” behavior. In the late 1990s, the term was heard in rhythm and blues songs as an indicator of male infidelity (e.g., R. Kelly's 1996 classic, “Down Low (Nobody Has to Know)”). The term also appeared in other forms of pop culture, primarily in Black male rap songs, as a marker of a man “keeping his business to himself.” The sudden ominous image of a “straight” Black man engaging in “secret” sexual activity with male partners was a relatively new and more limited characterization of the Down Low (Boykin, 2004). Along with the construction of this phenomenon, men started to adopt “Down Low” (or “DL”) as an identity label, used, for instance, in self-descriptions in personal ads on the web, where DL indicates both a desire for privacy as well as a marker of masculinity and sexual prowess.

Additionally, the recent construction of the “Down Low” has been yet another portrayal of bisexuality as a “new” concept, similar to *Newsweek's* “discovery” of “Bisexual Chic: Anyone Goes” (1974) over 30 years ago. Although the existence of male and female bisexuality has been well-documented across cultures since antiquity (Cantarella, 2002), the “Down Low” was portrayed as a new phenomenon. However, the cyclical erasure, stigmatization, re-erasure, and restigmatization of bisexuality, particularly among men, is hardly “new” (Angelides, 2001; Yoshino, 2000). As opposed to media depictions from recent decades, however, this time bisexuality was not exposed as a glamorous trend among pop stars and supermodels. Rather, it was a shameful “secret” which put innocent people (women in particular) at risk for disease and death. Indeed, the Down Low was suddenly exalted by some to the status of the “driving force” of the HIV epidemic in the Black community. Oprah, in her TV show, explicitly linked the Down Low phenomenon to HIV transmission, as did the report in the *New York Times Magazine*. Although Down Low men seem useful scapegoats for the disproportionately high prevalence rates of HIV among Black women, any direct empirical evidence regarding the role

of the Down Low phenomenon in the HIV epidemic among African Americans is lacking (Millett, Malebranche, Mason, & Spikes, 2005). Also, research on Black male bisexuality and its associations with HIV transmission has not yet adequately described the complexity of these men's sexual behaviors and associated risks, for themselves and their partners.

Last, current discourse surrounding the Down Low suddenly characterized “secretive bisexuality” as being all but exclusive to Black men. Interestingly, classical studies of bisexuality in the United States focused heavily on White men and women. When acknowledged at all, early images of the potential role of a “bisexual bridge” from bisexual male to (presumably heterosexual and monogamous) female partners also promulgated the stereotype of the “white picket fence,” i.e., the White, married man as a vector of disease transmission (Miller, 2002). The current public discourse on the Down Low has brought with it an abrupt about-face in terms of racial/ethnic focus. This has resulted in renewed demonization not only of bisexuality but of Black male sexuality (cf. Lewis & Kertzner, 2003). Malebranche (2007) notes, “Demonizing Black male sexuality has been a staple of American culture since slavery, where our role was to work and breed, and the Mandingo stereotype of a hyper-sexual Black man with an insatiable appetite for White women was created...we distort the truth about HIV in the Black community to divert our attention from the real ‘down low’ issues of oppression, racism, low self-esteem, sexual abuse, substance abuse, joblessness, hopelessness, and despair.”

Interestingly, Latino men have also been removed from current discourse on the “new Down Low phenomenon,” although they have also been found to have relatively high rates of male bisexuality along with relatively low rates of disclosure to female partners. Research focusing specifically on Latino bisexual men, broadly understood here as men of Latin American descent who live in the United States, is somewhat more developed than research on Black bisexual men. Even prior to the HIV epidemic, a body of research on bisexual behavior among Latino men emerged from social scientists working within Latin America and the Caribbean. Ethnographic studies have shown that Latin American bisexual men face unique issues in the construction, expression, and experience of their sexualities (Aggleton, 1996). For example, Carrier (1985) and Taylor (1978) found that the system of categorizing same-sex experiences among bisexually-active Mexican men is determined by whether the individuals assume the “male” or “female” role during sexual activity (penetrating or being penetrated). De Moya and Garcia (1996) found similar relationships between masculinity and bisexuality in the Dominican Republic. In the Brazilian context, Parker (1991, 1996, 1999) suggested that the “object” (male or female) of one's sexual desire may be less significant in the subjective construction of one's sexuality and that a relatively high erotic value is placed on a certain amount of flexibility in sexual encounters.

