TOPIC: MASCULINE GENDER ROLE CONFLICT AND ITS PSYCHO-SOCIAL CORRELATES: A STUDY AMONG HOMOSEXUAL MEN IN GHANA.

BY

YVONNE OTUABE OTCHERE

This Thesis is submitted to the University of Ghana, Legon in partial fulfillment of the requirement for the award of Doctor of Philosophy Degree

2013/2014 ACADEMIC YEAR
Declaration

I, YVONNE OTUBEA OTCHERE the author of this dissertation, do hereby declare that except for the reference of the work of other people which have been duly acknowledged, the work presented here was undertaken under supervision by me as a graduate student of the University of Ghana, Legon, 2012/2013.

This work has never been submitted in whole or in part for any degree in this University or elsewhere.

............................................................

YVONNE OTUBEA OTCHERE

The work has been submitted for examination with our approval

............................................................

Professor S.A. Danquah                Professor C. C. Mate-Kole

............................................................

Professor J. Y. Opoku                Dr. Adote Anum
DEDICATION

To all the young mothers and women out there..once there is a will.. there is a way! Impossibility is nothing!
ACKNOWLEDGEMENTS

This work would have never been completed without numerous help and support from many people. Firstly, I thank God Almighty (JESUS CHRIST). He who has begun a good work would bring it to a perfect end. Secondly, I am highly indebted to my supervisors. Your love for hard work and perseverance is what has brought me this far. Specifically, I want to thank my Head of Department and clinical supervisor, Prof. C.C. Mate-Kole. “Hard work always pays off” you would always reiterate. I thank you for the good and guided clinical experience I have attained under your able supervision. Sir, I deem it an honour to have been your student. Truthfully, you are a great and selfless mentor indeed!

I want to thank my mother, Charity Obeng for paying for my Phd fees to prevent me from deferring the programme. Maa this is the result of your long years of sacrifice!! I thank my Dad (Hon. Godfried Otchere, Former Member of Parliament for Ayensuano Constituency) for your encouragement and dedication to education. “If I die, they can take all the properties but not your education Ama” you would always retort. Thanks because these words have cautiously guided my dedication to research and continuous studies.

I thank my Phd colleagues and Mphil clinical students (Martha, Beatrice, Dzifa Monu, Seth etc)... Doc! Doc!! you would always tease. I thank you all... may we excel wherever life finds us all...

I also thank my Husband, Salim Nelson of CSIR and Reverend Gracer of Dominion University. I thank Prof Anarfi (ISSER), a humble and affable scholar in deed! Thanks for the books and literature on sexuality. God bless you!

This research would have been a dream without the responses from homosexual men. Thank you for your time...you are a true psychological experience not a misnomer as some
researchers believe. I thank all my study participants and gay research assistants (Steven and Fred). I also want to thank Vincent of PPAG for networking and gay contacts. I am indeed grateful to you all. God bless.
ABBREVIATIONS

MRC- Masculine/Male Role Conflict

MGRC- Masculine Gender Role Conflict/ MRC- Male Role Conflict

PWB- Psychological Well-being

ATSPH- Attitude toward seeking Psychological Professional Help or psychological help-seeking behaviour (PHSB)

GID- Gay Identity Development

FRSP- Female sex-role preference

MSRP- Masculine/Male sex-role preference

BSRP- Both (male and female) roles sex-role preference

SRP- Sex-Role Preference

IPA- Interpretive Phenomenological Analyses

I - Interviewer

P - Participant

MSM- Men who Sleep with Men
Abstract
Building on current knowledge, the primary aim of the present study was to assess psycho-social correlates of Masculine Gender Role Conflict (MGRC) among homosexual men and to posit and test a model by which the variables (psychological well-being, gay identity development and attitudes towards psychological help seeking behaviour) are related to MGRC. Guided by the Male gender role conflict theory, survey and interviews were used to collect data from 175 homosexual men. The data analysis methods used in the present study includes: descriptive statistics, *pearson r* correlation, regression and the Interpretative Phenomenological Analyses (IPA) to elaborate understandings on the relationships among the variables of interest.

Correlation analyses revealed that high scores on MGRC were associated with positive attitude towards seeking psychological help. Also, high scores on MGRC were associated with fewer problems with anger, anxiety and depression among homosexual men. On the contrary, Africentric coping strategies could not moderate the relationship between MGRC and psychological well-being. Consequently, no mediation path was detected between gender role conflict and Gay Identity development with, sex-role preference as a mediator variable.

Data derived from the qualitative analyses suggest that homosexual men in the present study experience stressors associated with MGRC. However, the results showed that collective coping in terms of sense of sexual identity was more recognizable among homosexual men. Therefore, the present study suggested a contextual model to better understand Masculine Gender Role Conflict among homosexual men in Africa.
Table of Contents

Declaration ............................................................................................................ i
Dedication and Appreciation .............................................................................. ii
Abbreviation ........................................................................................................ iii
Table of Contents .............................................................................................. iv
Abstract ............................................................................................................... v

Chapter One
Introduction ........................................................................................................ 1
Statement of problem ......................................................................................... 10
Aims and Objectives ......................................................................................... 11
Rationale for study ............................................................................................ 12

Chapter Two
Theoretical Framework ......................................................................................... 14
Review of the literature ...................................................................................... 29
Statement of Hypotheses ...................................................................................... 43
Operational Definitions ....................................................................................... 44

Chapter Three (Study One)
Methodology ...................................................................................................... 49
Population/Sample .............................................................................................. 50
Materials/scoring ............................................................................................... 51
Demographic data ............................................................................................... 52
Pilot Study .......................................................................................................... 56
Procedure ........................................................................................................... 57
Ethical Considerations ...................................................................................... 58

Chapter Four (Results for Study One)
Distribution of data .......................................................................................... 59
Statistical Analysis ............................................................................................. 61
Discussion of findings ......................................................................................... 68
Limitations of Study 1 ....................................................................................... 86

Chapter Five (Study Two)
Methodology ...................................................................................................... 89
Population/Sample .............................................................................................. 90
Interview Schedule ............................................................................................ 93
Data Collection procedure ................................................................................. 95
Data Analysis ...................................................................................................... 98
Methodological Rigour ........................................................................... 99
Ethical Considerations ........................................................................ 100
Results .................................................................................................. 101
Discussion ............................................................................................. 102
Limitations ............................................................................................ 154

Chapter Six
General Discussions ........................................................................... 156
Summary of results of Study 1 and 2 .................................................. 157
Implications of Study 1 and Study 2 ..................................................... 163
Significance of Study 1 and Study 2 ..................................................... 168

References ............................................................................................ 173
Appendices ............................................................................................ 197
Appendix A: Ethical Clearance .............................................................. 198
Appendix B: Questionnaires ................................................................. 199

List of Tables
Table 1: Distribution of data ................................................................. 59
Table 2: Correlation Matrix showing relationships between variables .... 60
Table 3: Hierarchical Multiple Regression for the moderating effect of Age on the MGRC and ATSPH relationship ................................................................. 62
Table 4: Hierarchical Multiple Regression for the moderating effect of Africentric coping on the relationship between MGRC and Psychological Well-Being ................................................................. 64
Table 5: Simple regression analysis on MGRC predicting Gay Identity Development (GIQ) ......................................................................... 66
Table 6: Simple regression analysis on sex-role preference predicting GIQ ......................................................................... 66
Table 7: Simple regression analysis on MGRC predicting sex-role preference ......................................................................... 67
List of Figures
Figure 1a ........................................................................................................... 23
Figure 1 ............................................................................................................. 45
Figure 2 ............................................................................................................. 45
Figure 3 ............................................................................................................. 46
Figure 4 ............................................................................................................. 84
Figure 5 .......................................................................................................... 174
CHAPTER ONE
1.0 Introduction

“The structure at the bottom of the male psyche is still as firm as it was twenty thousand years ago”

Robert Bly (1990, p.230)

Background to Study

Gender and sexuality

‘To be a man is to be masculine!’ Nonetheless, in semblance with most local adages, platitudes and clichés, this begins a journey of unraveling the mystery of what ‘manliness’ means to a different kind of men and how this affects their sexual orientation from a cultural perspective. In the light of the present dissertation, the reality is that for homosexual men socialized in a patriarchal society, the ‘rippling effect’ of a strong heterosexist definition, socialization and inculcation of masculinity on the physical, psycho-social, academic, and spiritual functioning cannot be underrated. This dissertation takes a different approach from the conventional scientific discussions on sex-differences, towards exploring within-group differences among a sub-population of men, from a cultural perspective.

Recent demographics depict that males in Ghana represent 48.8 percent of the total population and females, 51.2 percent (Ghana Demographic & Health Survey, 2012). Despite the disparity in numbers, males in traditional African societies hold considerable authority (Goode, 1992). According to “The Mirror”, a Ghanaian weekly newspaper, it is estimated that three (3) percent of Ghana’s population are homosexuals (The Mirror, Saturday, March 17, 2012). A collaborative report by the Ghana Aids Commission (2012) and Regional Institute of Population Studies (RIPS) estimates that thirty thousand (30,000) of Ghana’s population is Men who Sleep with other Men (MSM). In the light of the above, the demographic disproportion (where straight men outweigh homosexual men) provokes a basic question: why the significantly low percentage of homosexual population has not rather facilitated the appreciation of scholarly discourse on sensitive men’s masculinity and gender
role conflict issues in Ghana. There seem to be limited scientific exploration on the extent to which homosexual men in general construct and experience masculinity in Africa.

Thus, the purpose of the present study is to provide an empirical test of O’Neil’s (1981) male gender role theory by relating masculine gender role conflict to psychological well-being, psychological help-seeking and identity development among gay men in Ghana. More specifically, the current study seeks to test a moderation-mediation model.

Evidently, the African collectivist orientation is well noted to portray certain strong traditional beliefs, expectations, ideals, and endemic perceptions about masculine socializations and constructions of masculinity. For instance, some salient traits associated with masculine gender role tenets suppress men from identifying, accepting and seeking help to cope effectively with their affective issues (Kytle et al., 2003, Sheppard, 2003). In a typical African and Ghanaian context, these beliefs have evolved with symbolic representations of modernization, migration and urbanization, which in turn have negatively influenced gender roles to be more distinct (Ampofo, 1999; Dolphyne, 2000), thus, making it difficult to ignore the psychological implications of the entrenched gender role effects on men who decide to take on ‘reverse gender roles’. For homosexual men, one would have to contend with being a social male (gender identity) and then being a homosexual male (sexual identity) at the same time (Kimmel & Mahalik, 2005). This means that homosexuals as men in African traditional collectivist societies would have to adhere to the norms and values of male role expectancies while at the same time conforming to the rules and roles that define and govern their sexual identities. With these multiple and significant identities, there are likely to be discrepancies and distortions in cognition/belief and behaviour. The possible resolution is the male role conflict (MRC) for homosexual men. By indication some researchers have suggested that among the gay sub-culture, individuals (for example, a FSRP, i.e. feminine sex role preference participant) would have to ascribe to the indicators of masculine gender role expectations for males and also act out stereotypic and effeminate qualities of homosexuality
(Wade, 2005; Wright, 1993). It is possible that an intrapersonal conflict may emerge in such a situation.

In like manner, homosexual men may be cautious on exuding behaviours’ that are termed anti-masculine e.g. ‘feminine traits’ by a heterosexist society. This is because in traditional African societies, men are expected to be brave, less domesticated, courageous, domineering, amongst other noble traits (Shafer, Ratele, Strebel & Shabalala, 2007). Oftentimes, homosexual men may readjust their behaviours to match their individual sex-role stereotypes creating a distortion between their cognition/belief and behaviour. Homosexual men are likely to experience male role conflict because even within the gay sub-culture, homosexual men are reported to be more femipobic (fear of feminine qualities); often ridiculing other gay men who tend to exude feminine traits (LeVay & Valente, 2002).

Zamarripa, Wampold, and Gregory (2003) note that “the term gender role conflict has emerged as a description of how the adherence to rigid roles may result in psychological distress” (p.33). This suggests that homosexuals as “men” may find it difficult to dissociate from cognitive schemas or ‘rule of thumb’ of expected masculine behaviour for ‘socialized males’ which are gradually inculcated and performed during preteen stages (Davis, 1999). Any discrepancy between belief and behaviour may ultimately culminate into stress for homosexual men. O’Neil et al. (1995) argue that gender role conflict symptoms are expressed in four overlapping outlets. These include; the cognitive, affective, behavioural and the unconscious levels.

One major behavioural variable that seem to have influenced MGRC research in recent times is men’s attitudes towards professional psychological help-seeking behaviour (Berger, Levant, McMillan, Kelleher, & Sellers, 2005; Mansfield, Addis, & Mahalik, 2003; Tsan & Day, 2007). However, fewer studies have explored MGRC and psychological help-seeking behaviour and suggested significant relationships among homosexual men (Good & Wood, 1995; Galdas & Cheater, 2010; Malebranche, Peterson, Fullilove & Stackhouse, 2004;
Wade, 2009). Less scientific exploration seems to exist for homosexual men in Africa. Results of some studies suggest that the ideologies which the masculine tenet values seem to espouse are contrasting with psychological help-seeking behaviour for men (Addis & Mahalik, 2003; Berger, Levant, McMillan, Kelleher & Sellers, 2005; O’ Neil, 1995). More broadly, studies (e.g. Hayes & Mahalik, 2000; Simonsen, Blazina, & Watkins, 2000) have drawn a significant positive relationship between gender role conflict and increasing rates of psychological dysfunctions among homosexual men.

Fewer studies have explored MGRC and Gay identity Development relationships among homosexual men in Africa. Studies on Gay Identity Development suggest that homosexual men progress through different phases of identity development compared to their non-homosexual counterparts (Cass, 1979; Dank, 1971). Studies have suggested that gay identity development is related to psychological well-being (Brady & Busse, 1994; Dupras, 1994; Vincke & Bolton, 1994) and most studies have largely investigated how MGRC influenced psychological well-being and help-seeking behaviour (Blazina & Watkins, 1996; Sharp & Heppner, 1991). Interestingly, the MRC theory seems to suggest that the identity formation for homosexual men is crucial and inculcated through the rigorous processes of masculine gender role enculturation such as MGRC experiences for the traditional African man. The present study sought to go a step further by examining the existing relationship between MGRC and identity formation (gay) among homosexual men.

Consequentially, Male Gender Role Conflict (MGRC) may have a major contextual implication for homosexual men. For instance, by inference, the Ghanaian constitution highlights more on the criminality of male same-sex relationship than female same-sex relations and seems to offer legal provision for sexual behavior and sexual preferences but fails to mention some specific sexual orientations (Kramer, 2003). As a result, many homosexual men live mainly by gender identity as non-homosexual and by cardinal sexual
identity as homosexual men (Kiama, 1999). Therefore, the present study chose to focus on
the sub-population of homosexual men instead of females which is a topical issue.

Undoubtedly, most male milestone development is ingrained in the rudiments of
masculinity (Schwartzberg & Rosenberg, 1998). So then, in pursuance of knowledge, is
there any value in considering MGRC among homosexual men? In consideration, is it
possible that unconscious and less-than-recognizable suppressions concerning MRC might
incapacitate a man’s affirmed and culturally scripted desire to succeed in adhering to socially
desirable constructions of masculinity? Over time, several studies have documented and
acknowledged different psychological variables related to Male Gender Role Conflict (Brady
& Busse, 1994; Dupras, 1994; Vincke & Bolton, 1994).

Assessments of gender role traits among homosexual men

The literature on masculine gender role conflict for homosexual men is muddled with
theoretical disintegration and empirical findings on the varying kinds of strain minority men
encounter in the process of gender role performances (Brannon & Juni, 1984; Eisler &
Skidmore, 1987; O’Neil, 1986). However, in entrenched African societies, mutual
relationships are viewed within the context of marriage and procreation (Gyekye, 1996)
which are in conflict with the practices of homosexuality.

Interestingly, assessments of homosexual men on gender role traits and gender role
conflict have been varied. From nascent stages, studies suggest that pre-gay children are more
likely to experience gender role conflict because they tend to be gender non-conformists than
non-homosexual children (Bailey & Zucker, 1995; Gladue & Bailey, 1995; Hall & Kimura,
1995; LeVay & Valente, 2002). Comparably, homosexual men may experience more gender
role conflict than their non-homosexual counterparts because they are more likely to be
gender non-conformists during preteen and adult stages than their heterosexual counterparts
(LeVay & Valente, 2002). Interestingly, other studies contend that in a continuum,
homosexual men may exude a range of gender role traits (ranging from feminine to super masculinity) (Isacco, Yallum, & Chromik, 2011). For instance, Lippa (2000) reported that gay men were more likely to ascribe less masculine traits to themselves than non-gay men. In a follow-up study, Lippa (2002) observed that these gays were more likely to be gender non-conformists in even their selection of jobs and leisure activities.

Overall evaluation and synthesis of the cited studies and assertions seem to suggest that straight men/heterosexuals are studied and assessed using a ‘gender model’ whereas homosexual men are studied with ‘a gender-deficit model’. Homosexual men are assumed to be eliciting traits which are ‘socially unpresentable’ for which roles are therefore regarded as incompatible with their male identity. However, some research work have suggested that the use of ‘gender role deficit model’ as reason why homosexual males may experience Masculine Gender Role Conflict (MGRC) is too simplistic, suggesting that there are other factors that may account for gender non-conformity (Bem, 1974; LeVay & Valente, 2002). Such researchers argue that ‘the role suggestibility criteria’ which is used to designate male-sex role at one end of the continuum and fixate female sex role on the other end of the range, leads to polarized allocation of social roles; therefore identifiable covert and overt behaviour that fall out of scope of the positioned benchmarked roles are regarded as atypical and unacceptable (Bem, 1974; Wester, Pionke, & Vogel, 2005).

From the above scientific discourse on gender role assessments of homosexual men, Herek (1991) and Connel (1987) assert that a homosexual man’s representation of masculinity is a negation to the conventional hegemonic masculinity. Further, researchers have been interested in exploring possible relationships between masculinity among homosexual men to determine whether a direct relationship can be deduced from these constructs (Brady & Buss, 1994; Simonsen, 1998). Others contend that a vast distinction exists between ‘homosexual masculinity’ and ‘heterosexual-masculinity’ which is captured in varied culture-specific contexts (Ore, 2003).
The caveat is that the supremacy of heterosexual-masculinity may be incompatible with a genuine confederation with “homosexual-masculinity”. This is because the two constructs (i.e. heterosexual-masculinity and homosexual-masculinity) exist in competitive terms since it “can be read as affirmation of the perceived threat that the very existence of homosexuality poses to heterosexual masculinity” (Clarkson, 2006, p.194). MGRC have been touted as a critical tool for the achievement of psychological well-being in men, therefore the need to further explore the consequences of MGRC, both positive and negative, for gay men by examining how it affects their mental wellness, gay identity formation and psychological help-seeking.

In consonance with the above, researchers have been quick to tag male homosexuality as a ‘deficit in masculine identity’ (Nicolosi, 1997, p.70). By implication, homosexuality is incongruent with the traditional prescriptions to masculinity.

An overview of homosexuality and MGRC in Africa: a contextual perspective

According to Kiama (1999), the sparse research on homosexuality in Africa represents male same-sex relationship as widespread than often known. As a result, there may be within group sexual male exploration with other male partners, without necessarily acknowledging themselves as non-heterosexuals. The resulting effect is that because of the intrinsic family value system in African collectivist orientations (Gyekye, 1996), homosexual men may be in conflict trying to find the midline between gay behaviour and tenets of family system the African culture seems to espouse. For instance, Niang, Diagne, and Niang (2002) found that among Men who Sleep with Men (MSM) in Senegal, a greater percentage were bisexual men. There is some historical empirical evidence of male homosexuality among the Azande communities of Southern Sudan and in Uganda and Rwanda districts (Gervisser,
depicting homosexuality and constructions of masculinity as a part of the African cultural orientation for many centuries but remained less explored scientifically.

Besides, in Africa, existing norms and values about sexuality and masculinity seem to propose that young males are expected to be knowledgeable, experienced and adventurous regarding issues of sexuality and reproductive health concerns (Barker, 2000b). Contemporary studies on masculinity seem to suggest that there exist in the literature, a tabulated range of plural masculinities based on context, sexual orientation, etc (e.g. Chan, 2001; Connel, 1995; Nardi, 2000). Without question, other definitions seem to emphasize on a universal concept of masculinity by threading some similarities between Western and African masculinity (Brannon, 1976; Miescher, 2005). Masculinity has also been defined as male norms (Levant, Hirsch, Celentano & Cozza, 1992), masculine ideologies (Thompson, Pleck, & Ferrera, 1992), male sex roles (Bem, 1974; Pleck, 1976), and gender roles (Stroller, 1968; O’Neil, 1981), amongst others. Yet, sketching a thin line of distinction between ‘African masculinity’ and ‘Western masculinity’, studies placed versions of sub-Saharan African masculinity as transient and polysemous in definition and evolution of construct, suggesting a possible variation of the construct across varying ethnic cultures (Barker & Ricardo, 2005; Brooks & Good, 2001a).

In emphasizing specific cultures, in southern Ghana however, the remnants and traces of social construction perspective on masculinity is somehow mirrored among the Akan, Ga-Adangme and Ewe in their symbolic representation of the cultural and historical definition of masculine gender role dynamics and sexuality. Oppong, Oppong and Odotei (2006) argued that ‘though Ga-Adangbe and the Ewe are patrilineal, whereas Akan matrilineal, patriarchy is common to all three groups and informs gender relations and sexuality’ (p.42). With this background, this may be suggestive of the fact that gay adults in the coastal communities especially may not have been challenged so much by the existing confrontations with the norms and values of their ethnic masculine socialization. Rather, the patriarchal ideology on
masculinity and male sexuality (such as dominance, sexism, etc) may have served as a catalyst to promote homosexuality and specific ‘sex-role preference’ tendencies for men in these vicinities. Some researchers have suggested a cyclical relationship between patriarchy, sexism and homophobia (Dryneslines, 2009; Kimmel, 1994). This parameter is reinforced by the fact that in Ghana, patriarchy ideologies give men authoritative power in the sexual territory (Dodoo & Ampofo, 2001).

Somewhat related to the above ideas, in a strict comparative analysis, Miescher (2005) argued from an African perspective that becoming ‘a man’ in traditional African collectivist context did not evolve with colonization which then dissolved into a worldwide accepted gender role stereotypic categorizations. The above justification is based on the notion that the historical-cultural categorizations for homosexuality and masculinity identities in Africa have supported the superiority of heterosexuality and under-studied homosexuality-masculine dynamics. At the same time, there is societal pressure to conform to the culturally pervasive norms and values of traditional masculinity and there is outright condemnation if one violates these norms and values. Commonly, this occurs to men in general regardless of one’s sexual orientation, and homosexuals may not be immune to male role socialization effects in Africa.

Studies have further explored men’s challenging traditional notions of masculinity prescribed by society and the diversity of masculinities in Africa (Ampofo, 2001; Miescher & Lindsay, 2003; Morell, 2001). Although some men contend that they are born with androgynous hormones, some researchers in masculinity have argued that it is impossible to separate men from the rigid traditional roles prescribed by society (Pleck, 1995; Levant, 1995; O’Neil, 1986; LeVay & Valente, 2002). According to Ampofo (2001), from early childhood, Ghanaian males are socialized into conforming to gender stereotypic roles. By implication, the Ghanaian homosexual men as ‘males’, would first have to contend with different identities which include being gay and being male at the same time.
Germane to the discussion on gender-sexuality identity in Africa, studies contend that Ghanaian concept of masculinity is vastly influenced by customary gender ethics and morals (Dolphyne, 2000; Miescher, 2005). Overall, the present study would seek to contribute to the deconstruction of “identity based on gender essentialism” (Adu-Poku, 2001, p. 165). This means that the present study would contribute to the scholarly perception that constructions and attributions to gender may be more influenced by socio-cultural definitions than biological.

All efforts enumerated on sexuality and masculinity, albeit insufficient, are yielding some scientific intellectual discussions and results. Nonetheless, this present dissertation is sensitive to both structural/constitutional limitations on homosexuality in Ghana’s collectivist environment and to an individual homosexual perception of masculinity, and response to them. MGRC is a possible psychological variable that would emerge in the face of an alienating situation.

**Statement of the Problem**

The gap on Masculine Gender Role Conflict (MGRC) in the African literature on masculinity among homosexual men creates the need for timely research into the problem. This is supported by the fact that because traditional cultural orientation is dominant in Africa (Fagbemi, 1996), it is likely that gender-related concerns may have been under-estimated and therefore less explored scientifically. The problem is that “homosexual male communities have less rigid restrictions about...traditionally nonmasculine behaviours than the culture at large” (Schwartzberg & Rosenberg, 1998, p.269). As a result, intrapersonal and interpersonal conflict may emerge because, the Ghanaian and African communities are well known for the continual rigorous indoctrination of masculine socialization for males (Ampofo; 1999; Shafer, Ratele, Strebel & Shabalala, 2007).
Interestingly, Hyde, Krajnik and Skuldt-Niederberger (1991) suggest that males may tend to integrate more feminine characteristics into their masculine role formation as they grow. How true is this statement in homosexual males in the present study? Would MGRC be a potent variable among homosexual men in the present study at all?

Studies reviewed in the Western and African masculinity literature have examined bivariate relationships; however, none have posited and tested models of MGRC and its psycho-social correlates among homosexual men. The present study fills the gap in the literature by proposing a theoretical model that includes MGRC and its relationship on the psycho-social variables.

**The Aims and Objectives of the study specifically are;**

1. To posit and test a model by which these variables are related. Specifically;
   a. To find out if MGRC would correlate with psychological well-being.
   b. To determine the relationship between MGRC and psychological help-seeking behaviour.
   c. To determine the relationship between MGRC and gay identity development.
   d. To assess the moderating effect of Africentric cultural coping strategies on the relationship between Male Gender Role Conflict and psychological well-being.
   e. To assess the moderating effect of age on the relationship between Male Gender Role Conflict and Psychological help-seeking behaviour.
   f. To assess the mediating effect of sex-role preference on the relationship between Male Gender Role Conflict and Gay Identity Development (GID).
2. To examine the efficacy of applying a ‘psycho-social correlates model’ in determining Masculine Gender Role Conflict among homosexual men in an African context.
3. To describe the experiences of homosexual men in Ghana from a qualitative point of view.
Specifically, the second study sought to understand the following:

How homosexual men describe their experiences of MGRC in a broader cultural context.

How gays construct and define their own masculinity.

To explore cultural coping strategies adopted by homosexual men.

To explore goals set up for themselves and their partners on Gender Roles (Conflict).

Rationale of study

There are both practical and theoretical fundamental reasons for conducting the present study. From a theoretical level, recent research in men’s studies have argued that gay men, similar to heterosexual men, not only experience obligations to conform to socialized masculine ideals but also experience crisis directed towards strict compliance to these rigid, masculine qualities (Simonsen, Blazina, & Watkins, 2000). Therefore, it is only by exploring some of the masculine tags that an academic awareness can be created for destabilization of endemic stereotypic tags of masculinities and provide a channel for reformation of new constructs (Morrell, 1998a).

Specifically, the present study would seek to examine if MGRC from a cultural perspective is a potent variable for homosexual men in Ghana or rigidly a Western construct. Segall, Lonne and Berry (1998) assert that the complexity of human behavior is comprehended when viewed critically through the lens of one’s cultural settings in which the behavior occurs. Currently, the literature that spans this area in Africa is sparse. The concentration of literature on MGRC from western cultures is over-whelming. However, most of these studies concentrate on high school and college research participants with a few focusing on homosexual men. The western literature on masculinity neglects the influence of culture/context in explaining the present study’s psycho-social variables. Therefore, the present study seeks to serve as a basis for understanding the parameters for designing culturally-sensitive heterosexual-homosexual intervention paradigm/models.
From a practical perspective, this study is an initial attempt to address the gender role conflict controversies in the 21st century more thoroughly through an African lens by asking certain critical questions. Is the concept of masculine gender role conflict particularly and restrictively western? With most research explorations in western cultures, the GRC for men has not been rigorously tested and validated for African homosexual men. Would MGRC be needlessly relevant for Ghana?

To explore the scope of MGRC on the present study sample, nine personal interviews were included to assist in positioning ‘MGRC’ and masculinity in a wider context. The caveat is that a man’s opinion of his own culture may be rarely isolated from the varied institutional, intrapersonal, communal, family, and ethnic domains. Hence, the study sought to comprehend the conflicts, psychological dysfunctions and anxieties about MGRC from a qualitative experience. According to Wester, Pionke, and Vogel (2005), homosexuals are not obliged to perform traditional male expectations of behaviour and often do not conform to rigid male gender roles. How different is the present sample on these psycho-social variables?

To explore MGRC, a mixed method is employed. The areas to be covered include theoretical perspectives, relevant research in MGRC and its relations to psychological well-being, psychological help-seeking behaviour and gay identity development. A brief review of gender-sexuality and the MGRC construct as it has been conceptualized and assessed in the literature is also featured in chapter two. Chapter three presents a review on study one (quantitative study). Study one (1) of the current research work presents analytic procedure, results and discussions for quantitative analyses. The chapter four section presents study two (qualitative study) which indicates qualitative methodology, results and discussion. General discussions for quantitative and qualitative findings, implications and significance of the present study are discussed in subsequent chapters.
2.0 CHAPTER TWO

LITERATURE REVIEW

This chapter presents a review of the literature surrounding Masculine Gender Role Conflict (MGRC) among homosexual men. It includes a review of the literature that has facilitated the development of conceptual models in understanding Masculine Gender Role Conflict among homosexual men. This section also presents brief discussions on the historical antecedents of the construct (MGRC) and how the construct has been explored in the field of psychology, and review on the gender-sexuality dilemma from a multi-disciplinary perspective.

The Male Gender Role Conflict Theory (MGRC)

The Male gender role conflict theory was proposed by O’Neil, Good and Holmes, (1981a, 1981b, 1982, 1995). This theory assumes that anxiety and stress are associated with rigid adherence to traditional male socialization and norms as a consequence of males’ socio-cultural experiences. According to O’Neil et al. (1981) as a result of men’s experiences with masculine social stereotypes, they may acquire an illogical and self-defeating fear of non-adherence which on the surface makes them appear unfeminine in people’s eyes. Thus, males may be concerned about the negative effects of Male Gender Role Conflict (MGRC). The theory also indicates that the apparent crisis “emanates from deep emotional turmoil about masculine and feminine gender roles” (O’Neil, 1995, p.167).

Based on the Male Gender Role Conflict theory, it is assumed that gays are first males and then sexual orientation follows. At the base of the Femi-phobia (fear of feminine qualities) in the MGRC theory is the internalization of psychological templates of cultural prejudice and stereotypic ideas which reflects certain male characteristics as consistent with masculinity. This means that cognitive dissonance may occur because homosexual men are likely to experience conflict between the endemic psychological male gender role templates and apparent behaviour. The Male Gender Role theory has several implications for males and
most especially minority groups such as homosexual men. It aids in illuminating why homosexual men are tagged gender non-conformist and why they would experience MRC at all.

The Male Gender Role Conflict (MGRC) theory indirectly opens the door to seeing beyond a superficial thinking and a rationalist proposition. The MRC theory accepts that neither the individual psychology of males alone such as blaming parents’ socialization nor a boy’s lack of gender identification with his father resulting in malformed gender identity, is most attributable to homosexuality or formation of gender roles prescribed by society.

In findings derived from a meta-analysis, 232 empirical studies (1982-2007) that used GRC scale over 25 years revealed that the male role conflict theory contains social norms and value constructs that are broadly reflective of Gender Role Conflict-related performances in males (O’Neil, 2008). The research review concluded that Gender Role Conflict (GRC) was significantly predictive of men’s psychological and interpersonal problems. Typically, GRC is a widely researched construct in men’s studies and has successfully predicted relationships with a range of men’s health variables among western samples (Berger, Levant, McMillan, Kelleher & Sellers, 2005; Blazina & Watkins, 2006; Shepard, 2002). Kang’s (2001) study results showed lower scores on the GRC scale for social desirability responses.

Some confirmatory studies (Pleck, 1995; Mahalik, Locke, Ludlow, & Diemer, 2003; Wade & Gelso, 1998) have shown the GRC scale to exude predictive convergent validity with other widely used masculinity measures such as Brannon Masculinity Scale (BMS; Brannon & Juni, 1984), and Masculine Gender Role Stress Scale (MGRS; Eisler & Skidmore, 1987).

**Criticisms and Measurement Issues**

Indeed, O’Neil et al. (1986) in their seminal confirmatory analysis review on the GRCS-I emphasized that the instrument was designed to assess private gender role concerns.
Later, GRCS-II was developed and upgraded to ‘assess males’ gender role conflicts in specific gender role situations’ (O’Neil, 1986, p.335).

Obviously, the trend in gender role studies is one of “think masculine, think straight male” and this correlation has been confirmed by subsequent studies (Kvande, 1999; Levant, Hirsch, Celetano & Cozza, 1992; LeVay & Valente, 2002; Mahalik, Locke, Ludlow, & Diemer, 2003; Pleck, 1995; Thompson & Pleck, 1995). However, some studies have criticized O’Neil’s 37-item scale by arguing that it was specifically constructed to focus deliberately on the investigation of intra-psychic crisis that threatens the psychological well-being of males only (Klonoff, Landerine, & Campbell, 2000; Steele, 1997). Consequently, Klonoff et al. (2000) argued that the GRC measure tends to overshadow women’s gender role concerns and salient issues related to women’s gender role crisis. Employing secondary research observations, Worrell (2001) found that the four major domains of GRC had major discussions solely skewed towards males. Hence, minority groups had been deliberately sidelined on gender role conflict issues as if they do not experience gender role conflict at all.

The GRC scale has also been criticized for cross-cultural limitation. Moradi et al. (2000) criticized the GRC scale for its weak empirical validation and less exploration on sensitive populations from collectivist orientation. Additionally, the male gender role theory fails to explain why males who are not necessarily gay may defy communal normative principles about masculinity (Morrell, 1998; Yon, Jimenez & Valverde, 1998). According to Shafer, Ratele, Strebel and Shabalala (2007) and Ampofo (2001), such males/men who take on reverse social stereotypic sex-role are tagged among the Akan ethnic group as ‘obarima-obasia’ (feminine-man) or ‘kojo-obabesia’ (Monday male-born, exuding feminine qualities).

The Male Gender Role approach to exploring Masculine Gender Role Conflict (MGRC) in minority men tends to adopt a two-tiered perspective towards MGRC. Firstly, the theory places emphasis on the individual processes by adopting the ‘blame-victim-hypothesis. Then, the theory tends to be exogenous in scope, also laying blame on active socio-cultural
causal variables such as parents/caretakers. Despite empirical data that weigh this surveillance on men, the theoretical explanations seem largely unidimensional. Generally, the theory fails to acknowledge individual differences that transcend beyond cultures and gender. The theory ignores prominent and coalition effect of the socialization systems and human structures in churning human behaviour towards a specific direction. Aligning blame on males in general ignores a holistic evaluation and assessment of the whole situation. Interestingly, in exploring this theory, many questions are left unattended to. For example, why are homosexual men considered completely as gender non-conformists? Why do they then experience Male Role Conflict at all? Could there be other potent variables that add to this effect?

**Putting the male gender role theory to empirical test**

In O’Neil’s original (1981) study that explored the Male gender role theory, 527 undergraduate men, majority of whom were 19 years old, heterosexual, white, single and freshmen responded to the GRC questionnaire in two Midwestern universities (O’Neil et al., 1986). GRC was predictive of psychological well-being. There are however some grey areas in the findings of O’Neil. With a predominant white sample, generalization is highly restrictive. The use of young heterosexual participants only also limits the veracity of the theory. Results failed to paint a complete picture with regards to sexual orientation. However, findings of the study had implications for the present study. The present study sought to close the gap by employing personal interviews and a homosexual sample to observe the phenomenon amongst them.

Subsequent research work by Morton, Farris, and Brenowitz (2002) used the MRC theory with the aim of exploring male gender dysfunction on a sample of 655 male delinquents. The results supported Pleck’s (1995) and O’Neil’s (1981) assertion that males’ strict adherence to societal prescriptions have adverse implications for men and people
around them. A significant number of respondents scored lower scores on subscale five (5) depicting Masculinity/ Femininity on the MMPI-A, suggesting that this subscale was the highest predictor for the male delinquents.

Findings that lend credence to the Male gender role theory were conducted by Burn and Ward (2005). They examined traditional masculinity and relationship satisfaction for males and their female partners. The results revealed that the assertion that when men align themselves to rigid principles of masculinity, its effects are problematic first for themselves and then significant others. This means that men may be the first to have intrapersonal experiences with MGRC and then this may also reflect on their close associates or people within their cycle of interaction (interpersonal experience).

Other confirmatory studies using the gender role conflict theory for gay samples indicate that homosexual men do experience similar male gender role conflict patterns when compared to heterosexual men (Jones, 1998; Simonsen, Blazina & Watkins, 2000). Reviews on masculinity have recognized the theoretical and applied significance of the above research findings and have uniformly called for field investigations devoid of methodological and conceptualization inconsistencies (Dew, Brubaker, & Hays, 2006; Sanchez, Wesefeld, & Liu, 2010).

