

Gays of Our Lives:

Stories uncovered by the Investigaytors



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Investigaytors is a voluntary program initiative of the Community-Based Research Centre for Gay Men's Health that aims to build capacities for social research. Its purpose is to equip young gay men with the skills and resources to contribute to the development of knowledge about gay men's health and their communities.

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The Investigaytors' Qualitative Journey

After two exciting years of exploring quantitative research while working on the Sex Now Survey, the Investigaytors embarked on a new learning journey. In March 2013, we began a qualitative phase of training in social research. With its focus on developing rich narratives of lived experience, exploring qualitative research felt like a giant step up from statistical tables. Now it was: “*Who* are the *men* behind survey drop-down lists and checkboxes? And *what* do they have to say about gay men’s health?”

Staying true to the program’s “hands-on” approach, the initiative began with a qualitative boot camp where we learned about and practised some essential qualitative research skills. We were challenged to develop a complete description of an incident with an outsider who “disrupted” the boot camp (but who later turned out to be an actor contracted for the exercise). We took to the streets of Davie Village with smart phones and cameras to explore the photovoice approach – capturing images and narrative to describe what it’s like to be young and gay in Vancouver. We practised working with focus groups by doing one – about our own experiences of growing up gay – to get a feel for facilitating them. We even practiced some tai chi moves to hone our inner observational skills.

Then, throughout the year, the Investigaytors underwent a series of workshops where we discussed applying the key eco-social theories involved in broad studies of gay men’s health: social determinants of health, intersectionality, minority stress, and life course.

Through all of it, the Investigaytors experienced moments of deep interpersonal exploration and self-discovery. Using arts-based methods like photovoice and body mapping, interviewing key leaders in the gay men’s health field, and consulting with youth in the community on what it means to be young and gay today, also built up a lot of qualitative data. And of course, what research program would be complete without an intense phase of analyzing data? So, in a process that took many weeks, the Investigaytors, transcribed and coded hours of narrative looking for rich veins that describe the central themes of gay men’s experience. Then, while only just scratching the surface of it, we were pressed to present our analysis at the 2013 Gay Men’s Health Summit. Our presentation turned out to be a Summit highlight – the hit of the conference!

To cap off an amazing year of learning the essential skills of qualitative research, the Investigaytors are excited to present this print version of our “investigaytion”.



Pride Under the Camera Lens: *Exploring Photovoice*

The old adage “a picture is worth a thousand words” taps into the idea that photos are rich sources of information. A photograph, much like life, is complex under the surface. It captures an image informed by a particular time and place – like bleach blond guys, boy bands, and Pokémon in the 1990s.

Photos also say a lot about the person behind the lens. We choose to take photos for reasons that reflect our relationship with a particular moment and people. The image it produces is as much a reflection of the photo’s graphic content as it is a reflection of our motives as photographers.

Over an intensive summer of learning qualitative skills, the Investigaytor team explored the vibrancy of a qualitative method that brings both photography and narrative together – photovoice.

Photovoice is an art-based approach to qualitative research that involves three main parts: developing an exploratory question, taking pictures that delve into it, and then describing what the photographs bring to mind. In short: a research question explored with photographic images and narrative.

The Investigaytors chose one question from many alternatives to explore with their cameras: What does Pride mean to you? What is it like to be part of Pride festivities? What did you do for Pride? How does this Pride compare to your first? What are Pride’s messages? What does Pride avoid or ignore?

Since Pride is one of the really significant events of a young gay man’s summer, we chose to work on “What Pride means...” to each Investigaytor. We would each explore Pride under the lens of our own digital camera or smart phone.

Subsequently, we wrote short narratives relating every image we took to our original question. Then each of us shared our work at study team meeting. The Investigaytors had a lot to say about Pride. We talked about the impact of evolving technology and social media; about struggle and acceptance; celebration and excitement. As we looked through each other’s photos and descriptions, two themes emerged from the discussion.

Pride is Political

The first theme was about the Politics of Pride, which every Investigaytor seemed to touch on in their photos and narratives.



“I was too busy caught up in politics of Pride; shaking hands, sending e-mails, and posing for photos.”

We reflected on a key aspect of those politics: public relations. How Pride has increasingly become a space for “Good PR” between communities.



“At its core, I believe Pride still functions as an outlet for the LGBTQ community to come together and take a political stance against prejudice and discrimination while promoting equal rights.”