As with Black men, since the advent of HIV/AIDS, the study of Latino male bisexuality in the United States has been strongly linked to the emergence of the epidemic. Some researchers attempted to transpose new labels onto Latino bisexual men in the United States with little theoretical basis. For example, Fox (1996) proposed a separate and distinct typology of “Latin bisexuality,” defined as “male individuals who take the insertive role in anal or oral sex with another man, and consider themselves heterosexual” (p. 36). This typology reflects a stereotypical representation of particular sexual behaviors and does not account for any of the complexities of Latino male bisexuality and potential relationships between ethnicity and sexuality. Still, research on homosexually- and bisexually-active Latino men has indicated that familiar Anglo-American categories of sexual orientation are culturally specific and that their imposition on Latinos is problematic (Muñoz-Laboy, 2004; Muñoz-Laboy & Dodge, 2007).

It is for these reasons that we have attempted to critically re-examine Black and Latino male bisexuality in this special section of *Archives of Sexual Behavior*. We have sought to contribute

to a new knowledge base, not just focusing on the “new Down Low phenomenon,” but on bisexuality among ethnic minority men in general. While bisexuality itself has been given scant attention in the scientific literature, Black and Latino male bisexuality deserves special attention. The recent Down Low dialogue has elicited many questions. Knowledge on ethnic minority male bisexuality is primarily anecdotal. While myths are spreading, perhaps with greater speed and voracity than HIV and other sexually transmitted infections, a scientific understanding of ethnic minority male bisexuality has lagged. In this special section, we have given special attention from public health and theoretical perspectives.

What is Known

Previous research focusing on the non-heterosexual practices of Black and Latino men has already established several tenants. First of all, the prevalence of bisexuality has been found to be considerably higher among these men in comparison to their White counterparts. Rates of behavioral and self-identified bisexuality in large samples of men who have sex with men (MSM) have varied widely (around 10–44%) but have been consistently found to be highest among ethnic minority men when compared to other men (Heckman et al., 1995). In large comparative samples of Black and White MSM, Stokes, Vanable, and McKirnan (1997) also found that Black men were significantly more likely to estimate their peers as engaging in bisexual behavior (48%) than were White men (27%). Black men in these samples were more likely to view bisexual behavior as normative despite their strong feelings that same-sex behaviors were not tolerated within their communities. Scientific information regarding the social, sexual, and risk factors associated with relatively common bisexuality among ethnic minority men has been slow to develop.

Black and Latino MSM (MSM being used here to indicate both men who exclusively have sex with other men as well as men who have sex with men and women) have also been found to be less likely to identify as “gay.” As Millet et al. (2005) reported in an extensive review, these men are not only less likely than White MSM to identify as gay, they are also less likely to join gay-related organizations and read gay-related media. This discrepancy between behavior and identity was convincingly illustrated by findings from research carried out in New York City that received a significant amount of media coverage. This study showed substantial differences between straight-identified MSM and gay-identified MSM (Pathela et al., 2006). In this sample, straight-identified MSM were much more likely to report belonging to minority racial or ethnic groups than the gayidentified MSM (62% vs. 28%). The straight-identified MSM were also much more likely to be married.

Black and Latino bisexual men have also been found to be less likely to disclose their same-sex behaviors, particularly to female partners. Studies that have examined disclosure of bisexuality among these men have found that relatively few (between one-tenth and one-third) disclose (Doll & Beeker, 1996; Kalichman, Roffman, Picciano, & Bolan, 1998; Montgomery, Mokotoff, Gentry, & Blair, 2003). Several reasons have been mentioned for the ethnicity-related discrepancy between identity and behavior and the limited self-disclosure. It has been suggested that ethnic minority men see the gay culture in the United States as a White, and sometimes also as a “feminine,” phenomenon, which is difficult for them to identify with. Added to this is the racism that ethnic minority men report to experience in the gay community (see, e.g., Han, 2008). Another reason is the idea that one would have to play down or give up one's ethnic background, including the social support coming from one's ethnic community; one's ethnic community and the gay community are rarely compatible. A third, crucial factor is the strong lack of acceptance of bisexuality and homosexuality in Black communities that several researchers have noted (e.g., Fullilove & Fullilove, 1999; Ward, 2005).

The actual picture seems to be more complicated. Using responses from almost 7,000 Blacks and 43,000 thousand Whites in 31 surveys conducted since 1973, Lewis (2003) demonstrated that despite greater disapproval of homosexuality among Black persons. Blacks' opinions on sodomy laws, gay civil liberties, and employment discrimination were quite similar to Whites' opinions. Blacks are actually more likely to support laws prohibiting antigay discrimination. Controlling for religious and educational differences, Lewis found that Blacks remain more disapproving of homosexuality but were moderately more supportive of gay civil liberties and markedly more opposed to antigay employment discrimination than were Whites.

