Sexuality Disclosure among Black South African MSM and Responses by Family

Akua O. Gyamerah*
Center for AIDS Prevention Studies, Department of Medicine, University of California, San Francisco

Kate L. Collier
Independent Scholar

Vasu Reddy
Faculty of Humanities, University of Pretoria

Theo G. M. Sandfort
HIV Center for Clinical and Behavioral Studies, New York State Psychiatric Institute and Columbia University, and Department of Psychology, University of Pretoria

*Correspondence should be addressed to Akua O. Gyamerah, University of California, San Francisco, 550 16th St., 3rd Floor, UCSF Mail Code 0886, San Francisco, CA 94143. E-mail: akua.gyamerah@ucsf.edu
Abstract

Although South Africa protects sexual orientation in its Constitution, homosexuality is socioculturally contested and unaccepted. This lack of acceptance may impact the coming-out process of men who have sex with men (MSM). This study explored diverse factors that influenced whether Black South African MSM disclosed their sexual practices and identities to their families, how their families responded, and how family responses affected them. In-depth interviews were conducted with 81 Black MSM from four Tshwane townships about their sexual and gender identities, sexual practices, social networks, and familial relationships. Interview transcripts were analyzed with ATLAS.ti using a priori codes and inductive coding. Most participants disclosed their sexual identities to at least one person in their families or assumed their families knew despite no explicit disclosure about their sexual identity; a significant minority had not disclosed. Families of those who disclosed were either supportive, in denial, confused, or unsupportive in their responses. Whether or not family was supportive, silence around the participants’ same-sex sexualities was prevalent within families. Family responses affected how participants perceived their sexuality and their confidence. Further studies are required to better understand the underlying processes of coming out for Black South African MSM and how these processes impact health outcomes and social well-being.
South Africa represents one of the world’s most liberal countries in regard to the legal protection of lesbian, gay, bisexual, transgender, and queer (LGBTQ) rights. It was the world’s first country to include sexual orientation as a ground for non-discrimination in its 1996 constitution (Equality Clause) and on 30 November 2006, it became the fifth country—and the first in Africa—to legalize same-sex marriage through the Civil Union Act (Cock, 2003; De Vos & Barnard, 2007). These legal protections were adopted in a broader context of social reform by the post-apartheid government after the successful organizing of LGBTQ rights activists, veterans of the anti-apartheid movement (Cock, 2003; Thoreson, 2008). Legal protections such as the Equality Clause and the Civil Union Act are important for millions of people across the world who identify with same-sex sexualities, desires, and intimacies because, as several studies indicate, the absence of such rights has a significantly negative impact on their health and other quality of life outcomes (Almeida, Johnson, Corliss, Molnar, & Azrael, 2009; Baral et al., 2009; Krieger, 2014; Long, Brown, & Cooper, 2003; Makofane, Beck, & Ayala, 2014; Meyer, 1995; Santos et al., 2013; Thoreson, 2014).

Despite these legal protections, however, public attitudes in South Africa toward homosexuality are mixed (Roberts & Reddy, 2008). A global Pew Research Center (2013) study reports that 61% of South Africans surveyed in urban settings indicated that homosexuality should not be accepted in society. As Andrew Tucker (2011) argues in his book examining the gap between South Africa’s liberal sexual rights laws and the lived experiences of queer men in Cape Town, while the country’s legal system enshrines de jure protections, many LGBTQ people continue to socially experience de facto marginalization. LGBTQ South Africans regularly experience social stigma, discrimination, and extreme forms of violence—with experiences varying across class, ethnic, racial, gender, and geographic lines (Graziano, 2004b;
Mkhize, Bennett, Reddy, & Moletsane, 2010; Nel & Judge, 2008; Smuts, 2011; Tucker, 2009; Visser, 2003). Moreover, these experiences are associated with negative social, economic, and health outcomes that compound high HIV risk and prevalence, sexual and physical violence, economic marginalization, homelessness, and depression, among others (Graziano, 2004b; Msibi, 2009; Reid & Dirisuweit, 2002; Swarr, 2012; Wells & Polders, 2006; Zahn et al., 2016).

This uneven and contradictory legal and social context plays an important role in whether and how LGBTQ individuals disclose their sexual identities and practices to key members of their social networks, particularly friends and family members. Although there are a growing number of studies that explore the lived experiences of LGBTQ people in South Africa, there are still very few empirical studies examining the disclosure of one’s non-heterosexual sexual identity and practices to family members. The limited coming out literature in South Africa that does exist covers a range of coming out contexts and issues concerning different identities. Some research describes the general experiences of youth coming out (Butler & Astbury, 2008) and others focus on experiences in secondary school and college campus settings (Bhana, 2012; Butler, Alpaslan, Strümpfer, & Astbury, 2003; Francis & Msibi, 2011; Graziano, 2004a). Gevisser and Cameron’s (1995) anthology of personal and historical accounts of same-sex sexualities in South Africa contains a few coming out experiences of Black South African gays and lesbians during the apartheid era, including those of gay and lesbian activists, gender non-confirming lesbians, and queer township men. Among the stories highlighted in the anthology is that of Simon Nkoli, who recounted coming out to his family as a Black gay activist during the anti-apartheid struggle (Nkoli, 1995). Of note, Nkoli described the tensions and challenges he experienced navigating life as a Black South African male within the mostly white gay
organizations and within the mostly Black anti-apartheid movement and the marginalization he faced in both spaces in addition to his family’s reaction to his sexuality.