We also saw Pride politics as “collective action”. How a festival and parade can serve as a way to bring people together to work co-operatively.

We reflected on the history of political activism behind Pride and what it could mean today.



“Pride isn’t a parade for me really, not at its core anyway. The parade is only an homage to marches and protests. For me Pride is an act of subversion, or at least it ought to be.”

Pride is Personal

The second theme to emerge was the personal meaning of Pride—how Pride is uniquely experienced by each one of us.

We reflected on our complex relationships with both shame and Pride.



“Like many gay men, I have personally dealt with these feelings of shame regarding my sexual orientation, so to have this experience was very positive.”

We shared the histories of our friendships made through Pride.



“This picture represents what Pride means to me the most: spending time with people you love. This is an image of me and my best friend who over the years was unable to spend Pride with me due to him working. This was our first Pride together and because he was able to celebrate with me I would dare to say he made my Pride experience the best yet.”

We saw Pride as an expression of the love and caring men can have for each other.

In this way, we learned a lot about both photovoice and Pride. Pride can be understood in many different ways from many points of view. A photo captures just a “snapshot” of its diverse meanings and experiences. Pride can be both personal and political. And so can photography.

Like Pride, photovoice is reflective. The process of writing narratives about our photos positioned us to consider more deeply what Pride means; not only in the moment of the image but in the broader context of our lives.

Photovoice is as unique an experience as it is a method of social research. It would be impossible to capture the same images or narratives in another photovoice project. The process involves a real connection between researcher and subject that illuminates our unique social locations and identities. A question with images and narrative.

In the search for meaning in our photos we discovered that the fabled “thousand words” of a picture were actually our own words, our own narratives. And with that discovery, we each found a voice through photovoice.

Body Mapping the Investigaytors

That summer of 2013 Investigaytor Joshun led our team through a qualitative technique called body mapping. A body map is a life size, visual representation of one's own physical body and its relationship to everyday life. It is used as a way of encouraging storytelling about personal experiences. The method originates in South Africa where it was used as a therapy for women living with HIV; sharing stories associated with their stigmatized serostatus. We made some minor changes to the format.

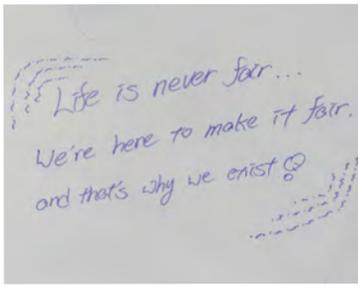
Typically, body mapping is done one on one with the guidance of a supportive researcher but we decided to create our maps together in the same room, at the same time. Though normally a variety of art supplies are used including poster paints, we limited ourselves to markers, construction paper, pages from magazines, and anything else people wanted to bring from home that wouldn't make a mess in an office environment. We constructed our body maps over two evening sessions in CBRC's boardroom.

There are a few reasons why we chose to explore body mapping. It is not a widely known method but it seemed like it would be both fun and informative at the same time. It would help us engage *reflexivity*, which is an important concept in qualitative research. By reflecting on our life experiences through body mapping, we became immersed in a process of raising conscious attention to persistent patterns in our own thoughts and actions.

Body mapping also helped to solidify a central idea of intersectionality theory, allowing us to consider the multiple identities we hold in a single body and how our ongoing experiences are linked to them.

The day we began, Joshun first asked the Investigaytors to consider how we wanted





to represent ourselves as body maps. While most of us chose to lie flat on the floor with arms at the side, a few were bold enough to pose with arms and legs in other more demonstrative positions.

Each of us had someone else trace our body shape in pencil onto a large piece of craft paper on the floor.

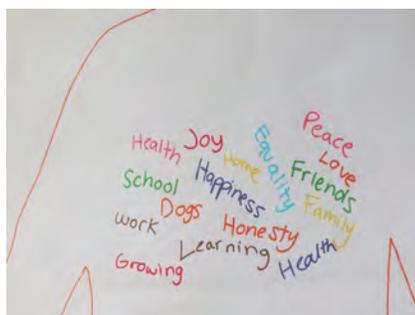
After that we each chose a colour which we traced over our body shape. Most of us chose colours for purely aesthetic reasons, while others chose a colour that represented a mood or emotion or personality trait. We also traced the shape of our hands onto our maps.