There is a drawback on the literature pertaining to the male gender role theory in discussing homosexual boys and pre-teen male development. The male gender role theory seems to suggest that the theory holds for older male adults than younger ones since the theory alludes to the fact that crises may occur after the socialization stage. Therefore, there is isolation and utmost neglect of “homosexual pubescence” (Corbett, 1998). Adolescence has been characterized as a stage of confusion (Lerner & Galambos, 1998). Thus, the need for the present study to widen the age gap by including adolescents from 16 years in the present study.
Most of the studies utilizing the male gender role conflict theory have focused on individualistic culture samples such as European-Americans. Klein (1993) and Worthington (2004) suggested that even when other conditions in the masculine gender role model are present and satisfied, multiple usages of the concepts in masculinity research may affect the consistency in findings.

So far, the studies explored seem to suggest that largely, heterosexual men are liable to Masculine Gender Role Conflict experiences. Less has been explored on homosexual men. It also reinforces the idea that ‘male gender role conflict hypothesis’ may be observed in straight men more than in homosexual men and possibly less applicable to men of other sexual diversities such as homosexual and bisexual men. It also strengthens the argument that the male gender role theory may not be a holistic and potent theory for explaining the crisis all males encounter in adhering to strict gender roles.

**The Gender Schema theory**

Sandra Bem (1981) developed the gender schema theory. According to the gender schema theory, individuals have cognitive elements/templates intrinsic to gender that influences their mental representations of the construct. Under ‘the influence of socialization, most children develop highly polarized schemata of masculinity and femininity, so that their perception becomes categorical that is either masculine or feminine but nothing in between’ (LeVay & Valente, 2002, p.184).

The gender schema theory tends to adopt a representation of theoretical elements in social construction, social learning perspectives and biological pre-disposition as well. Indeed, it employs a two-tiered approach to the workings of sexuality-gender role dynamics. Thus, the theory adopts “blame the internal individual processes and social forces for one’s apparent behaviour”. Does the theory imply that homosexual men have cognitive templates for storing atypical behaviours only? The theory fails to acknowledge the gender spill-over
effects that occur as a result of strict adherence to these mental polarizations of gender role attributes. In addition, the gender schema theory fails to explain how the ‘gender model’ and then the ‘gender-deficit model’ explain straight and homosexual men’s schema representation effects of gender role socialization.

The gender schema theory has several implications for homosexual men. It tends to depict homosexual men as products of inappropriate socialization processes, biological dispositions, ill–family structure, and inappropriate models of imitation. Superficially, the theory helps to explain why homosexual men tend to exhibit gender atypical behaviours from a much uncontaminated ‘tabula rasa’ stage to a stage where behaviour is a result of experience (learning-rewards and punishments) and perception. According to the theory, males are conscious of the effects of not modeling ‘acceptable behaviours’ and are therefore aware of the personal and psychological costs of boundary crossing.

Largely, this approach tends to be exogenous in approach by diverting attention towards external and situational factors as major determinant in the acquisition of the polarized gender role templates. Beyond this, the theory fails to acknowledge inherent and enduring characteristics which are intrinsic to individuals, which may transcend gender categorizations as well as the influence of other situational forces that compel males into specific social roles (LeVay & Valente, 2002).

Nonetheless, putting most of the responsibility on internal factors does not allow for a holistic exploration of the situation. Additionally, several questions may be left unanswered when this theory is employed. For instance, does the theory imply that African males may experience less MGRC than males of western/individualistic orientation? The theory seems to suggest that African males may have restrictive intrinsic templates for gender role performances.
Putting the Gender Schema theory to empirical test

Maccoby (1990) examined the gender schema theory in a study of heterosexual boys and girls. Results showed that the separation of male and female participants during childhood play was not enough to explain gender schema theory but suggested that other critical or third variables influencing the phenomenon were far more complicated than known. Maccoby (1990) argued that biological factor and ‘socialization effects’ affect different traits than the major cognitive template arguments posited by the schema theory. LeVay and Valente (2002) described these unknown factors as possible “third variable effects” on biological predisposition and socialization of children.

Research work has also complemented the schema theory with regards to sexual orientation. Daryl Bem (1996) in his study concluded that a minority of individuals who begin with atypical play preferences would be socialized to play with the opposite sex playmates, which ultimately causes them to be sexually attracted to persons of the same sex.

Reviews on gender-role non-conformity and sexual orientation have recognized the theoretical and applied significance of the theory and have uniformly called for field investigations comparing heterosexuals and homosexuals on the gender schema theory. Findings from the above cited studies have implications for the present study and may possibly help explain why African men may experience less Masculine Gender Role Conflict compared to their European counterparts. This may be as a result of clear gender roles distinction from pre-teen stages in Africa (Ampofo, 2001; Dolphyne, 2000).

Meek’s (2011) Masculinity Model-a modified contemporary approach to masculinity among minority men.

Current researchers have challenged the traditional theories on gender roles, calling for a holistic dimension to masculinity research exploration (Green, Bettinger, & Zacks, 1996; Meek, 2011). The Meek model on masculinity works on the premise that past or
present influences such as culture, psychological and developmental variables have an influence on a male’s perception of masculinity/gender role concept. According to the model, one’s perception of gender roles also determines the appropriate adoption of style of masculinity based on an evaluative cost-benefit analysis. According to the model, when the benefits of masculinity/gender role concept outweigh cost, then gender role perception is strengthened. However, based on the aims and objectives of the present study, the model was modified to reflect masculinity and coping among minority groups. Subsequently, in the adapted model, culture (socio-cultural) which represents a broader sub-gay culture and the context-specific culture (e.g. African collectivist culture orientation) tend to play a prominent role on a gay man’s personalized views on masculinity by influencing the analogy of cost-benefit analysis in the adoption of suitable individual private coping strategies.

Figure 1: Adapted Masculinity model (Meek, 2011)

Though a much more thorough and elaborative paradigm of men’s masculinity on a broader level, the theory fails to incorporate peculiar networks, which may be solely relevant to sexual minorities. The strength of the model is its ability to synergize the significant constituents such as gender role self-concept (of the MGRC) basic to males across cultures as proposed by O’Neil (2008).
Less empirical data exists to support the theoretical applicability and cultural relevance of Meek’s (2011) integrative model of masculinity across cultures and samples. However, Herek (2002) proposes that minority group paradigms like the gender theories evaluated above should concentrate much more on individualized /idiosyncratic constructions of gender-sexuality. This is because developmental formation for sexual orientations such as being gay or lesbian or transsexual may differ for some complex reasons. This is because every type of sexual orientation is unique and may evolve through different identity development formation.

Most of these theories fail to examine the contextual-interactive forces or “invisible hands” that seem to regulate behaviour in specific setting. Succinctly put by Silverstein (2006), a more comprehensive framework that addresses “all of the salient features of personal identity and social locations” (p.26) of sexual diversities is needed to comprehend the basic constituents of gender role concerns of minority men.

**Historical perspectives on Masculine Gender Role Conflict (MGRC) construct on males in Psychology.**

Males have always been participants of psychological research (Harding, 1991) but less scientifically investigated ‘men as males’ (Thompson, Pleck, & Ferrera, 1992). In retrospect, elements of research experience however have been based on straight men’s view of how gender should be investigated. This means that there may be a systemic bias in the definition and representation of gender which may be solely based on a heterosexual man’s perspective on how gender should be studied.

In the past, focusing on the differences between males and females (gender as a variable) and knitting into the myriad of differences/similarities between males and females, attention propagated by minority action drew focus on the recognition of ‘minority groups’ (Harding, 1991). Subsequently, research failed to focus on men as males and explored more
on the variations/similarities between masculine and feminine gender roles (Kvande, 1999). A thorough exploration and acknowledgement of men and masculinity received less attention until O’Neil’s (1986) and Pleck’s (1981) studies revived an empirical psychological research niche for its scientific investigation.

There is some early documentation of the construct (MGRC) among homosexual men in Freud’s (1920) libidinal transaction in the psychoanalytic literature before Pleck’s (1981) ‘The Myth of masculinity’ and O’Neil’s (1981) publications which suggested MGRC in men and homosexual men as a clinical symptom of ‘pre-oedipal and post-oedipal crisis’ and also a consequence of an inverse ‘autosexuality’ (especially for homosexual men). Freud (1957) made scientific observations that some clinical patients produced noticeable dysfunctional symptoms at a point when they begun to adhere to the achievement of socially oriented masculine ideals. He thus reports:

“Psychoanalytic work teaches that the forces which induces illness in consequence of success, instead of, as normally, in consequence of frustration, are closely connected with the Oedipus Complex, the relation to father and mother—as perhaps, indeed, is our sense of guilt in general” (p.331).

Then, O’Neil’s (1981) male gender role theory suggests that males who are involved in gender role performances from primary orientation may continue to struggle with discrepancies in self/identity and social gender role stereotypes. Later, O’Neil (1995) observed that external factors during pre-teen socialization stages may possibly affect gender role attitudes. Subsequently, O’Neil (2008) argued that stressors such as adhering to masculine ideology are projected into adulthood.

Consequently, males strive to meet the social regulations and rules. However, they are met with stiff opposition when they default in adherence to the ‘code of conduct’. Males therefore begin to channel these challenges into psychological defenses. This may culminate
into physiological and psychological wear out. For men, even in competing well to meet the stereotypes set by their fellow men, a paradox occurs. Men themselves become each other’s competitors (Leverenz, 1991). The tension is then directed within the ‘breed of men’ (Haldeman, 2006). In so doing, a power-structure of systems of multiple layers are induced; the successful man/ unsuccessful man, the heterosexual/homosexual, the normal/conflict man and the Africa man/the uncultured man. These are a cluster of dichotomies that depict and at the same time reinforce cultural perceptions of the ideal masculinity, that is ‘the complete/successful man’ or the much despised ‘incomplete/conflict man’.

Mintz and O’Neil (1990) also made similar observations with regards to Masculine Gender Role Conflict (MGRC) and its avoidance. Specifically, Mintz and O’Neil (1990) suggested that inflexible demands of masculinity may be incongruent with improper gender role performances which could also be the cause of dysfunctional conflicts in males and this could range from subtle to chronic effects.

Like Freud, O’Neil’s theorizations also provide an intra-psychic explanation of Masculine Gender Role Conflict (MGRC) by exploring the psychological domains (e.g. cognitive, affective, behavioural and most importantly the unconscious). Eisler’s (1987) theory on masculine role stress suggests that Masculine Gender Role Conflict could also crop up from the attitudes of parents towards their child’s early reward-and-punishment system. If parent react harshly to non-masculine behaviours for the boy-child for instance, the child may independently through self-evaluation substitute ‘non-masculinity’ with loss of support, which may result in unconscious strive to attain distinction between activities that gain parental support and behaviours that are detestable which may be detrimental to proper early childhood development. Eisler’s (1987) theory like O’Neil’s (1981) and Pleck’s (1981) theories also lay confirmation for the intra-psychic struggles and psychogenic scope of the Masculine Gender Role Conflict (MGRC).
However, much of the contemporary research work on Masculine Gender Role Conflict have spanned from O’Neil’s (1981) work on MGRC. O’Neil’s research was due to earlier thoughts based on the work of Pleck (1976) who asserted that “men fear and try to control women because they fear the feminine part of their own identity generated by their early attachment to the mother... and more generally because boys are socialized to be masculine by avoiding feminity rather than directly imitating male models” (p.159). Pleck’s original work theorized MGRC as a behavioural and personality disposition based on internalized precepts than external attributions. Pleck’s theory, like Freud’s psychoanalytic, O’Neil’s gender role conflict and Eisler’s gender role stress theories are suggestive of semblances of the oedipal crisis. Specifically, there is libidinal progression or fixation with a mother’s attachment. Due to inconsistencies in findings as a result of the narrow operationalization of the MGRC construct on males and measurement issues, O’Neil (1981) propounded a theory on MGRC.

Contradictions in Masculine Gender role conflict studies

Considering the plethora of theoretical orientations that span gender role literature, there are bound to be some rhetorical conclusions in theorizations. By implication, although other theorists contend that the term gender and sexuality orientation are in itself plastic and unstable (Butler, 1999). Others argue, there exists categorizations of ‘defective gender-sexuality’ and ‘normal gender-sexuality’ for instance, straight/heterosexual men are still the yardstick by which sub-groups such as women and homosexual, bisexual men and other diverse sexual orientations are measured and judged (Bennet & Royle, 2004).

There are arguments by which contradictions spring up in the gender and sexual orientation hypothesis. First, a broad focus and scientific emphasis on how unique heterosexual men’s gender role may result in less attention for minority group gender role experiences (Steele, 1997). Additionally, in performances of ‘gender-sexuality hypothesis’,
and in branding minority groups as different, homosexual men are suggestible tagged as incapable of performing and meeting adequately the optimal gender role requirements. Heterosexual males are therefore the litmus test for masculine gender role performances. This is also a contradiction.

Interestingly, Steele’s (1997) assertion depicts a one way position that can only be forestalled by an alternative standpoint theory. Thus, Creedon (1993a) argues the paradox occurs when the dominant group for instance heterosexual men attributes, are heralded in comparison to the marginalized groups (such as homosexual men). Mostly, the evolving change begins by the appreciation of sub-groups as beginning points from which to construct research methodology by seeking to explore the meanings in their distinct and in-depth experiences through a qualitative approach.

A review on gender role contradictions presents with arguments on “alpha” and “beta” bias. This highlights on the exaggeration of peculiar differences and the beta bias is underestimation of more salient differences between (straight) men and minority groups. Thus the labeling/tag of ‘femininity’ on minority groups (Hare-Mustin & Marecek, 1990) is also a term held for homosexual men. This reference extends to men of diverse sexual orientation (for e.g. bisexual men). Notably, this “femininity” out-group biases and stereotypes are identifiable even within sub-groups. In Alpha bias, this means that there is a likelihood that varying categories of men of diverse sexual orientation (e.g. bisexuals, gay men) are likely to be overlooked (as research participants) because ‘hetero-normativity’ which means attention to ‘the accepted, preferably normal, straight and perceptually masculine man’ as the appropriate object of study. Implicitly, beta bias depicts minimization of variations within the ‘male breed’.

The present study, from a minority group perspective, is a scientific call for better research approaches such as qualitative exploration devoid of ‘extraordinary masculine tendencies’ and alterations that would tell the ‘story of the sexes’ from a minority group
perspective and from an African lens. This is because in Ghana, open public discourses on sexuality are tagged as an outright desecration of conventional rules and culture (Mills & Anarfi, 2002).

In conducting psychological research, the social scientist should explore a multitude of existing paradigms to identify with a suitable one for the research. This in turn predicts the sequence of methodology and research layout to be adopted for investigation. Based on multiple perspectives, relevant divergent theories are synthesized for discussions in the present study. For instance, even though females or lesbians were not investigated in the present study, the adoption of homosexual-friendly and sensitive psychological measurements/instruments in a manner make it fall within the purview of “gender as a variable” perspective. Indeed, by employing quantitative and qualitative approaches to the investigation of homosexual men only, the study also takes a different perspective from conventional studies where straight men have been overly investigated in psychological studies. With this approach, minority men are given a tone of voice and stage where they can also contribute to their experiences in their mundane lives to the psychological literature, because it is often assumed they construct masculinity differently. Invariably, this threads in ‘gender as a dichotomy’ perspective where gay men are viewed as a males but different category of men to be explored and experienced scientifically. However, critics have cautioned that “gender as a dichotomy perspective” reinforces variations between masculine and feminine gender roles. However, not all persons seem to fit into this continuum. Homosexual men do not fit into this continuum (Lippa, 2000). Lippa’s study findings argued that homosexual men tend to score higher on the androgyny trait. This may suggest that homosexual men are neither masculine nor feminine. It is possible that homosexual men may possess a complex balance of the masculine and feminine gender role traits (Isacco, Yallum, & Chromik, 2011)
In summary, challenging the *status-quo* and advocating an eclectic approach to the study of gender roles among homosexual men also means acknowledging straight males and minority group gender role performances as different. Specifically, homosexual men gender roles experiences are unique and not simple. Therefore, they would need further in-depth research exploration.

**MGRC and Review of Related Studies**

**Masculine Gender Role Conflict (MGRC) and Psychological well-being**

A growing body of research work seems to suggest that men who endorse traditional beliefs about masculinity engage in less health-promoting behaviour and therefore have greater health risks than men who endorse less traditional beliefs (Cournoyer & Mahalik, 2000; Mahalik, Lagan, & Morrison, 2006; Mahalik, 1999a; Zamarripa, Wampold, & Gregory, 2003). However, there seem to be sparse research work on Masculine Gender Role Conflict (MGRC) for homosexual men in sub-Saharan Africa.

Thomkins and Rando (2003) examined heterosexual men aged 18 to 54 years, from Midwestern University in the U.S. They predicted a positive relationship between GRCS and Shame. The sample comprised 86.7% white/non-Hispanic. Amongst this sample, 44.5% were freshmen, 10.4% seniors and 8.4% graduated students. Instruments employed included the Internalized Shame Scale (ISS) and the GRC scale. Results showed a positive relationship between ISS scale and GRCS. More importantly, GRCS was predictive of self-reported shame which may in turn affect the psychological well-being of the participants. The sample of the study was university students. Therefore, the sample is not representative enough to draw conclusive evidence. The present study sought to go a step further by recruiting a sample with a wider demographic background.
The above study failed to identify two broad categories of MGRC outcome as identified in the male role conflict theory. These broad categories implied by the theory are help seeking behaviours and psychological well-being.

Subsequent studies made similar observations to Thomkin and Rando’s (2003) findings. In a comparative study of two different cohort groups and in an attempt to replicate Sharpe and Heppner’s (1991) study, Cournoyer and Mahalik (1995) explored levels of gender role conflict and different measures of psychological well-being in college and middle aged men. With a convenience sample, majority of the sample recruited were white men in the U.S. The sample size was 98 for adult men and 99 college men. Results indicated that college and middle aged men differed on GRC. Specifically, middle aged men reported lower scores on the success, power, and competition of the GRC subscale and scored higher on the conflict between work and family subscale than college men. Both scored less on restricted emotionality subscale and depicted less anxiety and depression but reported higher self-esteem, and high rates of intimacy. More specifically, age influenced the nature of the relationship between gender role conflict and psychological well-being, meaning, middle aged men with less gender role conflict had higher levels of psychological well-being than college men. This results show that age could be a mediating/intervening variable that could possibly explain the relationship between masculine gender role conflict and psychological well-being which the present study sought to explore.

Overall, the research concluded that their study findings support the classical study of O’Neil (1981) study which asserts that regardless of the lifespan stage of one’s development, strict adherence to male gender role produces dysfunction. The study is limited in terms of sample characteristics such as socio-cultural differences, age, socio-economic status etc. According to Blazina (2004), when gender role conflict occurs in one’s early life, psychological maladjustment may develop leading to psychological defenses manifested
throughout one’s existence. As a consequence, negative stereotypes may affect one’s masculine identity.

However, Stillson, O’Neil, and Owens (1991) made contrary observations to Cournoyer and Mahalik’s (1995) study. Findings from the study with a predominant unemployed sample and a diverse ethnic background revealed that there was no relationship between age and levels of GRC among college and middle-aged men. This finding seems to undermine O’Neil’s assertion that regardless of one’s age, strict conformity to MGRC would result in psychological instability.

Although findings of Good et al. (1996) study lend credence to the above cited studies (for e.g. Cournoyer & Mahalik, 1995; Sharpe & Heppner, 1991), mixed results were obtained. Good et al. (1996) sampled 130 college men from two university counseling centers. The aim of the study was to investigate the relationship between male gender role conflict and psychological distress. Measures used for the study included the GRC scale and the Symptom Checklist (SCL-90-R) to measure psychological distress in the sample. Though GRC was significantly related with psychological distress, contrary to expectation, anxiety was not predicted by GRC, which is inconsistent with prior studies. In a follow-up study, Good et al. (2004) using structural equation modeling found that GRC was not strongly associated with psychological stress. More interesting, GRC and problem-solving attitudes did not mediate psychological stress. Plausibly, the contrary findings may be due to the employment of more sophisticated statistical methods that reduced measurement error; also the use of an idiosyncratic sample may have influenced findings.

The limitations of Good et al. (1996) and Good, Heppner, Debord & Fischer’s (2004) studies include the measure used to capture psychological distress among the counseling center clients/participants that had some psychometric limitations. The use of a clinical sample in Good et al. (1996) study limits the generalizability of the findings.
Irrespective of the fact that a lot of researches have confirmed a relationship between GRC and psychological distress among heterosexual men (O’Neil, Good, & Holmes, 1995; Sheppard, 2002), Stillson, O’Neil, and Owen (1991), reviewing literature on MGRC revealed that a small non-significant canonical correlation existed between GRC pattern of success, power and competition and complaints about physical illness. With a typical sample of Latino descent from Hispanic-American and a small sample size of (n=21), the sample size was too small and the sample characteristics very limited to conclusively draw valid relationships among variables.

Interestingly, for most of the studies reviewed so far on MGRC, there were some ambiguities in findings. For instance, in the above cited Cournoyer and Mahalik’s (1995) study, it is not so apparent if the heterosexual men were exhibiting an internalized MGRC or simply those samples were passively showing a socio-cultural stereotype about masculinity and masculine role conflict. The question is, were they projecting their own needs about masculinity or they were just ‘playing the good subject’? Also, most of the studies reviewed in the present study failed to account on how the response sets and social desirability were controlled.

One weakness of the studies reviewed is their inability to engage and explore the inter-country and intra-country analysis of gender role conflict in different geographical boundaries but chose to focus on mixed race and a single race in one geographical boundary. Several factors could account for variation in results.

Despite massive western research work in this area, there is less information about gay men and masculinity in Africa. Majority of the studies on MGRC so far, have used other samples such as college students to the neglect of other sexual orientation (Harris, 1991; Robertson & Fitzgerald, 1992).

and its relationship to psychological distress and coping styles in homosexual men. The study employed existing data (secondary data) on GRCS, Coping Inventory for Stressful Situations, State-Trait Anxiety Inventory, and the CES-D scale. One hundred and thirty (130) participants were sampled. The study compared existing data on GRC to a non-gay sample from another study (Stillson, O’Neil, & Owen, 1991) with a sample size of 134. Results showed that there was no significant difference between the gay sample and the comparative group of non-gay sample on GRC subscales such as Success, Power, Competition and Emotional subscales. Findings also depicted lower scores on the Restricted Affection Between Men (RABBM) subscale and significant higher levels of scores on the Conflicts between Work and Family Relations scale for the gay sample compared to the non-gay sample. However, the study provides support for Sharpe, Heppner and Dixon (1995) study, who using heterosexual sample, found that over all, a non-significant relationship between GRC and psychological well-being. Only the Restricted Emotionality (RE) subscale was significantly related to the GRC.

Building on Jones’ (1998) study, Simonsen, Blazina, and Watkins (2000) explored the relationship between gender role conflict and psychological well-being. A sample of 117 participants were administered the GRC scale, the Attitudes Toward Seeking Professional Help Scale (ATSPHS), and the Hopkins Symptoms Checklist List (HSCL). Male gender role conflict was associated with anger, anxiety, and depression. Specifically, Success, Power, and Competition (SPC) were significantly positively correlated to symptoms of anger, anxiety, and depression. SPC also correlated positively with Conflict Between Work and Family Relations.

Plausibly, some reasons could account for the inconsistencies in the findings from the two gay studies. Differences in GRC subscales on Conflict Between Work and Family Relations and psychological well-being between Simonsen et al. (2000) and Jones’ (1998) studies might be related the nature or type of research designs employed in their studies.
findings. The differences in theoretical perspectives and research designs may have contributed to the incongruence in how the subscales or variables were defined as well as investigators’ decisions regarding what variables were included. Lack of assessment of pertinent variables is a concern in all areas of research and caution should be taken when evaluating non-comprehensive studies and when comparing findings across studies with discordant methods. While Jones (1998) adopted a mixed method (secondary and primary research approaches), Simonsen’s (2000) study employed a holistic field research. It is noteworthy that Shepard (2003) supports Jones’s (1998) study, which found that for gender role conflict and psychological wellbeing, single gay men reported more conflict with Restrictive Emotionality, which was correlated with anger, anxiety, depression, and lower self-esteem than partnered gay men. This is indeed significant and apparently has implications for the present study.

Sanchez, Westefeld, and Liu (2010) examined the relationship between traditional masculine ideals and negative feelings about being gay. Instruments used included the GRC scale, Lesbian and Gay Identity scale, Social Desirability, and questions related to the importance of masculinity. With an online survey sample of 622 self-identified gay men, the mean age reported was 36.81 and ranged between 18-80 years. The sample was well educated with about 79.1% with at least a bachelor’s degree and white majority (83.6%). The online results revealed that most participants valued the public appearance of masculinity and gays ideally wished to be more masculine than they presently felt. Additionally, multiple regressions showed that the degree to which gays valued masculinity and were concerned with violating masculine ideals was positively related with negative feelings about being gay. Results from the study had implications for the present study one and study two. The study validated the potential effect of how low MGRC could also suggest effective coping strategies among gay men. Other studies have also revealed that MGRC is significantly related to lower intimacy among gay men (Van Hyfte & Rabinowitz, 2001).
The use of online surveys by some studies (e.g. Sanchez, Westefeld, Liu, 2010) to explore gender role concerns among gay men may be problematic. The strength of online surveys/studies for hidden/sensitive populations is that it allows for a large collection of anonymous data that includes people who may not have volunteered in person for fear of stigmatization and possibly hate-crime. It also reduces researcher effects/bias on participants. However, research has highlighted on the skewed nature of online/internet usage for self-identification by minority groups (with low outness level) - as most of these ‘self-identifiers’ may choose this method of scientific investigation for fear of being stigmatized (Dew, Brubaker, & Hays, 2006). The weakness of the study is that self-selection bias is likely to exist because gay-oriented organizations were used to recruit sample. Another flaw of the online survey is that it does not make room for respondents to reflect on the items before giving responses. Another shortfall is that, the study combined the experience of gay, bisexual and ‘unsure’ men. In similar studies, researchers have failed to distinctly draw a salient line between homosexual and other sexual diversity samples (Cochran & Mays, 2000; Gilman, 2000; Gruskin, Hart, & Gordon, 2001; Sandfort, de Graaf, Bijl, & Schnabel, 2001).

**Cross-cultural studies on Masculine Gender Role Conflict (MGRC)**

In a cross-cultural study, Mahalik, Lagan, Hugh, and Morrison (2006) hypothesized that heterosexual men's health behaviors would significantly relate to their adherence to traditional masculine norms. Five hundred and forty-six (546) male college students (384 Kenyan men, 162 U.S. men) completed the Health Behavior Inventory and the Conformity to Masculine Norms Inventory. The Kenyan sample was recruited from three universities located in the capital city of Nairobi. Participants were all English speakers. Findings were quite interesting. Specifically, Kenyan males who endorsed traditional masculine norms were less likely to engage in health-seeking behaviours. Also, for Kenyan males, indicators of masculinity included the acknowledgement of fate and moving on without support from
medical expertise. This is consistent with studies among South-African sample where males who endorsed traditional masculinity, also correlated with risky sexual behaviours and less use of health care institutions (Sedumedi & Hauge, 2006). For the US participants, masculinity was unrelated to health and help-seeking behaviours. Masculinity from the perspective of the American sample consisted of a reduced likelihood to have a close friend or family member to talk to.

Results also showed that for the American and Kenyan male groups, the more masculinity was endorsed, the more involvement in not seeking professional help for emotional difficulties, ignoring health appointment, poor anger management and more risky sexual behavior. By implication, there are some universal scripts for masculinity. The role of cultural differences (collectivist and individualistic) between these two countries cannot be underestimated from such findings. The study’s findings (Mahalik et al. 2006) showed that African males were less likely to take proactive health checks such as checking of cholesterol levels than their American counterparts. Masculinity featured more in the Kenya sample as a psychological variable than in the US sample. Possibly, this is because traditional gender roles for Africans are more entrenched than the West (Fagbemi, 1996). The use of heterosexual sample to the neglect of homosexuals is a limitation of the study. The study lends support to Kimmel’s (2000) findings that nationality is a salient variable of investigation in masculinity studies. Measures used for the cross-cultural study were developed on US samples and not Kenyan samples, therefore raising issues on measurement of the construct. Procedures for data collection from the two countries were different. Whilst the US study employed an internet survey, participants from Kenya used the paper and pencil test. Sampling techniques employed were different for both countries: the sample for US was recruited from a biology class whilst the sample from Kenya was randomly selected undergraduate men. This raises issues of concern on the generalizability of findings.
A number of limitations are notable for the study. First, the study fails to engage in cross-cultural analysis of the status of homosexuals in MGRC worldwide but rather narrowly focused on a developed and developing country with two different cultural orientations, U.S. - an individualist culture that endorses individual/personal goals instead of group norms and Kenya, a typical collectivist culture which endorses unity, cooperation, harmony, spirituality, balance and creativity (Constantine, Gainer, Ahluwalia, & Berkel, 2003) and Africentric values. Here, it is indeed possible that geographical barriers as well as differential dynamics of these two countries and their barriers could affect findings. Ultimately, the inconsistencies in methodology of the study could affect results. The deployment of research assistants to translate the index may cause inconsistencies in data collection. Participant response set may be influenced by certain salient characteristics of research assistants.

Although cross-sectional studies are useful in understanding the correlation between variables of key importance, this design does not allow for establishing causal relationships (Polit & Hunglar, 1999). Most of the above reviewed studies (for e.g. Jones, 1998; O’Neil et al., 1995) failed to give a cultural interpretation to MGRC. To control for this weakness, the present study utilized a qualitative approach to solicit responses on the cultural interpretation of Masculine Gender Role Conflict (MGRC) among homosexuals in Ghana.

Observably, the paucity of evidence on MGRC studies in Africa may be due to the fact that the African tradition is more oral than literal. Secondly, it is likely that because masculine gender role concerns are considered stereotypically traditional, thus conservative, it may have been overlooked scientifically in the African literature. There is therefore a paucity of comparative quantitative and qualitative studies on masculinity among homosexual men. Yet a balanced assessment of the nature and extent of African MGRC and sexual orientation was vital for the present study.
MGRC and Attitude Towards Psychological Help-Seeking Behaviours

Among gay men, empirical supports have been found for a significant association between MGRC and help-seeking behaviour (Galdas & Cheater, 2004; Malebranche, Peterson, Fullilove & Stackhouse, 2004; O’Brien, Hunt, & Hart, 2005).

Consistent with the above findings, Berger, Levant, McMillan, Kelleher, and Sellers (2005) conducted a study that aimed at measuring the impact of traditional masculinity ideology and gender role conflict on men’s attitudes towards seeking professional psychological help. Results showed that rigid adherence to the traditional masculinity ideology and gender role was inversely associated with willingness to seek psychological help. In all, gender role conflict was inversely related to help-seeking behaviour although the relationship was weak, Restricted Emotionality subscale (RE) was the best predictor of men’s help-seeking behaviour.

Good and Wood (1995) investigated the relationship between gender role conflict, depression, and attitudes toward help seeking in men. In all, 397 college male students were recruited for the study. Instruments employed for the study included male gender role conflict scale, Attitudes Towards Men Scale (Downs & Engleson, 1982) depression scale (CES-D, Radloff, 1977), and attitudes toward seeking professional counseling scale. Results showed that male gender role conflict, more especially restrictive emotionality, was a strong predictor of depression and consequently negative attitudes toward seeking mental health services. Notably, all four factors of the GRC scale correlated positively and significantly with depression as measured by the CES-D scale. This shows that some domains of GRCS may be uniquely linked to psychological well-being and help-seeking behaviours. The study is by far limited to young adults. It would therefore be difficult to extend results to other cohort groups. The present study sought to bridge this gap by extending the age range from 16 years to 43 years.
Blazina and Watkins (1996) made similar observations of the above findings among a white sample in U.S. The study amongst others, explored the consequences of gender role conflict on the psychological help-seeking attitudes of 148 mostly white college male sample. The instruments adopted included GRC scale, the subscale State-trait anger expression Inventory of STAI, the Face Value Alcohol subscale (FVA), Attitudes toward Seeking Professional Psychological Help, Substance Abuse Subtle Screening Inventory (SASSI), Beck Depression Inventory (BDI), amongst others. Using canonical analysis, results specifically revealed that SPC and RE subscales of the GRCS were found to be significant predictors of the four GRC variables. In all, each of the four factors of GRC was significantly related to at least one index of psychological health. GRCS subscales were significant in predicting help-seeking attitudes. The study however failed to test a direct relationship between GRC and psychological well-being while the present study explored the relationship.

Building on the research gap in the above study by using a typical homosexual sample, Simonsen, Blazina and Watkins (2000) examined gender role conflict and psychological well-being in gay men. Specifically, Simonsen et al. hypothesized that gender role conflict would negatively correlate with attitudes toward seeking professional help. Gay men who reported lower levels of gender role conflict tended to be more open to seeking psychological help and therefore were likely to be less depressed, less anxious and less angry. However, findings also showed that high scores on GRC positively correlated with anger, anxiety and depression.

This finding also corroborated Simonsen’s (1998) study which found that gay men compared to their heterosexual counterpart did not vary with respect to MGRC and help seeking behaviour. More significant was the fact that average scores reported by the sample of gay men in Simonsen’s study on ATSPH was higher than help seeking scores for the non-gay sample.
So far, none of the studies reviewed explored the moderating effect of age on the MGRC and ATSPH relationship.

Simonsen’s (1998) study shows that extant literature has been consistent with the findings of MGRC and help seeking behaviour in men regardless of one’s sexual orientation. Some challenges to the linkage between MGRC and help seeking involve the fluid complexities of masculinities, mirroring how ‘masculinities and health behaviours connect in unique and contradictory ways’ (Oliffe, 2007, p.17) across boundaries and time.

Despite some documented patterns of different sample with diverse ethnicity in MGRC research, the present study failed to explore such links because identifying links is complex as discussions are likely to be inaccurate and only represent “crude shorthand” that superficially scratches the surface of cultural/ethnic background in Africa. Instrumentation is another factor that sets back generalization of findings across different races and cultures. Different measures have been used to capture gender roles and professional help-seeking behaviour across different cultures.

In summary, previous research on MGRC and attitude towards professional help seeking behaviour on homosexual and non-homosexual sample; have continually supported an inverse relationship between the two samples. However, higher scores on ATSPH have been recorded for gay men as compared to non-gay (Simonsen, 1999). This means that help-seeking may be operationally defined differently in the gay sub-culture. Therefore future researchers must design a gay-specific help seeking behaviour measure to capture their psychological help-seeking behaviour. This also implies that conditions that indicate help-seeking in gay sub-culture may vary from the norm.

Relying only on recall of Masculine Gender Role Conflict (MGRC) and attitudes towards psychological help seeking is especially difficult since it is impossible to verify their outcomes. One problem is that gay men may not be reliably open up and may be sensitive to certain items and therefore social desirability may set in. Some gay men may be influenced to
either under-report or over-report behaviours that would influence results. Also the use of some specific ethnic backgrounds (especially for the U.S studies) to the neglect of others might have influenced findings. In all, generalization should be cautiously explored. Some studies also cited computer-assisted methods as the mode of data collection which might have suggested an increase in reliability and validity of data obtained through self-report. However, no methods of ensuring reliability and validity of self-reported data were discussed for such studies. Also majority of the participants in the studies reviewed so far were inner city youth/participants, which limits the generalizability of findings to sub-urban or rural populations.

**Masculine Gender Role Conflict (MGRC) and Gay Identity development (GID)**

Brady and Busse (1994) in their seminal work developed a 45–item questionnaire to verify the Gender Identity scale. The researchers conducted a study to ascertain the Cass’s (1979) developmental gay identity theory. Results showed that psychological well-being was associated with the stages of gay identity development. Specifically, gay men who reported to be in the lower stages of identity development scored more on psychological distress than gay men who reported higher stages of homosexual identity development. This implies that therapists who engage in therapeutic interventions with their gay clients may be adequately informed about the corresponding stage of identity development and the intensity of therapeutic sessions required.

Malcolm (2002) found in a study of men who were involved in a Gay, Lesbians, Bisexuals and Transsexuals (GLBT) community that significant factors such as age was associated with the stage of homosexual identity formation experienced. Among the statistics presented, the average age of those who were in the lower stages of gay identity development (was 27.36 years). This means that homosexual identity development is not completed in early years but in adulthood.
The only work that directly focused on masculine role conflict and psychological well-being, help-seeking behaviour and gay gender identity development amongst other variables, is Simonsen’s (1998) study. In all, 87% of the study sample was predominantly Caucasian. The aim of the study was to determine if MRC plays a role in gay men’s psychological dysfunction. With a sample of 117 gay men from local gay organizations, using canonical correlation analysis, results showed that MGRC was associated to psychological dysfunction, help seeking behaviours, and internalized homophobia in gay men. Regression analysis also showed that GRCS subscale of restricted affectionate behaviour between men (RABBM) was a predictor of stage of gay identity development. More importantly, Gender Role Conflict was a significant predictor of Gay identity development. The limitations of the study include the possibility of social desirability since gays recruited for the study answered questions based on their own experience as gay men in a gay culture. Some variables such as MRC may be interpreted differently when compared to non-gay sample. Also results of study were compared with previous studies of non-gay data which does not give a direct and current picture of the occurring situation. The use of many separate regression analyses as reported in the study could lead to restricted control over experiment-wise Type 1 error, which could ultimately affect findings.