Letitia Smuts’ (2011) work has the most direct focus on coming out as LGBTQ in the South African context. Through an intersectional framework, her research examined lesbian experiences of coming out in Johannesburg and how social spaces and identities they occupy and embody impact their process of identity development (Smuts, 2011). In her study, Smuts applied Vivienne Cass’ coming out model—a model informed by Western LGB coming out experiences—to the South African context and offers theoretical contributions to Cass’ model. Through semi-structured interviews with seven Black lesbians and seven White lesbians from mostly middle-class backgrounds, Smuts found that their lesbian identity formation—particularly, their willingness to disclose their identity—was largely shaped by other social identities like race, gender, and class as well as by social spaces they occupy, such as work, school, and neighborhoods they frequent.

Apart from South Africa, there is even less written about coming out experiences in other parts of sub-Saharan Africa. Kenya’s NEST Collective (2015) released a seminal book based on interviews with over 250 queer Kenyans related to their upbringing, aspirations, sexualities, romantic relationships, family, and other features of their lives. Embedded in these stories are 25 first-person short narratives in a chapter titled, “Coming Out”, on Kenyans’ experiences and desires of coming out to family members, work colleagues, community members, and friends. The chapter included people’s stories of wanting to come out, coming out or being outed, and of the reactions of the people they came out to. While the evolving queer African literature might mention experiences of coming out, very little is known about the factors influencing whether or
not LGBTQ Africans come out to their families, how they might experience this process, and the
impact it has on them and their families.

Our study expands the literature on LGBTQ experiences of disclosing their sexualities to
family members by presenting findings from a study on the experiences of South African men.
We interviewed a sample of Black South African men who have sex with men (MSM) in four
low-income Tshwane townships (forming part of the greater Pretoria metropole) to understand
the factors that influenced whether they disclosed their sexual practices and identities to their
family, how they disclosed, how family members responded, and the impact these responses had
on the study participants.

Coming Out Theories

There are several foundational theories that conceptualize various aspects of the coming
out process and sexual orientation identity development (Cass, 1979; Coleman, 1982; D’Augelli,
Development” and Savin-Williams’ (1998) identity development trajectory in particular are the
most relevant to the scope of this study because they engage with the process of coming out to
family.

D’Augelli’s (1994) model examines six different processes that encompass coming out as
LGB: 1) exiting a heterosexual identity; 2) developing a personal LGB identity status; 3)
developing an LGB social identity; 4) claiming an identity as an LGB offspring; 5) developing
an LGB intimacy status; and 6) entering a LGB community. Of central relevance in this model is
the "claiming an identity as a LGB offspring" phase, which is described as the process of
disclosing one’s sexual orientation to family members. The Savin-Williams’ (1998) model
examines eight stages of the identity development trajectory, including disclosing one’s sexuality to family members, which he argues occurs after coming out to non-family members.

The literature on coming out suggests that factors that influence LGB people to not disclose their sexual identity to family include weak family relations, fear of negative responses such as verbal and physical abuse, and fear of rejection and losing resources like financial support and shelter (D’Augelli, Hershberger, & Pilkington, 1998; Waldner & Magrader, 1999). Those who do choose to disclose are more likely to express a non-heterosexual identity, be more open about their sexuality, and perceive access to supportive resources such as support from a parent, sibling, friends, or a community organization (D’Augelli et al., 1998; Waldner & Magrader, 1999).

Once LGB people disclose their sexuality to family members, their family may react in numerous ways that can be either affirming (i.e., accepting, supportive) or distressing (i.e., rejection, abuse) to the LGB person (D’amico, Julien, Tremblay, & Chartrand, 2015; Savin-Williams, 2003; Savin-Williams & Dube, 1998). According to Savin-Williams and Dube’s (1998) “Developmental Model of Parental Reactions”, parents, in particular, can react in six ways: shock, denial and isolation, anger, bargaining, depression, and acceptance. These reactions, in turn, can impact the child’s mental, emotional, and physical health (Padilla, Crisp, & Rew, 2010; Rivers & Gordon, 2010; Rothman, Sullivan, Keyes, & Boehmer, 2012; Vincke, Bolton, Mak, & Blank, 1993).