Then Joshun posed a question: "What shapes your life?" We went on to create the graphic details of our body maps while keeping this question in mind. Joshun also asked us to come up with a slogan that best represents who we are as a person. After composing our body maps we took turns explaining them to the rest of the group.

Several common themes emerged but the most frequent was *intersecting identities*. We reflected on the impact of our ethnic backgrounds, our sexual and gender identities and membership in various other communities: how these different identities shape our lives and experiences but are also inseparable from one another. One Investigaytor shared his experience of homophobia among members of his own ethnic group. But he also reflected that this did not have as much impact on his emotional well-being as racism from other members of the gay community.

Another common body mapping theme important to the Investigaytors was the variety of *relationships* we have with other people. Family, friends, and our romantic partners or lovers were included in our narratives. We also discussed our moods, emotions, and personality traits as well as some of our personal interests, like music, art, reading, fashion, and food.

Being an academically inclined group, we also talked about our interests in race theory, psychology, sociology,



feminism, and critical thought. Some used their body maps to share personal stories. For instance, one Investigaytor revealed the story of how he acquired the scar that he had represented on the shape of his hand. All of these reflections revealed otherwise hidden parts of our identities.

A lot of us used our body maps to explore our views of the world and how the rest of the world views us in return. We considered the role that society, media, and culture plays in our day-to-day lives. Overall, the stories associated with our body maps were mostly positive, but we did enter darker topics like discrimination, bullying, eating disorders, and suicide.

After we each had a chance to present, we reflected back over the entire experience, from making the body map to sharing it with the group. Many of us enjoyed the creative process, but some were not so sure. Most preferred the process of making the maps over sharing them with the rest of the group. Some felt uncomfortable revealing

personal aspects of their lives among peers they interact with on a weekly basis.

We discussed the possibility of self-censorship in our maps. Some admitted to actively toying with how much to pour into the map and how much to hold back.

Although there were these mixed feelings about the technique, in the end we agreed that it has its merits and uses in the field of gay men's health. After all, we learned a lot about ourselves and each other in the process. And in doing so we also learned deeper truths about doing qualitative research in studies of gay men's health.



Setting the Research Agenda: *Community Leaders' Perspectives*

The Investigaytors embarked on our biggest qualitative venture when we began to consider the qualities of meaningful interviews for research. Before initiating the process, we collectively decided to interview gay community leaders to gain a better understanding of research interests important to them in preparation for the 2014 Sex Now Survey. Fourteen (14) key informants were chosen for their involvement in BC gay men's communities. They were a diverse group of community program leaders, public health professionals and researchers. The interviews were about an hour long, audio recorded and conducted over a two-week period in July 2013.

Understanding that research interviews can sometimes be dry, we wanted to make the experience as enjoyable as possible. So we crafted questions that were lively, productive and suitable for a gay context. First, we gave participants a hypothetical situation; we asked them what they would do if they had received unlimited resources to fund a study. Then we asked, why their particular study topic was important to them. To follow up, we asked about their sample recruitment strategy, potential results, and methodology. Lastly, we told each of them that they had won the "Nobel prize" for their study. We then asked how their Nobel study related to life course theory and what we would learn about gay men's lives from it.

Life course theory is an important research framework focusing on the influence of historical time and place on gay men's health and development (also the theme of the 9th Gay Men's Health Summit, 2013)

When we completed the interviews, our next step was to work as a team to analyze the recorded material that we had collected. Each Investigaytor chose a portion of an interview they considered to be significant and transcribed it into word documents for further analysis. Next, we came up with a system of thematic codes that arose from listening to the content of the interviews. To bring all the material together we identified four broad themes: 1) research approaches and topics, 2) research methods, 3) life course perspective and 4) other theoretical lenses.

Research Approaches & Topics

Participants identified a variety of research topics of interest to them that are summarized in figure 1. While many said they would study "anything but HIV"—as HIV has been the main focus of research on gay men to date—others argued that much remains to be known about the epidemic in gay men, including how to prevent new HIV infections more effectively. Therefore many saw HIV as an important topic to keep prioritizing in gay men's health research. Other topics informants suggested included mental health, recre-



Figure 1: Research topics suggested by community leaders in gay men's health.

ation substance use, discrimination, resilience, health care services and prevention.