It is likely that the strong association between masculinity and heterosexuality makes it difficult for ethnic minority men to openly explore same-sex sexual desires and develop a bisexual or homosexual identity. The strong association between masculinity and heterosexuality in Black and Latino ethnic minorities should not be understood as an essential link, because they cannot be seen independently from the social position of ethnic minorities (Malebranche, 2003).

The Public Health Context

Although bisexuality in Black and Latino men warrants attention in itself, the HIV/AIDS epidemic gives it a specific context that cannot be ignored. In fact, almost all studies reported in this special section have been done in the context of HIV/AIDS. It is well known that HIV continues to disproportionately impact the Black community in the United States. The highest rates of HIV infection are currently found among urban Black MSM, with an estimated seroprevalence of approximately 30–50% (Centers for Disease Control and Prevention, 2006). Additionally, although they comprise only 13% of the total population, Black women make up 72% of current female HIV/AIDS cases and HIV infection is the leading cause of death for Black women between the ages of 25–34 years (Centers for Disease Control and Prevention, 2006). During 2001–2004, Blacks accounted for 51% of new diagnoses of HIV infections in the United States (Centers for Disease Control and Prevention, 2007).

This situation has begun to spark the public health interest in the United States in ethnic male bisexuality. Recent evidence has shown that, among Black men, the odds of being HIV infected were 30 times greater for men who have sex with both men and women (MSMW) than for men who have sex exclusively with women (MSW), whereas the odds for men who have sex exclusively with men (MSM) were 13 times greater than men who have sex exclusively with women (MSW) (Brooks, Rotheram-Borus, Bing, Ayala, & Henry, 2003). Odds for Latino men are similarly elevated. Thus, bisexual Black and Latino men are at significantly higher risk for HIV infection and transmission in comparison to both exclusively heterosexual and homosexual men.

In order to effectively address the HIV risk and prevention needs of ethnic minority men and their sexual partners, a deeper understanding of the ways in which bisexuality is experienced and expressed is necessitated. Since bisexual men have most frequently been categorized with exclusively homosexual men, most previous research on male bisexuality has focused on homosexuality with scant and questionable extrapolations made to bisexuality. Serious shortcomings and inadequate knowledge exist in regards to bisexual men's individual, social, and sexual lives, as well as subjective experiences of their sexualities.

Theoretical Perspectives

Although there is a great public health need for an in-depth understanding of bisexuality, there are several theoretical issues that have hardly been addressed, including the “existence” of male bisexuality and its potential contributions to health, beyond disease transmission. Bisexuality has received notably less scientific and theoretical attention than homosexuality in sexuality research (Angelides, 2001). Nevertheless, Kinsey and his team's pioneering

research on sexual behavior in the human male revealed that, in addition to exclusively heterosexual and exclusively homosexual individuals, substantial numbers of men reported sexual attractions and experiences involving both men and women (Kinsey, Pomeroy, & Martin, 1948):

Males do not represent two discrete populations, heterosexual and homosexual. The world is not divided into sheep and goats. Not all things are black nor all things white. It is a fundamental of human taxonomy that nature rarely deals with discrete categories. Only the human mind invents categories and tries to force facts into separated pigeon-holes. The living world is a continuum in each and every one of its aspects. The sooner we learn this concerning human sexual behavior the sooner we shall reach a sound understanding of the realities of sex. (p. 639)

Decades before Kinsey, others had already noted that bisexuality was a common and natural (if not inherent) form of sexual expression (Ellis, 1905/1942; Freud, 1925/1963). Such early theories were not without opponents who claimed sexual orientation to be an essentially binary (homosexual/ heterosexual) construct and espoused that bisexual individuals were confused, in denial, or deceptive in terms of their sexuality (e.g., Bergler, 1956). Despite current best clinical practice that characterizes bisexual, homosexual, and heterosexual orientations and identities as healthy and valid (American Psychological Association, 2004), skepticism of the “existence” of male bisexuality continues to weave its way into some current sexuality research, making a theoretical understanding of bisexuality even more complex and contested. Whatever the case, it is impossible for bisexual men to “not exist” and simultaneously be the “driving force” of disease transmission between “homosexual” and “heterosexual” populations; obviously, further scientific dialogue is needed.