It should be noted that these models were developed from empirical studies on coming out in Western contexts. Both the processes/stages of claiming an LGB identity and entering an LGB community would be expected to be different in a setting where attitudes toward sexual orientation self-identification might be different and an LGB community might be emerging.
Thus, our study does not apply these models to the analysis; rather it offers an empirical analysis of Black South African MSM’s reasons for disclosing or not disclosing their sexual identity to family members and the experiences of those who disclosed.

**Disclosure**

Our study examined one aspect of the coming out process—the disclosure of one’s sexual orientation or same-sex sexual practices to family members. For definitional purposes, this article utilizes the term “disclose” and “disclosure” to family to mean actively or passively informing a family member about one’s same-sex sexual identity, preferences, and/or practices. We differentiate between two methods of disclosure: *Active disclosure* and *passive disclosure*. The former involves a person initiating the process of informing family members about their sexual orientation on their own terms and the latter entails a person feeling or being forced to inform family members about their orientation due to various factors. This definition of disclosure combines both extant theories on coming out with inductive theorizing from our study data. The definition assumes that the individual is aware of or has accepted to an extent their same-sex sexual desires, identity, and preferences, which typically occurs at an earlier stage of identity development before disclosure.

**Methods**

**The Parent Study**

Data for this study originates from a mixed-methods study conducted in four townships within the Tshwane Municipality of South Africa, focused on the social organization of same-sex sexual practices of Black MSM as well as the structural and psychosocial factors that affect their sexual experiences (see, Sandfort, Knox, Collier, Lane, & Reddy, 2015; Sandfort, Lane, Dolezal, & Reddy, 2015). The study involved HIV testing, a survey, ethnographic observations, mapping,
and interviews. The present study is based on a series of in-depth interviews with Black MSM from the townships conducted during the ethnographic phase.

**Ethical Approval**

The study received ethical approval from the New York State Psychiatric Institute Institutional Review Board in the U.S. and the Human Sciences Research Council Research Ethics Committee in South Africa. All participants provided informed consent prior to study participation.

**Study Setting & Participants**

Interviews were conducted from 2010 to 2011 in four Tshwane townships: Atteridgeville, Mamelodi, Hammanskraal, and Soshanguve. The population of these townships predominantly consists of Black Africans due to the legacy of Apartheid racial and spatial segregation, when Black South Africans were forced into townships built on the peripheries of cities. Among the four townships, Soshanguve has the largest population with over 400,000 people, followed by Mamelodi with about 350,000 people, Atteridgeville with about 65,000 people, and Hammanskraal with around 22,000 people (Statistics South Africa, 2011). While all four townships are under-resourced, Atteridgeville has better living conditions, higher income, and has a higher proportion of its population with higher education (Statistics South Africa, 2011).

In-depth interviews were conducted with 81 purposively sampled Black participants from the four townships; 20 participants each were from Atteridgeville, Mamelodi, and Soshanguve, while 21 participants were from Hammanskraal. To be eligible for the study, participants had to identify as Black and be between the ages of 20 and 44 years, assigned male sex, reside in one of the four townships, and have had oral, anal, or masturbatory sex with at least one male in the preceding year. Interviews took place in the participants’ choice of English, Tswana (Setswana),
or Northern Sotho (Sepedi). As is common among South Africans who live in township communities, discussions were sometimes conducted in more than one language.

The final sample of participants ranged in age from 20 to 39 years ($M=25.16$ years). The majority of the participants identified as gay; a few participants identified as bisexual or did not specify a label for their sexual identity, and a couple identified as straight. We observed gender diversity among our participants, with a few identifying as drag queens or transgender women, and the vast majority identifying as feminine, masculine, or a combination of both. We used the term “men who have sex with men” not as an identity category that participants adopt, but rather as a behavioral term to identify and recruit participants assigned male at birth who have sex with men. The sexual identities and gender identities and pronouns used for participants reflect their self-reported identities. For example, if participants identified as “drag queens” and preferred to be addressed as “she,” it did not necessarily imply that they identified their gender as female. Additionally, pseudonyms are used to anonymize the identity of participants.

**Procedure**

Prospective candidates were identified by members of the study’s Community Advisory Board, outreach workers at our partnering community-based organization, and by ethnographers during fieldwork. Participants were also recruited using snowball referrals. The Project Manager screened each prospective participant over the phone to ensure that they met the eligibility criteria for the study as well as to inform purposive selection of participants for the interviews. The study applied purposive selection of participants to ensure that the sample was diverse with respect to self-identification of sexual orientation, age, gender presentation and self-identification, and choice of sexual partners (i.e. exclusively men, or both women and men).

Trained interviewers used a semi-structured guide to probe participants about their sexual
and gender identities, sexual practices and experiences, social networks, and familial relationships. The key interview questions that are relevant for the purpose of this article examined whether or not participants had disclosed their sexual identity to family and why; how their family feel about their sexual identity if they’ve disclosed it; how they feel about their family’s reaction to their sexual identity; and who they rely on for social support during difficult times.