Interviewees said they wanted more focus on the social influences on health, as opposed to the biomedical approaches historically favored by researchers. A social approach would examine the cultural conditions that produce negative health outcomes for gay men (such as homophobia, exclusion and isolation). The results of such research would help to identify community driven solutions to strengthen the health of gay men. Informants felt that a sole focus on biomedical research is too narrow, doesn't strengthen the health of gay men and only treats symptoms instead of promoting well-being. Additionally, they said biomedical approaches typically have short-term benefits, while community driven solutions are more likely to have long-standing benefits overall. More so, some informants felt that biomedical approaches do not empower gay men but make us dependent on medical professionals. Instead, informants suggested that we should focus on the positive factors that shape health and well being as a way to find solutions.

Participants also expressed a desire for broader approaches to gay men's health research that take into account the well being of the whole person, rather

than their risks for specific diseases. As one participant put it, *"We need to be looking at a much more holistic concept of what health can be."* Informants argued that since the majority of health problems experienced by gay men have similar root causes (such as homophobia-heterosexism) they probably have similar solutions. Further, informants hypothesized that these solutions would be found in improving social supports, strengthening community, and building resilience. They also suggested that there should be more research done on health care systems and health communications to build more effective prevention and education strategies.

Some key informants did not mention a specific research topic but instead suggested studying sub-groups of gay men. These sub-groups were described as under-studied, invisible and marginalized populations within gay communities such as indigenous men, transgender people, gay seniors, deaf gay men and gay men with disabilities. Informants expressed concerns that these subpopulations were invisible in gay health research and therefore ignored in gay men's health promotion. They felt that research was urgently needed on the specific health issues of these groups, as well as on their experiences of stigma and marginalization inside and outside the gay community.

Research Methods

Interviewees also had suggestions about ways of doing research with gay and bisexual men. There was debate among informants about how to define the “gay” population. They questioned the tendency in research with sexual minority men to use terms like “gay” or “men who have sex with men” (MSM) without recognizing important identity distinctions. Both terms were seen as potentially problematic by interviewees and therefore posing important methodological challenges for research. For example, the acronym MSM was perceived by some key informants to erase the experience of men who self identify as gay. One informant argued *“Nobody self-identifies as an MSM so how is it applicable?”*

On the other hand, some informants recognized that some same sex attracted populations might be overlooked by researchers. One informant said: *“There is a huge population of MSM that don’t identify as gay, so how do we reconcile that?”* Whether MSM or gay is used, some key informants recognized that we should not treat any group as homogenous— that there is a diversity of experiences within gay communities. In that sense, one interviewee said: *“The terms gay men, or gay men’s health, or MSM implies there is a singleness, rather than a constellation of ways of living and being a guy”*.

Most informants agreed that the majority of research on gay men in British Columbia relies on cross-sectional surveys. While surveys have offered important information on the health status and behaviours of gay men, informants felt that they tend to reduce life experiences to a handful of characteristics and numbers. Informants suggested that qualitative methods such as interviews, focus groups, discussions groups, ethnography and art-based methodologies could offer more nuanced and complex understandings of gay men’s lives and experiences. That being said, many did not see qualitative inquiries as being in opposition with quantitative methodologies. On the contrary, many suggested that mixing both approach-

es was key to advancing our knowledge of gay men’s health. Other methodological suggestions included program evaluation to understand what makes health promotion effective as well as longitudinal studies to track changes in gay men’s health over time.

The majority of informants shared common values regarding the involvement of the gay community in research. In that sense, most interviewees advocated for community-based participatory research (CBPR) as a “best practice” in conducting research with gay and bisexual men. CBPR is an approach to research with communities that values the knowledge and experience their members possess collectively. It calls for systematic efforts to integrate community members into research activities. Key informants said that gay men should be involved in every stage of research, from identifying the questions to disseminating results. They argued that this was key to seeing research results turned into tangible actions toward improving health. Moreover, informants were wary that, without the insights of gay men, research initiatives would end up stigmatizing them.

Life Course Perspective

Informants were explicitly asked to reflect on how a life course perspective could be applied to their proposed research topic. Life course was defined as research that examines the long term impact that time and place can have on health. Informants highlighted how a life course framework can bring into focus the “timing” of exposure to health risk factors. Coming of age in the middle of the HIV epidemic, for example, had a very different health impact on young gay men of that time than on those of us who came of age in the era of anti-retroviral medications and social media.