Given the magnitude of the HIV/AIDS epidemic, and its profound impact on social structures and public health systems, an emphasis on the behavioral, social, and cultural factors associated with continued HIV transmission has been essential. However, an artifact of disease-focused research is that much of the contemporary knowledge related to the sexual behaviors of bisexual men has been constructed in the context of HIV. In fact, we would argue that in many health-related practice and research circles, the use of the term MSM (initially created to focus on behavior and not sexual orientation) has led to an absence of any recognition of bisexuality in the vast majority of this work and has instead led to a conceptualization of bisexual men as little more than a bridge for HIV transmission between homosexual and heterosexual individuals and communities. While this special section explicitly focuses on male bisexuality and sexual risk, we see a great need for non-disease-focused research on bisexuality and its potential positive and negative contributions to physical, mental, and social health. Thoughtful and insightful research on aspects of life other than disease and pathology in samples that are diverse in gender, ethnicity, and social class, as well as sexual orientation and identity, (as well as funding for such research) will hopefully ensure more accurate theoretical perspectives on bisexuality.

Terminology

HIV/AIDS prevention and research has led to the construction of several new labels that, even though the intention was to simplify, have potentially contributed to further confusion. Especially in relation to bisexuality, it is important to look at terminology used and the way terminology relates to actual phenomena (Dodge & Sandfort, 2007). Definitions of “bisexuality” vary widely across studies, most notably in terms of sexual behavior versus sexual identity. Also, one should realize that terminology is not always used consistently: the same label can refer to different phenomena and vice versa.

One of the first new labels that arose in the context of the HIV/AIDS epidemic was men who have sex with men (MSM) (Sandfort & Dodge, in press). It came into existence as an acknowledgment of the fact that not all men who engage in sexual activity with other men are exclusively homosexual and/or identify as “gay.” Especially in the context of HIV/AIDS, it was an important distinction. It is important to keep in mind, though, that except for a behavioral description, the term does not mean anything. We do not know how MSM see themselves or what their same-sex behavior means to them. Sometimes MSM is being used to include men who also have sex with women. This is confusing if it is not made explicit. We would rather prefer to use the acronym MSMW in this context, as we suggested to the contributors to this section: MSMW stands for men who have sex with both men and women and it is used interchangeably with “behavioral bisexuality.” A behavioral bisexual is an individual who, usually within a specific period of time, engages in sexual activity with male and female (and sometimes transgender) partners. Again, it is important to keep in mind that the acronym MSMW only refers to behavior: men can have sex with both men and women for a variety of reasons and in a diversity of contexts, while the behavior itself can have divergent meanings for the ones involved.

Behavioral bisexuals should be distinguished from self-identified bisexuals. The latter are individuals who use the word “bisexual” in regards to labeling their own sexual orientation, preference, and/or identity. Even though the concept of self-identified bisexuals suggests a more homogeneous category of people, this is not necessarily the case. While several studies usually remain on a descriptive behavioral level, finding out about meaning and contexts is crucial, in case one wants to reach these groups for prevention. Finally, while “bisexuality” is used in various ways, we prefer it to denote emotional and sexual attraction and involvement with members of both sexes, as distinct from exclusive emotional and sexual attraction and involvement with members of the other sex (heterosexuality) and of the same sex (homosexuality).

Contributions to the Special Section

In preparing this special section, we have assembled a diverse collection of research and theoretical perspectives on Black and Latino male bisexualities. The 11 articles collected here do not offer final answers; rather, they are first explorations into a relatively uncharted field. They present some provisional information about who the men in sexual activity with both men and women are, as well as their potential sexual risk behaviors. They all offer building blocks for future research and suggest directions for culturally appropriate interventions.

As an introduction, our own recent pilot research (Dodge, Jeffries, and Sandfort) offers a rich qualitative glimpse into the sexual and social lives of a sample of Black MSMW in New York City. In contrast to most current media stereotypes, factors related to the sexual risk, protective behaviors, and disclosure practices are offered in these men's own words. Observing that many studies fail to differentiate between Black MSM and Black MSMW, Wheeler, Lauby, Liu, Van Sluytman, and Murrill compared both groups on several demographic, health, and behavioral risk covariates. The differences that they identified strongly suggest to them a need for specific HIV prevention interventions for both groups. Siegel, Schrimshaw, Lekas, and Parsons more specifically looked at MSMW who do not identify as gay and also do not disclose their same-sex involvement to their female partners. In this pilot study, they observed in this ethnically diverse sample that unprotected sex was common, more so with steady partners than with casual partners, regardless of their sex. According to Siegel et al. their findings suggest that MSMW indeed may serve as a bisexual bridge for HIV and STD transmission. Lauby, Millett, Bodas LaPollo, Bond, Murrill, and Marks compared Black MSMW who reported being HIV-positive or negative, or not knowing their HIV status. They found that HIV-positive MSMW were much less likely to have engaged in unprotected sex with their main male or female partners than

HIV negative men or men who did not know their HIV status. There were no differences in level of protection with casual partners, again indicating the presence of risk of transmission.