Also, gay men who scored lower MRC were associated with higher psychological well-being. As expected, gay men who scored higher levels of MRC tended to be less likely to seek help. It is important to note that less research work have been carried out to test the mediating effect of sex-role preference on the MGRC and GID relationship. In related studies, Jackson (1997) found that black men who are MSM and African men are more likely to adhere to one dominant hyper-masculine trait i.e. sexual role preference in order to fulfill heterosexual ideals of masculinity. MGRC was not explored and indicated in Jackson’s (1997) studies; however the results have immense implications for the present study. The
present study sought to fill this gap by exploring the mediating effect of sex-role preference on the MGRC-GID relationship among homosexual men.

Although some of the described studies reviewed so far are not primarily guided by theories, others were duly guided and directed by theoretical frameworks such as the gender development theories. Realistically, none of the paradigms encompass every identified potential features associated with MGRC in gay men.

Almost all of the studies reviewed are western studies. It is a great limitation and barrier to research on the effective comprehension of Masculine Gender Role Conflict (MGRC) especially among gay men in Africa. The literature on studies related to masculine role conflict and its associated variables of gay men in Africa is virtually non-existing.

In summary, as exemplified by the discussed studies, literature on the direct association between MGRC and gay identity development remains inconclusive as some researchers have not been able to find a direct significant association between them. It is possible that the lack of association may be due to design and measurement problems. More importantly, the lumping of men of diverse sexual orientation in one category is also to be blamed for such discrepancies. Much of the recent studies on MGRC still rely on instruments used in previous studies. The present study utilized O’Neil et al. instrument whose constructs are known to cut across diverse cultures, geographical boundaries and sexual diversities.

**Statement of Hypotheses**

1. There would be a significant positive relationship between Masculine Gender Role Conflict (MGRC) and Psychological Well-being.

1a. Africentric coping strategies would moderate the relationship between MGRC and psychological well-being.

2. There would be a significant negative relationship between Masculine Gender Role Conflict and Attitude Toward Seeking Psychological Help (ATSPH). More
specifically; homosexual men who score higher on the MGRC scale, would have a more negative attitude toward seeking professional psychological help than those who score lower on the MGRC scale.

2a. Age would moderate the relationship between Masculine Gender Role Conflict and Attitude Towards Seeking Professional Psychological Help seeking behaviour (ATSPH) for homosexual men. Specifically, older homosexual men may exhibit more positive attitude towards help-seeking behavior than younger homosexual men.

3. There would be a significant negative relationship between Masculine Gender Role Conflict and Gay Identity Development (GID) such that homosexual men who score higher on MGRC would be in the lower stages of gay identity development than those who score lower on MGRC.

3a. Sex-role preference would mediate the relationship between MGRC and Gay Identity development.

Definition of Terms

**Gay men/homosexuals** - participants between the age range of 16-45 years. Men who are sexually attracted to members of the same sex.

**Masculine Gender Role Conflict (MGRC)** – According to O’ Neil, Good, and Holmes (1995) it is a psychological condition in which adhering to socially prescribed masculine gender role norms have negative consequences on both the intrapersonal and interpersonal male functioning.

**Sex-role preference** - also referred to as ‘role played in homosexual relationship’. It involves playing social gender roles and reverse sex-roles where it is required that one same-sex partner takes on a pseudo-male gender role/functions and the other partner assumes a pseudo-female gender role/ functions in a homosexual relationship.
Psychological Well-Being (PWB) – as measured by the Hopkins Symptom Check List means that low scores on anxiety, anger and depression depict a good psychological well-being whilst high scores on the HSCL scale depict poor well-being.

Fig. 1, 2 & 3 represent: Proposed conceptual models to explain Psychological correlates of MGRC in homosexual men in Ghana.

Figure 1: Model depicting the proposed mediating effect of SRP on MGRC and GID.

Figure 2: The model shows the moderating effect of AFCI on the MGRC and PWB relationship. (Adapted from Baron and Kenny, 1986)
Figure 2: This shows the moderating effect of the AFCI on the relationship between MGRC and Psychological Well-Being. In Fig.2, AFCI can influence the Psychological Well-being directly as shown by arrow B or interact with MGRC to change the direction of the relationship between MGRC and Psychological Wellbeing.

Figure 3: The model shows the proposed moderating effect of Age on the MGRC and ATSPH relationship.

Figure 1, 2 and 3 presents hypothesized mediation and moderation models, showing MGRC and its psycho-social correlates would be examined in the present study. Some research work (for e.g. Baron & Kenny, 1986; Edward & Lambert, 2007; Fairchild & MacKinnon, 2009) have suggested that both moderating and mediating effects can be explored in a single research work. If mediator and moderator variables are not investigated, a more accurate explanation of direct relationships may be missed (Bennett, 2000).
Fig. 1 depicts the mediating effect of sex-role preference on the relationship between MGRC and Gay identity Development (GID). Figure 2 also depicts the moderating effects of Age on the relationship between MGRC and Psychological Help-seeking behaviour, and moderating effect of Africentric coping strategies on the relationship between MGRC and Psychological well-being. The above models for the present study is a brief adaptation of Meek’s (2011) eclectic model on masculinity and primarily, a summary of O’Neil’s et al. (1981) model on Masculine Gender Role Conflict. Guided by the psycho-social correlates of MGRC model in Figure 1, the present study sought to address the stated aims and objectives. A general framework for capturing both the correlational and the experimental views of a moderator variable is possible by using a path diagram as both a descriptive and an analytical procedure. Using such an approach, the essential properties of a moderator variable are summarized in Figures 2 and 3. This model diagram has three causal paths that feed into the outcome variable. Based on the conceptual model, several major propositions were identified.

1) First the model proposed that relationships exist between MGRC and Attitude Toward Seeking Psychological Help (ATSPH), Gay Identity Development (GID), Psychological well-being (PWB) directly through the arrow that linked them to the MGRC box.

2) Figure (1) presents the mediating effect of Sex-Role Preference (SRP) on the relationship between MGRC and Gay Identity Development is examined. For example, it is proposed that the relationship between MGRC and Gay Identity Development (GID) may disappear or substantially reduced after controlling for sex-role preference. Such an outcome would suggest that the effect of (low) MGRC on GID is mainly indirect through (a stabilized/high) SRP. A high/ stabilized SRP then becomes a mediator of the relationship between low scores on MGRC and Gay Identity Development. Additionally, MGRC may have a direct or indirect relationship
with Gay Identity Development through SRP (i.e. A to B to C, and A to C as shown in Figure 1). Such an outcome would suggest that MGRC only partially mediates the relationship between MGRC and Gay Identity Development.

3) The moderating effect of Africentric cultural coping strategies on the relationship between MGRC and Psychological well-being is also examined. The present study sought to ascertain whether high Africentric coping strategies would weaken the direct relationship between MGRC and PWB, or whether low scores on Africentric Coping Strategies would strengthen the direct relationship between MGRC and PWB. For example, using the model, MGRC and AFRC may have a direct effect on PWB but also the effect of MGRC on PWB may vary according to the Africentric Coping Strategies employed by the individual.

4) The moderating effect of the Age on the relationship between MGRC and Attitude Towards Seeking Psychological Help (ATSPH) was tested in Figure 3. Here, Age can influence the ATSPH variable directly as shown by arrow B or interact with the MRGC variable to change the strength or direction of the relationship between that variable and the ATSPH variable.

Guided by the above models, the present study sought to address the aims and objectives of the present study stated in chapter one.

3.0 CHAPTER THREE

METHODOLOGY
3.1 Introduction

This chapter presents the methodological approach that was used in the quantitative section of the present study. This section is divided into two parts. Study one presents a review of the quantitative method. Overall, the methodological procedure presented include: the sample, sampling technique, ethical issues, the measures that were used in data collection, procedure employed, data analyses, discussions, limitations and recommendations.

Research design

The primary methods of inquiry for the present study were quantitative (Study One) and qualitative (Study Two). The principal use of double approaches in research is known as triangulation of methods (Denzin & Lincoln, 1994) and has varied theoretical underpinnings. These include the complementary nature of data collected from the two sources and the validation of information sourced from one method against the other. The ultimate goal of the present study was to better understand and describe the experience of male gender role conflict among homosexual men in Ghana from a socio-cultural perspective. This lends credence to Gamson’s (2000) assertion that the techniques in ‘emic’ approaches are relatively concerned with cultural exploration and comprehension that provide an avenue for sub-populations who have been less explored in the African psychology literature on masculinity; an emphasis on a good fit between the qualitative research experience and the exploration of sensitive population (homosexual men) being addressed in the present study. In summary, the two methods for the present study (the survey method using a packet of questionnaires and personal semi-structured interviews) provide a rich outlet for understanding MGRC in homosexual men.

Participants
Participants in the present study were gay peer educators from diverse socio-economic backgrounds who had convened for a peer review meeting in Accra. Supplementary data were collected from the Accra-Tema Metropolis. Accra and Tema are cosmopolitan towns with various institutions and people from varied backgrounds residing in these localities. Therefore, this improves access to research participants and it makes research cost-effective as well. The age range of 16 to 45 years was chosen for the present study because according to Kramer (2003), adolescents and young adults are more prone to homosexuality in their bid to reduce chances of unplanned pregnancy during sexually active period of their lives. A total of five hundred and forty-five (545) questionnaires were distributed but due to incorrectly or partially filled questionnaires, only four hundred and seventy-five (475), representing 87.16% were received for analysis. However, out of the 475, only one hundred and seventy five (175), representing 36.8% were self-identified homosexual men. Three hundred (300) of participants, representing 63.16% were largely bisexual men and therefore were within the exclusion criteria. This means that the total sample used in the present study was 175.

The guidelines for testing R-square, or the multiple correlation, is \( N \geq 50 + 8m \), where ‘m’ is the number of independent variables and \( N \) is the sample size (Tabachnick & Fidell, 2001) was used to ensure the appropriate number of sample size, reasonable for revealing significance. According to the stipulated guidelines, the present study required a minimum of 82 participants. The sample size for the quantitative study was 175 homosexual participants. Purposive sampling method was used because with this method, research participants were located in organizations, groups, and in settings where they were more likely to be engaged in, according to Lincoln and Denzin (2000).

Inclusion criteria
Participants within the age range of 16 to 45 years and self-identified homosexual men were eligible to take part in the present study. The survey instruments and instructions were in English. Therefore, respondents were required to read and respond in English.

**Exclusion criteria**

Self-identified bisexual men were excluded from study participation and analyses since the focus of the study was on self-identified homosexual men. Data from participants below the ages of sixteen (16) and above forty three (45) were also not used in the analyses.

**Descriptive Analysis**

Descriptive statistics analysis of demographic variables of participants in this study was done and is presented in Table 1. The demographic distribution of participants indicated that 97.1% were males and 2.9% reported they were females (males but self-identified as females). Participants ranged in age from 16 to 43 years old ($M = 24.61$ years, $SD = 4.87$). Educational level ranged from less than SHS education (49.7%) to postgraduate education (2.9%). Also, majority of the participants reported they were Christians (80%) followed by Muslims (8.6%), and then traditional (8%). For level of outness, significantly, 14.8% indicated they lived in the closet, 34.7% reported somewhat out, 25.0% reported mostly out and another 25.0% reported completely out (see Table 1).

3.4: Table 1: Demographic characteristics of participants
<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sex</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Male</td>
<td>168</td>
<td>97.1</td>
</tr>
<tr>
<td>• Female</td>
<td>5</td>
<td>2.9</td>
</tr>
<tr>
<td><strong>Age (mean)</strong></td>
<td></td>
<td>24.61 (SD=4.87)</td>
</tr>
<tr>
<td><strong>Educational level</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Less than SHS</td>
<td>28</td>
<td>16.0</td>
</tr>
<tr>
<td>• SHS</td>
<td>87</td>
<td>49.7</td>
</tr>
<tr>
<td>• Bachelor's degree</td>
<td>35</td>
<td>20.0</td>
</tr>
<tr>
<td>• Graduate degree</td>
<td>15</td>
<td>8.6</td>
</tr>
<tr>
<td>• Master's degree</td>
<td>5</td>
<td>2.9</td>
</tr>
<tr>
<td><strong>Religion</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Christian</td>
<td>140</td>
<td>80.0</td>
</tr>
<tr>
<td>• Traditional</td>
<td>8</td>
<td>4.6</td>
</tr>
<tr>
<td>• Muslim</td>
<td>15</td>
<td>8.6</td>
</tr>
<tr>
<td>• Other</td>
<td>7</td>
<td>4.0</td>
</tr>
<tr>
<td><strong>Importance of religious belief</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Very important</td>
<td>84</td>
<td>48</td>
</tr>
<tr>
<td>• Important</td>
<td>43</td>
<td>24.6</td>
</tr>
<tr>
<td>• Minimally important</td>
<td>10</td>
<td>5.7</td>
</tr>
<tr>
<td>• Not important at all</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Marital status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Never married</td>
<td>117</td>
<td>66.9</td>
</tr>
<tr>
<td>• Married</td>
<td>35</td>
<td>20.0</td>
</tr>
<tr>
<td>• Separated</td>
<td>18</td>
<td>10.3</td>
</tr>
<tr>
<td>• Widowed</td>
<td>1</td>
<td>.6</td>
</tr>
<tr>
<td><strong>Sexual orientation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Heterosexual</td>
<td>16</td>
<td>9.1</td>
</tr>
<tr>
<td>• Homosexual</td>
<td>159</td>
<td>90.9</td>
</tr>
<tr>
<td><strong>Coming out process</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Most difficult</td>
<td>54</td>
<td>30.9</td>
</tr>
<tr>
<td>• Somewhat difficult</td>
<td>57</td>
<td>32.6</td>
</tr>
<tr>
<td>• Not difficult at all</td>
<td>42</td>
<td>24.0</td>
</tr>
<tr>
<td><strong>Where would you seek help</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Spiritualist</td>
<td>17</td>
<td>9.7</td>
</tr>
<tr>
<td>• Family</td>
<td>43</td>
<td>24.6</td>
</tr>
<tr>
<td>• Professional psychologist</td>
<td>25</td>
<td>14.3</td>
</tr>
<tr>
<td>• Pastor</td>
<td>22</td>
<td>12.6</td>
</tr>
<tr>
<td>• Friends</td>
<td>60</td>
<td>34.3</td>
</tr>
<tr>
<td>• Imam</td>
<td>2</td>
<td>1.1</td>
</tr>
<tr>
<td>• Others</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Relationship status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Single</td>
<td>59</td>
<td>33.7</td>
</tr>
</tbody>
</table>
- Attached 45 25.7
- Married 11 6.3
- Multiple partners 53 30.3
- Separated 3 1.7

**Role played in homosexual relationship**
- Male 59 33.7
- Female 56 32.0
- Both 48 27.4

**Family structure**
- Single parent 75 42.9
- Both parents 72 41.1
Other 24 13.7

<table>
<thead>
<tr>
<th>Number of males grew up with</th>
<th>2.83 (SD=2.06)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of females grew up with</td>
<td>2.66 (SD=1.84)</td>
</tr>
</tbody>
</table>

### 3.5 Measures
The questionnaire was divided into six main sections as follows:

**Sexual orientation identity**: Adaptations of the Kinsey sexual orientation scale (Kinsey, Pomeroy, & Martin, 1984) was used to assess sexual orientation. Participants were asked to circle a corresponding number to the label they attribute their sexual identity to. For purposes of the present study, the scale reflected a continuum of sexual orientation identities; 0 for complete homosexuals, 3 for bisexuals and 6 for complete heterosexuals.

**Gender Role Conflict Scale** (O’Neil, Helms, Gable, David, & Wrightsman, 1986). This measure has been validated for use with gay men (Wester et al., 2005). This measure consists of four subscales that assess the degree to which men experience internal conflict and concerns related to violating traditional masculine norms. The 13-item Success, Power, and Competition subscale assesses the degree to which a man emphasizes personal achievement and control-authority over others (e.g. “I worry about failing and how it affects my doing well as a man”). The 10-item Restrictive Emotionality subscale assesses the extent to which a man is uncomfortable with emotional self-disclosure (e.g. “I do not like to show my emotions to other people”). The eight-item Restrictive Affectionate Behavior Between Men subscale
assesses a man’s discomfort with emotional and physical affection with other men (e.g., “Affection with other men makes me tense.”). The six-item Conflict Between Work and Family Relations subscale assesses the distress a man experiences from balancing demands from work/school and family/leisure life (e.g., “My career, job, or school affects the quality of my leisure or family life.”). A four week test and retest reliability ranged from .72 to .85 (O’Neil et al., 1986). Each subject will have an overall MGRC score based upon summing the responses to the 37 items then dividing by 37. This will result in an MGRC score from 1-6. A higher score is predictive of the presence of MGRC. Respondents used a 5-point scale (From 1-strongly disagree to 5-strongly agree) to rate their agreement with each item where higher scores suggest more conflict and concern than lower scores. For the present study, the reliability coefficient for the GRC scale is 0.70.

**Hopkins Symptoms Check List (HSCL):** The HSCL (Derogatis, Lipman, Rickels, Uhlenhuth, & Covi, 1974) was used to obtain a measure of general psychological symptoms and problems. It is a paper-and-pencil task that requires its participants to rate how much they have been bothered by a variety of symptoms over the preceding two weeks. The responses are rated on a continuum from ‘not at all’ to ‘extremely’. The statistics based on a sample of 367 neurotic depressives and 432 heterogeneous outpatients reported on depression, anger, and anxiety portions of the checklist have a test-retest reliabilities of .81, .80, and .75, respectively. The HSCL asks respondents to rate how often they have been experiencing certain symptoms in the last two weeks, including today. A score of 1 is "not at all", 2 is "a little bit," 3 is "quite a bit" and 4 is "extremely". Examples of symptoms used for depression in the checklist include loss of sexual interest or pleasure and thoughts of ending your life. For anxiety, examples include nervousness or shakiness inside and feeling fearful. Lower scores on this scale indicate less depression anger and anxiety, while higher scores indicate more depression, anger and anxiety.

For the present study, the reliability coefficient of the HSCL scale is .92.
Attitude Towards Seeking Professional Psychological Help Scale (ATSPPH; Fischer & Turner, 1970): The scale is a paper-and-pencil task that contains 29 items about a subject’s general orientation toward seeking professional help for psychological problems. Responses are rated on a 4-point, bipolar, likert-type scale, ranging from ‘strongly disagree’ to ‘strongly agree’. Responses can range from 0 to 87, with higher scores indicative of more positive attitude towards seeking help. Higher scores on the ATSPPH are indicative of positive attitude toward help seeking. Cronbach’s alpha values ranging from .83 to .86 have been obtained for the scale. The scoring direction for items 17 to 29 is reversed in an attempt to discard response set distortion. For the present study the word ‘psychiatrist’ on the ATSPPH scale was replaced with psychologist to meet the goals of the study. For the present study, the reliability coefficient for the ATPSH is 0.90.

Gay Identity Questionnaire (Brady & Busse, 1994): This is a 45 question survey designed to identify gay identity development. Examples of true and false questions include ”I probably am sexually attracted to men and women” and ”I am openly gay with everyone, but it doesn't make me feel all that different from heterosexuals.” For research work that involved 225 gay men from a variety of situations such as bars, parks frequented by gay men, gay professional organizations, and psychotherapy practices with predominantly gay clients, Simonsen (1998) found an inter-item consistency for stages three, four, five, and six as discussed in Cass's (1979) theory of homosexual identity development. These consistencies are .76, .71, .44, and .78 respectively. Participants score one point for each statement marked true and zero points for each statement marked false. For the present study, the reliability coefficient is .71.

Africentric Coping Systems Inventory (ACSI): The ACSI is a 30-item self-report measure of the unique coping activities employed by African Americans during stressful encounters with the environment. It was developed by Utsey, Adams and Bolden (2000). The ACSI is grounded in an African-centered conceptual framework and consists of the following dimensions or subscales: Cognitive/Emotional Debriefing (11 items), Spiritual-
Centered Coping (8 items), Collective Coping (8 items), and Ritual - Centered Coping (3 items). To complete the AC SI, participants are asked to recall a stressful situation that occurred. Using a 5-point likert scale (0 = did not use, 1= used a little, 2= used a lot, 3= used 4=a great deal), the ACSI requires respondents to indicate which coping strategies they employed in coping with the stressful situation. An example of items in the scale is “I tried to forget about the situation” (cognitive), “I prayed that things will work out for themselves” (spirituality), “I shared my feelings with a friend or family member” (collective) and “I lit a candle for strength” (ritual). A content review of several empirically derived measures of coping such as Ways of Coping Questionnaire (Folkman & Lazarus, 1988) revealed a conspicuous absence of the coping behaviors unique to African Americans (e.g., collective coping, spiritual-centered coping, ritual-centered coping). Utsey et al. (2000) suggested that, there was a need to develop valid and reliable measures that capture the culture-specific coping strategies employed by African Americans during every day stressful situations. The inter-correlation coefficients for the four subscales are .60, .70, .60, and .62 (Utsey et al., 2000). The ACSI had a minimum score of 0 and a maximum score of 72. For the present study, the reliability coefficient is .82.

Pilot study

A pilot for the present study was conducted on HIV-positive Men who Sleep with Men (MSM) who were receiving Anti-Retroviral Treatment (ART) in a public hospital in Accra. A total of twenty participants voluntarily took part in the study. Using the packet questionnaire for the present study, the researcher also had informal interactions with some MSM members who took part in the pilot study who offered useful suggestions for the quantitative study and the qualitative interview questions. The contributions were on how to improve the items on the standardized questionnaire and semi-structured questions. The reliability coefficient for the Gender Role Conflict scale was .78. The Attitude Towards Seeking Psychological Help
(ATSPH) was .86, Gay Identity Development was .70, Psychological well-being (HSCL) was .91, and AFCI was .62. For the ATSPH, the word psychiatrist was changed to psychologist to suit the aim of the present study. Other instructions on the questionnaires were all made uniform and restructured to check instructional inconsistencies on the measures.

**Procedure used in the survey**

Data was obtained from the regional gay peer educators meeting in Accra. The study took place in a rented social events hall in Accra for the paper and pencil test. The rationale for recruiting sample participants from such locations was to reduce selection bias (Corliss, Cochran, & Mays, 2008). Additional supplementary data was obtained by appeals from two research assistants who were gays. The paper and pencil mode was employed and participants answered the questionnaire with pens on each questionnaire that comprised the survey packet. Participants were presented with a packet of questionnaire each and refreshed with soft drinks after completion. A packet of questionnaire took 45-60 minutes to complete. Majority of the questionnaires were collected within a day and supplementary data collected by the gay research assistants.

Sexual orientation of participants in the present study was determined by participants’ self-report. Participants were asked to identify their sexual orientation in the demographic section of the questionnaire as ‘heterosexual’, ‘bisexual’ or ‘homosexual’. Simonsen, Blazina, & Watkins (2000), recruiting homosexual sample for their study employed self-identification and subjects who identified themselves as ‘bisexual’ had their data discarded.

The regional gay peer educators meeting is an assembly of gay peer educators from the capital cities across Ghana. The rationale behind the selection of homosexual males from public meetings was to help gather data from a varied perspective so as to comprehend from a broader perspective.
Ethical considerations

Homosexuality is a sensitive matter to males in Ghana and punishable by law therefore measures were taken to address issues of informed consent, anonymity and confidentiality, amongst others. Ethical clearance was sought from the Institutional Review Board of the Noguchi Memorial Institute for Medical Research, University of Ghana, Legon. Permission was subsequently granted. The study was conducted in line with ethical principles for conducting research with human participants as stipulated by the American Psychological Association (2004).

Participation was voluntary and the informed consent clearly delineated the approximate time for filling questionnaire, permission to withdraw from the study at any time, a guarantee of confidentiality, availability of psychological support amongst others. All participants signed and dated the consent form before the study proceeded.

The transcribed data, audio recorder and consent forms were kept in a locked file drawer in a secured location.
CHAPTER FOUR

Results
(Study I)

Introduction

The primary aim of the present study was to investigate the phenomenon of Masculine Gender Role Conflict (MGRC) among homosexual men in Ghana. The dependent variable measures were psychological well-being (PWB), Attitude Toward Seeking Professional Help (ATSPH) and Gay Identity Development (GID). The independent variable was Masculine Gender Role Conflict (MGRC). The moderating variables were Africentric coping and Age and the mediating variable was Sex-Role Preference (SRP).

All returned surveys were coded and information loaded into SPSS (18.0). The data analysis was in two parts. The results of study one comprised univariate descriptive analysis, means, standard deviations and percentages was reported for all demographic variables (age, ethnicity, religious affiliation etc). Inferential statistics such as correlation and multiple regression analyses were conducted to test relevant hypotheses.

Distribution of data

Table 2: Descriptive statistics and Reliability indices of study variables (N = 175)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Skewness</th>
<th>Kurtosis</th>
<th>Alpha</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRCS</td>
<td>141.45</td>
<td>18.543</td>
<td>-.125</td>
<td>-.211</td>
<td>.70</td>
</tr>
<tr>
<td>ATSPH</td>
<td>75.72</td>
<td>6.296</td>
<td>-.038</td>
<td>.694</td>
<td>.90</td>
</tr>
<tr>
<td>GIQ</td>
<td>71.80</td>
<td>6.379</td>
<td>-.094</td>
<td>-.805</td>
<td>.71</td>
</tr>
<tr>
<td>HSCL</td>
<td>107.46</td>
<td>24.936</td>
<td>.845</td>
<td>.506</td>
<td>.92</td>
</tr>
<tr>
<td>AFCI</td>
<td>41.09</td>
<td>8.330</td>
<td>.482</td>
<td>.775</td>
<td>.82</td>
</tr>
</tbody>
</table>

MGRC- Men Gender Role Conflict
AFCI- Africentric Coping Inventory
HSCL- Hopkins Symptom Checklist

GID- Gay Identity Development
ATSPH- Attitude Towards Seeking Professional Psychological Help

University of Ghana http://ugspace.ug.edu.gh
Analysis of the normal distribution of the variables and reliability analysis are presented in Table 2. The normality of the data obtained for the study was verified. The analysis revealed that all the study variables were normally distributed. According to Tabachnick and Fidell (2001), a variable is normal when, the value for skewness and kurtosis range between ±1. The reliability coefficients of the study variables were assessed by computing the Cronbach alpha for each variable. For each variable, the analysis found all the values to be above the threshold of .70 reported as appropriate for psychometric analysis (Wells & Wollack, 2003). The reliability coefficients ranged from .70 to .92. For all the measures, normality was tested to ensure that none of the measures defy the normal curve assumption prescribed for the use of parametric tests (Opoku, 2006). Also, to check whether the distribution of scores for the present data was normal, the skewness and kurtosis were thoroughly examined. Measures were normal and did not threaten the use of parametric tests.

**Table 3: Correlation Matrix showing relationships between the Study Variables**

<table>
<thead>
<tr>
<th></th>
<th>SPC</th>
<th>RE</th>
<th>RABBM</th>
<th>CBWF</th>
<th>GRCS (Total)</th>
<th>ATSPH</th>
<th>GIQ</th>
<th>HSCL</th>
<th>AFC</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SPC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RE</td>
<td>-.015</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RABBM</td>
<td>.020 ** .551 **</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CBWF</td>
<td>.055 .404 ** .154 *</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GRCS (Total)</td>
<td>.444 ** .787 ** .682 ** .600 **</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATSPH</td>
<td>.416 ** -.011 .042 .004 .189 *</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GIQ</td>
<td>.248 ** .024 .010 -.042 .102 .252 **</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HSCL</td>
<td>-.339 ** -.075 -.015 .157 * -.131 * -.299 ** -.426 **</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AFC</td>
<td>.221 ** .130 .204 ** -.062 .208 ** .323 ** .034 -.019</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SPC: Success, Power and Competition  
RE: Restricted Emotionality  
RABBM: Restricted Affectionate Behaviour Between Men  
CBWF: Conflict Between Work and Family  
GRCS: Gender Role Conflict Scale  
ATSPH: Attitude Towards Seeking Psychological Help  
GIQ: Gay Identity Questionnaire  
HSCL: Hopkins Symptom Checklist List  
AFC: Africentric Coping Inventory  

*p<0.05  **p<0.01
TEST OF HYPOTHESES

MGRC and Psychological well-being

To examine the first hypothesis, a Pearson correlation coefficient matrix was used to determine the relationship between Masculine Gender Role Conflict (MGRC) and Psychological Well-Being (PWB).

To test hypothesis 1 which states that there would be a significant positive relationship between Masculine Gender Role Conflict (MGRC) and Psychological Well-being as measured by the HSCL. From Table 3 (Pearson correlation matrix), the relationships between various variables are reported. It is found that a negative significant relationship exists between MGRC and HSCL ($r_{(175)} = -0.131, p<.05$). This means that high scores on MGRC are associated with fewer problems with depression, anxiety and anger as measured by the HSCL whilst low scores on MGRC are associated with more problems with depression, anxiety and depression (see Table 1).

The relationship between MGRC and Attitude Towards Professional Psychological Help-seeking Behaviour

The second hypothesis states that there would be a significant negative relationship between Masculine Gender Role Conflict and Attitude Towards Seeking Professional Psychological Help (ATSPH). From the correlation Table 3 above, a significant positive relationship exist between MGRC and ATSPPH [$r_{(175)} = 0.189, p<.05$], thus the hypothesis was not supported. This implies that, contrary to prediction, homosexual men who score higher on the MGRC scale would exhibit more positive attitude towards seeking Professional Psychological Help.

The relationship between MGRC and Gay Identity Development (GID)

Hypothesis three stated that there would be a significant negative relationship between MGRC and Gay Identity Development (GID). More specifically, Homosexual men who
score high on MGRC would be in the lower stages of gay identity development than those who score low on MGRC. Using the Pearson correlation analysis (Table 3) results showed that no significant relationship exists between MGRC of men and their Gay Identity Development ($r_{(175)} = .102, p > .05$). This means that hypothesis 3 which stated that there would be a significant negative relationship between MGRC and GID was not supported.

Age would moderate the relationship between MGRC and Attitude Toward Seeking Psychological Help. Specifically, older homosexual men who score high on MGRC would report more positive attitude toward seeking psychological help. The results are presented in Table 4.

**Table 4: Hierarchical Multiple Regression for the moderating effect of Age on the relationship between MGRC and ATSPH**

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>Std. Error</th>
<th>B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1</td>
<td>(Constant)</td>
<td>68.410</td>
<td>3.564</td>
</tr>
<tr>
<td>Step 2</td>
<td>MGRC</td>
<td>.052</td>
<td>.025</td>
</tr>
<tr>
<td></td>
<td>Age</td>
<td>-.144</td>
<td>.094</td>
</tr>
<tr>
<td>Step 3</td>
<td>(Constant)</td>
<td>73.522</td>
<td>4.571</td>
</tr>
<tr>
<td></td>
<td>MGRC</td>
<td>.043</td>
<td>.025</td>
</tr>
<tr>
<td></td>
<td>Age</td>
<td>-.159</td>
<td>.095</td>
</tr>
<tr>
<td></td>
<td>MGRC * Age</td>
<td>-.524</td>
<td>.518</td>
</tr>
</tbody>
</table>

$R^2 = .025, .038$ and $.044$ for step 1, 2 and 3 respectively. $\Delta R^2 = .013$ and $.006$ for step 2 and 3 respectively, *$p < .05$
From table 4, MGRC significantly predicted ATSPH among homosexual men \( R^2 = .025, F_{(1, 170)} = 4.324, p < .05 \), and accounted for 2.5% of the variance in ATSPH. Contrary to expectation, however, the interaction between MGRC and Age (MGRC * Age) was not statistically significant \( \beta = -.078, p > .05 \). This indicates that, age did not significantly moderate the relationship between MGRC and ATSPPH. Thus, Hypothesis four which states that age would moderate the relationship between MGRC and ATSPH, more specifically homosexual men who score high on MGRC in the older age group would report positive attitude toward seeking psychological help was not supported.

**MGRC, Africentric Coping and Psychological well-being**

Hypothesis five stated that Africentric coping would moderate the relationship between MGRC and Psychological well-being. Specifically, homosexual men who score high on the MGRC scale and obtain high scores on the Africentric coping scale would report less anger, anxiety and depression as measured by the HSCL. The hierarchical multiple regression was used to test the moderating effect of Age and Coping on the relationship between MGRC and ATSPH, MGRC and PWB respectively. The results are presented in Table 5.
### Table 5: Hierarchical Multiple Regression for the moderation effect of Africentric Coping on the relationship between MGRC and Psychological Well-being (PWB).

<table>
<thead>
<tr>
<th>Model</th>
<th>(B)</th>
<th>Std. Error</th>
<th>(B)</th>
<th>(F)</th>
<th>(P)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(Constant)</td>
<td>135.460</td>
<td>14.426</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MGRC</td>
<td>-.198</td>
<td>.101</td>
<td>-.147*</td>
<td>3.831</td>
</tr>
<tr>
<td>2</td>
<td>(Constant)</td>
<td>134.446</td>
<td>15.818</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MGRC</td>
<td>-.201</td>
<td>.104</td>
<td>-.150*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Coping</td>
<td>.037</td>
<td>.231</td>
<td>.012</td>
<td>1.917</td>
</tr>
<tr>
<td>3</td>
<td>(Constant)</td>
<td>137.072</td>
<td>16.650</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MGRC</td>
<td>-.214</td>
<td>.107</td>
<td>-.159*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Coping</td>
<td>.011</td>
<td>.237</td>
<td>.004</td>
<td></td>
</tr>
<tr>
<td></td>
<td>MGRC x Coping</td>
<td>.919</td>
<td>1.783</td>
<td>.041</td>
<td>1.361</td>
</tr>
</tbody>
</table>

\(R^2 = .022, .022\) and .023 for step 1, 2 and 3 respectively. \(\Delta R^2 = .000\) and .006 for step 2 and 3 respectively, \(^*p < .05\)

The results indicated that MGRC had a marginally significant influence on Psychological Wellbeing \(F(1, 173) = 3.831, p < .10\). Contrary to expectation however, the interaction between MGRC and Coping (MGRC*Coping) was not statistically significant (\(\beta = 1.783, p > .05\)) in predicting Psychological well-being. This means that the hypothesis which stated that Africentric Coping would moderate the relationship between MGRC and Psychological well-being, specifically homosexual men who score high on the MGRC scale and obtain high scores on the Africentric coping would report low on anger, anxiety, and depression as measured by the HSCL was not supported.
Sex-role preference would mediate the relationship between MGRC and Gay Identity Development (GID).

The last hypothesis stated that Sex-role preference would mediate the relationship between MGRC and Gay identity development. The statistical relationship could not be tested and further explored because the relationship between the predictor variable (MGRC) and the criterion variable (Gay Identity Development) was not significant [refer to Table 2]. However, based on statistical guidelines, Baron and Kenny (1986), proposed a four step approach in which several regression analyses are conducted and significance of the coefficients is examined at each step. The purpose of Steps 1 – 3 is to establish that zero-order relationships among the variables exist. If one or more of these relationships are not significant, researchers usually conclude that mediation is not possible or likely but this is not always true (Mackinnon, Fairchild, & Fritz, 2007). Assuming there are significant relationships from step 1 through 3, one proceeds to step 4. In the step model, some form of mediation is supported if the effect of mediation remains significant after controlling for independent variable.

Based on the above deductions, the last hypothesis which stated that sex-role preference would mediate the relationship between MGRC and Gay Identity Development was tested using a couple of simple regression analysis and a multiple regression analysis. This was primarily based on the steps proposed by Baron and Kenny (1986).

In the first step, a simple regression was performed with Masculine Gender Role Conflict (MGRC) predicting Gay Identity Development (GIQ). The results obtained are summarized in Table 6.
Table 6: Simple regression analysis on MGRC predicting Gay Identity Development (GID).

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>Std. Error</th>
<th>B</th>
<th>t</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Constant)</td>
<td>23.794</td>
<td>3.943</td>
<td></td>
<td>6.035</td>
<td>.000</td>
</tr>
<tr>
<td>MGRC</td>
<td>.024</td>
<td>.028</td>
<td>.074</td>
<td>.887</td>
<td>.377</td>
</tr>
</tbody>
</table>

$R^2 = 0.005, \Delta R^2 = 0.005$

The result obtained from study shows that MGRC did not significantly predict Gay Identity Development ($\beta = 0.074$, $p > 0.05$), the result further showed that MGRC contributed only 0.5% of the variance in gay identity development ($R^2 = 0.005$, $F_{(1, 145)} = 0.786$, $p > 0.05$). The assumption of independent errors was met as indicated by the model’s Durbin-Watson coefficient of 1.442 (Details of these test are shown in appendix E).