Informants also spoke about social change as another dimension of the life course perspective. One informant suggested that social change has produced a *“great divide generationally between gay men.”* Another informant shared a personal view of gay gen-

erations: *“Older men were isolated and needed physical spaces to feel comfortable. Now younger gay men want to be part of heterogeneous spaces and older gay men want to be part of homogeneous spaces.”*

Some informants framed life course at a community level where health effects may cross one generation to another. An example mentioned was the intergenerational impact of residential schools and colonization on alcohol and substance use, at the intersection of queerness and indigeneity. *“We are looking at the fundamentals of how men learn, think, and process. The foundation of the early part of their lives greatly affects them at later stages.”* Another informant was interested in *“the historical changes that brought gay men together (in communities) under systems of oppression and disease.”*

Other Theoretical Lenses

Informants were not explicitly asked to speak about theoretical frameworks associated with their proposed research, however, they all discussed various social and structural forces influencing gay men’s health. Many directly mentioned syndemic, social determinants, and intersectionality perspectives on health research.

Syndemic research was brought up in relation to HIV and directly linked with our key informants’ desire for a more holistic approach to gay men’s health research. A syndemic involves two or more co-occurring epidemics or health conditions interacting with each other synergistically in a population (Singer, 2009). Syndemics commonly occur because of adverse social conditions. The quality of social, economic, physical, or environmental contexts affects health outcomes. The most gay relevant social conditions identified by informants were health care services, social support networks, and stigma and discrimination.

Informants spoke of our need to broaden research beyond HIV: *“I really believe we should focus on, ‘as well as’, not, ‘instead of’ HIV.” One informant said.*

“We’re constantly looking back at the HIV epidemic. Everything tied to gay men’s health research is tied to HIV.” Another remarked, *“It’s oversimplified to look at one health outcome, HIV.”*

Other important health conditions informants identified as co-occurring with HIV were: suicide, depression, substance abuse, homelessness, and alienation. Social isolation was identified as a problem within gay communities due to the lack of welcoming spaces and the prevailing role of technology facilitating social contact. An informant noted a disparity between the amount of research on the sexual behaviour of gay men compared to the amount of research focused on social and emotional relationships. One informant noted that the gay men’s health is siloed from mental health – a problem with all health issues.

Regarding health care services, one informant emphasized how important it is for public health information to be accessible for it to be effective. Informants cited the need of culturally and linguistically appropriate healthcare services as an issue of accessibility. Informants also cited examples of how stigma and discrimination, such as homophobia and heterosexism, adversely affect health care services.

Another theoretical framework mentioned by key informants was intersectionality. Its theoretical perspective re-conceptualizes determinants of health as complex interactions among various forms of social inequity such as racism, classism or homophobia. (Hankivsky and Christoffersen, 2008). Informants felt that trans, gender, class, and ability/disability issues were under-prioritized in research with gay communities. They provided many examples where an intersectionality approach would be helpful such as the intersection of sexual orientation and indigeneity. One informant said, *“Being indigenous, I find that I’m not really represented in gay men’s research. And then, vice-versa, in indigenous research, I don’t see a lot of gay men represented.”* He suggested that public health services are either inaccessible or very limited for queer indigenous people.

Another informant described how race, ethnicity, and religion interact in his experience of gay communities. *“Why is there a need for a gay Sikh man to surround himself with other gay Sikh men? Because when we go to mainstream [gay] groups, we feel alienated.”* Another informant cited an example of an accessibility barrier for health programming for gay deaf men: *“The queer community is becoming more and more accessible ... [but] there’s no funding for ASL (sign language) interpreters to talk about HIV at workshops.”*

These theoretical frameworks—syndemic, social determinants of health, and intersectionality—offer insightful perspectives from which to examine the complex social influences on gay men’s health. Syndemic theory frames the impact of multiple and simultaneous epidemics impacting on gay men’s health. Social determinants of health theory provides insight into the impact of inequality and adverse social conditions. And intersectionality conceptualizes how various forms of social inequity and oppression converge to result in health disparities.

Conclusion

With the help of our informants, we gained critical insights into the issues community leaders from across BC found to be important for research on gay men’s health. Their input will assist in developing the 2014 Sex Now Survey questionnaire. However, that was not all we gained through the experience. The Investigators learned valuable interview skills that can apply in future careers or research initiatives. In this way we recognized that the life course model of gay men’s health is echoed in our own research training.