The interviews took place in private spaces at the offices of collaborating agencies in Pretoria or in a private area in one of the townships, depending on the preference of the participant; lasted about 90 minutes each; and were audio-recorded. All interviews were fully transcribed and translated into English when necessary.

Analysis

Interview transcripts were analyzed with ATLAS.ti using a priori codes and inductive coding. The codes used were concept-driven and were developed from the key research questions in the study and the interview guide. Two coders individually coded interview transcripts and then later reconvened to review the coded transcripts to produce a reconciled, coded transcript (37 of the 81 interview transcripts). Once consensus was achieved on the coding process, the remaining 44 transcripts were each coded by one person. Data from the following concept-driven codes were further analyzed: “Openness about sexuality”, “Family”, “Perception and treatment of MSM”, and “Social Support”. The first author completed a second round of inductive, data-driven coding using Grounded Theory techniques, specifically theoretical/axial coding (Creswell, 2009). All responses related to family awareness of and responses to the participants’ sexual identities and practices and how the participants reacted to these responses were organized for this level of coding. Using theoretical/axial coding, these
responses were further analyzed to generate sub-categories and codes that connect concepts and explain the relationships between different categories. This level of coding was then reviewed by the co-authors and disagreements were reconciled.

Results

From the 81 participants interviewed, 53 reported they had disclosed their sexual identity or practices to at least one family member, and an additional 10 assumed their family members were aware although they had never openly disclosed their sexual identity or practices to family members. Eighteen participants indicated they had not disclosed their sexual identity or practices to family members.

Model of Sexuality Disclosure to Family

The Model of Sexuality Disclosure to Family in Figure 1 summarizes participants’ status in disclosing same-sex sexual identity and practices to family, reasons for maintaining their disclosure status, and family responses to those who have disclosed. The model illustrates three disclosure statuses: those who have actively or passively disclosed, those who assume family knows, and those who have not disclosed. The model also lists the diverse reasons participants maintained their disclosure status, reactions by family members who learned of participants’ sexual identity or practices, and the impact of these reactions on participants. The sections below report in detail participants’ descriptions of whether they had
disclosed their sexuality to family members, why and how they disclosed, how family members responded once they became aware, and the meaning of these family members’ responses for the study participants.

**Reasons for Non-Disclosure to Family**

Participants who had not disclosed their sexual identity or same-sex sexual practices to their family members had several reasons for not doing so. Many feared their family members would react negatively to this information. They expressed feeling pressure to meet expectations to have heterosexual relationships and start their own families, and were concerned about challenging those expectations. As one participant, Tungu, a 20-year-old straight-identifying man with a long-term girlfriend, explained, “They raised me up as a man and they expect me to behave like one.” In this case, behaving like a man meant starting a family with a female partner. He preferred to keep his same-sex sexual practices a secret and was concerned about a negative reaction due to how religious his family is. Another participant, Montsgo, a 28-year old gay-identifying participant, said he would not want his family members to know about his same-sex sexual practices because, “It is quite embarrassing…I do not think it is what they expect from me.”

Although these participants had not disclosed their sexuality to their family yet, they were asked whether they planned to in the future. Their responses were diverse with respect to their desire to disclose. Participants expressed discomfort, fear, and anxiety about disclosing their sexual identity or practices to family, whether or not they planned to do so in the future. Some wanted to disclose their interest in men but did not feel ready to do so at the time of the interview. Mareka, a 23-year-old who identified as feminine but did not adopt a sexual identity label, shared that he would like for his family to know about his sexuality sometime in the future
when he feels more comfortable with it and “there comes a situation where you can tell your family how you feel.”

The prospect of disclosing one’s sexual identity and practices to family members brought anxiety for some participants. One gay-identified man, Bheka, expressed feeling “scared” and “not want[ing] to take the risk” of being “disowned.” Despite this fear, he stated that he wanted his family to eventually know about his sexuality.

Many other participants preferred to keep their sexual identity or practices a secret, especially those who identified as masculine. One such participant, Ntsumi, who identified as bisexual and was confused about his attraction to men, was not ready to disclose his sexuality because he felt his family would be judgmental and not understand his same-sex interests. “Most people don’t understand, they will judge you, the more they find out, it will create some complications,” he said. However, the preference to keep one’s sexual practices a secret was not limited to masculine-identifying participants. “I prefer to keep it hidden,” explained 24-year-old Lesebo, who preferred the gender pronoun “she” and shared that she is at-times mistaken for a woman. “They will figure it out on their own,” she added.