In the second step, a simple regression analysis was performed with sex-role preference predicting gay identity development. The results obtained are summarized in the Table 7 below.

Table 7: Simple regression analysis on sex-role preference predicting Gay Identity Development.

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>Std. Error</th>
<th>B</th>
<th>t</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Constant)</td>
<td>24.877</td>
<td>1.261</td>
<td></td>
<td>19.731</td>
<td>.000</td>
</tr>
<tr>
<td>Sex-role preference</td>
<td>1.199</td>
<td>.567</td>
<td>.174*</td>
<td>2.115</td>
<td>.036</td>
</tr>
</tbody>
</table>

$R^2 = 0.03, \Delta R^2 = 0.03 \ast$ significant at 0.05 level of significance

The result obtained shows that sex-role preference significantly predicted Gay Identity Development ($\beta = 0.174$, $p < 0.05$). It was also ascertained that sex-role preference contributed 3% of the variance in gay identity development ($R^2 = 0.03$, $F_{(1, 145)} = 4.475$, $p < 0.05$). The assumption of independent errors was met as indicated by the model’s Durbin-Watson coefficient of 1.559 (Details of these test are shown in appendix E).

In the third step, a simple regression analysis was performed with Masculine gender role conflict predicting sex-role preference. Summary of the result obtained are shown in Table 8 below.
Table 8: Simple regression analysis on MGRC predicting sex-role preference

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>Std. Error</th>
<th>B</th>
<th>t</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Constant)</td>
<td>1.884</td>
<td>.575</td>
<td>3.276</td>
<td>.001</td>
<td></td>
</tr>
<tr>
<td>MGRC</td>
<td>.001</td>
<td>.004</td>
<td>.022</td>
<td>.262</td>
<td>.794</td>
</tr>
</tbody>
</table>

$R^2 = 0.000, \Delta R^2 = 0.0000$

The result obtained shows that Masculine gender role conflict did not significantly predict sex-role preference ($\beta = 0.022, p > 0.05$). The result further shows that MGRC did not contribute to the variance in sex-role preference ($R^2 = 0.00, F_{(1,148)} = 0.068, p > 0.05$). The assumption of independent errors was met as indicated by the model’s Durbin-Watson coefficient of 1.862 (Details of these test are shown in appendix E).

Based on the fact that two of the relationships were not significant (MGRCS and Sex-role preference; MGRC and Gay identity development), it could be concluded that mediation is not possible or likely according to Baron and Kenny (1986), so the fourth step was not carried out.

**Summary of study one (1) results**

Findings of study one showed that high scores on MGRC were associated with fewer problems with anger, anxiety and depression. High scores on MGRC were also associated with positive attitudes towards psychological help-seeking behavior. Further findings showed that, there was no significant relationship between MGRC and Gay Identity Development. Age did not moderate the relationship between MGRC and Attitude towards Psychological Help-seeking behavior (ATSPH). Africentric coping also failed to moderate the MGRC and Psychological well-being relationship. Lastly, no mediation path was detected between MGRC and Gay Identity Development, with sex-role preference as a mediator variable.
Discussion (Study I)

The present research explored the crucial issue of Masculine gender Role Conflict (MGRC) and its psycho-social correlates among homosexual men. The Gender Role Conflict Scale (GRCS) was used to assess Psychological well-being, Psychological help-seeking behaviour and Gay identity development among homosexual men. The present study sought to gain a cultural perspective to the construction of masculinity and the experiences of Masculine Gender Role Conflict (MGRC) among homosexual men.

Masculine Gender Role Conflict and Psychological Well-being (PWB)

The first hypothesis which stated that there would be a significant positive relationship between masculine gender role conflict (MGRC) and Psychological Well-Being (PWB) was supported. Results showed that a significant negative relationship exists between MGRC and PWB. This implies that gay men who reported high levels of MGRC would have fewer problems with anger, anxiety, and depression. The results are consistent with studies by Good et al. (2004). Lending credence to the present study’s finding, Good et al. (2004) study found that high levels of GRC could not correlate with high levels of anger, anxiety and depression for homosexual men. On the contrary, this finding is inconsistent with the results of studies conducted in the West on homosexual samples (Sanchez, Westfeld, & Liu, 2000; Simonsen, Blazina, & Watkins, 2000). Findings showed that high scores on MGRC were associated with more problems with anger, anxiety and depression. The results are also inconsistent with studies explored on heterosexual men (O’Neil, 1981; Mahalik & Cournoyor, 2000; Sharpe & Heppner, 1991).

Notably, the present findings are suggestive of the fact that not all men do experience the same levels of distress associated with gender role conflict regardless of one’s culture and one’s sexual orientation. This finding was unexpected. However, this finding is supported by a study conducted by Jones (1998). In reviewing Gender Role Conflict (GRC) patterns and its
relationship to psychological distress and coping styles among homosexual men, Jones (1998) found that Masculine Gender Role Conflict was associated with fewer problems with anger, anxiety and depression among homosexual men.

This finding was unexpected. According to Moos and Swindle (1990), discussions on stress and coping/well-being should be conceived within the framework of culture and situation. Probably for homosexual men, stress experiences should be captured within the confines of the sub-gay culture and situational cues which may be critical in a gay man’s re-definition of the conflict situation and well-being. Nonetheless, the findings also bring to the fore how complicated and delicate the relationship between Gender Role Conflict and Psychological Well-Being. Also, the results of the present study debunk the claim of O’Neil’s (1981) male gender role theory that men, in adhering to restrictive and rigid gender roles, would necessarily experience distress.

As noted by O’Neil (1981), as a result of males’ rigorous socialization process, males tend to be inculcated and ingrained with schemas of self-defeating fear of non-compliance to the rudiments of masculinity, which on a face value, helps them to appear visibly unfeminine in the judgmental lens of their own peers and other social raters as well. Plausibly, as society prides males to exude ‘appropriate traits’ such as aggressiveness, assertiveness, courage and fearlessness, males are also cautioned to abide by these guidelines regardless of its detrimental effects to their mental health status. Accordingly, it seems that somewhere in the midline, participants find ways to negotiate the effects of the emanating discomfort and the ensuing conflict. Males in general seem to be applauded when they pass the test of masculinity and ‘named and shamed’ when they fail to meet the litmus test for masculinity which becomes the defining point of regulation for subsequent behaviour for men. For homosexual men, it is possible to comprehend such findings from two perspectives. First, homosexual men as males in a rigorous collectivist culture like the Ghanaian culture are socialized accordingly to engage in the test of masculinity. Even though, homosexual men are
likely to experience distress when they tend to exude behaviour contrary to the prescribed social norms, they might have found ways of resolving conflict issues which could ultimately prevent its apparent detrimental effect on their mental health status. Other factors contributing to the findings may include the length of the GRC scale.

The high levels of education of study participants might have also contributed to present study findings. Findings of the present study showed that forty nine percent (49.7%) of the study sample were educated above Senior High School (SHS) level and a significant percentage (31.5%) had obtained tertiary education. By and large, this was an educated sample. This shows that the sample may have been quite educated on issues of gender role conflict and its associated distresses and this might have influenced their coping skills and indirectly their mental health status. Supportably, this was evident during the qualitative interview discussions.

Largely, majority of the present sample reported as gay peer educators. Obviously, there is a strong likelihood that the present study’s participants are a more enlightened sample and might have found ways of resolving distresses associated with adopting atypical gender role behaviour as observed during the interview discussions.

Future studies should concentrate on comparative analysis of variations on GRC experiences of homosexual and heterosexual men so that intensive mental health care plan can be instituted for the group that requires the most urgent mental health care plan. Also, the contextual and ‘emic’ experiences of men of diverse cultures and sexual orientation should be the focus of subsequent research work on GRC. This is to help researchers appreciate the diverse experiences of men in relation to their cultural-orientation (O’ Neil, 2008) and psychological well-being.

For homosexual men, sexual orientation follows after first being viewed through the male lens. Sexual orientation follows here, not as a pre-requisite for the test of masculinity, but as a consequence of sexual preference or choice. During the qualitative
interviews, five of the participants disclosed they had been gay since birth, and three confessed they were victims of influences of strong familial bond, sexual abuse, but participants had found ways of accepting the ensuing effect of their ordeal and the act of homosexuality. This suggests that, participants might have found multiple ways of resolving conflict issues right from preliminary stages. Therefore, adulthood now serves as a “resolution period” for the present sample. Possibly, there are obvious differences between the significant levels of GRC experienced by homosexual and heterosexual men as reported in some previous studies (Jones, 1998; Naranjo, 2001; Shepard, 2001). There may be floating levels of GRC which may not necessarily culminate into psychological distress for homosexual men.

Masculine Gender Role Conflict (MGRC) and Attitude Toward Seeking Psychological Help (ATSPH)

The second hypothesis which stated that there would be a significant negative relationship between Masculine Gender Role Conflict and Attitude Towards Seeking Psychological Help (ATSPH) was not supported. Results from Table 3 shows that there was a significant positive relationship between MGRC and ATSPH. This means that, homosexual men who scored high on the MGRC had more positive attitudes towards seeking professional psychological help. Since help-seeking behaviour is conceptualized as an undesirable gender role trait for the ‘test of masculinity’, which is reinforced by gender-role standards, it was expected that homosexual men in the present study who exuded high levels of GRC experiences would have less help-seeking behaviour (O’ Neil, 1981). This hypothesis was not supported.

Findings of the present study failed to authenticate the supposition that there is a strong theoretical assumption in the literature that seems to view help-seeking as feminine

Conversely, findings from the present study is consistent with studies which found that homosexual men are more likely to portray gender-atypical traits which are regarded as feminine such as help-seeking behaviour than non-homosexual men (LeVay & Valente, 2002; Isacco, Yallum, & Chromik, 2011).

Derived from the male gender role theory, the model posits that masculine gender role conflict (MGRC) may occur in two-tiered levels. That is, the intrapersonal and the interpersonal level. When help-seeking is viewed on the interpersonal level, for males, they are groomed to brood over problems and be their own counselors than to seek for assistance. Largely, help-seeking is seen as a ‘feminine trait’ and projected as a weakness within the domain of masculine literature (Berger, Levant, McMillan, Kelleher, & Sellers, 2005; Good & Mintz, 1991; Good & Wood, 1995; O’Neil, 1986). Thus, the present research explored items such as ‘where respondents would seek help if they had a problem they couldn’t handle’. The majority of the participants (34.3%) indicated that they would seek help from friends as compared to 14.3% who reported that they would employ the services of a professional psychologist.

Findings from the present study showed that homosexual men who experienced high levels of MGRC also had more positive attitudes towards seeking professional psychological help. This finding is inconsistent with findings by Mahalik et al. (2006), who found that masculinity was unrelated to health and help-seeking behaviour for both Kenyan and U.S heterosexual samples. Other studies have demonstrated otherwise. For instance, some studies found an inverse relationship between MGRC and ATSPH among heterosexual sample (Blazina & Marks, 2001; Fitzgerald, 1992; Good & Wood, 1995).
Other gay studies have demonstrated support for the inverse relationship between MGRC and ATSPH research findings. For instance, Blazina and Watkins (2001), Rochlen et al. (2002) in reviewing literature on MGRC and ATSPH, also found an inverse relationship.

However, only one study found relatively higher scores on help-seeking behaviour for gay men as compared to non-gay samples (Simonsen, 1999). There are several plausible explanations for the significant positive relationship results obtained for gay men in the present study. This finding was highly unanticipated.

The sample in the current study scored high on help-seeking behaviour. Although the popularity of professional psychological services seems to be a relatively new phenomenon among homosexual men in Ghana and possibly in its nascent stages in Ghana, it was quite surprising that a handful of participants could readily identify what psychological services were and where they could assess these services during interview sessions. Thus, respondents subscribed to the idea that psychological help-seeking played a significant role in their total mental well-being.

This may be a result of the re-socialization within the sub-gay culture regarding the relevance of seeking professional help in a strong heterosexist, religious and homophobic society. Possibly, because the present study’s sample comprised mainly of trained gay peer educators, participants may have recognized and appreciated the relevance of medical and psychological help-seeking behaviour in the era of AIDS pandemic in Ghana which may have influenced the present findings. This is because most participants discussed their experiences with HIV counselors during the interview sessions.

Findings from the present study, to some extent, do not support O’Neil’s (1981) assertion that men are socialized to decline help-seeking behaviours and only view it as behaviour for ‘the weakling’. Thus, in the local African parlance, only unmasculine men are easily diseased and therefore are likely to seek help (Foreman, 1998). It is possible that because homosexual men may take on reversed roles, they are more likely to exude ‘feminine
qualities’ and as such may adopt help-seeking behaviour (a seemingly feminine attribute). Other explanations include the fact that, the majority of the participants engaged in the interview sessions were FSRPs. Thirty two percent (32.0%) of total participants reported their preference for the female sex role orientation as compared to the thirty three percent (33.7 %) who indicated a preference for the masculine sex role orientation. When participants were asked to indicate their sex, two percent (2.9%) of participants indicated they were females when all participants who answered the questionnaires were visibly males.

Some studies have been quick to tag “femaleness” or feminine qualities as capable of reducing the negative effect on any form of deviance (Donahue & Benson, 1995). Therefore, there is a greater probability that the adoption of feminine sex-role orientation/preference might have enhanced and promoted positive behaviour outcome, such as professional help-seeking behaviour and fewer problems with anger, anxiety and depression for homosexual men in the present study.

Possibly, homosexual men in the present study might have also declined the larger heterosexual view of the larger society on traditional help-seeking behaviour for men, and may have adopted the help-seeking- feminine trait which may be more accepted within the gay sub-culture. Possibly, this may reinforce their feminine-orientation in sex-role preference. This explanation is reinforced by the fact that a significant proportion of the present study sample thirty two percent (32.0%) preferred the Female Sex Role Preference (FSRP) to other sex-roles such as Both Sex Role Preference (BSRP) and Masculine Sex Role Preference (MSRP).

The results of the present study is consistent with findings by Wester, Pionke, and Vogel (2005) who found that homosexual men do not necessarily conform to rigid male gender role stereotypes such as failure to seek help.

Other reasons for this finding could be that the educational level for the present sample (50.0% of the sample had received at least a Senior High School education) were
significantly high and this could possibly explain their enlightened view on professional help-seeking behaviour. Also, a larger portion of the sample reported to have had some increased degree of outness, therefore there is the likelihood that the sample is much more open-minded about professional help-seeking behaviour. Studies have found that the androgyny trait tends to be more pronounced for males as they age or grow older (Hyde & Kraknik, 1991). The sample explored in the present study had a wide age range and this and many other reasons may have accounted for the present study’s findings.

It is reasonable to suggest, based on the present study findings, that with the passage of the Mental Health Bill, more proactive outreaches should be carried out by mental health professionals to tap into ‘preparedness’ of such hidden, but sensitive sub-populations about the relevant mental health services that are readily available and where homosexual men could find such assistance in times of urgency. Most of the participants during the interview session revealed they had no or little knowledge of where psychologists could be found. Often fears of being labeled as abnormal were recounted by participants who were aware they could seek for psychological help in the psychiatric hospitals. More significantly, religion-based therapeutic interventions and support groups should be encouraged since the present sample scored highly on reverence for a supreme deity and religiosity. This is because though they showed interest in professional psychological help-seeking, the demographic data revealed that the majority of the sample (34.3%) preferred seeking counsel from friends than utilizing the services of a psychologist (14.3 %). The qualitative interviews revealed that most of these friends whom they would seek advice from their gay peers. Participants expressed safety and security in gay friends than other modes of helpers. This shows that the Ghana Psychological Association, other health and minority men stakeholders should embark on more psycho-education in the area of professional help-seeking among sensitive minority population in Ghana.
Masculine Gender Role Conflict (MGRC) and Gay Identity Development (GID)

The third hypothesis sought to find out if MGRC would be negatively associated with Gay Identity Development (GID). This hypothesis was not supported. Correlation analysis showed that the relationship between masculine gender role conflict (MGRC) and Gay Identity Development (GID) was not statistically significant. This is inconsistent with studies by Sanchez et al. (2006) and Simonsen (1998), whose studies confirmed MGRC to be a significant predictor of Gay Identity Development (GID). This hypothesis was formulated based on the Male gender role (conflict) theory (and the Gay Identity Development theory) which assumes that since sex role stereotypes tend to be inconsistent and contradictory and homosexual men may tend to be gender non-conforming, there is a possibility that Masculine Gender Role Conflict (MGRC) would be predictive of their level of identity formation. An experience of Masculine Gender Role Conflict (MGRC) for men, according to the male role conflict theory, requires an account of failure to abide by societal conformity prescriptions for masculinity.

Reasons accounting for the non-significant results may be the socio-cultural variations in Western cultures and Collectivist cultures. O’Neil’s (1981) theory on male gender role studies were sampled and based on an individualistic western sample. It may be possible that the male gender role (conflict) theory is culture-specific and may be much more relevant to predicting Gay Identity Development among the gay men in the United States and Europe than in Africa where group goals supersede that of personal interests. It's also possible that MGRC may be relevant to the prediction of gender role experiences among heterosexual men than sub-populations.

Another possible explanation for the non-significant results could be that, the sample in the present study indicated high level of outness, education and age range. Possibly the sample might have achieved a more formidable identity which may be independent of their level of masculine gender role crisis. This is supported by Malcolm’s (2002) study results which
found that age was predictive of level of gay identity development. With a mean age of the present study (24.7 years) it is quite possible that identity development is averagely stabilized in the present sample, therefore less likely to be duly affected and predicted by crisis such as masculine role conflict.

The active influence of gay associations at the various community levels could also be a plausible reason why the hypothesis was not supported. This became apparent during the one-on-one interview sessions. Most gay men in the present study acknowledged themselves as active members of local gay associations. It is possible that participants may have been taught how to handle conflicts that come with taking on, for instance ‘reversed roles’ and how to handle such crisis to ensure sound/positive psychological well-being and maintain a stable gay identity. During interview sessions, some gay participants disclosed that they had been gay since childhood. It is possible that participants might have formed a stable identity by now and recent gender role crisis experiences were independent of their gay identity development or gay identity crisis.

Also, coping with sexuality may be an apparent issue for the present study’s sample. As peer educators, it is possible that participants may have the skills to physically and psychologically cope with the daily challenges that arise as a result of their sexual preference.

**Masculine Gender Role Conflict, Africentric Coping and Psychological well-being**

The hypothesis proposed that Africentric coping would moderate the relationship between Masculine Gender Role Conflict (MGRC) and Psychological Well-Being (PWB). This hypothesis was not supported. Multiple regression analyses showed that the moderating effect of Africentric coping on the relationship between Masculine Gender Role Conflict (MGRC) and Psychological Well-Being (PWB) was not statistically significant. Specifically, the prediction that homosexual men who score high on the MGRC scale and report high
scores on the Africentric coping scale would report less anger, anxiety, and depression was not supported. The findings from the present study seem to suggest that, regardless of the high Africentric coping employed, for minority men who score high on MGRC, this would not necessarily translate into positive psychological well-being. This finding was evident during interview discussions. Qualitative results showed that although the present study’s sample seems to adopt cultural coping ties with apparent MGRC experiences, there were also evidence and traces of cycles of psychological distress episodes.

Though not a direct moderating effect, the results of the present study, however, are inconsistent with previous findings that, coping would mediate the relationship between Gender Role Conflict and Psychological Well-Being (Wester, Kuo, & Vogel, 2006).

Findings from the present study were highly unexpected. Rutter (1987) suggested that protective/resilient factors such as coping only display its requisite effect under conditions of high-risk, such as high gender role conflict situations, and do not provide any added benefit under ‘low risk’ (low MGRC) situations. Therefore, the lack of significant effect may be that present study’s sample is experiencing less MGRC and therefore there is not much ‘conflict’ to moderate.

Some other reason which may account for the non-significant results may be that homosexual men go through stages of psycho-sexual development as postulated by Freud (Ore, 2003). Homosexuality may emanate from failure to transit from auto-sexuality to heterosexuality. Here, since pleasure and sexual satisfaction are concentrated within their ‘specie’, adopting a heterosexist coping mechanism may seem unattractive to them. Here, anything that may seem threatening to their “pleasure principle” may be obstructed (physically or psychologically).

Possibly, culture-specific coping ties are skills that may be acquired to enhance homosexual men’s capability of dealing with the challenges of their ‘homosexual phase’ may have been less explored. Thus, other gay sub-cultural coping techniques related to men of
diverse sexualities in relation to adequate coping might be more significant and may invariably be less explored. For instance, sense of gay identity evidenced through networking seems to be more common among the majority of the participants interviewed in study two. Utsey, Hook, and Fiscian (2008) in reviewing literature on coping found that people of African descent were more likely to adopt specific cultural coping techniques such as religion, family ties, etc. However, the researchers failed to observe strongly the adoption of Africentric coping techniques in the present sensitive population of African descent. This was evident during qualitative discussions which explored Africentric coping. It is possible that homosexual men may be employing some other coping techniques which may have been less explored.

Plausibly, because the constitution of Ghana criminalizes homosexuality, gay men might have found the adoption of culture-specific appropriate techniques irrelevant for their crucial survival. In the Ghanaian culture, the act of homosexuality is abominable and largely detested; therefore homosexuals may have found other relevant outlets such as seeking professional medical and psychological help more convenient and safer than conferring on family ties and external relations. In Ghana, gay men are lynched and hate-crime is on the rapid increase, therefore it is not surprising gay men have adopted other outlets for ‘safe coping’.

Another plausible explanation for the findings of the present study could be that, several homosexual men still had inaccurate views about the adoption of African coping techniques as was observed during the personal interview sessions. Seeing a fetish priest/priestess, swearing, evoking ancestral spirits, chanting and other significant elements are all under the domain of culture-specific approach to coping. Though some participants adopted these methods, they may not have duly understood that, it is an appropriate culture-specific approach to coping. Also the Africentric coping scale fails to capture some of these important context-specific coping ties on its measure. The present study sought to employ a
personal interview session so that some of these culture-specific coping ties could be explored.

It is quite interesting to note that the supplementary analysis revealed that MGRC was a significant predictor of Africentric coping, but the question that remains for future research is to further explore specifically the survival/resilient techniques adopted by minority groups especially in Africa.

**MGRC, Age, and Attitude Toward Seeking Psychological Help (ATSPH)**

The hypothesis which stated that age would moderate the relationship between MGRC and ATSPH was not supported. Multiple regression analyses showed that age had no significant moderating effect on the relationship between MGRC and ATSPH. By implication, older homosexual men who score high on MGRC, would report more positive attitude toward seeking psychological help was not supported. This finding was surprisingly unexpected.

Other studies have demonstrated otherwise. For instance, Cournoyer and Mahalik (1995) in reviewing literature on Gender Role Conflict (GRC) found that age of participants influenced the relationship between levels of GRC and overall psychological well-being. More specifically, their study uncovered that heterosexual, middle aged men with less gender role conflict also reported higher levels of psychological well-being than their heterosexual younger men. This seems to underestimate O’Neil’s (2008) assertion that regardless of one’s age, strict conformity to MGRC would result in psychological distress.

Plausibly, the relationship between MGRC, Age, and ATSPH for homosexual men is more complex than often assumed. Therefore, there might be another potent variable which may reliably moderate the MGRC and ATSPH relationship than age. It is also possible that because the majority of the present sample was trained gay peer educators, whether the participants were young or old did not really explain an increase or decrease of the MGRC
and ATSPH relationship among homosexual men. It is possible that all participants possessed the cognitive know-how on relevant gay-related conflict issues and seeking help such as engaging in formal HIV counseling processes as expressed by participants during one-on-one interviews.

The non-significant results may also denote that future studies should re-examine the old African adage where older men are viewed as repositories of knowledge and wisdom and therefore might not necessarily resort to professional advice on very crucial social issues. This is because they are perceived to be already embedded with the requisite knowledge. What is more, it could be that, due to the technological phase of this generation and the grand exposure to the internet, social media such as Facebook and Twitter, the above stated African adage can no longer stand the test of time and should therefore be revisited scientifically.

**Masculine Gender Role Conflict, Sex-role preference and Gay Identity Development**

This hypothesis tested if sex-role preference would mediate the relationship between MGRC and Gay Identity Development (GID). The hypothesis was not supported. Thus, sex-role preference was eliminated as a possible mediator. This is because a mediator requires to be significantly related to both the predictor (MGRC) and criterion (GID) variable, while the sex-role variable was deficient on such characteristics. Further, simple regression analyses showed that MGRC contributed only (0.5%) of the variance in gay identity development. However, sex-role preference significantly predicted Gay Identity Development, contributing three percent (3%) of the variance in Gay Identity Development.

This hypothesis was derived from the gender role conflict theory (O’Neil, 1986) which seems to suggest that the behaviour/gender roles are learned acts and facilitated and reinforced through schools of socialization. The gender schema theory also tends to suggest that men tend to acquire sex-consistent stereotyped behaviours because they already have cognitive templates for easy assimilation of such behaviours. Though the theory fails to duly
account for reasons why pre-gay children are more likely to display gender atypical behaviours (Bailey & Zucker, 1995), the theory on a face value helps to explore why homosexual men and males in general would display certain preferences for specific sex-roles than others and why they would experience Masculine Gender Role Conflict (MGRC) at all. There is sparse literature in this area and most studies that have explored sex-role preferences among homosexual men have not explored the mediating effect of this variable on the relationship between MGRC and Gay Identity Development. Preliminary analyses found that Masculine Gender Role Conflict (MGRC) was not predictive of Gay Identity Development and there was no significant relationship between MGRC and sex-role preference.

There is a multitude of reasons that may account for such findings. One possible reason for this result is that the current findings may be based on a much smaller sample (N=159, including gay men who self-identified themselves as heterosexual men, n=16), this might have limited the power of analyses for the present study. Secondly, sex-role preference was determined by one’s self-report on sex role played in the homosexual relationship, as opposed to a more thorough measure, which would have captured in detail, daily sexual and social activities that prescribe and define one’s sex-role preference in a homosexual relationship as male, female or both roles. Here, it is quite possible respondents might have underreported their sex-role preferences. Thus, a unique measure that showed varied sex-role preferences would have been more efficient in facilitating an accurate and total recall of preferred sex-roles.

It is possible that because most of the present study’s participants were gay peer educators, their perception of sex-role preference (with a mean age of 24.61 years) does not reflect a complete picture of their level of MGRC. This is because they might have already adopted significant and varied ways of coping, such as living in denial; therefore they tend to avoid thinking of the conflict and refused to appreciate the existence of such stressors to
reduce the effect of social stressors such as MGRC as indicated by interviewees during the qualitative session. It is possible in such cases that one might report a ‘suitable or socially desirable sex role preference, for instance, Masculine Sex-Role Preference (MSRP).

Subsequently, the findings from the present study have several implications for future research. The traditional family structure systems are gradually breaking down and making room for other unstructured forms of family systems such as co-habitation, half-parenting, step-parenting and other sub-structures. Future studies should study the role of these different family systems on sex-role preferences of homosexual men.
One aim of the present study was to assess the psycho-social correlates of Masculine Gender Role Conflict (MGRC) among homosexual men. The present study also sought to posit and test a model by which Masculine Gender Role Conflict (MGRC) and its psycho-social variables are related and therefore assess the applicability of such a model to the prediction of
MGRC and its psycho-social correlates among homosexual men in Ghana. Based on the findings of the present study, modifications were made to the MGRC model. The above model explains in visual form, how the proposed conceptual model fit into the findings of the study one. The above broken lines show non-significant relationships and the straight lines depict possible significant relationships based on Pearson $r$ correlation and multiple regression analyses. The modified model (Figure 3) represents the present study variables from the original model which was found to have significant and non-significant relationships with MGRC. Psycho-social variables such as age and Africentric cultural coping strategies as moderating factors did not appear to have a complete and significant moderating effect. Also, sex-role preference, failed to mediate the relationship between MGRC and Gay Identity Development. As shown in Figure 3, a broken line/arrow indicates the described relationship between relevant variables. The findings of the present study showed non-significant moderation and mediation effects. Research works (Baron & Kenny, 1986; Edwards & Lambert 2007) have suggested that a combined analysis of moderation-mediation in a single study may be difficult statistically and conceptually.

In summary, there was limited support for the moderating effect of age and Africentric cultural coping in general on the relationship between MGRC and Attitude Toward Seeking Psychological Help. Also, the present study showed subsequent limited support for the mediating effect of sex-role preference on the relationship between MGRC and Gay Identity Development. However, the present study’s results for the moderating effect of variables are not surprising because it has been observed that “moderator effects are notoriously difficult to detect in non-experimental field studies” (McClelland & Judd, 1993, p. 377).

Furthermore, a mixed support of findings from the present study’s model as compared to mainstream literature on MGRC on heterosexual samples show the importance of
establishing more qualitative research on sensitive populations on the African continent than relying on the Western literature for information on MGRC on homosexual men in Africa.

On the whole, varied reasons may explain why the entire MGRC model was not validated among homosexual men in the present study. In review, it provides a basis for questioning the common observations of adopting western constructs in order to understand gender role (social) issues in developing countries such as Ghana (in psychological research). Plausibly, other potent variables which were not tested in the present study might be more significant predictors of levels of psychological well-being, psychological help-seeking behaviour and gay identity among homosexual men in Ghana than in the West. It is also possible that due to the non-existing literature on the predictor variable, moderating and mediating variables explored in the present study in Africa, the researcher deduced relevant research variables based on studies conducted in European countries on heterosexual and college men. Consequently, it may be that the model assessed in the present study may be more valid for heterosexuals and the college homosexual sample in Western countries than ‘in and out of school’ sensitive sample in sub-Saharan Africa.

Lastly, though most studies on MGRC have failed to test models, it may be likely that different types of model such as Meek’s (2011) model, socio-psychological or a public health model or an eclectic model may have more predictive power and relevance for homosexual men on MGRC in Ghana.

Limitations of the study

1. Although the results showed relationships between variables, it is worthy to note that the findings of the study do not imply causality between the factors for which there were significant correlations.

2. Future studies must explore statistically, sex-role preference (i.e. who plays the male or female role in a homosexual relationship) and its corresponding distress.
3. The age gap for the sample recruited was wide so other uncontrollable factors might have set in and influenced the results. Future studies should compare young and older gay men on study variables since studies have suggested age is a possible mediating variable.

4. Language might have been a barrier. Though participants could read and speak English, they might not have understood well, some items on the questionnaire.

5. Social desirability may have been a limitation. Participants in the present study may have responded in ways that they think would be most suitable to the researcher. GRC items ask very sensitive questions regarding expressing affection between men, emotionality etc. Respondents may have been well safeguarded about admitting to certain intimate behaviours between men. Conversely, some respondents may have responded in such a way to appear they were experiencing more conflict than they actually are. Some of the questions called for answers on a likert scale, response sets were possible, a few were noticed during the screening of raw data.

6. Information was solely collected through self-reports and self-identification of homosexual men.

7. The inability of the present study one to better comprehend norms, values from the perspective, homosexual men who are being studied is a limitation of the present study. Qualitative study also allows for the discovery of unexpected, but important topics/information which may have eluded the researcher as a result of the pre-defined set of questions as was the case of study one.

Summary and Conclusion

The present study aimed at assessing MGRC and its psycho-social correlates among homosexual men in Ghana. In all, one hundred and seventy-five homosexual men from the ten major regions in Ghana participated in the study. The findings of the quantitative study
revealed less support for the gender role conflict theory proposed by O’Neil (1986). Largely, there seem to be less significant relationships between MGRC and its psycho-social correlates among the present study sample. Therefore, based on the limitations of study one (quantitative study) and as a result of the less support and empirical validation for the overall present study variables in the proposed model, the second study (qualitative study) sought to further understand the results gained in the first study. Secondly, the qualitative study sought to contextualize the present study variables so as to appreciate the variables from a socio-cultural perspective.
CHAPTER FIVE

STUDY TWO (2)

One of the primary aims of the present study is to describe the experiences of MGRC in a broader cultural context. The purpose of this section is to present the methodology and findings that were used in the second in-depth study. This section includes research design, inclusion and exclusion criteria, sample size and the sampling technique, analytic procedure, interview schedule/guide, interview results and discussions.

Research design

For the qualitative analysis, the Interpretive Phenomenological Analysis (IPA) by Smith and Osborn (2003) was employed in the investigation of homosexual men’s relative experiences with masculinity, and MGRC. Interpretive Phenomenological Analysis (IPA) tends to highlight on “how participants are making sense of their personal and social world” (Smith & Osborn, 2003, p.51). Smith and Osborn (2003) suggest that the IPA is idiographic in that the approach tends to investigate the private “personal world”, for example, how a homosexual man constructs his/her experiences. These private conclusions are largely based on the individual’s perceptions of his/her personal and subjective world. It also inculcates cultural meanings such as culture-specific gender role characteristics as it is reflected to the individual in their mundane activities. In summary, the IPA approach adopts a two-tiered method in research exploration in that “the participants are trying to make sense of the world; the researcher is trying to make sense of participants trying to make sense of their world” (Smith & Osborn, 2003, p. 51). Interpretive Phenomenological Analysis (IPA) was also chosen for the present study because it primarily acknowledges the relevance of language in expressing perceptions and experiences and does not focus narrowly on the historical contexts that have guided and moulded the meaning of the discourses used.
Target Population

The target population entails the whole cluster of cases about which the researcher would like to draw generalizations (Polit, Beck, & Hungler, 2001). For the present study, the target group was homosexual men in-school and out of school in Ghana.

Inclusion criteria

The inclusion criteria required participants to self-identify as men in a homosexual relationship. Specifically, homosexual men/participants should have had anal or oral sex with a male partner(s) within six months of participating in the present study. The age requirement was a minimum age of 16 years. According to Anarfi and Awusabo (1993) sexual networking among the youth in Ghana begins at the age of 16 years. Survey instructions were in English. Respondents were required to read and respond in English.

Exclusion Criteria

The criteria for exclusion were self-identified bisexual men. Homosexual men below 16 years and above 45 years were excluded from participating in the present study.

Sampling size and Sampling technique

For the qualitative study, sampling technique was purposive in nature and participants were recruited by word of mouth, through the gay peer educators who were recruited as research assistants. According to Polit, Beck and Hungler (2001), purposive sampling is a non-probability method in which the researcher recruits study participants on the basis of private judgments about appropriate sample representation. Nine participants were recruited for the present study. However, the first three interviews served as pilot interviews. Participants in the pilot study were given a general overview of the semi-structured study questions, to look through and contribute some questions to the list. Only six of the nine
interviews were used in the data analysis. Interviews were arranged with interested participants with adequate briefing about the scope of the study and also to seek informed consent.

Participants were also informed of the kind of questions that were of interest to the researcher and allowed to view an information sheet which had some information on the present study and its added benefits to the society at large and the gay community. This included fostering the comprehension of issues about MGRC for Ghanaian males, and the understanding from beneficial cultural constructs for coping. It was further emphasized that participation in the present research was completely voluntary and one could opt out of the study at any point in time. Prospective participants were given general overview of study questions to look through and to add some questions to the list. Participants then signed informed consent forms after giving verbal consent for participation.
Table 9: Shows the demographic characteristics of participants for study two.

<table>
<thead>
<tr>
<th>Sex-Role Preference</th>
<th>Gender</th>
<th>Relationship Status</th>
<th>Level of Education</th>
<th>Religion</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>FSRP</td>
<td>Male</td>
<td>Single</td>
<td>Senior High School</td>
<td>Christian</td>
<td>Unemployed</td>
</tr>
<tr>
<td>FSRP</td>
<td>Male</td>
<td>Attached</td>
<td>University</td>
<td>Christian</td>
<td>Student (unemployed)</td>
</tr>
<tr>
<td>FSRP</td>
<td>Male</td>
<td>Attached</td>
<td>Polytechnic (HND Certificate)</td>
<td>Christian</td>
<td>Administrative assistant with a private firm</td>
</tr>
<tr>
<td>FSRP</td>
<td>Male</td>
<td>Single</td>
<td>Senior High School</td>
<td>Christian</td>
<td>Fashion designer</td>
</tr>
<tr>
<td>MSRP</td>
<td>Male</td>
<td>Attached</td>
<td>Tertiary Graduate</td>
<td>Christian</td>
<td>Administrative Officer</td>
</tr>
<tr>
<td>BSRP</td>
<td>Male</td>
<td>Single</td>
<td></td>
<td>Christian</td>
<td>Self-employed</td>
</tr>
</tbody>
</table>

Table 9: this show some demographic characteristics of the present study sample. Due to the sensitive nature of issues on homosexuality in Ghana, the table excludes names and locations of participants. The characteristics of the sample obtained included homosexual men’s age, educational background, sex-role preference, family structure, marital status, religion, number of children, ethnic background and place of origin. In all, six young homosexual males participated in the second study and their ages ranged from 18 to 30 years. All participants were self-identified homosexual men with various academic and professional backgrounds. All participants were reported as Christians. Specifically, only one attended an Anglican church. The others identified with the various charismatic churches. Only, three of
the participants noted that, they grew up mostly in intact family structures (both parents). Three of the participants reported were attached (i.e. had active gay partners). The majority of participants (specifically, four of them) reported being sexually abused by a familial relation, such as, male cousins, family members, and significant others, such as a teacher which gradually led to their introduction and subsequent initiation into homosexuality. There were two tertiary students, a fashion designer, and two unemployed males. Majority of homosexual men (four of the participants) indicated they preferred the Female Sex Role Orientation/Preference (FSRP). Only one participant acknowledged strict preference for Both Sex Roles (BSRP). One participant also indicated strict preference for male/Masculine Sex Roles (MSRP). The majority of participants had at least a Senior High School education. The majority of the participants resided along the coastal belt with a few residing in Tema, Osu and other locations in the Accra Metropolis. No children were mentioned.