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What it Means to be Young and Gay in Vancouver: *The Focus Groups*

Later in the summer of 2013 the Investigaytors hosted a series of focus groups for young gay men. While the exercise was meant to teach us about how focus groups can be used for research, how to facilitate them, and how to interpret the results, it was also meant to help us better understand young gay men. The Investigaytors were interested in finding out how our peers see themselves. Specifically, we wanted to know about young gay men living in Vancouver and how their individual histories shape who they've become.

We came up with 11 questions that explored the theme of what it means to be young and gay (and if there was more to it than being a certain age and liking guys). We asked them how their lives might be different if they were straight and what experiences differentiated them from their straight friends. We asked them how central being gay and the gay community was to their lives. More so, since most research emphasizes the negative attributes of our community, we were particularly interested to highlight the positive aspects of gay identity and the resilience of young gay men.

This work was informed by our previous quantitative research that showed significant differences between young and older generations of gay men (see our previous publication, *Under the Lens*). With this in mind, we asked our questions to provoke discussion and stimulate insight into how our identities as “young people” and “gay men” intersect. We hoped that we would see through these discussions how gay men felt about themselves. We hosted 4 focus groups with 22 participants in all.

“I Have Sex with Men”: How Young Gay Men Define Themselves

Participants were often quick to explain what made them “gay”. As one of them put it “*I have sex with men*” and many others echoed this. They went on to describe, however, how they did not like being con-

finied by or expected to be a certain way based on their sexual orientation. They mentioned their discomfort with how being gay was made out to be the most important thing about them and how that could be used to reduce or stereotype them.

They talked about aspects of themselves that contradicted stereotypes of gay men. Some participants felt that, because they were gay, they were often expected to be effeminate, vain or ‘slutty’. While focus group participants could identify with these stereotypes, they often challenged them with personal anecdotes highlighting masculinity or monogamous relationships. Indeed, some cited resistance to gay stereotypes as a source of their ambition and rebellion. Being dismissed because of their sexuality caused them to work harder to achieve goals. While rejecting stereotypes, they felt freedom to act however they wanted.

The Life Challenges of Young Gay Men

Our focus group participants described several challenges that they experienced as young gay men. They suggested that their life challenges are not unique to young gay men, but are more universal challenges of being young adults and trying to balance school, work, family, friendships and lovers. Many noted however, that their straight counterparts were often further along in achieving milestones like marriage or starting a family—goals that are much more attainable and expected of straight people. Again our participants didn't view such milestone “delays” as necessarily a bad thing, just a different experience.

There were, however, some challenges unique to being gay that our participants described such as stigma and homophobia. For example, several stated that because of some of the negative stereotypes about gay men, they often felt pressure to “*keep up appearances and stay a good gay ambassador*”. More so, some were worried they would be treated

differently in the workforce because of their sexuality. As one participant described: *“My Dad told me being in the workplace will be harder.”*

Many also described how they still feel physically and emotionally threatened as young gay men. *“There is always the risk of being gay bashed.”* They felt, however, that the threat of violence was mediated by the various gay spaces and places they occupy. They expressed feeling more vulnerable in their hometowns, rural and suburban communities, or non-gay areas of Vancouver. In those places they reported being more likely to refrain from anything that might broadcast their sexuality.

Participants also described experiencing some challenges within gay community, particularly in relation to creating a circle of friends or finding mentorships. For example, one said, *“It feels like you’re being told, sorry the culture is full right now. We’re not accepting anybody else.”* Another pointed out, *“What I find with Vancouver—one of the things I really, really lack and struggle with not having—is a sense of guidance and community from my elders.”* The challenges some faced also had an impact on their friends and families. One participant shared that being gay is, *“an emotional burden on my family.”*

Resilience

Despite these challenges, young men who came to our focus groups felt proud and comfortable with their sexuality. When asked if they would take a pill that could make them straight, many emphatically said “No”. Being gay had become too central to their lives, had shaped too many of their relationships. They described how they felt more aware of themselves because of personal time spent analyzing their sexuality and taking an active role in their own health. Being gay was integral to their identities. Those that said they would flirt with heterosexuality approached it from a place of curiosity more than shame. They wondered what it would be like having a world tailored for them rather than having to fight and resist. But they went on to say they were grateful for the gains of older generations of gay men who fought for equality.