Tshepang, a 20-year-old who did not identify as gay but rather “non-heterosexual,” indicated he was apprehensive about disclosing his sexuality to his family because he was unsure whether he would still be attracted to men in the future. Tshepang did not view sex with men negatively; however, he was uncertain of whether he would continue having sex with men unless he met “a mature enough gay” man he could have a serious relationship with. Despite suggesting that his same-sex attraction could be a phase he may outgrow, he also shared that he wanted to wait until a life event forced him to inform his parents of his same-sex interests: “I keep it under
wraps for now, until maybe when I decide to get married with another man, then they’ll have to know. Whether I want to tell them or not, they will find out.”

**Disclosure of Sexual Identity and Practices to Family**

According to the participants who were out to their families, family members became aware of their sexual identity or practices in several ways. In some situations, participants took a more active approach in which they used direct or indirect methods to inform their family members. Others took a more passive approach whereby they were obligated to inform family members about their sexuality.

**Family awareness through active disclosure.** Several participants had initiated the process of informing one or more family members about their sexual identity themselves. For example, Danisa, a feminine, gay-identifying participant, sat his mother, sister, and cousin down when he was 10 years old to inform them he was gay. Moswen, a 20-year-old who identified as a woman, told her family openly that she was having sex with men: “They actually did not find out. I told them that I am having sex with other men.” Other participants found alternative ways to inform their families about their sexuality. Lebona, who knew he liked men as early as during his pre-school years, introduced his family to his male partner. A self-described gay, feminine/butch guy, Lebona described inviting his boyfriend to a family dinner:

They found out by me telling them that there is someone coming for dinner. This guy was bi and was side-lining the girlfriend…At that time, my mother called my father and my father drove all the way to give me a lecture. But at the end, they both obtained his number and my father gave him a lecture to say this is how you should treat my little girl.

Many of these participants stated that their family members already suspected they liked men or they assumed their family members knew based on their numerous behavioral markers. These suspicions were informed by family’s observations of the participant’s feminine gender
presentation but also from gossip or rumors. There were a few participants from this group whose behaviors were so suggestive to their families, that their family members were rather the ones who informed them about their sexual orientation. For example, Baruti, a 28-year old gay man who described himself as “straight-acting”, shared that his mother informed him he was gay after she observed him playing with girls as a child:

My mom actually explained it to me, being gay, and since then I understood. I never had a problem with who I was. I just accepted. She told me that she saw when I was born, apparently, I used to play with girls and yes, she had known since I was a young guy until I was a teenager. Then she explained to me what is a gay person, how do they feel, who do they date. So, I understood since I was a teenager about who I was and my sexual orientation.

**Family awareness through passive disclosure.** Although many of the participants whose family members were aware of their sexuality actively informed them directly or indirectly, the majority said they were not as keenly involved in sharing such information with their families. They were instead forced to do so for various reasons. Like those participants who actively informed their family members, many of these participants stated that family members either “suspected,” “could see,” or “always knew,” and then confronted them about their sexuality. Amose, a gay, masculine-identifying participant, described how his mother confronted him:

She sat me down, everybody was there and she said: ‘Okay, fine. I need to ask you something and I need you to be honest about it: are you gay?’ And I thought about it and I remember I was thinking that if I say no, I am just not accepting who I am and how are they going to accept me if I cannot accept myself? So, I told her that, ‘Yes, I am gay.’ That is how I came out.

Other participants’ family members heard rumors in the community. As a 34-year-old bisexual participant, Tebogo, explained, “My mother, she just heard outside that, ‘Your son is
doing this and this and this with these [gay] people.” His mother then confronted him about what she had been hearing. Tshediso, a 36-year-old gay participant, was outed by his male partner in the midst of an argument:

Tshediso: You can’t hide forever; sometimes they have to find out one way or the other. Unfortunately, during my first relationship, my mom used to love that guy a lot and one day we had an argument and we had to get my mom in as a mediator for that. Now the guy told me, ‘No, it is because I am in love with him’ you know? That’s how my mom knew that I’m in love with this guy...

Interviewer: She thought you were friends?

Tshediso: Yes.

Not all participants who were confronted about possible same-sex behaviors or having a gay or bisexual identity immediately confirmed their family members’ suspicions. Paolosi, whose family was aware of his gay identity, described that he initially denied being gay when his mother confronted him after she caught him kissing a guy at the age of 17. Over the years, his family figured out that he was gay based on “his actions” and bringing men into the house. He explained that his mother was even able to distinguish his friends from his boyfriends, “She would never ask me about it, she would always ask the guy I came with, asking what you are doing with my child.”

Still, some of the participants found themselves in situations that exposed their same-sex sexual practices and/or hinted to their sexual identity and preferences; for example, being caught while sharing a private moment or while involved in a sexually intimate act with a same-sex partner. Lefu, who identified as gay, described how one of his parents discovered he dated men when the parent overheard him on a house phone chatting intimately with his partner. He recalled:
Not a very good thing…when you’ve got two phones in one house and one person decides to pick up the phone and make a call and hears Barry White on the other side of the line talking to the 18-year-old child going, ‘Baby, I love you’.