**Specific Aims and Objectives**

1. To describe how homosexual men describe their experiences of MGRC in a broader cultural context.

2. To determine how homosexual men construct and define their own masculinity.

3. To explore cultural coping strategies adopted by homosexual men.

4. To explore goals set up for themselves and their partners on Gender Roles (Conflict).

**Interview Schedule/Data Gathering tool**

Studies such as (Good et al., 1996; Good, Heppner, Debord & Fischer, 2004; O’Neil, Good & Holmes, 1995) have tended to lay much focus on the MGRC of heterosexual men. Although, Simonsen, Blazina, and Watkins (2000) employed homosexual men in their investigation of MGRC experiences, there has not been much qualitative work to investigate
the cultural underpinnings of the MGRC construct and the adoption of cultural coping strategies.

An interview schedule was put together based on the results of the previous study (study one). This was carried out in consultation with the principal thesis supervisor and some inputs from the homosexual participants. The semi-structured questions were to help the researcher gain comprehension into the male role conflict experience of the respondents so as to fully recognize their narrations and also help contextualize their narrations. Probing questions were asked where responses provided by participants needed further clarification. Most participants were a bit reluctant giving out information and acknowledging that there were differences within the ‘breed of the male specie’ in terms of sexual preference. For the majority of the participants there were no differences; it was a matter of choice or preference.

In most homosexual communities and gay sub-cultures, discussions about masculinity status and related issues are held most sacred and are ‘taboo topics’ especially if a participant is not so comfortable with the interviewer to whom the participant is disclosing that information.

Examples of research questions in the interview schedule include:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Are there different kinds of males? (If yes, probe)</td>
</tr>
<tr>
<td>2.</td>
<td>Can you share with me what you think identifies you as a man/male?</td>
</tr>
<tr>
<td>3.</td>
<td>In your experience, what does it mean to be gay?</td>
</tr>
<tr>
<td>4.</td>
<td>What do you think it means to be a man, and to be gay at the same time?</td>
</tr>
<tr>
<td>5.</td>
<td>Have you been in any situation that makes you feel less of a man? (Probe)</td>
</tr>
<tr>
<td>6.</td>
<td>How did you cope? Probe</td>
</tr>
<tr>
<td>7.</td>
<td>Can you give me examples of Ghanaian cultural values about maleness you still hold on to and practice?</td>
</tr>
<tr>
<td>8.</td>
<td>Can you tell me any values on Ghanaian maleness which you feel are no longer important to your life presently and could you give me any examples of such?</td>
</tr>
</tbody>
</table>
**Interview/Data Collection procedure**

Using the designed semi-structured interview as a guide, the researcher allowed six homosexual participants to explore areas of interest from participants’ perspective. According to Smith and Osborn (2003), this promotes a rich source of data. Participants were asked to read the informed consent and ethical clearance certificate before proceeding with the present study. The informed consent discussed the scope of study, its voluntary participation, purpose and procedures, confidentiality, anonymity, possible risks and discomforts and it also provided researcher’s contact information in case prospective participants had questions about the present study.

Once all questions and concerns were addressed, participants were given the consent form and asked to sign to indicate that the informed consent was well understood. Interviews on the average lasted for one hour and thirty minutes; and interviews were conducted at the seminar room of the Psychiatry Department, Korle-bu. The interviews were conducted in English and the *Twi* language. Most of the participants interviewed were a bit hesitant about answering questions about situation that made them feel less of a man. For some, this was captured later on during the interview so as to ensure that they were adequately relaxed and ready to narrate their stories. Participants were assured that information gained from recordings would be kept confidential. Some participants appeared seemingly tensed up at the beginning of the interview but they appeared more calmed as the interview progressed from one stage to another and they began to pour out their unique experiences and their “untold stories”.

Participants were reassured that there were no rights or wrong responses to questions since they were architects of their own experiences. The interview was carried out with a
digital recorder. Participants were reminded of the topic under discussion when they veered away from the subject area.

After the interview, participants were given relevant information about clinical psychological services in Ghana and where they could receive professional psychological support when they needed one without stigmatization. Participants were also refreshed with a bottle of soft drink and a pie. Subsequently, the email address of the principal thesis supervisor, in the event of further questions and psychological service was given to participants. At the end of the discourse, participants were allowed to listen to original recordings and indicate relevant portions they did not consent to, however none of them did that. This practice was to encourage the correction and indication of misrepresentation of their narrations in accordance with Mertens (1998) outlook for ensuring creditability of qualitative data. Most participants were satisfied with the representation of narrations and opted for hard copies of the completed thesis work.

Interested participants who offered their emails were told the copies of the results of the study would be communicated to them electronically. All code of ethics prescribed by APA was strictly adhered to.

For the qualitative data, participants were informed that the interview would be audio-recorded and that all names and personal information would be kept anonymous. Participants were also informed that the audio-recorder and all hard copies of the research materials with important details about participants would be kept in a safe place where no one would have access to except the researcher. Information regarding the present study and transcriptions were stored on the laptop and would be pass-word protected. Participants were informed that the interview would be transcribed in full and the voice recordings would be subsequently destroyed after the thesis work has been fully examined and passed.

Furthermore, participants were assured that verbatim quotations from the transcriptions which would be used in the present thesis work and future intellectual
publications would be fully anonymised. Due to the sensitivity of sexual orientation issues in Ghana, participants were told that they could abandon any question they felt uncomfortable with. Usually, regarding the experiences of homosexual men, sensitive issues of homosexuality were negotiated with either an advocate working on behalf of the gay men in Ghana, or familial relations who are held in confidence by the gay men, or a gay male authority figure that they are familiar with and other allied health professionals. As a young female researcher, the interviewer fell into none of these categories for the homosexual men so negotiating masculinity issues was quite a bit of a challenge. It usually required other unrelated questions to be asked to break the ice to get them more relaxed and then more sensitive issues discussed later.

Field Notes

Although a private notebook was kept for recording participants’ key observations and non-verbal responses, it was also observed that some participants were sensitive to note taking. According to Stern (1985), field notes are relevant for future research, for explaining and guiding findings. For such sensitive participants, the researcher could not keep a research diary to record other serendipitous ideas and overt observations that cropped up during discussions which were not within the scope of the main interview but mental notes were taken of such encounters and recorded after each interview session.

Data Management

All audio recordings were extracted on a laptop and data were password protected. Participants were informed that the interview would be audio-recorded and that all names and personal information would be kept anonymous. Participants were also informed that the audio-recorder and all hard copies of the research materials with important details about participants would be kept in a safe place where no one would have access to except the
researcher. Information regarding the present study and transcriptions were stored on the laptop and were password protected. Participants were informed that the interview would be transcribed in full and the voice recordings would be subsequently destroyed after thesis work has been fully examined and passed.

**Data Analysis**

All aspects of the data, including transcribed data, field notes were analyzed. The step by step analytic approach proposed by Smith and Osborn (2003) was employed in the analysis of data used in the present study. This includes leaving two spaces on the left and right side of the transcribed data. Relevant information brought to the fore during revision and reading was noted on the left side whilst emerging themes were indicated on the right side. Subsequently, emerging themes from the first transcribed data were thoroughly explored for relationships and associations to each other and then rearranged into clusters and then checked against data for accuracy. As a result, a table of superordinate themes and subthemes were derived and literature that confirmed these themes was written beside them. These stages were repeated for subsequent transcripts which led to a master table of superordinate and subthemes while exploring for new themes as well. For example worry, frustration, uncertainties, intra-psychic confusion, distress were all clustered under the superordinate theme of psycho-sexual stressors adhering to gender roles with subthemes of anxiety, stress etc as shown in the table below. Direct quotes from participants were used to support the themes that emerged. The superordinate themes were:

1. Participants’ reflections on challenges/conflict situations experienced by Homosexual men in adhering to rigid traditional masculine gender roles.

2. Participants’ reflections on their varying coping styles.

3. Participants’ view on their current ideations on masculinity and constructions of masculinity.
4. Participants’ reflections on their perceptions of ‘gayness’ and masculinity.

5. Participants reflections on the influence of masculinity on sex-role preferences

6. Participants’ reflections on goals they had set for themselves and their partners in terms of gender roles (conflict).

In the initial stages of data reduction and for the purposes of codification and categorization, FSRP was used to represent homosexual men of feminine sex role preference and MSRP for homosexual men of male/masculine sex role preference and BSRP for verbatim quote from a homosexual man of both male and female sex role preference.

Methodological Rigour

Methodological rigour was used to reduce preconceived ideas and prejudices held by a researcher on the topic of investigation. According to Mertens (1998) ‘the focus is on understanding how individuals create and understand their own life spaces’ (p.169) as expressed by participants in the present study. However, some relevant strategies prescribed by Mertens (1998) and Lincoln & Guba (1985) for confirmability, credibility and dependability of qualitative data guided the analysis and interpretation of the data more thoroughly. Confirmability serves as an in-built check on any traces of researcher subjectivity or biases which may have influenced interpretations of findings. Fellow PhD colleagues reviewed the transcribed data and field notes to establish if study results were confirmed by the transcribed data (Mertens, 1998). Feedback helped to position interpretations of data in a more objective framework. Dependability is synonymous to reliability of data. A dependability measure through peer audit and peer rating was used to ensure that the transcribed data were in consonance with the semi-structured questions and further probing used in the study. This was to ensure that the questions were in line with the present study’s aims and objectives. Credibility of data was achieved by sending transcribed data to
participants and also allowing them to listen to audio recordings to review data to ensure that their views were well represented.

**Ethical Considerations**

Ethical clearance for study one and two were sought from the Institutional Review Board of the Noguchi Memorial Institute for Medical Research, University of Ghana. All ethical guidelines prescribed by the American Psychological Association in relation to the use of human participants were strictly adhered to. Confidentiality and privacy of participants were addressed. Participants were first briefed on the research topic and the purpose of the study. This was all captured in the informed consent. Participants were told that they could withdraw from interviews at any time and they were also not obliged to answer questions they didn’t want to answer. Participants were required to sign the consent form before interview commenced. No participant declined to sign a consent form or end interview before the interview was officially ended.

Due to the sensitive nature of the questions, free clinical counseling and psychotherapeutic services were made available for participants who may have experienced emotional trauma or psychological distress during or after the interview discussion.
FINDINGS

Introduction

The purpose of the present second study was to explore Masculine Gender Role Conflict (MGRC) in a wider context among homosexual men in Ghana. Six homosexual men were interviewed about their experiences in relation to masculinity and masculine gender role conflict. During the analysis of data, six superordinate themes emerged and these were arranged into categories with their corresponding sub-themes. The themes that emerged were obtained from the interview data using homosexual men’s personal verbal accounts. This was carried out in consonance with the aims and objectives of the present study. This section includes sample characteristics and presentation of thematic findings.

Sample characteristics

The characteristics of the sample obtained included homosexual men’s age, educational background, sex-role preference, family structure, marital status, religion, number of children, ethnic background and place of origin. In all, six young homosexual males participated in the second study and their ages ranged from 18 to 30 years. All participants were self-identified homosexual men with various academic and professional backgrounds. All participants were reported as Christians. Specifically, only one attended an Anglican church. The others identified with the various charismatic churches. Only, three of the participants noted that, they grew up mostly in intact family structures (both parents). Three of the participants reported were attached (i.e. had active gay partners). Majority of participants (specifically, four of them) reported being sexually abused by a familial relation, such as, male cousins, family members, and significant others such as a teacher which gradually led to their introduction and subsequent initiation into homosexuality. There were two tertiary students, a fashion designer, two unemployed males and one senior high school graduate. Majority of homosexual men (four of the participants) indicated they preferred the University of Ghana http://ugspace.ug.edu.gh
Female Sex Role Orientation/Preference (FSRP). Only one participant acknowledged strict preference for Both Sex Roles (BSRP). One participant also indicated strict preference for male/Masculine Sex Roles (MSRP). Majority of the participants had at least a Senior High School education. Majority of the participants resided along the coastal belt with a few residing in Tema in the Accra Metropolis. No children were mentioned. For the initial stages of data reduction and for the purposes of codification and categorization, FSRP was used to represent homosexual men of feminine sex role preference and MSRP for homosexual men of male/masculine sex role preference and BSRP for verbatim quote from a homosexual man of both male and female sex role preference.

**Thematic results and Discussion**

Interestingly, according to Smith and Osborn (2003), the IPA allows for a combined technique where study results and discussion can be merged and discussed in a single section. The technique includes the presentation of identified superordinate themes during data analysis by imbibing related and extant literature to demonstrating the practical significance of the findings of the study. The overall purpose of such a technique is to allow a researcher delve into a detailed and in-depth narrative that involves all aspects of study findings, analysis of data and the application of relevant excerpts from the transcribed data and relationships to existing literature.

Using the Interpretive Phenomenological Analysis (Smith & Osborn, 2003), six main superordinate themes was uncovered in the participants’ responses to interview questions. To avoid replication of questions, some questions were collapsed by using a cluster- analysis or superordinate themes procedure. Based on their dominance, frequency of occurrence and richness throughout data, superordinate themes were recognized by extracting information from the common themes that emerged within and across interviews. The six superordinate
themes with their corresponding sub THEMES obtained for the present study were the following:

<table>
<thead>
<tr>
<th>SUPERORDINATE THEMES</th>
<th>SUB-THEMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSYCHO-SEXUAL CHALLENGES</td>
<td>• Intimidation from peers</td>
</tr>
<tr>
<td></td>
<td>• Public disclosure of sexual identity</td>
</tr>
<tr>
<td></td>
<td>• Playing reverse roles</td>
</tr>
<tr>
<td></td>
<td>• Conforming to socio-cultural definitions of manliness</td>
</tr>
<tr>
<td>CULTURAL COPING STRATEGIES</td>
<td>• Sense of sexual identity</td>
</tr>
<tr>
<td></td>
<td>• Value systems</td>
</tr>
<tr>
<td></td>
<td>• Religion</td>
</tr>
<tr>
<td></td>
<td>• Family and friends</td>
</tr>
<tr>
<td>Construction and Ideations on Masculinity</td>
<td>• Traditional male attributes</td>
</tr>
<tr>
<td></td>
<td>• Traditional male roles</td>
</tr>
<tr>
<td></td>
<td>• Work and Career achievement</td>
</tr>
<tr>
<td></td>
<td>• Schools on masculinity</td>
</tr>
<tr>
<td></td>
<td>-Traditional agents</td>
</tr>
<tr>
<td></td>
<td>-Non-traditional agents on masculinity</td>
</tr>
<tr>
<td>Perceptions of Gayness and Masculinity</td>
<td>• Masculine Emotional traits</td>
</tr>
<tr>
<td></td>
<td>• Cognitive traits of gayness masculinity</td>
</tr>
<tr>
<td></td>
<td>• Affective traits</td>
</tr>
<tr>
<td>The influence of Masculinity on Sex-role preferences</td>
<td>The influence of Masculinity on Sex-role preferences</td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td>---------------------------------------------------</td>
</tr>
<tr>
<td>• Behavioural traits of gayness in masculinity</td>
<td>• Behavioural traits of gayness in masculinity</td>
</tr>
<tr>
<td>• Masculine Gay traits</td>
<td>• Masculine Gay traits</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goals set for gender roles</th>
<th>Goals set for gender roles</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Gay socio-sexual power inequalities/gay sex roles</td>
<td>• Gay socio-sexual power inequalities/gay sex roles</td>
</tr>
<tr>
<td>• Affective security traits</td>
<td>• Affective security traits</td>
</tr>
</tbody>
</table>

**Psycho-sexual Challenges**

One of the major superordinate themes identified in exploring the experiences of homosexual men were challenges associated with strict gender role expectations and performances. On this theme, psycho-social gender role stressors were the social, cultural and psychological factors that acted as distress variables to their general well-being, whereas sex-role preference/sexual orientation-related challenges were restrictive context-specific variables that affected their core existence/survival as males and their sexual preferences as well.

Observably, homosexual men expressed a spectrum of discomfort experienced in their bid to conform to social gender role stereotypes and prejudice. This is consistent with extant literature (e.g., Flett, 2007; O’Neil, 2008) and O’Neil et al.’s (1986) assertion that males who conform to inflexible, restrictive social stereotypes experienced psychological distress but the extent of appreciation of the distress; the type of distress and its paramount cultural and
psychological underpinnings and implications on homosexual men were some of the primary focus of this second study. The second study also sought to explore and at the same time comprehend findings obtained in the first study from a contextual perspective. Most participants interviewed employed varying modes of acknowledging the existence of their psycho-sexual challenges. While majority viewed directly their experiences as intra-psychic conflict situations, few described situations without necessarily linking those experiences to ‘conflict situations’. During in-depth interviews, it was somewhat unsettling for the interviewer to associate participants’ facial expressions with conflict situations and psychological wellness. Much of the time, it was observed that their facial expressions / body gestures of present study’s participants were not so much in agreement with their verbal language in the expression of the discomforts associated with the stresses they experienced than anticipated. At certain points of narration, some participants showed a mixed reaction. Although the majority of the participants verbally attested that they no longer experienced any distress associated with gender role concerns, their subsequent non-verbal language and gestures implied otherwise.

Some significant common themes in this section raised by participants included, conforming to cultural definitions of masculinity, stress/conflict involved in being in the closet, putting up pretenses/intimidation from peers, playing reverse roles, and even more evident, the issues that made them feel less of a man. Significant amongst these variables were also stressors that caused the conflict situations and vivid description of the conflict situation itself. More often, it was difficult to separate these two events from participants’ narrations.

**Intimidation from peers as a stressor**

Obviously, most of the homosexual men were being reminded of some of the challenges they were already aware of. In terms of psycho-sexual challenges experienced by
homosexual men in Ghana, one critical issue that participants had to cope with was intimidation from peers. Only one participant appeared to guess and think thoroughly when questions on conflict situations were posed. Expressions of conflict were varied and sometimes expressed indirectly. Sometimes stressors/conflict was also expressed in the form of intimidation from fellow straight peers. Without hesitating, one participant voiced his frustration when without his consent, he was forcefully included in what he expressed as a ‘masculine game’ by his peers:

“several occasions, sometimes they are going to play football, without asking me if I want to play or not they write my name, whether I like it or not I’ll have to go and play football, because I can’t play it makes me feel less like a man. And then sometimes, when I am with them and they say, ‘do what the men are doing’ it brings me, it makes me conscious that am not behaving like a man should and sometimes they would force you to get a girl friend or something, they will say hey if you don’t have a girlfriend it means you are not a man or stuffs like that. It makes me feel less like a man.”

(FSRP, 19 years old SHS graduate)

“Hmm..i do...when my friends are talking about girls...i am always quiet in their midst because I have nothing to say..yea that where I get my confrontations from!”

(MSRP, 25 years old tertiary student)

From the above progressive narrations, it is quite evident that “peer rating” and peer norms on masculinity are one of the systematic ways of appropriate masculine adaptations. Sanchez et al. (2010) noted that homosexual men were concerned about public appearance of maleness and may ultimately wish to feel manlier. “One has to do what the men do” to feel upgraded and regarded as a ‘real man’ even if that is tantamount to a crisis situation for the FSRP participant. It also seems that conceptualizations of manliness for the homosexual man
may at a point incubate at the participant’s level of unconsciousness until an external cue is given to elicit the known information of manliness which may have been suppressed into unconsciousness. This finding is interesting and significant. It also tends to corroborate O’Neil’s (1995) assertion that for the male, gender role performances may be conceptualized at the unconscious level, until an external event may trigger its relevance as demonstrated by the FSRP participant. According to Butler (2009), men may tend to define gender identity by various modules. This finding shows that MGRC conflict situations may be conceptualized at the interpersonal level for the homosexual man.

**Public disclosure of sexual identity as a stressor**

Without mincing words, another participant also expressed frustrations that goes with public disclosure of his sexual identity and sex-role preference that affects his outward/overt but obligatory gender role performances. Generally, fears of lynching and mob action, among others, have increased hidden minority groups in Ghana (Kramer, 2003). Therefore, most homosexual men in Ghana tend to be more closeted than open about their sexual orientation (Kramer, 2003). Subsequently, because in a contextual perspective, gender roles performances for homosexual men may tend to be perceived as a non-existing experience, homosexual men therefore have to conceal their sexual identity it is related overt gender roles performances from family and straight friends. Consequently, crisis ensues and every facet of their lives is affected. One participant laments:

“Sometimes, you have to... just recently, on Tuesday it was a festive time at our place so I had gay friends coming all over and I was with family so for family I had to be like a man and then for my my friends, they know me to be very very sissy, behaving like a girl and so my friends see me, they call me a name that when we see ourselves we call, they were calling me with that name and I had to respond the way I respond,
and family was around so how do I do it? I had to do it in such a way that family will think oh, I just know them from somewhere and not that I’m too like them so I wanted to get into the mood and be like them, hang around with them and then go and have fun because of the family I had to be straight and be like a man so it was a shock in itself”.

(FSRP, 20 year old SHS graduate)

“Sometimes I feel angry because... you know, sometimes I just feel that I am wasting my time and after all I am not doing the right thing! yea, that is what I feel sometimes that I am not doing the right thing! yea.. I get angry.. and sometimes I am in the mood, but I am not in the mood so sometimes.. I just blush it off!”

(MSRP, 25 year old)

From the above FSRP participant’s narration, there seems to intra-group culture requirement for gay gender role performance which must be exhibited regardless of the context in which one finds himself. However, there also seem to be some gray areas/unsettling matters in gay gender role issues and its apparent conflict experiences when ‘intra-group behaviour’ seems to contrast the ‘out-group’ gender role expectations for the appropriate gender role performances. ‘Switching in and out of mood’ of gay gender role performances as narrated by the MSRP participant and the apparent confusion of exuding overt sex-role preference behavior for the FSRP, may connote symptoms of unstable gay identity development. This finding is quite revealing and also tends to question gay identity development, gender role performances with its complex sex-role preference and its associated emotional well-being. Quantitative findings showed that sex-role preference was predictive of gay identity development among the present study’s sample. Simonsen (1998) found that gender role conflict was predictive of gay identity development among gay men. Although findings of the present study failed to support a predictive relationship between MGRC and GID, it is possible that the present study’s participants may not have fully achieved Cass (1979) last
stage of stable gay identity development which is the synthesis stage. Plausibly, most participants may be alternating around identity confusion, identity comparison, and identity tolerance stages of gay identity development as suggested by Cass (1979). Such nascent stages of gay identity development may be timely predispositions for gender role conflict experiences.

Notably, a sub-gay cultural interpretation and re-definition of Masculine Gender Role Conflict (MGRC) originates from the above noted FSRP participant. Here, masculine gender role conflict is not a mere adherence to restrictive and stereotypical traits as portrayed by O’Neil et al. (1981) but also discrepancies between sub-group gender role performances and out-group gender role expectations. The verbatim statements above lend credence to Gevissner’s (1999) assertion that due to the intrinsic cultural family value system in Africa, for instance, homosexual men may have ‘crisis experiences’ battling a midline between closetedness (i.e. living in the closet/level of outness) and family normative systemic orientation. Probably, this finding may be due to the entrenched gender role socialization in a collectivist culture like Ghana. According to Ampofo (2001) males in Ghana are inculcated with these ‘masculine virtues’ possibly from their active pre-teen years. As a result, utmost deviation from masculine norms may become problematic for minority men (homosexual men) in Ghana.

Most homosexual men articulated their frustrations in a heterosexist society where straight males make the gender role compliance rules for all males to follow. Participants expressed ‘a sense of helplessness’ in having to conform to the dictates of society. It is quite obvious that because in Ghana a system of patriarchy dominates (Akotia, 2005; Ampofo, 1999) straight men may be tagged as decision-makers and very relevant determinants in the implementation of social legislation, in almost every facet of endeavour.

Nonetheless, studies suggest that in Africa, men take a lot of pride in living up to society’s standards of ‘manliness’ (Ampofo, 2001; Foreman, 1999). This is guided purely by
pragmatic considerations of how a man should conduct himself to pass the test of masculinity. These findings, nevertheless, seem to lend credence to typical Ghanaian cultural and religious values on masculinity.

Playing reverse roles as a stressor

Sometimes, for homosexual men who played reversed roles, conflict situations were expressed in intra-personal experiences such as a ‘conscious’ intra-psychic conflict participants experienced. Increasingly, among homosexual men, intra-psychic conflict was a battle of schematic representations of socialized knowledge on maleness and its social attributions on gender role performances and reverse sex-role preferences which may be unique to homosexual men. Much of the time participants expressed the intrapsychic conflict as a dissonance between beliefs on maleness and apparent behaviour. However, from participants’ narrations these ‘painful events’ or seemingly conflict situations were time-bound. Further, the findings from the present study revealed that the present ideations existed because participants had learnt to cope with reliving their painful conflict-situation experiences over and over again. For instance, two participants explain:

“Sometimes after sleeping with men I feel like I am having some malaria attack and sometimes after sex I hate myself and I don’t feel like going near a man again!”

(FSRP, 22 years old SHS graduate)

“That was when I made my mind not to play that role again! My conscience was telling me something else! Why am I a man then turning myself to be a woman! Why shouldn’t I remain to be a man! So that was when I said no I wouldn’t play that part!!”

(BSRP, 26 years old)
Intra-psychic conflict presented in varying modes as narrated by the above FSRP and BSRP participants. First were the psycho-somatic symptoms which often presented with strong somatic conditions such as body weakness. At other times, intra-psychic experiences were best captured in the deployment of literary tools such as engaging in a soliloquy where there is a split-self dissociation that enabled the individual to have a deeper introspective and internal dialogue with oneself to explore and resolve the ensuing conflict. According to the BSRP participant “the conscience” became the inner voice that enlightened him about his ordeal. This finding is interesting and seems to suggest some consequences of intra-psychic conflict, such as ‘a sex-role switching’ preference than an abrupt termination of same sex attraction. Despite the internal conflict homosexual men seem to encounter, it seems clear to suggest that participants know the conflict situations are time-bound. There also seem to be notable traces of a sense of learned helplessness associated with the intra-psychic conflict encounters in sex-role performances. Notably, this helps participants to relive and go through the same bout of intra-psychic distress/conflict situation repeatedly. For instance, one participant reiterated:

“I play both male and female sex role preferences.. and in the initial stages I used to experience discomfort a lot.. but these days I don’t feel any of those symptoms! When I sleep with a man then I ask myself ahh what am I doing.. ahh what is this?”

(BSRP, 26 year old purchasing officer)

Clearly, adopting both sex roles had a significant impact on participant’s life. Significant experiences of distress associated with ‘playing both sex roles’ as highlighted by the BSRP participant, were cumulatively linked with a private loss of manliness, negative self-concept, loss of self-control, increased feelings of helplessness, a compromised sense of socio-cultural male identity and ego-crisis.

From the above narration, it seems that homosexual men recognize and appreciate the ‘discomforts’ associated with the germinal stages of their sex-role preference. Participants
also tend to recognize and acknowledge the transitional phase of such distresses and its apparent termination stage as well. However, the use of the verbal expressions such as ‘aah’ and other symbolic literary tools tend to re-emphasize the point that distresses previously experienced may not seem bothersome superficially but might have found active outlets for expression.

Interestingly, intra-psychic conflict also emerged from vivid description of sexual experiences where they played the receptive role partner. One participant articulated:

\(P: \text{During sexual intercourse, a man inserts his penis into your anal cavity and it comes with pain, but you just have to accept it as part of life...sometimes during penetration you experience cuts and ...} \)

\(I: \text{Was that a conflict situation for you?} \)

\(P: \text{yes.} \)

\(I: \text{Can you tell me how it affected your psychological well-being?} \)

\(B: \text{... sometimes someone can even snatch that partner from you and that is enough you make you worried...you get worried...you feel sad sometimes you feel like attempting suicide! This also makes you move around with different partners!} \)

(FSRP, 22 years old SHS graduate)

Playing the receptive or the female sex role preference also had psychological and mental health implications such as suicidal ideations, risky sexual behavior (e.g. multiple sexual partners) for the present study’s participants. Interestingly, sex-role preference performances were a sub-culture requirement that participants recognized and efficiently contributed to. All these scenarios are attempts by homosexual men to own their unique experiences. Every conflict situation is unique and all (homosexual) men cannot experience the same distress as the male gender role conflict theory seems to propose. Conforming to
masculine gender roles according to Blazina, Cordova, Pisco, and Settle (2007) must not necessarily result in conflict for the individual.

Conforming to socio-cultural definition of maleness

It was clear from participants’ narrations that the general culture seemed to serve as a major stressor. From descriptions of what a man should be to expectations of who a man is, participants narrated how this conception fitted into the male schema. It was obvious that this contention normally emanated from situations where participants were unable to exert control over situations that expose them to conflict. Notably, these were situations that made participants feel less of a man. In most cases, participants insinuated that they felt powerless and stagnated by their inability to control the situation and dictate the precedence of events. For instance, some participants articulated:

“Hmm.. actually I went to the club with my friends and then they all had girlfriends.. they all had girlfriends.. and then I was the one out and then I thought if I wasn’t gay probably I might have also had a girlfriend or something to show.. it happens most of the time I can say that made me feel ...that made me feel less of a man.”

(MSRP, 25 years old tertiary student)

“That was when my mother said she had not seen me with a girl and then decided to ask if I had a girlfriend? Because of my gay identity I was forced to think about what prompted this question from my mother because I wasn’t that old enough to get married so I thought there was something behind that question”

(BSRP, 26 year old, purchasing officer)

According to participants, general cultural prescriptions of the manly experiences were as a result of familial and non-gay friends’ suspicions about their gay identity. Observably, from
the above narrations, these were indications, strong enough to affect private/individual sex-role preference performances.

One participant was quick to voice that:

“I am always in the middle of girls..and even in the secondary school my colleagues would be teasing me.. but I don’t feel like going with the boys erhh... a man came proposing to me ..it made me feel less of a man because we know that in normal relationships, I would have gone out to propose to someone.. and when I have sex with men I am sexually satisfied than women..” (FSRP, 22 year old SHS graduate)

The picture is drawn by the FSRP above participant. The use of words such as ‘normal’ in the participant’s descriptive diction of heterosexual relationships implies that gay men may tend to see themselves as deviating from ‘the norm’ which affects their subsequent perception of events in conflict situations. It also seems that the tenets of masculinity seem to espouse the values of a man going after a female rather than the man going on a sexual adventure with another man. There seems to be a carry-over effect of heterosexual man's conception of masculinity which now seems to be interfering with gay men’s gender role performances.

In all, the majority of the present study’s participants indicated that they no longer experienced discomforts associated with the conflict situations. Notably, some variables explained by study participants as additional determinants of sexual encounters with other men (which influenced conflict and subsequently affected their psychological well-being) were participants’ Christian background and poor financial condition. Subsequently, attributions of conflict situations to emotional well-being were made mentioned of by FSRP participants. One participant did not, however, directly comment on this research question. The participant preferred to stay resolute on the issue than discuss it in detail. This participant was a university student and had been gay since childhood. Overall, participants’ narrations/responses suggested that, participants identified with conflict situations. Three participants appreciated that socially desirable masculine traits also caused crisis situations
for them. Most significantly, some of the participants failed to directly associate conflict situations with their psychological well-being. Even when linkages were made, it was noted that substantive coping techniques were already in place as observed by Jones’ (1998) study and Sharpe, Heppner and Dixon’s (1995) studies. Conversely, this finding does not support holistically, the tenets of the gender role conflict theory which seem to assume that anxiety and stress are rigidly associated with strict adherence to gender role which in turn, affects psychological distress and help-seeking behaviour. It is significant to note that, on the whole participants’ narrations limit the effect of such crises on the total mental well-being of homosexual men.

More often, the interviewer had to probe further to reveal the effect of such crisis situations. Perhaps, participants had found less-than-simple ways of resolving crisis situations they encountered daily, so perceived conflict and real situations might have been redefined as detected during subsequent narrations and discussions. Gender Role Conflict situations for homosexual men were re-defined and thus seemed cushioned. Conflict emanated not only by conforming to gender roles, but concepts such as ‘compliance to reverse roles’ and sexual orientation such as ‘being gay’, and not bisexual (which seems more acceptable within the wider sexual orientation sub-culture) were sources of conflict. This finding also validates the fact that, the male gender role theory is unable to grossly account for non-conformity of gender role norms among homosexual men, and the present study’s findings re-emphasizes the point that the original studies provide empirical validation for the gender role conflict theory were based on a heterosexual and western sample. Therefore, the theory may be lacking generalizability to non-western and non-heterosexual samples. The present study findings were mixed for intra-group differences in homosexual men, i.e. FSRP, BSRP, and MSRP. It was observed that FSRP and BSRP were more likely to relate gender role crisis to their psychological wellness than the MSRP as explained and observed above.
One interesting and serendipitous finding which was missing from extant literature is the attributions and linkages of masculine conflict situations to spirituality among homosexual men. Here, some participants attributed the impulsivity of the act of homosexuality with its ensuing gender role conflict to ‘an invisible hand’ that regulates sex role preferences and sexual urges over men who have sex with other men. One participant articulates: “homosexuality is like a spirit because sometimes you can’t tell if it’s a spirit that controls you or..” (BSRP, 26 year old, Purchasing officer). The above finding is significant and this supports Mbiti’s (1975) statement that to be African is to be spiritual. However, this finding also contradicts the tenets of African masculinity. In Africa, masculine men are expected to be physically, emotionally and spiritually strong and not-to-be-controlled as identified by study participants. Depictions of spiritual regulation as noted by the BSRP participant in the above verbatim quote are ‘feminine’ and may possibly explain why BRSP may be a midline on the homosexual gender/sex role continuum and possibly more strayed towards feminine orientation in semblance with the FSRP than the MSRP. This is indeed revealing.

Significantly, there wasn’t much difference between MSRP, BSRP and FRSP participants with regards to psycho-sexual challenges encountered with gender roles and conflict situations. However, it was detected that throughout narrations, FSRP and BSRP were more likely to relate speedily, crisis experiences to their mental, emotional, psychological and physical well-being than the MSRP. This was indeed a significant finding. Some reasons may have accounted for such a significant finding. Possibly because the majority of the participants were FSRPs, their opinions might have dominated overall interviews conducted. Masculine men are not easily weakened by physical and psychological illnesses (Foreman, 1998) and this might have confirmed the assertion that to be ‘man’, one should have the capability to endure pain and brood over one’s problems than to share it out.
or directly relate it to mental instability which is a regarded as a sign of ‘weakness’ and femininity for the MSRP. The MSRP finding is consistent with Jones’ (1998) and Shepard et al. (2003) findings, which suggest that for ‘socialized masculine men’, MGRC was not predictive of psychological distress.

Observably, based on deductions from non-verbal expression, it was not so clear if the ‘discomforts’ associated with the psycho-sexual challenges/stressors narrated by participants, were imaginary or real or perhaps events, participants had heard their colleagues had experienced and therefore they had imbibed those experiences into their personal observations.

Cultural strategies for coping

Coping was also another superordinate theme that emerged out of the analysis. For homosexual men in the present study, coping with sexuality, was not only an apparent issue, but ‘a systemic order of concern’. For participants, there was an entrenched ‘systemic disorder’ on issues relating to homosexuality and manliness so participants had learned to negotiate inconspicuously to live ‘a normal life’ and also to feel integrated into society.

Coping is generally an outlet for utmost adjustment and a means of building resiliency towards an undesirable situation or a stressor. O’Neil (2008) asserts that qualitative explorations of Gender Role Conflict (GRC) should harness on context-specific variables such as culture-specific coping ties. According to Utsey et al. (2008), Africentric cultural specific–coping such as family support, religion and friends are endemic to the African system of coping for survival and adaptation. This shows that, in coping with Masculine Gender Role Conflict (MGRC), Ghanaian men in general were more likely to employ strong family ties, values, a strong sense of attachment and religion, depicting a collectivist perspective. Various researchers have suggested one system of coping for African
collectivist-orientation, e.g. religion over significant others (Mbiti, 1975). However, not much has been documented on homosexual men in Africa.