The aim of the next two articles was to get a more in-depth understanding of sexual risk behavior among MSMW. Mutchler, Bogart, Elliot, McKay, and Schuster explored psychosocial correlates of unprotected sex without disclosure of HIV-positivity among HIV-positive African-American, Latino, and White MSMW. They found, among other things, that unprotected sex without disclosure of HIV status was more prevalent among men who were more exclusively homosexually-identified; they further showed that some correlates of unprotected sex are ethnically specific. Based on focus group discussions, Harawa, Williams, Ramamurthi, Manago, Avina, and Jones more specifically examined the role of substance use and abuse in same-sex sexuality of African American non-gay identified MSM and MSMW. For these men, alcohol and drug use seemed to facilitate the engagement in same-sex sexual activity, as well as unprotected sex. Their findings further suggest that some men in treatment for substance abuse first might have to come to terms with their bisexuality before they can successfully address their addiction.

While these contributions aimed at understanding the population and their sexual risk behaviors, Williams, Wyatt, Liu, Rivkin, Ramamurthi, and Li evaluated one of the few HIV prevention interventions specifically focusing on HIV positive African American and Latino MSM and MSMW with histories of childhood sexual abuse. While their study suggests a short-term effect of the intervention, it also shows the difficulty of maintaining long-term behavioral change.

Other articles included in this special section adopted a wider perspective. Muñoz-Laboy, for instance, explored the meaning of the concept of familism and how it figures in the sexual regulation of bisexual Latino men. He demonstrates how familism, as defined by familial support, emotional interconnectedness, and familial honor, relates to sexual decisions of young bisexual Latino men. Padilla draws an even wider picture. While the attention to structural factors in the study of sexual risk behavior is increasing (e.g., Chakrapani, Newman, Shunmugam, McLuckie & Melwin, 2007), little work has been done on how structural factors actually shape sexualities of specific populations. Based on extensive ethnographic work, Padilla demonstrates how the tourism industry in the Dominican Republic structures the bisexual practices and meanings of male sex workers.

The final two articles do not present original empirical work, but attempt to integrate and evaluate existing research findings. Based on what is known about the development of ethnic and sexual identities, Wilson outlines a dynamic-ecological model of identity formation and conflict to explain bisexuality among some African-American men. Malebranche, in his prolific contribution, presents an in-depth discussion of what we know about bisexually active Black men, specifically focusing on the limitations of current public health research. Together with the suggestions from other contributors to the special section, Malebranche contributes to a solid research agenda related to bisexuality in ethnic minorities.

Conclusions

Based on the summary of papers in this special section, a number of subsequent research questions have developed. For example:

- (1) How might the use of network analysis impact our understanding of ethnic minority male bisexuality?
- (2) How might longitudinal studies on the development of bisexual behaviors and identities among ethnic minority populations (including an understanding of contextual

factors related to sexual behaviors) contribute to the knowledge base on ethnic minority male bisexuality?

(3) How do the individual, social, and sexual lives of ethnic minority bisexual men compare to and contrast with their majority counterparts, within the United States?

(4) How do the experiences and expressions of ethnic minority male bisexuality in the United States resemble or differ from ethnic minority men in other national cultures around the world? For example, in a social network sample of nearly 300 Roma (or “gypsy”) men in Bulgaria, Kabackchieva et al. (2006) found that 59% had engaged in sexual activity with both male and female partners in the past year. Rates of unprotected vaginal and anal intercourse in this time frame were even higher and 22% reported at least one sexually transmitted infection.

(5) How can we better understand the denial and stigmatization of male bisexuality, particularly in ethnic minority communities, and find successful points of intervention?

(6) How can we begin to understand bisexuality for its numerous potential contributions to health, beyond disease transmission and other negative consequences?

It is our sincere hope that these questions will be answered through future scientific investigations of male bisexuality.

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