The mother of Tlotliso, a young gay man, learned about his sexual practices after he began to experience intense pain in his anus following his first receptive anal intercourse experience. He was not ready to tell his mother but the situation forced him to disclose his sexual identity and activities to her:

On Monday, when I went to the toilet again, the same thing [anal bleeding] happened and my mom was at home. It was painful. I couldn’t close my legs and she took me to the doctor. When I got there, the doctor told me to climb on the bed and he inspected me and when he was done he told my mother that I am being naughty and that I know what I did and that I will tell her what I did. So, my mother asked me what I did and I told her. That’s how my mother found out that I was having sex [with men]…It wasn’t my intention to tell her because I was not ready. It was the situation with the doctor that forced me to tell my mother. I told myself that it is better to tell her because she found out through the doctor.

Extent of family awareness. Out of all those participants who had disclosed their sexuality to their family, a few reported that all of their family members—meaning immediate and extended—were aware of their sexuality. For these participants, the family became aware through other family members whom they had informed. As Danisa, the participant who came out to his mother at the age of 10, shared, he informed his mother of his sexuality and in turn, she told the rest of their immediate and extended family members. Danisa was an outlier; for most of the men, not all family members were aware of their sexual identity and certainly not their sexual practices. Among the participants who said any family members knew about their sexual identity or practices, most indicated that it were immediate family members, like parents and siblings (and especially mothers and sisters), who knew. If an extended family member was aware of their sexuality, it was usually a cousin or an aunt.
**Assumed family awareness.** A small group of participants said they assumed their family members were aware of their sexuality, despite never having explicitly shared this information with them. Most assumed family members knew because they felt they had dropped enough hints to them. These participants tended to describe themselves as feminine and some identified as women. Most were gay-identified, while others identified as homosexual, transgender and gay, or free-spirited. What distinguished this group from those who passively disclosed to their family members is that they had not explicitly acknowledged their family members’ suspicions, often because such suspicions had never been openly discussed. As a young feminine gay-identifying participant, Shandu, shared, he believed his family knew that he had sex with men, but “they just don’t have the guts to ask” him.

Like some of the participants who had disclosed their sexual identity or practices to family members, they felt that their feminine gender presentations should have hinted at their sexuality. Lerato, a 30-year-old self-identified gay, transgender participant shared that she did not hide her sexuality and thus assumed her family knew, simply stating, "They must know because I don’t hide." She added that her mother had figured it out before she passed away and thus, assumed her other relatives had figured it out as well. Similarly, Mohlomi, a gay-identified participant who had never directly told his family about his sexuality, believed his family knew. “They can see me,” he explained. “I’m a gay, a cross-dressing gay, so they know.”

Kabelo, an older gay man, assumed his family knew about his sexuality because he always and purposively brought his sex partners to his family’s house with the hope that they would figure things out. He took certain actions as a way to indirectly inform his parents about his sexual identity. For example, when he was in a relationship, his partner would visit once a week and Kabelo would intentionally not wake him up early because he wanted his family to see
the man before he left. “I think that they know [I’m gay],” he explained, “It’s just that I didn’t
tell them…I don’t see a need to tell them because they see what I do.”

**Family Responses to Sexual Identity and Practices**

Paralleling the diverse ways that family members learned of the study participants’ sexual
identities or practices, the types of responses that participants reported receiving from family
members were also varied. The ways some families responded to the participants were not static
and evolved over time: for example, family members initially responded negatively but later
became more accepting. In addition, the way some families responded was shaped by each
participant’s role in their respective families – being a breadwinner, caretaker, or successful
student contributed to family acceptance.

**Unsupportive responses.** Several participants described unsupportive responses from
family members, ranging from minor to serious, that included insults and taunts, violence,
_attempts to convert the participants into heterosexuals, and disownment. Thato, a 32-year old
gay, feminine participant said that his mother had physically attacked and disowned him; he
explained his experiences after disclosing his sexuality to his mother.

> My mom liked saying to me, ‘you like hanging out with girls, you
> are going to date guys.’ I thought she understood me and that was
> when I told them…it started to be something big…they told me to
> leave the house, I was sleeping at my friend’s place…I’ve been up
> and down going to the police, they were referring me to social
> workers but I couldn’t go. I remember I [returned] from John’s
> place and when I got there it was a fight, a big one.