Studies have shown that males in gender role conflict situations are more likely to employ some culture–specific coping techniques (Wester, Kuo, & Vogel, 2006). Chiang, Hunter, and Yeh (2004) emphasized that participants of African descent for instance, as a result of their collectivist orientation were more likely to adopt Africentric-specific coping strategies such as friends and religiosity in accordance with the African worldview system/orientation. For the homosexual men interviewed, participants identified with Africentric cultural coping-techniques. Some participants spoke consistently about religious rituals such as praying religiously and talking to a pastor about conflict situations when questions were further probed. Most of the participants acknowledged they lived in the closet, suggesting their coping styles were ‘closeted’ as well. From the analysis of the one-on-one interviews conducted, some common themes were identified in terms of Africentric coping strategies. The common themes among the five participants included proactive collective coping such as family and friends, religion and sense of identity coping strategies. Other subtle but complex psychological coping styles (sub-themes, such as denial, learned helplessness, avoidance and escape coping, emotional dissociation, distancing in relationships and communication) were also identified among participants’ coping encounters. For instance, one participant asserted: “I avoided his conversation and I avoided my friends, anytime he says that I change the topic and then, so we had to leave where we were... ” (FSRP). According to Moos and Swindle (1990) issues related to stress and coping must be evaluated within culture-specificity; dissecting the cultural and situational variables. From the analyses of the qualitative data, some significant themes were identified relevant to coping.

Sense of sexual identity- coping strategy
Here, a sense of identity, in terms of sexual orientation and sub-group culture provided shelter for homosexual men in times of conflict situations that bore serious consequences for their psychological and physical health. For homosexual men, active sensitization of sub-cultural self-identity seems to serve as positive buffers for atypical behaviours. A sense of identity among homosexual men could be explained as an overall positive appraisal and recognition of oneself and reception of one’s custom and practices as appropriate for basic human functioning. It was relevant to explore specific cultural coping strategies which were employed due to the peculiar conflict situations they encountered on a daily basis. For six of the participants, what allowed them to cope was having a sexual sense of identity. According to participants, this was reinforced through gay reunions, meetings at the gay clubs where active activities such as ‘dancing’ and having fun with each other occurred on a weekly basis. Studies have shown positive relations between ‘coming out’ and well formed sexual identity for homosexual men (Plummer, 1975; Troiden & Good, 1980).

According to most participants, a sense of identity helped them to cope with gender role conflict situations by unleashing a sense of acceptance and fulfillment. For the majority of participants, in-group identification, enhanced a sense of acceptance, identity and fulfillment by keeping intact with their perceptions of themselves as ‘gays’ and also defined a psychological boundary of what they could do and could not do to handle daily occurrences/challenges. One participant expressed how networking among gay men encouraged him to cope with distress. In terms of identity, one participant noted that,

“P: meeting at the club..every Wednesday only gays and bisexual men meet at that gay club
I: What activities are you engaged in there?
P: dancing..”

(FSRP, 23 year old fashion designer)

From the above narration, participant relates to the relevance of maintaining a solid sense of identity, this disambiguates who they are in terms of their sexual orientation and possibly
help them to adopt and share relevant coping mechanisms for their stressors with significant others. This concept is further expounded by other participants, for instance:

“..Until I joined my NGO, I didn’t involve in any sexual activity, but I got new friends and through conversation, they made me understand that there was something like this that they were doing and if you’re identified as this, this is how you will feel, then it means you have to do something like this. That’s it, it made me feel like I was lost but now I’m found, I met the right people who would accept me for who I am because at first I couldn’t tell anyone about this but when I told them, they identified that they also feel the same way and this is what they do and they are happy so I felt I’ve found the right people who are going to give me the right help I needed to make me live a happy life and indeed for some time I became very very happy, I always wanted to be with them because I felt they were the only ones who were going to accept me for who I really was and I could do anything I wanted to do, which I can’t do with other people because they may not accept it” (FSRP, 20 year old SHS graduate)

Here, the FSRP study participant recognizes and at the same time unravels the intrinsic and extrinsic motivation in having and maintaining a strong sense of identity. This includes a vivid identification of who they are, as a thriving coping resource to deal with the psycho-sexual challenges. The FSRP participant also briefly touches on the negative consequences of group non-identification or one losing out on a sense of strong identity which is susceptible to malfunction. Plausibly, because boys and girls may have a biological inclination to prefer dissimilar activities, and so are socialized to prefer the company of their own sex (LeVay & Valente, 2003). Therefore, a sense of identity for gay men is the rekindling of a cohesive group alliance and affiliation that a homosexual man may have been intrinsically socialized to accept. This finding is significant since it proved to be the strongest
and most consistent of the cultural sub-gay coping ties employed by the present study’s participants.

The selective use of words such as ‘networking’, ‘interact’, ‘celebrate’, ‘socialize’, ‘drink’, and ‘merry making’ by participants reinforces the ecstasy in their ‘sense of identity’. This is a significant finding. This is because networking as portrayed by the above participants is linked with survival for the present study’s participants. Interestingly, there is a gap in the literature on coping–sense of identity and its Africentric/cultural dynamics among homosexual men that need rigorous scholarly appreciation. However, the above verbatim statements support collective coping as intrinsic to homosexual sub-cultural coping orientation. This strategy can also be understood from the basic individual unit where personal identity and its inherent features are acquired within a cultural and biological structure (Bugra, 2004). Meek (2011) lends credence to Bugra’s (2004) assertion by emphasizing that, an individual’s private assessment of the cost of masculinity (shaped by socio-cultural factors) influences one’s adoption of appropriate coping ties. Therefore, having a sense of identity is fundamental to appropriate coping strategies among homosexual men in collectivist cultures such as Ghana.

Some participants interviewed reported that, their sense of identity also emanated from a range of gay sub-cultural practices such as how they dressed, for instance, maintaining a ‘feminine outlook’ (for the FSRPs), verbal and non-verbal language, clothing etc. Typically through dressing (for instance, the classic homosexual men likely MSRP, dressed differently from the local homosexual men likely to be FSRP), and specifically through the way homosexual men walked and talked, gestures, ear and facial piercings, name-callings, group meetings etc, such obvious and latent behaviour were strong identifiable sub-gay cultural rudiments. More often, these have been symbolic and much easier to identify with in the open streets. This also helped to build a stronger sense of belongingness and sense of community among gay men from whom they could obtain...
support in times of lynching or physical assault. Essentially, it was a progression of a good cause they could contribute to, and affiliate with ideals of such groupings.

In like manner, the participants’ choice of words, such as, ‘gay club’, ‘dancing’, ‘right people’, ‘accept’, when explaining sense of identity is revealing. Evidently, the sense of identity verbatim quote by the FSRP participant seems to portray how relevant the need for recognition is for coping among homosexual men. The essence of relationships in terms of the personal/private need for meaning and the realization of significant others as far as homosexuality and coping are concerned is also emphasized by the FSRP participant. The above statement corroborates Pederson’s (1995) assertion that there is an increased likelihood that people who share more similarities in culture are more likely to associate with each other. Homosexual men are more likely to find solace in people who affiliate with the ideals of same-sex group behaviour. The dynamics of intra-group behaviour of homosexual men are best navigated and explored through the lens of social psychological principles. Group dynamic principles such as conformity, compliance, and groupthink primarily based on social, psychological group principles such as group cohesion and psychological sense of community may possibly explain such findings. This is indeed a significant finding.

Value systems-Coping strategies

Gyekye (1996) suggests that the traditional African socialization imbibes rigorous virtues of acceptable traits which demands that, an individual operate ethically appropriate behaviour within social contexts of morality. Similarly, values are endemic ethical-normative principles of the Ghanaian acculturation process, and some Ghanaian homosexual men portrayed and seemed to uphold these values in high esteem. Pargament (1997) suggests, that value coping strategies may be privately employed to gain a sense of significance. Ghanaian cultural value systems on manliness adopted as coping strategies were cited by some participants as aiding them to cope effectively and appropriately. One participant acknowledged:
"it means, it means, it feels so important to me, it means nothing much, because whether I behave like a woman or not and I can still take care of my family as expected of me then I see no reason why it becomes a problem but if I behave like a girl something and I’m a social nuisance to the family or to the society then there is a course for them to discriminate or stigmatize against me because I don’t bring any profit to them but if I still behave like a girl and I can still earn income to support the family and all that then why not, why should there be any problem?"

(FSRP, 20 year old SHS graduate)

It is significant to state that most of the values expressed by participants were intrinsic ideals of ‘manliness’ (for instance, of the caretaker / provider role etc) that helped them to cope and face crisis situations as a ‘man’ would be socially defined. According to O’ Neil (1982), men in general tend to be ingrained with masculinity values related to success and in this case “success with manliness”. Plausibly, success with masculinity is linked with an innate positive self-concept of manliness as indicated by the FSRP participant. In a study by Kramer (2003), Ghanaian gay men interviewed expressed concern about avoiding open gay mates and feminine outlook for fear of lynching and ostracization, suggesting that homosexual men had to put up masculine acts (such as the above breadwinner role) to avoid public notice and preferred sex-role identification. This explains and validates the above verbatim statement.

However, it was also noticed that when it came to Ghanaian value coping strategies and culture in general, some interviewees were trying hard and sometimes struggling to maintain a balance. One participant explained:

I was acting, they always knew me to be someone who acted as, but getting to understand, immediately I started involving myself in sexual activity, I changed in a way not like I started acting more like a girl, but I started acting more like a man because I was thinking people are going to notice that this is what I’m doing, I’m now involved in homosexual activity. When I was not involved in homosexual activity,
sometimes I could feel free and behave like a girl I want to be because I was never thinking they knew anything like that, but since I started involving myself in the sexual activity, it made me more conscious in a way I started acting with them because my male friends I could be within the same room and have my bath and stuffs like that, my mind was sexually enthused towards them. (FSRP)

“oh, ok, I remember when I was in SHS 3 or 4, I had to pretend I had a girlfriend because the people in my school were saying that I was gay, it was all over the school that ei, this guy is gay and stuffs like that so I had to get a girl in my school who was my friend to act as my girlfriend and then she will tell everybody I’m the boyfriend and then I will tell everybody she was my girlfriend and then people will let my name go for a while and think that after all he is not gay because he’s got a girlfriend and stuffs like that and I had so many female friends so they think, some of them think that I’m a womanizer or something like that. It affects me in a way, but possibly there is someone around who is thinking I am gay and would want to come to me or something, but because I had to change to make people think otherwise, he wouldn’t come to me again and possibly it could be financial loss or something because the person coming, maybe he could bring some financial income and because I had to pretend or something, he stays away”. (FSRP, 20 year old)

Here, homosexual men may seem to ‘forcefully’ want to adapt to the Ghanaian cultural value-system that defines who a man is, the important manly features and apparently fit in, so as to avoid any confrontations (conflict) with the society. The ‘pretense attitude’ by the two FSRP participants and playing the girlfriend-boyfriend facade by the FSRP participant seems to suggest that regardless of the fact that participants are aware and would want to adapt to the sub-gay culture, they are also mindful and conscious of the general African
collectivist culture on masculinity and try not to be seen as ‘dissenters’. This finding supports Meek’s (2011) model that the general culture (which could also seem to be a stressor in terms of MGRC) and sub-gay culture were important elements in defining and shaping the adoption of private coping strategies.

The proposition on values was quite interesting and seems to corroborate respondents’ earlier assertions on ‘emanating MGRC’. Thus, MGRC could produce either positive or negative consequences for both FSRPs and MSRP s depending on how it is handled and viewed and strategically employed. It was therefore not surprising the quantitative result showed that participants who scored high on MGRC also reported fewer problems with anger, anxiety and depression. This finding seems to contravene earlier findings that MGRC could have negative outcomes only (O’Neil, 1981). It seems that, if after projecting publicly MGRC before peers or social raters, the actor/victim fails to perform to expectations which are acceptable within the sub-gay culture, the actor’s poor performance or resolution would reflect negatively on the person’s behaviour and this could deter the person/gay from engaging in the subsequent MGRC behaviour. However, if the actor experiences conflict with the sub-gay culture, the actor/participant is applauded then MGRC serves as a maintaining/reinforcer variable for subsequent conflict situations as illustrated by the FSRP participant. In retrospect, MGRC could result in positive or negative consequences on the individual and its rippling effect on the society at large depending on how it is again handled as indicated earlier on.

Yet, on the same values sub-theme, one participant had a different view of events. He says: “I am someone who would want to live a life, a very very free life with a very very clean mind but because of society someone could just term me as a hypocrite which I’m not, I live a hypocritical life, can I say that? I live a dual life. Today I have to live like this and tomorrow I have to act like this and live like this. It tells people
that you don’t have to do this, do this do that but I don’t do what I say because of society but I am a very right person, a very very right person but I find myself in a wrong place”

The participant lamented on conditions in the Ghanaian society where only males who subjected themselves to the precepts on masculinity were appraised and tagged as real men. The above statements seem to be linked to the line of thought that conforming to the precepts of society means ‘the right citizen’. However, there seem to be an emerging paradigm shift where homosexual men are beginning to re-examine ‘dynamic society’ and the influence of technological upheavals. There is a gradual realization that even though the existing norms and values may not favour homosexual men completely, they are not obliged to accept everything society dictates and that they can also make choices for themselves based on how they want to live on. Butler (1999) argues for the clarion appreciation of the fluidity of gender concerns. It is possible that the present study participants are beginning to identify with Butler’s (1999) realizations. This could be explored further in the limelight of the typical Ghanaian man.

**Religion- coping strategies**

From the descriptive data on participants, it was most significant to note that religion played an integral role among homosexual men in Ghana. Participants interviewed reported they were Christians, the use of words such as ‘by God’s grace’, ‘chorister’, ‘faith’, ‘church member’, ‘pray’, ‘creator’ and other words reflective of religious jargons depicted their belief in God as crucial in their coping process. Five of the participants reported of their charismatic orientation and only one reported to be a protestant (specifically an Anglican). The most significant revelation was associated with questions that explored religious coping, their
perceptions of masculinity and homosexuality. God was imbibed in their narrations. Participants told, regardless of how society tagged them. One participant noted:

“Sometimes I take some of these crises as part of life so I don’t experience much conflict now! I know that I am not female and God did not create me as a female so I tag these experiences as part of life!”  (BSRP)

According to Baumeister (1991) religious practices allow people to cope with the stressors of the human life. By using religion as (a tool) an interpretive control of the conflict situation at hand, the above BSRP participant is suggesting that conflict situations are a normal occurrence and the use of the statement “as part of life” is a re-interpretation of the conflict situation to allow individual gain and feel a sense of control.

The perception held by one participant was that religion was not only a perceived support, but a tangible/physical support when he declared:

“I am praying that God supplies my need so that I can stop this act”  (FSRP, 22 years old)

The above FSRP participant’s use of the word “prayer” underscores the significance of petitionary prayer as a viable coping strategy. McCullough and Larson (1999) found that prayer was one of the adapted means of strong religious coping.

It was significant to note that the FSRPs than the other intra-groups spoke of ‘supreme deity’ and ‘provision of their needs’ in terms of wealth or financial assistance in association to homosexuality, manliness and religious coping. This was revealing. Possibly, because the FSRPs regarded their sex-role status deficit of the manliness, their insecurity had found a celestial outlet for resolution of their intra-psychic conflict. Reflections of deity and the mention of the ‘God’ factor reinforce the above sub-theme. Observably, there were some intra-group differences. FSRP and BSRP were quick to identify with religious coping than the MSRP. The reasons behind this observation were not so clear during further probing. Plausibly, this seems to reinforce the notion that there exist gender differences in religious
coping practices. Perhaps, this is because females tend to be more religious-oriented than males (Gray, 1971). Possibly, this may be another reason why the BSRP may be more inclined towards feminine traits.

Although religious words were used in narration and commonly mentioned, it was also observed upon further detailed probing that religion was not depicted as a dependable or very strong method of the present study’s participants overall coping strategies. According to Bjorck and Cohen (1993) individuals tend to employ strong religious coping strategies when the perceived/real stressors are greater. It is possible as quantitative findings revealed that high MGRC experience did correlate with fewer problems with anger, anxiety and depression; the perceived stress associated with MGRC had been re-interpreted and other complex but appropriate coping styles were latently in place. Most notably, participants were quick to raise a defensive tone of voice when the question was further probed. For instance, one participant stated:

“as a matter of fact, I’ve never prayed about such things before because I see like telling God that God should change the way people think, no. sometimes, I just, if it’s a new place I’m going to because I know people are going to see me like less of a man or something I have to adopt a new way of walking, talk less, interact less, I can’t really socialise like I would want to because if I talk too much or I do too much of socialization then it means I’m going to bring out the real me, so I limit the way I do things, the way I talk, sometimes I even have to change the way I dress, wear things that is expected that every man should wear so at least they wouldn’t have to say it but they would be thinking whether I am or not even when I behave that way”

(FSRP)

From the above FSRP narration, it is quite obvious that even when religious coping was employed, some form of added/enhanced psychological coping techniques such as escape/avoidance coping were also engaged. The above narration is depictive of self-directed
religious coping where the individual views a problem/conflict situation as a private responsibility than one which needs a sole monotheistic outlet. This is indeed significant and emphasizes the point that homosexual men may be harnessing a complex (cultural) coping system such as psycho-religious coping strategies which needs further research exploration.

Significantly, from personal religious practices to organized religion, participants unraveled some gaps in religious coping ties.

The same participant was quick to add that;

“*Oh yea, my religion and homosexuality, definitely, so sometimes I have difficulty going to church because I'll go to church, I know it’s a sin though, but the fact that I keep hearing someone echoing it to me, it’s like it keeps echoing to me in my head anytime I hear people saying it to me and then it makes me sad, I can’t do anything because I’m left thinking. I don’t want to get close to people, I avoid friends, I avoid everybody, because I keep hearing people saying it’s sin, it’s sin, it’s sin*” (FSRP, 20 years old)

‘Sin’ was the most commonly cited factor influencing personal decisions not to pray or go to church and this was re-echoed by some of the participants. Moreira-Almeida and Koenig (2006) suggests that a viable religious coping is directly linked with organized religious practices. It was a bit unclear how this affected their sense of masculinity. Only one participant mentioned ‘demonization of homosexual men’ as a crucial reason why he avoided organized religion as an effective coping resort. Notably, this was reverberated amongst the FSRP participants than the other intra-groups. This finding is significant in that homosexual men’s experiences of intra-psychic conflict were associated with their sex-role preference (especially reversed sex-role). Interestingly, the availability hypothesis on religion reasons that participants may quickly adapt religion as a ready means of appropriate coping (Fiske &
Taylor, 1991). Chastisement during preaching/church sermons, stigmatization, ostracization, divine wrath seemed to play an important role for homosexual men who identified and appraised religious rituals, but actually failed to holistically employ it as an effective coping mechanism.

Although Goodwill (2000) emphasized that matters of faith are of critical importance to homosexual men’s religious coping, findings of the present study suggests that, it may not be a very strong, reliable and adequate form of their overall cultural coping ties. Plausibly, the availability hypothesis of religious inclinations may offer an alternative explanation for this finding. The religious heuristic may be seemingly available supported by the minimal effort required to employ its practices, thus, serving as a “psycho-spiritual catharsis” for gender role conflict situations.

Other traditional religion such as ‘fetish’ worship was explored. Only one participant admitted considering sanctioning to a deity, a group of boys in his neighborhood who had planned to lynch him. Studies by Goodwill (2000) and Haldeman (1996) suggest that homosexual men tend to reject traditional religion than non-homosexual men. The other participants failed to mention African traditional worship such as pouring libation, chanting as a form of coping. Interestingly, there seems to be a complex coping strategy which is more skewed towards psycho-cultural strategies such as custom-denial, avoidance and escape conditioning, and personal competence-based coping were subtly pronounced for some participants. For instance, one participant noted, “Oh yea (chuckles) I don’t mind them and I don’t care because me, I know it is not a bother to me...” (FSRP)

Family & Friends ties- coping strategy

Another common theme that emerged, but posed a bit of a challenge to homosexual men in terms of coping was ‘family’ and ‘friends’. The majority of the participants interviewed admitted that the nuclear and extended family played an integral role in their
lives. Further probing showed that the family unit was not a strong resort to their overall coping needs, possibly, because most homosexual men were ‘closeted’ and had to deal with stressors associated with their level of outness, for the majority of participants, they had to cope with living in the closet and the consistent fear that one day their sexual orientation would be made known publicly. From narrations, family support came in the form of perceived and embedded social support than the physical and tangible support. Participants reported family support was expressed through emotional support such as consolation, comfort, encouragement, etc. For instance, some homosexual men mentioned their mothers and younger gay brothers as consistent helpers in turbulent moments. Observably, that was not without caution. Information relayed to these familial outlets was sometimes diluted to prevent suspicions. One participant notes:

“... I could tell my mum that mum, this is what my friends are saying. When I’m passing, this person says I’m a woman, I could tell my mummy sometimes I tell friends about it, but not because I want them to go and act or something, but I want to just tell them what I’m going through”

(FSRP, 19 year old)

Though Ghanaians or people of African descent are bound to employ extended and collective coping (DeRose, 2002; Utsey, Adams & Bolden, 2000), it is most revealing to know that despite the banishment and stigmatization homosexual men faced, they were likely to adopt some familial coping strategies. This finding was highly unexpected.

However, the most revealing and contradictory aspects of this type of coping is that the majority of the participants admitted that the act of homosexuality evolved with familial bonds. However, this was guarded sacredly among a specific generation until the victim explored with non-familial bonds. One participant added: “because of my gay behaviour..only my cousin knew I was gay since I was three years.” (FSRP, 23 years old).
Four of the six participants acknowledged that their initiation into homosexuality started with familial bonds, specifically ‘cousins’ and ‘family members’ were mentioned. Three participants reported that they were victims of sexual abuse which culminated into homosexual indulgence. This is quite revealing. These family members according to participants kept the act a secret until participants also explored with other non-family members. This seems to suggest that the family bond does not serve as a potent system of support per se, but rather a viable transition of sexual acts which needs to be further explored. Though majority of the sample in the survey indicated that if they had a problem they couldn’t solve, they would resort to friends than family or pray about it, in-depth face to face discourse revealed that these ‘friends’ were preferably gay friends. Only one participant disclosed during interview discourse that he coped with challenges such as attempted lynching and hate-crime by telling his pastor about his ordeal. When further probed to find out whether his Pastor knew he was gay, the response was in the affirmative “yes” but the tone of voice was low and non-verbal language is suggestive of a-not-so-convincing coping resort.

**Constructions and Ideations on masculinity**

Extant theory and research work on masculine gender role conflict emphasizes on clichés such as ‘mode of conduct’ and ‘rule of thumb’ of appropriate behaviour prescribed for males (Levant, 1995; O’Neil, 1986). As a result, the majority of the participants recognized common thematic expressions on traditional male attributes and traditional male roles. These maleness characteristics included physical, emotional and spiritual strength, physical shape, attractiveness and stature (appearance/physique), gait, sexual potency, power of authority, and symbol of wealth. Similarly, traditional cultural roles of manliness included being the head, caretaker and breadwinner of the home. For example, one participant emphasized, “...hmm as the male should be the head of the home..(silence)” (FSRP).
Many of the participants reflected the traditional cultural orientation on manliness in semblance with what mainstream literature associated with “maleness” and masculinity:

“The man who sleeps with a woman is masculine (tone of voice changes). A man was created to sleep with a woman, but we have taken it upon ourselves to sleep with men.”

(23 year old, FSRP)

From the above cited verbatim statements, two major areas that define and sustain the transition into masculinity are clearly delineated as traditional attributes of ‘real men’ than other (kind) men. Real men engage in sexual exploits with women and must play the economic leadership role by being the provider. The majority of the participants were very clear in their narrations that ‘female sexual exploits’ is a male preserve and their abstinence from such activities made society tag them as ‘feminine’. Therefore, a male/man who “…does not perform sexually well in bed, the person is not regarded as a man!” (FSRP). As a matter of the repetitive use of the construct ‘sexual potency’ in the participants’ narration on masculinity, sexual potency is implied as a salient index of manhood such that any deficit in this area was evidenced as less of a man. Here, sexual potency becomes a performance of masculine gender role which is directly tied to the wealth of masculinity.

Interesting, on sexual potency, one participant had a distinct view from the traditional representations of masculinity expressed by the majority of the participants. He notes:

“Society wants me to have sex with a woman and have a child and then I am saying that no, I feel that I am supposed to be with a man and then adopt a child so society, what society thinks and what I think is conflicting with each other, that’s what I understand by it. Society expects me to be this and I don’t think that what society expects me to do is what I need for myself” (MSRP)

Ore (2003) argues that masculine identity derived from perceptions/ performances of flight from femininity may leave an unstable masculine gender identity of the individual. This may
also suggest that homosexual masculinity in terms of sex role preference may be unstable and plausibly explain why some participants may decide to play the BSRP role. From the MSRP’s assertion, conflict (suggested by O’Neil et al., 1986) may emerge meeting societal demands of manliness and recognizing an individual’s need for self-definition of manliness.

Another common theme that emerged was the expression of males as a symbolic citadel of spiritual strength. In the local Ghanaian context, males are preferably instituted as the religious leaders of families, clans or the ‘abusuapayin’. Maleness was linked to spirituality and this could be buttressed and reasoned through spiritual positions held by males in the local cultural settings, for instance the traditional fetish priest. Preferably, a male is instituted as the chief priest and regarded as a spiritual doctor (a symbol of authority). The majority of participants defined masculinity by integrating symbols of African spirituality into its definition. Some participants described the spiritual significance of masculinity by identifying ‘the man’ as the “spiritual covering” of marriage and the family as described in the earlier verbatim quote. Words such as ‘spiritual head’, ‘covering’, and ‘head’ were used to note the participants’ sense of spiritual significance in terms of masculinity. This is significant.

Only three of the participants acknowledged their capacity to work and take care of their family, marry and reproduce children as central to the desirable self-definition of masculinity which is in consonance with mainstream literature on masculinity (Brood & Goods, 2001a; Connell, 2000; Miescher, 2005). Some participants emphasized on the gait and physical attractiveness as the dominant elements of masculine identity. The results were quite surprising. Plausibly, because the majority of the participants were female sex role oriented (FSRPs), results show that masculine traits may be strongly coveted among present study participants.

Some participants did not directly indicate where their constructions of masculinity emanated. However, there were indications of training programs, interactions with people,
local neighbourhood groups, family, school, socialization, media and peers. The mention of formal/non-traditional and informal/traditional agents of socialization speaks to the participants’ consciousness of systems of gender role socialization and this supports the social construction theory. However, these external actors mentioned by homosexual men may have been underrated as potent and available/viable forms of socialization for pre-gay children. The immense role of the media in instigating certain depictions of masculinity was evident during participants’ discussions. For instance, “akpeteshie” and other alcoholic beverages such as ‘atemuda’, ‘brukutu’, most of which were tagged with sexual prowess as propagated by media houses for men, according to participants, were linked with masculinity by the present study’s participants. In such context, symbols of masculinity were traced through taking the strong alcoholic drink, drunkenness and its apparent relationship to sexual prowess.

Bandura and Bussey (1992) lent credence to the above observations when findings from their study proposed that, through the process of socialization, males are inculcated with the norms and values of masculinity. This is kept active by agents of socialization such as peers (Rust, 2000), school system (Connell, 2006), media (Connell, 1996), and valorized through systems of rewards and punishments. Most significantly, for the role of religion, Mbiti (1975) asserts that religion plays a critical role in the fabric of the African male enculturation. It is quite possible to note that because participants have been socialized in the rudiments of masculine socialization, this has not in any way adulterated their perceptions of masculinity regardless of their sexual orientation and demands of the gay sub-culture. This is indeed revealing.

Additionally, ‘manliness’ epitomized “responsibility”, and this was indicated by participants as paramount within the African context. One of the participants described and echoed masculinity in a more traditional context:
“The man is the head of the family so the man has to oversee the events that goes on around him and the larger society and see to it that things are in order...and mobilize ideas from all...in the home, the man is supposed to be the breadwinner and the provider for all making sure that none of the family members is in need...in the relationship, the man has to make sure nothing goes wrong in the marriage and provide for the needs of the family to prevent any disorderly and wayward children...for instance having bad friends may make the child expose of different behaviours which is not part of our culture” (FSRP)

The above verbatim statement reinforces Gyekye’s (1996) assertion that in traditional African society, ‘responsibility’ is held in higher esteem to individual (sexual) rights. Homosexual men in this regard were re-echoing and asserting the manly attributes required of ‘socialized masculine men’ and then rights of sexual preference followed. However, some studies have cautioned that inciting males into such social male role conceptualizations may result in their apparent engagement is risky activities which may be detrimental to their well-being (Shafer et al., 2007; UNFPA, 2000). It is possible that the apparent linkage of masculinity to taking strong alcoholic drinks, sexual adventure with multiple women and fixed-role responsibilities may be an indication of masculine gender role performances spill-over effects. This masculine ‘spill-over effects’ may be antagonizing to the overall well-being of men as suggested by Shafer (2007) and UNFPA (2000).

Interestingly, another participant also recounted the meaning of masculinity among the gay community by distinguishing what masculine connotations meant with regards to diverse sexual orientations. Obviously, participants noted distinct variations between perceived masculine expectations for homosexual men versus bisexual men. Participants categorized two types of ‘men’. Specifically, the FSRP participant identifies the ‘gendered
man’ and then the ‘ungendered man’ who by some sexual parameter is not a man. One of the participants articulated an in-depth description of the matter. He states:

\[ P : \text{like, a man as a man who is expected to be with a woman, but I’m a man though, I have things, erhh, sexually, things that classify me as a man, but I am not the man that gender demands me to be so I am a man sexually, but gender wise, I’m not a man so there are two different kinds of men- a man who is sexually a man and then gender, according to gender he is a man and then the man who is sexually a man but with gender he doesn’t identify as a man.} \]

\[ I : \text{okay, so bisexuals and other sexual orientations, can you tell me if they do fall into the ‘masculine men’ category or do you think that they are different?} \]

\[ P : \text{they all fall into that category, yeah, bisexual men are men!} \]

\[ I : \text{any reasons for that?} \]

\[ P : \text{because, he recognizes the need to be with a woman. A bisexual man recognizes the need to be with a woman so definitely he is a man. He is the man that falls under the right position of a man, but with a homosexual man who identifies with other men, he’s a man, but not entirely a man, and then we have the heterosexual men who are strictly for women and they are the real men. So I will say there are three types of men.} \]

(FSRP)

Some participants provided a more qualified understanding of the matter by their redefinition of masculinity in terms of sex-roles with major emphasis on sexual prowess and reverse sex-roles preferences among homosexual men. Participants attributed masculine traits to bisexuals. Participants’ appreciation of bisexual men as real men is mainly guided by their practical notions and considerations of how a real African man should organize himself. In the homosexual sub-culture of masculinity, there seem to be attributions of the “up sex-role preference” to masculine men and attribution of feminine traits to “playing the down sex-
role”. Subsequently, bisexuals and ‘up sex-role preference’ were classified by homosexual men in the present study as ‘real men’ within the masculine category. This finding is revealing. This is in consonance with the ‘Male Role Conflict hypothesis’ which seem to postulate that success with maleness is suggestive of loss with femininity (O’Neil, 1986). One FSRP participant was quick to draw similarities between heterosexual (relationship) power-inequality and that of homosexual power play/dynamics in sexual relations. Discussions suggested that the up-role was not necessarily a preserve for the traditionally masculine man, but other factors such as economic/financial power were a major determining factor in sex role preferences in same-sex sexual relationships. One participant voiced, “when there is a ‘burger’ homosexual man in town, and the person wants someone to move around with, then whatever role he demands, the less privileged participant accepts such offer” (FSRP). These roles are just not sexual but social roles as performed by a woman in a heterosexual relationship when participant describes a gay couple he personally knows of, “Okay in this case, the woman in the relationship happens to be older than the man.. so ‘she’ takes care of the home, clothing, feeding and everything..” (MSRP).

The above statement corroborates cultural definitions of masculinity and this was discerned through common thematic expressions in participants’ narrations. This also re-echoes the cultural ideology that for the gendered man, it’s about ‘think feminine, think domestication’ (Ampofo, 2001). This finding is quite revealing for homosexual men because it threads the bonds of similarity between feminine roles carried out in heterosexual relationships and that which is replicated in same-sex relationships as well. Most of their stories depicted connotations of ‘mainstream masculinity’ and ‘conventional masculinity’, albeit similar, both embellished in Ghanaian local cultural encapsulations, replicas of western masculinity and enclaves of sub-cultural gay masculinity. Relative representations of power inequality in same-sex relationships were quite evident and echoed during the qualitative
interviews. It is possible that these notions are fueled by social representations of maleness in African collective cultures.

In summary, irrespective of individual subjective definitions of masculinity, most of the homosexual men in the present study acknowledged mundane stereotypical attributions often related to masculinity such as physical prowess, aggression, agility, wealth, etc. This confirms Ampofo’s (2001) assertion that from pre-teen years, the Ghanaian male is likely to be trained to conform to stereotypes and entrenched gender role values and normative expectations of ‘maleness’.

One interesting finding was that ‘masculine games’ such as football, which were specifically mentioned by FSRP participants, were objectified under “masculinity”. He asserted that one perquisite of real maleness is that:

“Men are supposed to play football and when they meet they talk about girls..gymning.”

(FSRP)

Also, the interviewer/researcher observed that as participants acknowledged these social stereotypes about the male identity, the present study’s participants also tried to de-emphasize some basic and popular ones such as a passion for sports, female sexual explorations with a lot of rationalizations and behavioural gestures. For instance, throwing hands in the air to suggest the “not-so-bothered” attitude.

Notably, when the conventional masculine tags were not emphasized during narrations, participants actively stressed on other alternative outlets, such as, career success and school success which were prioritized over the cited and well known traditional masculine stereotypes. Some participants (FRSPs) acknowledged a preference for success in career than fulfilling the tangible and physical aspects of masculinity.

Due to the sensitivity of participants to written notes, interviews were carried out with overt behaviour/gestures being recorded in “mental notes”. The interviewer observed that in
terms of stature, the less seemingly ‘physically masculine’ gay participants placed less significant importance on ‘structural/physical masculinity’ than the seemingly physically masculine-typed study participants. Although the less (physical) masculine study participants’ discussions focused on success with masculinity, fear of the ‘deficit masculine man’ in terms of the social benchmarks on masculinity participants’ expressed were also concerns of these participants. One participant noted:

“...they say the man has to be the breadwinner and you know you are supposed to take charge ..and provide and then if you are not working or employed and then you don’t have anything to show you have money and stuff..it doesn’t prove you to be a man.. it doesn’t prove you to be masculine.” (MSRP, 22 years old tertiary student)

There seems to be an apparent dilemma which is unraveled by the MSRP participant. Homosexual men are not all feminine-oriented as the literature seems to suggest. Observably, the masculine gay participant's inability to fulfill the mundane duties of a traditional masculine man challenges the masculine homosexual man to assess his sex-role preference status within the traditional gender role mirrors of ‘a real man’.

From the narrations, some significant intra-group differences were observed between FRSP and MSRP with regards to their re-definition and interpretation of masculinity. It was observed that whilst MSRP were more likely to define masculinity from the heterosexist’s definition, stressing on the power-dynamics in terms of the economic and sexual prowess roles, the FSRP viewed masculinity from the passive ‘receptive role’ of the traditional female gender role primarily within the gay sex-role preference lens. This is where FSRPs in their sex- role preference performances were likely to be viewed through the lens of ‘recipients’ of emotional security such as affection, shelter and economic advantage from men. Participant’s choice of words such as ‘provide’, ‘propose’ in explaining such effects are significant.
Participants’ reflections on perceptions of Gayness and Masculinity.

One major superordinate theme that emerged was participants’ perceptions of their gay identity, masculinity/maleness and the connection between the two constructs. The results were revealing. Though majority of the participants (4 of out the 6) refused to directly acknowledge if there were different kinds of ‘men’, they were quick to draw conclusions on what their ‘gay identity’ meant to them in their re-definition and sense of maleness. Only one participant discussed different kinds of men as the ‘tops’ and the ‘downs’ which only limits the description to different types of sex-role play among homosexual men rather than men in general. The literature has been quick to link a possible relationship between masculinity and gayness as a ‘repudiation of feminity’ (Freud, 1937; O’Neil, 1982). Other social science researchers (Connel, 1995; Herek, 1991; Ore, 2003) have denounced the link between gayness and masculinity as incompatible and tagged homosexual men’s experience/perception/description of masculinity as subservient to ‘hegemonic masculinity’ and also a minor and a negation to traditional masculinity.

Participants, however, voiced what it meant to be gay and male at the same time. Majority of participant segregated the two constructs into three components by elaborating on the cognitive, affective and behavioural distinctions of gayness and ‘maleness’. One participant states,

“So often it’s their thought, someone will never involve in any sexual activity with any man, but they will still tell you they are homosexuals because he feels, he has a feeling towards another man, you see, so he will tell you even though he has not had any sexual activity with any man, but there are some that will be in the sexual activity itself and there are other ones who think that they are supposed to do it, or you did not get that yet?” (FSRP)

“It is about the way I talk, the way I do my things in the home, and I have been staying with my mum for a long time time so..and all my siblings are girls so I use to
do everything with them so and I like what women do I like most.”

(FSRP)

One participant also interspersed economic and behavioural definition of gayness in relation to Masculinity: “..and some financial problems, friends I used to walk with, and the way I find myself in gay company and how I socialize..”