They also described how they have been able to develop multiple strategies to deal with the difficulty of living within a heteronormative society. For example, as one described: *“I think the hardest part was coming out to myself... it’s an internalized shame. I learned to deal with it and question why I have internalized shame.”* Others said that they cope with stigma by focusing on their strengths, developing hobbies, doing arts, by making friends, or by getting involved in gay community.

Thus an overlapping theme within our focus group discussions was the resilience of young gay men. One participant eloquently suggested being a young gay man, *“has allowed me to see things in a more creative light and I think that it’s given me an opportunity to be a more active participant in my life—in being my own advocate.”*

More so, some of the guys were able to point to the coming out process as being a uniquely gay experience that they share with each other. They found camaraderie and empathy in this experience. Instead of being beaten by the closet, they viewed coming out as an optimistic and empowering victory. In many cases, it also informed their willingness to advocate for social change. They said coming out gave them the basis for understanding how to challenge systems of oppression and they were more able to understand the inequities others face. The underlying message was, that for many young gay guys, there is a culture of resilience and support that responds to the discrimination they have experienced.

Favorite Things about Being Gay

We asked focus group participants to describe their favorite things about being gay. Many said that being gay offered them more freedom and opportunity to do things their own way that is not available to straight people. For example, one young man suggested, *“There’s this fairytale worldview about how your life should be, but as with any person who doesn’t conform to the norm, you question all the givens in life and that opens up your mind a lot. The world is a bigger place in our heads because we don’t subscribe to these social norms. We get to pave our*

own way and make our own decisions.” Similarly, some guys described how being a young gay man allowed them the opportunity to challenge rigid sex and gender roles or social norms. As one participant argued, *“I can act as feminine or masculine as I want and no one will judge me.”*

The young gay men in our focus groups displayed a unique sense of camaraderie because of their shared experiences as gay men. This was particularly evident within discussions about oppression and anti-gay prejudice. As one participant shared, *“I like that even though we all haven’t gone through the same experiences, we all have that one thing in common. And as you meet someone, you can empathize with them. I like that we’re all connected in that way and that we’ve created a community around it.”*

These aspects of commonality and shared experience led another participant to argue that young gay men also share opportunities to be ambassadors and role models. *“I feel like I have opened minds more so than I have closed them, and that’s a great thing about being gay.”* Such feelings extend beyond the gay community. As another participant noted, *“You can be an ambassador to more than just the gay community. Because you go through these unique experiences, you are more compassionate, not just towards the gay community.”* Participants also described many positive perspectives on gay community including its values of inclusivity and acceptance. Another participant joked that his favorite thing about being gay was men’s support for each other, *“Our resourcefulness—that ‘Gay Mafia’ we talked about. We support each other and we have those resources available to us.”*

The celebratory nature of gay community was another positive aspect noted by the young men in our focus groups. *“Pride! It’s our own special holiday. There are record numbers of people every year who show up to support us. It’s very empowering.”*

Finally, a common theme underlining many focus group discussions was the emphasis on positivity within the gay community. Participants highlighted the value of shedding socio-culturally imposed and

self-inflicted feelings of shame to become liberated young gay men. Simply put, *“The sex!”* was one participant’s favourite thing about being gay.

“It’s Raining Men”: Defining our Community

We chose to end our exploration of focus groups on an upbeat and positive note by asking participants to, *“Imagine you are a publicist for Vancouver’s gay community?”*

“What would be our slogan?” Their responses reflected some difficulty participants had in trying to contain so many different facets of Vancouver’s gay community in one phrase. One participant suggested, *“It’s hard because there are a lot of elements that you’ve got to include and then there’s things that you should highlight.”* Many felt the need for slogans to be as inclusive as possible, arguing, *“I think that the majority of things that happen around the gay community include allies, and that would be something that I would highlight. That it’s an allies’ place too.”* Overall their slogans demonstrated mixed emotions, both negative and positive: *“Don’t come here!”* and *“It’s raining men!”*

Conclusion

The focus groups were inspiring, rich with lived experiences and driven by intense discussion. It reaffirmed that there is no monolithic gay experience but that there exists a lot of common ground among young gay men. It would seem that these commonalities—of time struggling with sexuality, of coming out, and of thriving as a minority—have created a sense of optimism for young gay guys. The focus groups were valuable in that they’ve led to more questions about gay community or communities. Further inquiry by the Investigaytors ought to explore the role of optimism. When young gay guys interact with older generations it might strengthen ties with mutual deference rather than division.