The younger brother of Themba, a 23-year-old bisexual-identified participant, disowned him and
questioned his manhood after he learned about his sexuality, proclaiming that he was “not a
man.”
Several unsupportive families attempted to change the participants’ sexuality by sending them to traditional healers, psychological counseling, or church. For example, Lefu, whose family overheard him on the phone with his boyfriend, said that his family members refused to speak to him after he disclosed his sexuality and sent him to a psychologist. The psychologist then questioned him about whether he wanted to change his gender identity. He recalled,

I think it was an attempt to actually turn me straight in a way or try to understand the whole thing, because I remember both psychologists said that, well the problem’s not with me, because they asked me ‘do you want to have a sex change?’ ‘No’. ‘Do you want to get a boob-job?’ ‘No, I’m comfortable with the container I have right now’…and she just carried on with the sessions.

Family members’ attempts to change the participants’ sexuality was illustrated by the experience of Lerato, a 30-year-old trans- and gay-identifying woman, whose half-brother took her to an “initiation”\(^1\) school, where boys are circumcised and become “real men,” in her words. She described this as a traumatic experience, stating, “I don’t remember [what happened in initiation school] because it traumatises me. That’s why I don’t remember.”

**Confused or doubtful responses.** There were family members who responded with confusion about the participants’ sexuality. They either did not understand the participant’s sexual identity, expected it to change, or denied it. Several participants discussed family members who were puzzled by the idea that they were, in their view, men who were attracted to other men. Zithembe, a 27-year-old, gay, feminine-identified participant, said about his family, “They were confused about me, but they just said, ‘He’s like that. We can’t change him.’” Bongani, a gay- and masculine-identifying man, shared that his family believed he was going

---

\(^1\) Initiation schools in South Africa are shaped by tradition and customs where young men are prepared for and initiated into manhood through numerous rituals, including circumcision. It is a rite of passage that is practiced primarily by the Xhosa people, although other groups practice it as well. While it is regulated by the government, there remain schools that do not have the certification to legally practice.
through a phase that would pass. He explained that there were confused but he stood firm and “told them this is how it is, this is how it is going to be forever.” He shared that they eventually accepted him, however, his brother was the last to “come to his senses.”

The way one 28-year-old transgender participant, Kealeboga, described her family’s lack of understanding was illustrative of the confusion certain families experience. Kealeboga’s mother initially thought she was going through a fashion phase but soon realized that she would not change. Her mom initially had problems with her sexual and gender identities but slowly began to understand. However, Kealeboga’s siblings and relatives did not share the same understanding, “like my uncle. He is like, ‘Why does it have to be like this? Why can he not have a girlfriend?’” Since her uncle lived with her and was hostile to her friends, she resorted to sneaking her partners into the house and did not openly discuss her romantic matters with family members.

**Supportive responses.** Participants experienced support from family members in a variety of ways, and sometimes unevenly within their families. It appeared, though, that some supportive responses from family members were not contingent upon a positive or completely accepting view of same-sex sexualities. One participant, whose sister is the sole family member aware of his sexuality, described that his sister expressed anti-gay views upon learning of his sexuality. “She is against gay people”, he shared, but not without quickly explaining that he did not take her position seriously. He maintained that “she does not have a problem” with his sexuality and that their relationship has remained the same despite her initial reaction.

A few of the participants whose families were supportive encouraged them to further explore their sexual identity by suggesting references to explore or providing them with different resources. For example, Danisa was told by his mother, “Okay you need to go to the library and
do your own research about those people and find out.’’ Similarly, Fenyang, a 28-year-old “woman gay guy” who was engaged to his male partner, shared that his aunt, a psychologist, counseled him when she found out about his sexual identity. Unlike forms of counseling experienced by others that were aimed at changing their sexuality, Fenyang’s aunt counseled him to help him better understand his sexuality when he came out at the age of 16. While counseling him, his aunt asked if she could inform the whole family, which he described as “very open-minded”, about his sexuality.

Family support was also expressed by defending participants against attacks from other family members or outsiders. For example, Danisa’s mother often told other family members, "My son is gay and take it or leave it.” Other family members provided support by providing participants with financial assistance. Lebona’s father, for example, supported him by paying for his hairstyles and collecting photos of his different mohawk hairstyles. His father, who became aware of his sexuality when he invited his boyfriend over to dinner, was also supportive of him by protecting him from men the way a father would protect his daughter from men who had dubious intentions. He explained, “The thing is my dad is overprotective since I told him that I am gay. I think he treats me like daddy's little girl. He does not want me around boys, like when we go clubbing.”

For several of the participants, family support was defined by being able to openly discuss their romantic and sexual lives with family members. For example, Mosegi, a 22-year-old feminine-identifying participant who was only out to his two sisters, described having conversations with his younger sister about his sexual experiences with men, “Okay my sisters at the moment, my little sister, she does not have any problem and I can also discuss anything with her, sexually: how do I sleep with those men? She is so much interested in that.” Likewise, 26-
year-old Khutala, whose sister was aware of his sexuality before she passed away, stated, "She loved it. She knew we could talk about different things, you know boyfriends and everything…relationships." For Lenka, a 30-year-old gay man who was engaged to his male partner, family support meant they were comfortable around his partner. He credited their support to the fact that his family is close-knit. “I just think that because we’re a very close knit family, they are just doing it for support you know? We never talk about it but they seem extremely comfortable when I’m with my partner around them."