(FSRP)

However, two participants had a different view on masculinity and gayness. Participants acknowledged a spiritual definition/ an invisible force of gayness in relation to maleness, He laments:

“.. It's just you so, no matter what you do, it means you are the same as everyone so you're just a human being. Somebody might say you have been possessed or those Christian things, I am gay personally so I can’t say I'm possessed with an evil spirit or something, but I know it means I'm sinning, but it doesn’t mean I'm an evil spirit or something”

(FSRP)

“ It's..it is..it is something in the mind as in you tune the mind in a particular way and then it sticks...you can’t pull back from there and it becomes a part of you..”

(MSRP)

One participant, however refined a gay man’s perception of ‘maleness’ and of masculinity in terms of sexual responsibility.

“..but a gay man's responsibility is to protect oneself sexually from HIV/AIDS and diseases such as syphilis, gonorrhea..”

(FSRP)
For the above FSRP participant, masculinity denotes ‘sexual responsibility’ which was a clear contemporary distinction from the frequently mentioned economic and spiritual associations of masculinity and gayness by the majority of participants.

Participants described sexual orientation as an influence on masculine definitions, noting clear differences between perceived masculine role socialization expectations for homosexual men versus heterosexual men. One participant was quick to add that masculine men have the following physical and social traits, “..they have broad voice, they walk straightly.. when they meet, they talk about football and stuff like that..” (FSRP).

Others specific words were expressed to denote some desirable physical masculine traits for masculine gay identity. One participant described “lalas” (a sub-group gay jargon) as the shaped hair, which runs from the side of the head down to the cheek bone (for men) the most desirable of masculine traits. The majority of the participants’ defined masculinity in connotations with traditional heterosexual masculinity as indicated above. However, none of the participants could directly state if homosexual masculinity (MSRP) lacks the requisite power or dynamics that heterosexual masculinity carries. However, participants’ descriptions of masculine role expectations during interview discussions were more suggestive of sex-role preference and sub-gay cultural/structural socialization influences. By acknowledging some relevant indicators of heterosexual masculinity as not necessarily a gender role survival for homosexual gender role traits, participants’ responses are suggestive of an uneven platform of (multiple) masculinities among homosexual men that needs further research exploration.

**Integrating gayness and masculinity, participants had this to say:**

“it means being bisexual...”  
*FSRP*

“..like a person who only feels for men and act like a man...”  
*FSRP, 23 year old, fashion designer*
These two participants were quick to intersperse the two identities (i.e. being gay and then being masculine). The text brings to the fore the perception that comparatively bisexual men may be carriers of androgynous traits than their non-homosexual counterparts (LeVay & Valente, 2002). It was quite confusing how the two identities interlocked but by merging the two constructs (i.e. Masculinity and gayness), participants seemingly disperses the notion that the two constructs are disjointed. Some researchers have viewed the connection of such constructs as ‘a deficit gender role model’ to hegemonic masculinity (Connel, 1987; Nicolosi, 1997). Fundamentally, the analogy of “bisexuals” reinforces the perception that as active participants (homosexual men), there is obviously a wide but sub-group re-definition of masculinity among the gay community different from the traditional representations.

Notably, Bhasin (2004) and Shafer et al. (2007) emphasized that there are bound to be differences within collective and cohesive groups in the definition of masculinity. This qualitative finding helps to explain why majority of Men who Sleep with Men (MSM) data collected for the present study identified as bisexuals (63.2%) than gays possibly because there is an urgent and inherent timeless need to be identified with the ideals of traditional manhood. This is consistent with the literature on gay identification and masculinity (Millett, Malebranche, Mason, & Spikes, 2005; Peterson & Bakeman, 2001). Though a minimal percentage, it is also not surprising that nine percent (9%) of total homosexual sample for quantitative exploration still recognized themselves as heterosexual men. Plausibly, socialization may account for such integration since most participants acknowledged and coveted positive ‘heterosexual masculine traits’. Findings also tend to point that ‘conflict’ is likely to emerge when homosexual men try to play the midline between sexuality (sexual orientation) and gender role expectations. For instance, carrying out the roles of gay-masculinity (MSRP) and being bisexual. This may be a sub-context re-definition of the constructs and the genesis of homosexual men’s gender role conflict than the definition and account of gender role conflict proposed by O’Neil (1981) for males in general.
Observably, most participants integrated conceptions of heterosexual masculine traits into ‘masculine gay traits’. This was quite revealing and lends support to extant literature which postulates that gay men are likely to exude and incorporate a range of gender role traits, spanning from feminine to increased masculine traits (Isacco, Yallum & Chromik, 2011).

In a nutshell, the majority of the participants explained that integrating acts of masculinity into gayness were direct recipes for another type of sexual orientation (i.e. bisexuals) who were regarded as ‘real men’ and more masculine when compared to gay men. Specifically, ‘bisexuals’ were made mention of. “Bisexuals” were presented by gay men as people who possibly combined attributes of straight men’s masculine traits with that of homosexual men’s (feminine) traits. This was a significant finding.

The influence of Masculinity on Sex-role preferences

The knowledge of male role expectations and belief systems on masculinity also appeared to influence how and when participants prioritized sex-role preferences, both sexually and socially. This is consistent with the gender role socialization perspective. Notably, the majority of the discussion, centered on the power-inequalities/ gender power dynamics in same-sex relationships, reviewed through the gay men's lens. The interviews provided evidence that even in same-sex relationships; this sexual psycho-politics are eminent. Homosexual sexual and social interaction is significantly characterized by unequal power relations between ‘males’ and ‘female’ sexual role preferences. The results were quite informative as three of the FRSP participants disclosed their desire to play the male/masculine role and one other FSRP participant expressed his desire to be versatile in terms of both male and female gender roles (BSRP). Throughout the six interviews, only one participant expressed solid contentment and consistency with his FRSP orientation through his apparent narrations and gestures. Significantly, most FSRP participants declared that their
views on masculinity were important indicators when seeking for a male sexual partner, suggesting a desire for masculine affiliation:

“... those feminine acts I put up with does not create any conflict for me, but it affects my sexual orientation in that it does not push me to have sexual intimacy with a woman.. I see myself as now after all, I can do what a lady can do so I should go in for a man rather than go in for a lady!” (FSRP)

The lesson is apparent in the above statement. The need for masculine affiliation is desirable for homosexual men. The play of reverse roles as expressed by the above FSRP participant emphasizes on the Ghanaian value that boys are socialized sexually to ‘hunt’ for partners. Though a male, FSRP homosexual men present a dual personality trait in sexual adventure which in the traditional cultural norms is at the sole prerogative of males. At the same time, the FSRP yearns to associate with and pursue a male partner instead of playing the dormant role of a ‘female’ who should be rather pursued. These dynamics are interesting and re-emphasize the point that with the socialized man, no matter how much he adopts a new identity, the inculcated male element is still activated in him, possibly at the sub-conscious level, but it is never dormant. This is further corroborated by studies by Ampofo (2007) and Nzioka (2001).

Plausibly, because homosexual men as ‘boys’ are socialized men are therefore influenced by the heterosexist definition of who plays what sex role. Obviously, the masculine role is initiated by the man not the woman/female. This is because masculine men may think it is their responsibility to always initiate sex by playing the big man/ top role or what is known in same-sex relationship as the “up role”. Related to the power dynamics in this regard, are replicas of financial power, popularity and social recognition/desirability of sex roles which also plays a crucial role in the sexual and social power dynamics in same-sex relationships.
The participants expressed their views on masculinity, and its relative importance to their sex role preferences and how it affected their choice of a partner as well. It is not quite clear if attributions of desired hegemonic and traditional masculinity and sex-roles were gross depictions of mainstream masculinity because the majority of the participants were FSRP participants. The majority of participants expressed explicit desire for masculine traits in would-be partners. This was noted in the attractive, descriptive and picturesque characteristics that were used to communicate what masculinity meant to participants. Masculine indicators emerged as important requirements on male attraction and sexual intimacy. Specifically, the choice of words used by participants included “lalas”, “curvy”, and “muscled”, etc. It is possible that because majority of participants were FSRPs, their views might have largely dominated discussions and this would have contributed to such findings.

Although some of these masculine descriptions were not directly stated and indicated, participants often associated them with descriptions of masculinity. During interviews, the interviewer noted a glint in facial expression and change in tone of voice when participants expressed ideas of what ‘appropriate masculinity’ meant and how sometimes this affected their sexual relationships. One participant noted:

“Now when I am engaged with a man sexually I tend to exude female tendencies! Sometimes when old sexual partners seem to lose sexual interest, then you are pushed to think that you must also change that habit!”  

(FSRP)

According to Tepper (1999), when males fail to meet the demands of traditional masculine ideology, it questions their real male identity which tends to increase their emotional distress. For the above FSRP participant, switching from the homosexual feminine gender role in the adaptation of masculine gender role may be one of the successive ways of re-gaining positive self-esteem and recognition.
One FSRP re-affirmed the positive emotional security of masculine men:

“..because I identified all of them as women as I am but it makes me think that a man is going to propose to you, you’re going to get a man to tell you this, you’re going to get a man who will give you money…” (FSRP)

Notably, most of the participants failed to vividly describe FSRP as a desirable or undesirable sex role orientation. However, from the present study’s data analyses, other variables accounted for female or male sex role preference than originally anticipated. Primary amongst the list of factors for FSRP participants, were emotional investments such as being passive recipients of economic security seems to run across narrations by FSRP participants. One participant noted:

“There are people like that! They would give you money just to sleep with you. The one who gives the money, sometimes has the preference of deciding what role to play…”

(FSRP, 23 years old)

“.. I had serious financial problems that made my teacher to abuse me sexually with the aim of helping me out academically and financially” (FSRP).

According to a World Bank (2008) report on poverty in Ghana, about 30% of its total population fall below the worldwide poverty indicator with about 53.6% living on less than two dollars a day. Plausibly, because poverty is seen as ‘unmasculine’ and dissociated with the replicas of ‘the big man syndrome’, homosexuality, which is largely linked with traces of femininity (Lippa, 2000) may serve as a kind of barter trade system in order “to make ends meet”. In fact, some FSRPs attributed the practice of homosexuality to financial ties. This is buttressed by Ampofo’s (2001) article on “The Sex Trade, Globalization, and Issues of survival in sub-Saharan Africa” which indicates that “sex has become an international commodity in high demand” (p. 27). Ampofo (2001) further suggested that male sex trade
thriving on the slogan of ‘the Ghanaian friendliness’ has become a transactional sex commodity that is traded and very well publicized on a plethora of social platforms.

Significantly, Kramer’s (2003) study on “attitudes towards homosexuality in Ghana” found that there are two types of gays in Ghana. According to Kramer’s (2003) study’s findings, the locals were more likely to possess less masculine traits (feminized), impoverished and originated from the slum areas of Ghana and may be skewed towards “down-sex role” preference or FSRPs as compared to the classics (which is suggestive of the masculine homosexual men). Tools/symbols of economic power re-echo the effect of male masculinities on gender role performances. The above findings corroborate Kippax and Smith’s (2001) study that explored sex and power among gay male couples. The findings were revealing. Results showed that traits of masculinity were often expressed through supremacy and compliance among the two partners (of different sex-roles) during sexual intercourse. Though the sample was predominantly white, the findings are relevant to the discussion and the investigation of masculinity and sex-role preferences among gay men in the present study.

Here, it is quite obvious that important cultural definitions of ‘manliness’ such as financial security, affective and social security from other gay peers were related to the desirable attributes in partner selection. However, the researcher also observed a sense of competition associated with sex-role preferences. From participants’ narrations, sex-role preferences seem to be competitive among homosexual men. According to O’Neil (1982), competition is one of the critical variable amidst other variables like socialized control and power in the masculinity model. In defining competition to reflect sex-role preferences among gay men, O’Neil (1986) defines competition as “striving against others to gain something or the comparison of oneself with others to establish one’s superiority in a given situation” (p.175). The principle of competition in sex-role preferences also tends to breed the
notion that masculinity is associated with intra-power among homosexual men. This is revealing.

It was however unclear if for FSRPs especially, coveted masculine traits were a compensation for their psychological deficit of that desirable masculine trait which could not be determined solely by the individual. However, such findings support Sanchez, Westefeld, and Liu’s (2010) study findings that the extent to which homosexual men appreciated masculinity and were concerned with disregarding masculine ideals was positively related with negative feelings about being gay.

Together, this shows that masculinity-sex role preference is an important variable for homosexual men. Obviously, this has implications for future research. More studies should explore the dynamics of the relationship that exists between sex-role preference and masculinity among homosexual men in Ghana since this could constitute a whole thesis work.

Goals set for themselves and their partners/society towards gender roles (conflict)

The participants expressed varied views about gender roles indirectly and sometimes through direct statements. Findings from Schwartzberg and Rosenberg’s (1998) study suggest that homosexual men have less rigid conformity/restrictions towards unmasculine social stereotypes than the larger society. It was therefore not surprising, when goals were indicated during discourse. These goals were indicated based on future coping techniques to be employed, what participants would change about gender roles and Ghanaian cultural values they would still hold on to and practice. The participants frequently expressed concerns about some Ghanaian cultural values that needed some successive and approximate shaping. In a spectrum, views ranged from one’s sense of helplessness in changing gender roles to specific changes that they would enact on their own capacities as individuals. In responding
to Ghanaian cultural values about ‘maleness’ he practiced, one participant directly expressed his goal on gender roles:

\[ P: \text{"like a man should be responsible, not in a way of having a family or, but being able to take care of your family, i.e. your mother, daddy, sibling, sister, I hold on to that. I regard that as a man you should be able to take care of your family. So I hold that, that as a man possibly you should marry and take care of your family but then I don’t hold on like you hold, that you have take care of the parents and then other siblings. I still have plans of getting married, its like seventy percent or something".} \]

\[ I: \text{what else, any other values on Ghanaian maleness that you would still practice in the next 5 to 10 years?} \]

\[ P: \text{I should be rich, I should work hard and get money, I hold on to that. I think that’s all that I hold on to as a man, but like a man should play football, they should compulsorily have children, they should sleep with women and stuffs like that I don’t hold on to that. A man should be muscled, curvy, built chest and that, no, I don’t hold on to that at all".} \]

(FSRP, 19 years)

The above cited verbatim statement corroborates Shafer et al. (2007) assertion that compliance with social norms is peculiar among males who from early stages are tasked to exploit and accomplish communal activities. ‘Real men’ must indeed provide for the family.

The above cited verbatim quotes reinforce Ampofo’s (2000) suggestion that the male-caretaker role is so much prevalent in the Ghanaian culture and that failure to live up to this role may be tied to femininity. It is therefore revealing that homosexual men as socialized males also recognized and identified with this ‘masculine role’ trait.

Masculinity was also associated with certain male-dominated games. Therefore, some participants expressed desire to change this perception as much as possible.
Three participants mentioned football, indicating that:

“..I will change that about football..”

(FSRPs)

As explained in an earlier review, three of the study participants bemoaned the situation where Ghanaian masculinity was strongly linked to football. According to participants, when ‘men’ meet they talk about ‘girls’ and argue over ‘football’. These symbolic representations are quite revealing and enlightening and tends to show that though homosexual men acknowledged and coveted aspects of mainstream definitions of masculinity (Bailey, Kim, Hills & Linsenmeier, 1997), participants were also quick to redefine their ‘perception’ of gay-masculinity and dictate how society had skewed and misrepresented such definitions and how this notion informed their sexual orientation. This finding is not surprising since the Ghanaian society persists in facilitating constructions of masculinities among males (Shafer et al., 2007).

Some participants expressed goals of cross-over from one sex-role preference to the other. This also summarized participants’ future perceptions and successes on masculinity and sex-role preferences. “If I would change anything, then it means that if I exhibit female tendencies then I must change and then start exuding masculine traits.”

(BSRP)

Other interesting goals frequently discussed during interview sessions were in the form of psychological help-seeking behaviour. According to Tsan and Day (2007) men, regardless of their sexual preferences, would generally exude negative attitudes towards help-seeking behaviour. It was therefore unsurprising when participants indicated conditions under which help-seeking would be essential. However, this could be explored in the light of African manhood socialization context. Tenets of help-seeking behaviour such as depending on others, acknowledging a need for help, identifying an affective problem are all in contradiction to physical prowess and less affective tendencies prescribed by conventional
masculinity (Addis & Mahalik, 2003). For the present study’s participants, significant amongst the help-seeking behaviour goals, was when a conversion therapy would be a necessary and an essential part of their life. For instance, one MSRP participant elaborates:

“... to seek professional psychological help is when ..hmm, maybe I feel okay..its enough..i don’t want to be gay anymore and then there is nothing I can do because I have become so used to being gay and there is nothing to do with the opposite sex, but not to say that I am stressed or something.. because they are talking about what makes them happy and I happen to be there.. because I know what makes me happy..
yea” (MSRP, 25 year old)

Notably, there were differences among FSRP, BSRP and MSRP in terms of gender role goals. Significant gender role goals for FSRP and BSRP were skewed towards exuding and identifying with more positive masculine gender role performances as compared to MSRP. For the MSRP, GRC goals were directed towards protecting and maintaining the status quo on masculine tendencies, for instance, less help-seeking behaviour.

Overall, reflections on masculinity were varied from what was anticipated and not holistically consistent with O’Neil et al. (1986) framework on MGRC for males. Moreover, there seems to be an extant connection with relevant issues of masculine gender role conflict among the present sample. Homosexual men in the present study evidenced different meanings related to manliness, and expressed varying views in reflection to hegemonic masculinity. However, more research explorations need to be carried out to bridge the gap on some misperceptions on masculinity and gender role spill-over effects which are ingrained among homosexual men and its effect on their mental well-being and adoption of appropriate coping strategies.
Limitations

1. The sample used for the qualitative interviews were recruited through word of mouth by gay research assistants. Therefore, the sample included in the study was small. Future studies should include a larger sample size.

2. All participants were Christians. Future studies should include homosexual men from other religious backgrounds.

3. Restrictions associated with the IPA qualitative analytic methodology should also be considered (Smith & Osborn, 2003). Other analytic approaches such as discourse analysis should be explored in future studies.

4. Some subjective and preconceived ideas about masculinity may have prompted the interviewer/researcher to highlight more on certain questions and this could have subsequently affected the interpretation of findings which could have been avoided through the use of a structured interview approach. However, IPA permits the researcher to interpret the participants’ private worlds, so allows for the subjectivity of researcher’s beliefs and biases.

5. Homosexuality is still a sensitive topic and considered criminal by the laws of Ghana. Therefore, most homosexual men in Ghana are closeted (Kramer, 2003). Access to homosexual men for research purposes proves to be a difficult hurdle. It was extremely difficult to locate some participants for follow-up and feedback with transcriptions and interpretations of data. These might have had an effect on the dependability, credibility and confirmability of the data (Mertens, 1998).

Suggestions and recommendations for future research

Future research should examine the influence of sex role orientation on respondents’ experience of MGRC.
For comparative studies, continued research should focus on comparing homosexual and heterosexual men on levels of MGRC.

Males derive some positive benefits from exuding masculinity. Most studies on MGRC do not take into account the positive meaning that the behaviour has for males. This phenomenon is worthy of future research.

Future studies should explore homosexuals in general without any peer training background.

Future studies should adopt more qualitative approaches and employ ‘triangulation of data’ from homosexual men and heterosexual men, drawing on the differences and gaps between the two samples in terms of gender role conflict experiences.

The nonrandom sampling method was employed. Future studies should consider randomization.
CHAPTER FIVE
General Discussion

Introduction

This chapter presents a summary and conclusions of the collective quantitative and qualitative studies. It also presents an overview of the findings, recommendations for future studies, limitations, implications and discussions on the overall significance of the present study’s findings.

Summary and Conclusions

The present study aimed at assessing some psycho-social correlates in homosexual men relevant to their experiences of Masculine Gender Role Conflict. In all, 175 homosexual males (in and out of school homosexual men) participated in the present study from a qualitative and a quantitative point of view. From the qualitative point, the study explored the psychosexual challenges/conflict situations, homosexual men encounter, how they adopted Africentric coping strategies, and constructions and their present ideations on masculinity from a socio-cultural perspective.

From the quantitative analysis, the following conclusions were drawn:

1. The hypothesis which stated that there would be a significant positive relationship between Masculine Gender Role Conflict (MGRC) and Psychological well-being as measured by the HSCL was not supported.

2. The hypothesis which stated that there would be a significant negative relationship between Masculine Gender Role Conflict (MGRC) and Attitude Toward Seeking Psychological Help (ATSPH) was not supported.

3. The hypothesis which stated that there would be a significant negative relationship between Masculine Gender Role Conflict (MGRC) and Gay Identity Development (GID) was not supported.
4. The hypothesis which proposed that age would moderate the relationship between Masculine Gender Role Conflict (MGRC) and Attitude Toward Seeking Psychological Help (ATSPH) was not supported.

5. The hypothesis which projected that Africentric coping strategies would moderate the relationship between Masculine Gender Role Conflict (MGRC) and Psychological Well-being was not supported.

6. The hypothesis which anticipated that sex-role preference would mediate the relationship between Masculine Gender Role Conflict (MGRC) and Gay Identity Development (GID) was not supported.

The first study was not able to unearth the underlining events, actions, norms and values from the perspective of homosexual men due to its quantitative nature. This further inhibited the opportunity to explore the other possible factors that may explain outcome variables in the present study. This therefore necessitated the second part of this study which recorded the following findings.

Summary of themes generated from homosexual men during the one-one-one interviews highlighted the following:

1. Homosexual men reflected on psycho-sexual challenges experienced in adhering to rigid traditional masculine gender roles. These were psycho-social and gender-related challenges. Some common themes identified included playing reverse sex-roles, frustrations associated with public identification of the sexual identity (living in the closet), intra-psychic conflicts (cognitive dissonance), and situations that made them feel less of a man amongst others. Most notably, MGRC was redefined by participants.

2. Participants reflected upon their varying cultural coping styles. Here, participants admitted that hate-crimes from the anti-gay Ghanaian environment forced them to
adopt coping skills that would enhance their chances of survival. Notably, sense of sexual identity, family and gay friends culture-specific coping strategies appeared more viable and pronounced among the majority of participants than religion and value system coping. In value coping, it was uncovered that, MGRC also had positive outcomes for homosexual men and not only negative outcomes as postulated by O’Neil’s (1986) gender role theory. Other serendipitous finding showed that familial ties also served as sacred and secret outlets for transition into homosexuality.

3. Participants spoke of their current ideations on masculinity and constructions of masculinity. The majority of participants who were FSRPs acknowledged that masculine traits were desirable traits and sought after traits in would-be partners. Observably, these conventional masculine traits also served as a source of conflict for the FSRPs. Present ideations on masculinity were informed by traditional, non-traditional agents of socialization and acculturation of homosexual men.

4. Participants reflected on their perceptions of ‘gayness’ and masculinity. Here the majority of participants admitted there were different kinds of males (specifically, homosexual, bisexual, tops, downs were made mention of) and linked it with their constructions of masculinity in their personal gay world. Also, gay men re-defined gender role conflict as not necessarily adhering to rigid gender roles, but as also playing the midline or integrating aspects of gayness and conventional masculinity. Significantly, bisexual men were noted as the intermediary between gayness and traditional masculinity.

5. Participants reflected on the influence of masculinity on sex-role preferences. Here, findings showed that participants’ perceptions of traditional masculinity such as emotional security for the FSRPs also influenced their understanding and choice of sex-role preferences. Consequently, these perceptions often determined who played what specific sex-roles and at what time.
6. Participants also reflected on goals they had set for themselves and their partners in terms of gender roles. Participants expressed a range of desirable goals. Notable amongst these goals were changing masculine games (e.g., football) and practicing cultural values/activities associated with masculinity. For sex-role preferences, majority of FSRPs desired to exude more masculine tendencies or preferred to be versatile in terms of male and female sex role preferences. Differences in goals were observed among different sex-role orientations (MSRP, FSRP, and BSRP). For the FSRP participants, goals were directed towards achieving masculine gender roles and improving professional psychological help-seeking behaviour. Goals for the MSRP included practicing and maintaining masculine traits and these included less help-seeking.

Both qualitative and quantitative data in the present study failed to provide a holistic support for O’Neil’s (1986) model on gender role conflict which stated that when males are pressured to conform to restrictive, sexist and stereotypical values on masculinity, they are more likely to suffer psychological distress which affects varied facets of their lives such as help-seeking behaviour. Qualitative findings suggested that homosexual men did experience some distress associated with gender roles, but have learnt to cope effectively, therefore recurrence of gender role conflict situations no longer served as discomforting to them. The question remains if the male gender role conflict theory still holds as a viable theory to explain masculine gender role conflict among minority groups such as homosexual men in a collectivist African culture in the twenty first century (21st century). It is of relevance to note that, the theory was primarily propounded and validated with a heterosexual sample from an individualistic culture. The theory has been holistically criticized as endogenous in approach tending to lay much emphasis on the individual by ‘blaming the victim’ and not laying much more emphasis on the invisible social forces who penalize men for failing to conform, thus
ignoring other additive effects on the relationship between Masculine Role Conflict (MRC) and the individual. Obviously, the Meeks’ (2011) hypothesis on masculinity may seem more applicable to homosexual men than O’Neils’ (1986) gender role conflict theory. This is because in the minority sub-culture, homosexual men tend to negotiate their individual male masculinity with society’s stereotypical roles by weighing the benefits and costs of style of masculinity and its applicability to diverse facets of their lives including their sexual preference.

In retrospect, it seems clear that a multi-faceted approach should be adopted in the concerns and research explorations related to homosexual men. Possibly, novel techniques such as triangulation of data should be inculcated in the examination of homosexual men’s male gender role concerns. The family structure system is undergoing a lot of rapid changes and many forms of unions and re-unions are fast approaching and gaining social cognizance. Certainly, straight men and men of diverse sexual orientations are vigorously finding ways to negotiate the dynamic relationships in which they find themselves. It is possible that homosexual men are operating within a scope of caution and at the same time comfortability as well. This is because although participants acknowledged being dissenters to the ‘heterosexual stereotypic web’, they were also cautious not to catapult gender role behaviour beyond obvious and visible boundaries in the Ghanaian heterosexist society. Within the gay-subculture where reverse gender roles were much appreciated and understood, gay men carried out gender role activities without much restraint and contentions. In recognition with Chan’s (2001) and Connel’s (1995) assertions on masculinity, constructions of masculinity among gay men were reviewed with reverence for context-specificity, and diverse sex role orientations.
Most notably, like the MGRC construct, sex-role preference also did not feature as a prominent psychometric third variable in relation to masculine gender role conflict concerns in the present study sample in that though sex-role preference predicted Gay Identity Development, there was no significant relationship between MGRC and Sex-role preference. In addition, most demographic variables were not salient predictors of MGRC among homosexual men, with the exception of ‘coming out process’. Feminine subscale scores on the MGRC scale, such as Restricted Emotionality (RE) and Restrictive Affection Behaviour Between Men (RABBM) were not significant predictors of psychological well-being and help-seeking behaviour among homosexual men. Notably, there were significant differences between levels of education and levels of MGRC experienced. This detail was also observed during the one-on-one interviews with the homosexual men as well. For instance, two graduate participants often talked about how they tried to take fewer cognizances of conflict situations and how they were not bothered by such incidences compared to the SHS graduates.

Generally, though majority of the interview participants were FSRPs, the results suggest that masculine traits were desirable and coveted traits. There is empirical evidence in extant literature that seems to suggest that those homosexual men of feminine sexual orientation/preference or less conventional attitudes towards masculinity show more positive psychological wellness, although narrations during the personal interviews suggested that femininity was not- a-so- much desired trait.

Questions concerning early child development, such as how many males and females they grew up with, and family structure were asked to understand homosexual men’s socialization in a holistic perspective. However, findings from regression analyses showed that such
factors were not potent predictors of MGRC. Such factors might be potent third variables explaining MGRC relationships which future research should explore.

In a nutshell, the present study failed to explore the relationship between MGRC and ethnicity among homosexual men in Ghana. Although previous studies reviewed have documented disparities between homosexual men of differing ethnicities and MGRC, the exclusion of these variables is intentional. In Africa, an entrenched ethnic, gender role stereotype creates a lot of “in-group” “out-group” dichotomy which visibly permeates into the network of sexual preferences, but this is inconclusive and on a face value does not provide an in-depth knowledge that is meaningful enough or necessarily generalizable to other minority populations. It only depicts a superficial method that carves the surface of cultural/ethnic background in Africa.

However, methodological inconsistencies and mixed findings highlight the need for a more potent measure in masculine gender role conflict assessment among homosexual men. Overall, MGRC did not present as a potent psychometric variable among the homosexual men in the present study. This also implies that MGRC relationships with other significant psychological variables may not be a simple, all-or-none phenomenon. The relevance of normative stress and cultural coping may have a sub-cultural interpretation among homosexual intra-culture which should be thoroughly explored. The findings are indicative of the fact that though homosexual men may be conforming to social stereotypes, they might have found contemporary ways of coping and interpreting their experiences.
Implications of findings from studies

The second aim of the present study was to examine the utility of applying a ‘psychological correlates model’ in determining Masculine Gender Role Conflict among homosexual men. The modified proposed model used in the present study was intended to elicit information from homosexual men that would be important for developing future culture-sensitive intervention in the significant areas mentioned below.

Findings from the study have implications for a) Theory and research b) Mental health care in Ghana (government) c) Ghana Psychological Association d) Religious organizations and society. e) Networking among homosexual men.

(a) Implication for theory and research exploration

The constructs utilized in the modified proposed model for predicting MGRC among homosexual men need to be reviewed, potent variables added, standardized and applied to the study of homosexual men in Ghana and Africa as a whole. A collaborative effort of local and foreign homosexual men and minority group stakeholders are needed to extend and strengthen the model through its application to MSM populations and other cultures in and across the African continent. Future studies on homosexual men in Ghana are important to sustain up-to-date and present information about this minority group. An area not fully explored is the triangulation of data, where data is collected from other sources such as heterosexual and bisexual men on MGRC as well. This would help identify similarities and gaps between the different types of males (in terms of sexual preference) on the MGRC construct and its psycho-social correlates. This would inform the contemporary MGRC research and mental health workers on the appropriate interventions which would reliably cater for masculine gender role needs of each special group.
(1a) Mental Healthcare in Ghana
Findings from the present study also imply that the advent of ‘technology’ in the 21st century has come to stay and mental abnormalities/clinical dysfunctions are presenting with less-than-recognizable symptoms. Firstly, the present study’s sample experienced some discomforts associated with MGRC. In all, MGRC did prove to be a potent psychometric variable for present study participants. Plausibly, there may have been other ‘latent variables’ that might have influenced the relationships. Clinicians engaged in therapeutic sessions with homosexual clients should be well informed about the complicated patterns and psychological outlets for MGRC expressions among homosexual men. Through thorough research exploration, adequate knowledge on gay identity development could be contextualized to help provide an African-oriented therapeutic intervention for homosexual men in Ghana. Clinicians should not only be based in the Psychiatric hospitals. Accessibility to professional psychological services was a problem for the present study’s minority men. The Psychological Act has been passed since the year 2012 and signed by the President of Ghana in June, 2013. More clinical psychologists are being recruited into mainstream health care services by the Ministry of Health (MOH). However, more mental health practitioners would be needed for effective community based interventions. This would encourage homosexual men and men of diverse sexual orientation to engage the services of these clinicians. Implications for information, psycho-education, preventive interventions and holistic health care cannot be underestimated.

(b) Implications for psychological practice in general.
The inadequate representation and accessibility of clinicians in various public hospitals and polyclinics were issues raised by the homosexual sample in the present study. The main objective of the Millennium Development Goal six (6) is to combat the spread of HIV/AIDS, other diseases (psychological dysfunctions are also implied) and also achieve a universal access to treatment by the year 2015.
Comparatively, the present study’s sample appeared to be more familiar with medical services than psychological services, although they acknowledged and identified the existence of psychological services. Findings of the present study also showed that participants had positive attitudes towards psychological help-seeking behavior.

However, the Ghana Psychological Association (GPA) and Ghana Psychological Council (GPC) as major stakeholders in mental health care should engage in more outreach to sensitize minority men on the need to patronize and prioritize professional psychological help when needed, stressing on APA’s ethical code of conduct of professionalism and confidentiality. Results from the present study showed that homosexual men had more positive attitudes towards professional psychological help which should be explored further. The GPA and GPC should explore how this perception can be further improved and how professional psychological services could be patronized more confidently similar to the free medical assistance (in terms of free HIV counseling and testing services) which participants acknowledged they received from the public health facilities. Psychological counseling services could be set up at the various public hospitals to augment the work of medical staff. During the interview session, one participant specifically confessed that he was abused sexually by a teacher in Senior High school and requested for a conversion therapy. The GPA should readily have free counseling service programs, including online and emergency phone lines for such victims. In all, mental health should be accessible in the second cycle institutions and for tertiary level students.

Even more important is the clarion call for the introduction of diagnostic models which are Africentric-oriented, culture-friendly and sensitive to Men who Sleep with other Men (MSM) in general.

(c) Implication for networking among homosexual men

The Millennium Development Goal two (MDG2), advocates the need for every citizen to be empowered with the requisite knowledge and skills to live a worthwhile life.
The findings of the present study showed that the availability of culture-specific coping strategies were an immediate though not so strong part of their overall coping strategy. More importantly, sense of gay identity appeared to be a more viable and an effective form of participants’ overall coping strategies. This has an urgent implication for networking among homosexual men. The findings could be viewed as strength for such a group with high level of social networking and official training in varied areas including HIV sensitization for homosexual men. The findings in the present study corroborate Cass’s (1979) model on the stages of gay identity development- a strength in helping minority men to develop lesser clinical symptoms (due to conflicts and stressors that emanate from refusing to comply) on gender role stereotypes. By and large, MGRC was not a prominent psychological variable among the present study’s sample and this could be attributed to the peer training/counseling background of the present study’s sample. However, in adopting appropriate coping strategy among homosexual men, the present study found that group cohesion, perceived sense of community through active networking was crucial for their mutual well-being and mental health.

Observably, participants who scored high on masculine gender role conflict also showed a positive attitude towards seeking psychological help. It is therefore important for homosexual men to reach out to non-members of their organization who are also homosexual men to teach them the essence of professional psychological services and consequences of MGRC. It was observed through the personal interviews that active social networking among homosexual men was equivalent to sound mental health. Also, in areas where lynching of minority men is quite common, more education on trauma management, how to deal with the social stigma and distresses, and the need for HIV testing and counseling should be the focus of such a networking organization. They could serve as group therapy for its members.
(d) Implication for religious organizations and the Society

Eighty percent (80%) of the present sample reported they were Christians. This is quite alarming. The Christian Council and its affiliate organizations should target the youth as the prime focus of their Christian activities. More outreach programs, especially in the senior high schools should be organized and the tenets of Christianity well explained to all without any judgment or condemnation attitude. The Ministry of Education should have a policy on teachers who sexually abuse their students and introduce them into homosexuality. One of the participants during the interview session disclosed he was abused sexually by a teacher in the senior high school. The recent Whistle Blowers Act passed by Parliament should be extended to the area of sexuality. More religious stakeholders should extend a hand to these minority men. Three of the interview participants acknowledged economic reasons as one of the mainstays of their sexual orientation. Philanthropists should help these young men financially without any judgmental attitudes.

For the society, the western/external influence of the Ghanaian culture is enormous. Some schools of thought have been quick to attribute the origin of homosexuality to western influence, but the fact is, homosexual men are a reality. Therefore, the lynching and hate-crime should stop. The Ghanaian family structure system should, be rather strengthened to increase adequate care for all and to prevent some of these exigency. Non-governmental organizations and stakeholders should be involved in education and sensitization on the external factors that could lead to homosexuality (such as poverty, unstable family systems and sexual abuse) so that these minority men can also work and be more productive to our nation.

Though Africentric coping failed to explain the MGRC-Psychological well-being, relationship, supplementary results showed MGRC was significantly predictive of culture-specific coping strategies. This means that society has a part to play in helping minority men perform more functionally in society.
**Suggestions and recommendations for further research**

Future research should explore Meek’s (2011) model and suggest through empirical data how Men who Sleep with Men (MSM) could be captured on the varying strains homosexual men experience in relation to masculinity and how contextual variables affect the relationship.

The present study’s findings suggest that masculine gender role conflict may serve as a positive reinforcer and a maintaining variable increasing the likelihood that conflict situations may recur. Future studies should investigate the positive effect of Masculine Gender Role Conflict.

The present study’s findings suggest that gay men may have cultural coping strategies peculiar to the homosexual sub-culture. Future studies should explore this phenomenon in detail.

**Significance/contribution of the whole study**

This research is of immense importance because it offers valuable information on the experiences of homosexual men in Ghana.

Regardless of the explicit limitations elaborated for the two studies, the present research has theoretical and practical significance for social science research/practice in many ways.

Firstly, the findings from the present study suggest that Masculine Gender Role Conflict (MGRC) may not be a potent psychological characteristic in the present sensitive population. Contrary to the general supposition that MGRC only resulted in negative outcomes for males (O’Neil et al., 1986, 1995; Pleck, 1995), findings from the present study suggested through the value system coping ties that MGRC may also have positive outcomes for gender role
performances of homosexual men by serving as a maintaining variable which needs detailed research exploration.

Also, in a collectivist African culture and a largely religious society (80% of the present sample reported as Christians) findings indicate that although Africentric coping could not moderate the relationship between MGRC and Psychological well-being, further analysis showed that MGRC is predictive of Africentric Coping ties. This is exceptionally significant. Culture-specific coping, although actively employed by participants did not seem to be a deeper coping resort. It reveals that there may possibly be other ‘influential’ and unique gay sub-culture specific variables distinctively related to homosexual men which must be thoroughly and vigorously explored. Nonetheless, serendipitous findings showed that Masculine Gender Role Conflict (MGRC) was predictive of Africentric coping and the qualitative common themes provides support for this finding. This buttresses the fact that the ‘African Psychology’ conceptualization of masculinity among homosexual men should be well documented and integrated into the psychological experience for all, especially research work, than the use of western concepts to explain that which holds for African study participants. The present thesis provides a baseline for such documentations.

The present study therefore fills a major gap in knowledge and in the literature. Major discoveries of the present study include the fact that, MGRC also has positive outcomes for homosexual men and not negative consequences alone as postulated by O’Neil’s (1981) male gender role theory. MGRC also failed to feature as a prominent variable for homosexual men in Ghana. Qualitative interview discussions also showed that the adoptions of culture-specific coping strategies are not so much conclusive for the present sample of homosexual men. There are gray areas in the adoption of cultural coping ties which needs further exploration among homosexual men. This is quite revealing.
Another new discovery from the present study is also the unraveling of a new breed of homosexual men known as Both Sex-Role Preference/Orientation (BSRP). This type of homosexual men is totally non-existing in extant literature. Present study findings further showed that this intra-breed of homosexual men (BSRP) are more likely to skew towards semblances and characteristics of Female Sex Role Preference (FSRP). Further findings from the present study showed that, this intra-breed of homosexual men (BSRP) may be carriers of the ‘androgyne trait’ and possibly a midline between MSRP and FSRP on the homosexual gender role continuum (probably more skewed towards female sex orientation).

Furthermore, the present study’s findings from the qualitative method reflect that for homosexual men, there exists a plethora of masculinities. For instance, masculinity based on sexual preference, masculinity based on sex-role orientation, masculinity based on gay sexual power inequalities etc.

Secondly, frantic research on published extant literature on homosexuality in Ghana proved futile. There has not been any major published psychological and social science research on homosexuality, especially with regards to Masculine Gender Role Conflict (MGRC) and its psycho-social correlates in Ghana. Plausibly, the difficulty/frustrations of finding the homosexual sample for researchers and the fear of lynching and hate-crime for homosexual men have contributed to this deficit in research. Homosexuality is unconstitutional by the laws of Ghana and this has also culminated into the paucity of research on masculinity among homosexual men in Ghana. Furthermore, the present study serves as a viable platform for appreciating minority men (men of diverse sexual orientations) as a true psychological experience that needs further exploration.

Thirdly, drawing a psychological research lens on ‘in and out of school’ homosexual sample also distinguishes the present research from previous western psychological studies which
have primarily focused on university/college students. Thus, the reality of homosexual men’s experience in totality is brought to the limelight without any segregation. This would help inform mental health practitioners and stakeholders in Ghana, about the current MGRC issues and how appropriate interventions and culturally-relevant and stigmatization-free therapies can be instituted to support minority men (especially the victims of sexual abuse in homosexual relationships). The present study also provides a basis for further cross-cultural research.

The study also adopted a two-tiered methodological approach in data collection. This was to complement the data obtained from one method to the other. This is known as ‘triangulation of methods’ (Denzin & Lincoln, 1994). Most western studies reviewed in the present study explored data through the quantitative method and the subsequent addition of qualitative method herein provides a rich basis of information for further exploration. In fact, the face-to-face interviews with homosexual participants were revealing and the use of survey alone may have deprived the present research of its in-depth and richness of data in comprehending masculinity issues related to homosexual men.
Figure 5: This shows a proposed model based on the findings of the present study.

Key: MGRC creators: These are variables that have the tendency of increasing conflict situations for homosexual men.

MGRC inhibitors: These are variables that have the tendency of reducing conflict situations for homosexual men.

In retrospect, the opening quote by Bly (1990) which seems to reinforce the notion that the structure at the base of the male psyche is still rigorously unshakable and intact as it was in yesteryears needs to be updated and further investigated in African collectivist cultures (especially among men of diverse sexual orientations) since the findings of the present study failed to support this assertion holistically.

In conclusion, the present study sample evidenced multiple meanings to issues on gender (roles). There is a need for scholarly appreciation on the fluidity of gender based on sexuality and its relevance to the traditional binary construction of gender especially among homosexual men in Africa.
REFERENCES


Scale for Adolescents: Correlates with masculinity ideology. Thymos: *Journal of Boyhood Studies, 1*, 191-204


York: Routledge.


Connell, R. (1996). Teaching the boys: New research on masculinity, and gender
strategies for schools. Teachers College Record, 98 (2), 206-235.


of Africa and African American.


Morton, T., Farris, K., & Brenowitz, L. (2002). MMPI—A scores and high points of male juvenile delinquents: Scales 4, 5 and 6 as markers of juvenile delinquency. *Psychological Assessment, 14*(3),311-31


and attitudes toward career counseling to interest in and preferences for career counseling styles. *Psychology of Men and Masculinity, 3*, 9–21.


or science fiction? Professional Psychology: Research and Practice, 37, 21-28.


among gay men. *Human Relations, 47*(9), 1049-1062


APPENDIX A

INTERVIEW GUIDE

- Are there different kinds of males? (If yes, probe)
- Can you share with me what you think identifies you as a man/male?
- What in your experience does it mean to be gay?
- What do you think it means to be a man, and to be gay at the same time?
- Have you been in any situation that makes you feel less of a man? (Probe)
- How did you cope? (Probe)
- Could you give me examples of any Ghanaian cultural values about maleness you still hold on to and practice?
- Are there differences in how straight men and homosexual men should behave? In what ways? Do you view yourself as a man differently now, from how you saw yourself when you were heterosexual and how do you think culture has affected that?
- Can you tell me about yourself? (For example, your age, sex-role preference etc.)

General Questions:
- Do you have any questions pertaining to this interview?
- How has this experience been for you?
- Do you have any concerns about the results of the present study?

Appendix A

Superordinate Theme and Supporting Common Themes

<table>
<thead>
<tr>
<th>Superordinate Theme #1: Participants’ reflections on psycho-sexual challenges experienced in adhering to rigid traditional masculine gender roles/conflict situations.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Themes</td>
</tr>
</tbody>
</table>

| Intimidation from fellow peers/friends/family. (N= 5) | P2: I am always in the middle of girls..and even in the secondary school my colleagues would be teasing me.. but I don’t feel like going with the boys erhh… a man came proposing to me ..it made me feel less of a man because we know that in normal relationships, I would have gone out to propose to someone.. and when I have sex with men I am sexually satisfies than women..

P4: actually I went to the club with my friends and then they all had girlfriends ..they all had girlfriends..

P5: ..so for you to say I have been in the gay business and now I want to withdraw myself and be a man sometimes it becomes boring because sometimes when you move out and you are with your girlfriends in the big programmes

P6: Because of society..if you a man and you walk like a woman they would all think that you are gay

<p>| Conforming to cultural definition to maleness. (N=4) | P1: ..he’s not regarded as homosexual because he’s acting like the real man gender expects him to be but if I come |</p>
<table>
<thead>
<tr>
<th>P3:</th>
<th>..to feel you are in control..in charge and then evidence to show you are in charge (laughs).</th>
</tr>
</thead>
<tbody>
<tr>
<td>P5:</td>
<td>..That was when my mother said she had not seen me with a girl and then decided to ask if I had a girlfriend? Because of my gay identity it was forced to think about what prompted this question from my mother because I wasn’t that old enough to get married so I thought there was something behind that question…</td>
</tr>
<tr>
<td>P6:</td>
<td>: being caring, talking care of the family, giving them money.</td>
</tr>
</tbody>
</table>

**Feelings of helplessness (N=3)**

<table>
<thead>
<tr>
<th>P1:</th>
<th>..I’m sexually involved with that man but I will be beaten or lynched while that person will be allowed to walk freely because he’s seen as a man so we’re regarded differently.</th>
</tr>
</thead>
</table>
| P3: | I have a cousin from Kumasi; he came to Accra for the first time so I’m with him and then anytime he’s talking he’ll be like he met this girl, he was even telling me that we should go for ‘mmaap3’ we should go and look for girls we should go for women hunting and then I was telling him oh no I
| Situations that made them feel less of a man. e.g. playing reverse sex-roles. (N=6) | P1: several occasions, sometimes they are going to play football, without asking me if I want to play or not they write my name, whether I like it or not I’ll have to go and play football, because I can’t play it makes me feel less like a man. And then sometimes, when I am with them and they say, ‘do what the men are doing’ it brings me, it makes me conscious that am not behaving like a man should and sometimes they would force you to get a girlfriend or something, they will say hey if you don’t have a girlfriend it means you are not a man or stuffs like that. It makes me feel less like a man.  

P2: oh, ok, I remember when I was in SHS 3 or 4, I had to pretend I had a girlfriend because the people in my school were saying that I was gay, it was all over the school that ei, this guy is gay and stuffs like that so I had to get a girl in my school who was my friend to act as my girlfriend. |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>don’t want to go. It was conflicting with my interest</td>
<td></td>
</tr>
</tbody>
</table>
and then she will tell everybody I’m the boyfriend and then I will tell everybody she was my girlfriend and then people will let my name go for a while and think that after all he is not gay because he’s got a girlfriend and stuffs like..

P3: .. if it’s a new place I’m going to because I know people are going to see me like less of a man or something I have to adopt a new way of walking, talk less, interact less, I can’t really socialise like..

P5: .. having to pretend everyday, not being able to live the way I want to be, everyday of my life I pretend. Sometimes I’ll be sitting down with my mum and dad and then there will be a comment on the radio and then they start to say all sort of things about those things and I’m there myself and I can’t say anything, I have to pretend I support what they said, say oh, this that, I, it doesn’t make me happy to speak against.

P6: There are people like that! They would give you money just to sleep with you. The one who gives the money sometimes has the preference of deciding what role to
Superordinate theme # 2: Cultural coping strategies

<table>
<thead>
<tr>
<th>Common Themes</th>
<th>Example from Interviews</th>
</tr>
</thead>
</table>
| Sense of sexual identity (N=6) | **P1**: .. how people react to me and then\ when I started going for trainings, getting\ to meet people, hearing the experiences of\ people, hearing how people react to\ situations and stuffs like that..
|                             | **P2**: I identified myself as a woman but I\ wasn’t involved in any sexual activity until\ I joined my NGO, I didn’t involve in any\ sexual activity but I got new friends and\ through conversation, they made me\ understand that there was something like\ this that they were doing and if you’re\ identified as this, this is how you will feel,\ then it means you have to do something\ like this. That’s it, it made me feel like I\ was lost but now I’m found
|                             | **P3**: I met the right people who would\ accept me for who I am because at first I\ couldn’t tell anyone about this but when I |
told them, they identified that they also feel the same way and this is what they do and they are happy so I felt I’ve found the right people who are going to give me the right help I needed to make me live a happy life and indeed for some time I became very very happy.

P4: I was excited, very very excited, I wasn’t, I wouldn’t say I was sexually something because when I’m with them I don’t feel like having sex with any of them because I identified all of them as women

P5: ..not really stigmatized but I feel remorseful rather than stigmatized, I feel stigmatized when my friends are stigmatized..

P6: ..But as I was growing I started exploring and I wanted to know if there were people feeling the same way I was feeling you know and errh..

Value systems coping strategies (N=4)

P1: ..it makes me, should I use, I doubt myself, like, is this really right, you see everyone, it’s like if there are100 people around me, 70 or 80 of them want this and then its just the 20 who want the other
thing so it means definitely if majority carries the vote then I just have to go for the 80..

**P4:** because I have a positive influence in my community, and I think because most of all I have respect for myself so I make people generate respect for me..

**P5:** they just different people as society thinks we’re abnormal, they think, he’s dull, he’s a demon, every sin is a demon, so we are demons then everybody else is a demon provided you sin, you are a sinner, you are still a demon, we all have a demon in us so we shouldn’t be regarded as so big demons as maame water and stuffs like that..because we do live up to manly expectations..

| Religion (N=5) | **P1:** sometimes I have difficulty going to church but I go to church.. **P2:** God hears my calls.. **P4:** I spoke to a friend who is also gay and my pastor.. **P5:** I am praying that God supplies my need so that I can stop this act. **P6:** I pray all the time and I am a chorister |
too.. so I sing a lot church..

**Family and friends coping system (N=5)**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>P1:</strong></td>
<td>He has been with so many friends who are gay and the influence is taking him up..</td>
</tr>
<tr>
<td><strong>P2:</strong></td>
<td>I could tell my mum that mum this is what my friends are saying. When I’m passing, this person says I’m a woman, I could tell my mummy sometimes I tell friends about it but not because I want them to go and act or something but I want to just tell them what I’m going through</td>
</tr>
<tr>
<td><strong>P4:</strong></td>
<td>.. friends I used to walk with, and the way I find myself in gay company and how I socialize..</td>
</tr>
<tr>
<td><strong>P5:</strong></td>
<td>I always walk with gays people.. so they help me when I am in trouble!</td>
</tr>
</tbody>
</table>

**Superordinate theme #3: Constructions and Ideations on masculinity**

<table>
<thead>
<tr>
<th>Common themes</th>
<th>Examples from Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Traditional cultural male attributes (N=6)</strong></td>
<td><strong>P2:</strong> you have take care of the parents and then other siblings. I still have plans of getting married, its like seventy something.</td>
</tr>
<tr>
<td></td>
<td><strong>P3:</strong>.. they should compulsorily have children..</td>
</tr>
<tr>
<td></td>
<td><strong>P5:</strong> must have a woman, he must give</td>
</tr>
</tbody>
</table>
| **Traditional male roles (N=6)** | Birth, he must be socially responsible, take care of family, take care of children

**P6:** A man is supposed to be the head of the family….

**P1:** A man is supposed to be the head of the family, he is supposed to provide, give money for the upkeep of the family, that is pay school fees, pay water bills, pay electricity bills, meet the needs of the family. A man must be very very commanding so that when he speaks everyone succumbs to him. This is what society and family expects a man to be..

**P2:** We have the heterosexual men who are strictly for women and they are the real men..

**P3:** A man should be responsible, not in a way of having a family or, but being able to take care of your family i.e your mother, daddy, sibling, sister, I hold on to that. I regard that as a man you should be able to take care of your family.

**P4:** I should be rich, I should work hard and get money, I hold on to that. I think that’s all that I hold on to as a man

**P6:** They should sleep with women and stuffs like that..

<p>| <strong>Work and Career achievement (N=3)</strong> | <strong>P1:</strong> Income to support the family and all that… |</p>
<table>
<thead>
<tr>
<th>Traditional agents/schools on masculinity (N=4)</th>
<th>P2: work hard..say power of authority..to feel you are in control..in charge and then evidence to show you are in charge (laughs)..&lt;br&gt;P2: home is also a factor, that’s why I say that family, society, and everybody&lt;br&gt;P3: : hmm, family and then school sometimes&lt;br&gt;P4: ..the way they show it on television and on the radio that when u take ‘brukutu’.. you can perform..you are a man..&lt;br&gt;P5: these pieces of information from how I was brought up and school as well…</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Non-traditional agents on masculinity (N=3)</strong>&lt;br&gt;P1: going for trainings, getting to meet people…&lt;br&gt;P3: …hearing the experiences of people, hearing how people react to situations and stuffs like that….</td>
</tr>
</tbody>
</table>
## Superordinate theme #4: Participants’ reflections on perceptions of Gayness and Masculinity

<table>
<thead>
<tr>
<th>Common Themes</th>
<th>Examples from Interviews</th>
</tr>
</thead>
</table>
| Masculine Emotional traits (N = 4) | P2 I would have gone out to propose to someone.. and when I have sex with men I am sexually satisfied than women  
P3 to get help..turns himself to be a woman for another man to have sex with him.. and receive protection.  
P4 a man who has feeling for another fellow man then you identify.. |
| Cognitive traits of Gayness and Masculinity (N=4) | P1 sometimes it’s their thought, someone will never involve in any sexual activity with any man but they will still tell you they are homosexual  
P2.. it is something in the mind as in you tune the mind in a particular way and then it sticks …you can’t pull back from there and it becomes a part of you..  
P4 My conscience was telling me something else! Why am I a man then turning myself to be a woman! Why shouldn’t I remain to be a man! So that was when I said no I wouldn’t play that part!!  
P5..it is the perception that Physically strong and emotionally.. I can tell myself...
<table>
<thead>
<tr>
<th>Behavioural traits of gayness and masculinity (N=4)</th>
<th>to be a man when for instance..</th>
</tr>
</thead>
<tbody>
<tr>
<td>P1 Like the way the person walks, the way, talking like a woman, sometimes having to clap and stuffs like that girls do when they are talking</td>
<td></td>
</tr>
<tr>
<td>P2.. Sometimes they dress differently than the way a normal man is supposed to dress. A normal man may wear a jean or something but maybe he will feel like wearing, female clothes, a top that people believe belongs to women, he will wear it because he feels like a woman..</td>
<td></td>
</tr>
<tr>
<td>P3 family I had to be like a man and then for my my friends they know me to be very very sissy, behaving like a girl and so my friends see me and they be like, ….I wanted to get into the mood and be like them, hang around with them and then go and have fun because of family I had to be straight and be like a man</td>
<td></td>
</tr>
<tr>
<td>P5 ..I like cooking and I like cleaning a lot especially the bedroom so anytime I did those tasks I was tagged me as a man who does woman’s job..</td>
<td></td>
</tr>
</tbody>
</table>
Masculine gay traits (N=4)

P1: ..a man as a man who is expected to be with a woman, but I’m a man though, I have things, erhh, sexually, things that classify me as a man, but I am not the man that gender demands me to be so I am a man sexually but gender wise I’m not a man..

P4: how well built they are, like looking at the curves men are supposed to have, how they are walking, how they talk and their form of dressing

P5: ..sometimes from they way they talk..

Superordinate theme # 5: The influence of masculinity on sex-role preferences

<table>
<thead>
<tr>
<th>Common Themes</th>
<th>Examples from Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gay sexual power inequalities/gay sex roles (N=5)</td>
<td>P3 one decides to play for a female role for a long time until the person might feel some uneasiness about it and then may decide to change and then play the masculine role.</td>
</tr>
<tr>
<td></td>
<td><strong>P4</strong> There are people like that! They would give you money just to sleep with you. The one who gives the money sometimes has the preference of deciding what role to play…</td>
</tr>
</tbody>
</table>
| Emotional/Affective security traits (N=4) | P1. I am also a man so I have to go chasing but when they propose I always find myself accepting.  

P2. A man came proposing to me  

P3. Those feminine acts I put up with does not create any conflict for me but it affects my sexual orientation in that it does not push me to have sexual intimacy with a woman. I know I would get something from a man.  

P4. Washing clothes, cleaning the bathroom and even having sex. I always play the role of a woman. I know I would get love. |
<table>
<thead>
<tr>
<th>Superordinate theme #6 : Goals set for themselves and partners towards gender roles (conflict)</th>
</tr>
</thead>
</table>
| Ghanaian cultural values on maleness (N=6) | P1:...to give money for the upkeep of the family, that is pay school fees, pay water bills, pay electricity bills, meet the needs of the family. A man must be very very commanding so that when he speaks everyone succumbs to him.  

P2 society wanting me to have sex with a woman and have a child and then I am saying that no, I feel that I am supposed to be with a man and then adopt a child so society, what society thinks and what I think...  

P3 Men are aggressive! Yes aggressive! And loves women...does womanizing and he is at all party functions...  

P4 who is sexually potent, the physical strength of the person… (silence) the way the person talks makes the person a man! |

| Help-seeking goals (N=5) | P1, yea, sometimes, even when I had to try, I had to go through a lot of counseling because I am not really ok, I felt immediately I do it and I’m infected, people will get to know and stuffs like that |
so that was the only counselling I’d gone for
P2. I used to go to the hospital to see if I had some viruses in my body..the most recent is two months ago..

| Achieving Masculine tendencies (N=5) | P1: when I find myself in the midst of people who are thinking of having children or getting married and stuffs like that, I am thinking that definitely everyone wants to do it then I should also do it..

P3: I loved to the female sex-role preference but now I want to be masculine so now I love to play the male role as well..so yes my beliefs on masculinity have changed..that is why I want to be the man always!

P5: ..hmm as the male I should be the head of the home..(silence)

P6 : ..You marry and be with your children though one is introduced that gayism but ...like the ability to have children with your wife..procreation..yea! |
Informed Consent Form

Dear Participant:

I would greatly appreciate your participation in my research study. The purpose of this research is to explore the relationships among different variables, including your feelings about yourself, as well as your feelings about interacting with other people. I hope that this study will be useful in helping psychologists to better understand personal belief systems in homosexual men.

As part of your participation in this study, I am asking you to respond to the questionnaires in this packet; most people can complete these in about 30-40 minutes. General information about such things as your age, ethnicity, and beliefs will be collected, but no specific information that personally identifies you will be asked.

Please answer all questions based on your true feelings and beliefs. Please keep this consent form and return your questionnaires to the person who gave them to you. Do not write your name anywhere on the questionnaires; I want the answers you give to be completely anonymous.

The information on the questionnaires is being collected for research purposes only. There is no foreseeable personal risk or discomfort involved in your participation in the present research. Your participation is completely voluntary. You may withdraw from the research at any time.

The data from this study is for scientific purposes only and will be kept completely confidential. Your personal information will be not be associated with the data nor with any written reports, presentations or publications that may develop from this study. Any future use of the data will be subjected to the same purposes and subjected to the same confidentiality guidelines. It is expected that the results from this study will be available by December 2012. If you are interested in receiving information about the results please leave your permanent address and will send you a copy.

If you have any questions or concerns regarding your participation in this study please contact Yvonne Otubea Otchere, Psychology Department, University of Ghana, Legon. (Tel. +233-28-8278181)/yvonne737@yahoo.com

Date: .................................................................
Demographic Data Sheet

INSTRUCTIONS: Please answer all the questions as honestly as you can. Your responses will be kept in absolute confidence. Your personal information will not be associated with your responses and none of the information will be discussed with anyone.

4. Ethnicity:
5. Occupation

Formal Education  [Please tick [✓] your response].

5. What is your highest level of Education?
   a. Less than Senior High school / / b. Senior High School / / c. Bachelor's degree / /
   d. Graduate degree / / e. Masters degree / /

6. Religious Affiliation 7. How important are your religious beliefs?
   a. Christian / / a. Very important / /
   b. Atheistic / / b. Important / /
   c. Muslim / / c. Minimally important / /
   d. Traditional / / d. Not important at all / /
   e. Other (Please specify) .....................

8. Marital Status
   a. Never married! Never Lived with Significant Other / / b. Married/Living with Significant Other / /
   c. Separated / / d. Widowed / /

9. Which of the following best describes you?

10. What is your current relationship status?
    a. Single / / e. Attached / /
    b. Separated / /
    f. Multiple partners / / c. Divorced / /
        d. Widowed / /

11. Please rate what you consider to be your level of outness
    a. In the closet / /
    b. Somewhat out, but still in the closet in many areas of life. / /
    c. Mostly out, but with a few areas still in the closet. / /
    d. Completely out / /

12. My coming out process has been difficult.
a. Most difficult / / 
b. Somewhat difficult / / 
c. Not difficult at all / / 

13. Would you seek help from if you had a problem you couldn’t handle?
   e. (Other) Please specify.................................

14. How many males did you grow up with?.................................
15. How many females did you grow up with? .................................
16. What role do you play in a homosexual relationship?
   Male/ /  Female/ /  Both male & female roles / / 

Please respond to the items below using the following scale. Tick the appropriate box.

1 = strongly disagree
2 = disagree
3 = moderately disagree
4 = moderately agree
5 = agree
6 = strongly agree

1. Moving up the career ladder is important to me.
2. I have difficulty telling others I care for them.
3. Verbally expressing my love to another man is difficult for me.
4. I fell torn between my hectic work schedule and caring for my health.
5. Making money is a part of my idea of being a successful man.
6. Strong emotions are difficult for me to understand.
7. Affection with other men makes me tense.
8. I sometimes define my personal value by my career success.
9. Expressing feelings makes me feel open to attack by other people.
10. Expressing my emotions to other men is risky.
11. My career, job, or school affairs affects the quality of my leisure or family life.
12. I evaluate other people's value by their level of achievement and success.
13. Talking (about my feelings) during sexual relations is difficult for me.
14. I worry about failing and how it affects my doing well as a man.
15. I have difficulty expressing my emotional needs to my partner.

University of Ghana http://ugspace.ug.edu.gh
16. Men who touch other men make me uncomfortable.
17. Finding time to relax is difficult for me.
18. Doing well all the time is important to me.
19. I have difficulty expressing my tender feelings.
20. Hugging other men is difficult for me.
21. I often feel I need to be in charge of those around me.
22. Telling others of my strong feelings is not part of my sexual behaviour.
23. Competing with others is the best way to succeed.
24. Winning is a measure of my value and personal worth.
25. I often have trouble finding words that describe how I feel.
26. I am sometimes hesitant to show my affection to men because of how others might perceive me.
27. My needs to work or study keep me from my family or leisure more than I would like.
28. I strive to be more successful than others.
29. I do not like to show my emotions to other people.
30. Telling my partner my feelings about him/her during sex is difficult for me.
31. My work or school often disrupts other parts of my life (home, health, leisure).
32. I am often concerned about how others evaluate my performance at work or school.
33. Being very personal with other men makes me feel uncomfortable.
34. Being smarter or physically stronger than other men is important to me.
35. Men who are overly friendly to me, make me wonder about their sexual preference (men or women).
36. Over work, and stress, caused by a need to achieve on the job or in school, affects/hurts my life.
37. I like to feel superior to other people.

ATSPPH - Please respond to the items below using the following scale. Tick the appropriate box.
1= strongly disagree, 2=disagree, 3= agree, 4=strongly agree

1. Although there are clinics for people with mental troubles, I would not have much faith in them.
2. If a good friend asked by advice about a mental problem, I might recommend that he see a psychologist.
3. I would feel uneasy going to psychologist because of what people would think.

4. A person with a strong character can get over mental conflicts by himself, and would have little need of a psychologist.

5. There are times when I felt completely lost and would have welcomed professional advice for a personal or emotional problem.

6. Considering the time and expense involved in psychotherapy, it would have doubtful value for a person like me.

7. I would willingly confide intimate matters to an appropriate person if I thought it might help me or a member of my family.

8. I would rather live with certain mental conflicts than go through the ordeal of getting psychological treatment.

9. Emotional difficulties, like many things, tend to work out by themselves.

10. There are certain problems which should be discussed outside one's immediate family.

11. A person with a serious emotional disturbance would probably feel most secure in a good mental hospital.

12. If I believed I was having a mental breakdown, my first inclination would be to get professional help.

13. Keeping one's mind on the job is a good solution for avoiding personal worries and concerns.

14. Having been a psychiatric patient is a blot on a person's life.

15. I would rather be advised by a close friend than by a psychologist, even for an emotional problem.

16. A person with an emotional problem is not likely to solve it alone; he is likely to solve it with professional help.

17. I resent a person--professionally trained or not--who want to know about my personal difficulties.

18. I would want to get psychological attention if I was worried or upset for a long period of time.

19. The idea of talking about problems with a psychologist strikes me as a poor way to get rid of emotional conflicts.

20. Having been mentally ill carries with it a burden of shame.

21. There are experiences in my life I would not discuss with anyone.

22. It is probably best not to know everything about oneself.
23. If I were experiencing a serious emotional crisis at this point in my life, I would be confident that I could find relief in psychotherapy.

24. There is something admirable in the attitude of a person who is willing to cope with his conflicts and fears without resorting to professional help.

25. At some future time I might want to have psychological counselling.

26. A person should work out his problems; getting psychological counselling would be a last resort.

27. Had I received treatment in a mental hospital, I would not feel that it ought to be "covered up."

28. If I thought I needed psychological help, I would get it no matter who knew about it.

29. It is difficult to talk about personal affairs with highly educated people such as doctors, teachers, and clergymen.

### GIQ

Directions: Please read each of the following statements carefully and then mark whether you feel the statements are true or false for you at this point in time. A statement is marked as TRUE, if the ENTIRE STATEMENT IS TRUE, OTHERWISE IT IS MARKED FALSE.

<table>
<thead>
<tr>
<th>Number</th>
<th>Statement</th>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I probably am sexually attracted equally to men and women.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>I live a homosexual lifestyle at home, while at work/school. I do not want others to know about my lifestyle.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>My homosexuality is a valid private identity, that I do not want made public.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>I have feelings I would label as homosexual.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>I have little desire to be around most heterosexuals.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>I doubt that I am homosexual, but still am confused about who I am sexually.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>I do not want most heterosexuals to know that I am definitely homosexual.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>I am very proud to be gay and make it known to everyone around me.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>I don't have much contact with heterosexuals and can't say that I miss it.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>I generally feel comfortable being the only gay person in a group of heterosexuals.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>I'm probably homosexual, even though I maintain a heterosexual image in both my personal and public life.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>I have disclosed to 1 or 2 people (very few) that I have homosexual feelings, although I'm not sure I'm homosexual.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>I am not as angry about society's treatment of gay because even though I've told everyone about my gayness, they have responded well.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>I am definitely homosexual but I do not share that knowledge with most people.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
15. I don't mind if homosexuals know that I have homosexual thoughts and feelings, but I don't want others to know.  
16. More than likely I'm homosexual, although I'm not positive about it.  
17. I don't act like most homosexuals do, so I doubt that I'm homosexual.  
18. I'm probably homosexual, but I'm not sure yet.  
19. I am openly gay and fully integrated into heterosexual society.  
20. I don't think that I'm homosexual.  
21. I don't feel I'm heterosexual or homosexual.  
22. I have thoughts I would label as homosexual.  
23. I don't want people to know that I may be homosexual, although I'm not sure if I am homosexual or not.  
24. I may be homosexual and I am upset at the thought of it.  
25. The topic of homosexuality does not relate to me personally.  
26. I frequently confront people about their irrational homophobic (fear of homosexuality) feelings.  
27. Getting in touch with homosexuals is something I feel I need to do, even though I'm not sure I want to.  
28. I have homosexual thoughts and feelings but I doubt that I'm homosexual.  
29. I dread having to deal with the fact that I may be homosexual.  
30. I am proud and open with everyone about being gay, but it isn't the major focus of my life.  

<table>
<thead>
<tr>
<th>GIQ (Cont’d)</th>
</tr>
</thead>
</table>

Directions: Please read each of the following statements carefully and then mark whether you feel the statements are true or false for you at this point in time. A statement is marked as **TRUE** if the ENTIRE STATEMENT IS TRUE, OTHERWISE IT IS MARKED FALSE.

31. I probably am heterosexual or non-sexual.  
32. I am experimenting with my same sex, because I don't know what my sexual preference is.  
33. I feel accepted by homosexual friends and acquaintances; even though I'm not sure I'm homosexual.  
34. I frequently express to others, anger over heterosexuals' oppression of me and other gays.  
35. I have not told most of the people at work that I am definitely homosexual.  
36. I accept but would not say I am proud of the fact that I am definitely homosexual.
37. I cannot imagine sharing my homosexual feelings with anyone.
38. Most heterosexuals are not credible sources of help for me.
39. I am openly gay around gays and heterosexuals.
40. I engage in sexual behaviour I would label as homosexual.
41. I am not about to stay hidden as gay for anyone.
42. I tolerate rather than accept my homosexual thoughts and feelings.
43. My heterosexual friends, family, and associates think of me as a person who happens to be gay, rather than a gay person.
44. Even though I am definitely homosexual, I have not told my family.
45. I am openly gay with everyone, but it doesn't make me feel all that different from heterosexuals.

Below is a list of problems and complaints that people sometimes have. Please read each one carefully. After you have done so, please rate how much that problem has bothered or distressed you DURING THE PAST TWO WEEKS INCLUDING TODAY. To make your rating, use the scale shown in the example. Tick that number in the open space to the left of the problem. Do not skip any items.

**Ratings:**
1. not at all
2. a little bit
3. quite a bit
4. extremely

If you feel that "backaches" have been bothering you quite a bit during the past 2 weeks, you would record your response "3" as shown.

<table>
<thead>
<tr>
<th>DURING THE PAST 2 WEEKS, INCLUDING TODAY, HOW MUCH WERE YOU BOTHERED BY:</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Headaches</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Nervousness or shakiness inside</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Being unable to get rid of bad thoughts or ideas</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Faintness or dizziness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Loss of sexual interest or pleasure</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Feeling critical of others</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Bad dreams</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Difficulty in speaking when you are excited</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Trouble remembering things</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Worried about sloppiness or carelessness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Feeling easily annoyed or irritated</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Pains in the heart or chest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Itching</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Below is a list of problems and complaints that people sometimes have. Please read each one carefully. After you have done so, please rate how much that problem has bothered or distressed you **DURING THE PAST TWO WEEKS INCLUDING TODAY**. To make your rating, use the scale shown in the example. Tick that number in the open space to the left of the problem. Do not skip any items.

**Ratings:**
1. not at all
2. a little bit
3. quite a bit
4. extremely

If you feel that "backaches" have been bothering you quite a bit during the past 2 weeks, you would record your response "3" as shown.

<table>
<thead>
<tr>
<th>Problem</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. Feeling low in energy or slowed down</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Thoughts of ending your life</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Sweating</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Trembling</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Feeling confused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Poor appetite</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Crying easily</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Feeling shy or uneasy with the opposite sex</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. A feeling of being trapped or caught</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Suddenly scared for no reason</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Temper outbursts you could not control</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Constipation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. Blaming yourself for things</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27. Pains in the lower part of you back</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. Feeling blocked or stymied in getting things done</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29. Feeling lonely</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30. Feeling blue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31. Worrying or stewing about things</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>32. Feeling no interest in things</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33. Feeling fearful</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>34. Your feelings being easily hurt</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>35. Having to ask others what you should do</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>36. Feeling others do not understand you or are unsympathetic</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>37. Feeling that people are unfriendly or dislike you</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**DURING THE PAST 2 WEEKS, INCLUDING TODAY, HOW MUCH WERE YOU BOTHERED BY:**

1. Having to do things very slowing in order to be sure you are doing them right.

2. Heart pounding or racing

---

University of Ghana http://ugspace.ug.edu.gh
3. Nausea or upset stomach
4. Feeling inferior to others
5. Soreness of your muscles
6. Loose bowel movements
7. Difficulty in falling asleep or staying asleep
8. Having to check and double check what you do
9. Difficulty making decisions
10. Wanting to be alone
11. Trouble getting your breath
12. Hot or cold spells
13. Having to avoid certain places or activities because they frighten you
14. Your mind going blank
15. Numbness or tingling in parts of your body
16. A lump in your throat
17. Feeling hopeless about the future
18. Trouble concentrating
19. Weakness in parts of your body
20. Feeling tense or keyed up
21. Heavy feelings in your arms and legs

Please answer the questions honestly. This is to help understand personal feelings and belief systems in homosexual men in Ghana.

AFCI

Instructions: Please consider the strategies you use in coping with stressful situations. Recall a stressful situation(s) that occurred. Rate each coping strategy by indicating whether you used it to cope with the stressful situation.

0 = Did not use   1 = Used a little   2 = Used a lot   3 = Used a great deal.

_____ 1. I prayed that things would work themselves out.
_____ 2. I got a group of family or friends together to help with the problem.
_____ 3. I shared my feelings with a friend or family member.
_____ 4. I remembered what a parent (or other relative) once said about dealing with these kinds of situations.
_____ 5. I tried to forget about the situation.
_____ 6. I went to church (or other religious meeting) to get help or support from the group.
_____ 7. I thought of all the struggles Black people have had to endure and it gave me strength to deal with the situation.
8. To keep from dealing with the situation, I found other things to keep me busy.
9. I sought advice about how to handle the situation from an older person in my family or community.
10. I read a scripture from the bible (or similar book) for comfort and/or guidance.
11. I asked for suggestions on how to deal with the situation during a meeting of my organization or club.
12. I tried to convince myself that it was not that bad.
13. I asked someone to pray for me.
14. I spent more time than usual doing group activities.
15. I hoped that things would get better with time.
17. I spent more time than usual doing more things with friends and family.
18. I tried to remove myself from the situation.
19. I sought out people I thought would make me laugh.
20. I got dressed up in my best clothing.
21. I asked for blessings from a spiritual or religious person.
22. I helped others with their problems.
23. I lit a candle for strength or guidance in dealing with the problem.
24. I sought emotional support from family and friends.
25. I burned incense for strength or guidance in dealing with the problem.
26. I attended a social event (dance, party, movie) to reduce stress caused by the situation.
27. I sang a song to myself to help reduce the stress.
28. I used a cross or other object for its special powers in dealing with the problem.
29. I found myself watching more comedy shows on television.
30. I left matter in God’s hands.