Some family members were initially unsupportive but gradually became more supportive over time. These family members’ perceptions and attitudes changed primarily because they were becoming more knowledgeable of the participant’s sexual identity or because they are family and accept them for that reason. As Ayanda, a 21-year-old gay man shared, his mother, took more time than did his father and siblings to understand and accept his sexuality. Despite this, he had yet to introduce a partner to her. He explained,

Well my mother was not really comfortable with it, although she is accepting it every day. She is not acting up or rejecting me or anything about that and my brothers also are not judging me. Nobody judges me because I sleep with other men. They just love me because I am her son and they are my brothers or my sister.

Silence. Whether participants received family support or not, silence around the men’s sexuality was prevalent within several families. When probed about how their family felt about their sexuality, many of the participants stated that they did not know because family members never spoke about their sexual identity or practices—or at least in their presence. For many of the participants, it appeared the silence was due to a lack of understanding or complete acceptance of their sexuality. However, a few who felt their family had accepted them or were comfortable with their sexuality also mentioned that family members were silent about their
sexuality. Lenka, for example, explained, “We never talk about it but they seem extremely comfortable when I'm with my partner around them.”

Silence around sexual identity and practices was bidirectional, with many participants reporting that they were silent around their family about their sexuality or same-sex relationships due to numerous factors, including wanting to avoid criticism or not wanting to “disrespect” their family. As Lefu shared, “It’s not something we discuss over dinner, but I respect them in so many ways that I do not want to…when I had a boyfriend, I wouldn’t kiss him in front of my brother or sister.” Another participant, Kealeboga, explained that she would sneak in with her sex partners because she respected her family a lot. She also snuck in her partners to avoid altercations with her uncle who disapproved of her sexuality and her bringing over partners. She frequently lied about her romantic and sexual relationships due to the lack of approval from some relatives. “…My ex-boyfriend used to come and sleep over. We sneak in. I am just not that open and say, ‘Yea, mommy he is here today, he leaves in the morning.’ Because I respect them a lot.”

While there were some family members who were silent about the men’s sexuality, there were a few who wanted to know exactly what the participants were doing sexually, in a way, reducing their same-sex interests to their sexual behaviour. Dingani, a 22-year-old gay-identified participant whose mother had become more accepting of him, described her initial reaction to his sexual identity:

My mom is the person that knows. On the first day, I could see that she was not ok with it. She was stressed and she would wonder if I get fucked or if I fuck, those are the kind of questions she would ask herself in the beginning. She was very sad and stressed that day.
Dingani’s mother first learned of his sexuality from his brother, who discovered him kissing his boyfriend at home. She was initially stressed about his sexuality but eventually decided that it would be best if he kept his sexual partners and encounters out of her view.

**Contradictory responses.** Although nearly all of the participants whose families were aware of their sexual identity had at least one family member who disapproved of it, there were some contradictions in how they related to the participants in terms of their sexual identity. For example, family members’ economic, social, and emotional dependence on the participant seemed to facilitate their acceptance of the participants despite their sexual identity. On the flip side, economic, social, and emotional independence seemed to affect the way family members treat the participants in terms of their sexuality. For example, Tshediso, the participant who was outed by his partner during an argument, shared that his family members were generally accepting of him but were critical when he became economically and socially independent and spent money on his partners. These family members were more vocal of their disapproval of the participant’s sexuality as a result:

> Yes, they do accept that I’m gay, even though the only negative attitude that I got was when you start to work, you’re living at home, Black people what do they do? They take aunt’s kids and they take care of them. So, when you start being independent, have your own place [and] not give them money, they start to have an attitude towards the person that you’re in love with, saying he is wasting your money because you were giving them money now [instead of to family].

**Social support.** Despite many family members’ disapproval of the participants’ sexual identity, most of the participants identified a family member—often mothers, aunts, and sisters—as one of their main sources of social support. These family members may have rejected homosexuality or same-sex sexual practices, but they did not abandon or drop support of the participants because of their sexual identity. For example, family members were the main source
of financial support to some of the participants. These participants tended to be younger and more economically dependent due to unstable employment or unemployment. For example, Butholezwe, a 20-year-old gay-identified man shared that his father and older sister were his two main sources of support when he “needs money and stuff.”

Other participants received family support in the form of emotional support such as advice on sexual and romantic relationships, mitigating emotionally difficult situations, or making life decisions. Mothudi, a 27-year-old gay-identifying man who was more economically independent and out to his family, explained that his mom “sits with him” and “guides him as necessary” when he has problems. Another participant, Paolosi, a gay man who had not directly disclosed his sexual identity to his family but assumed they knew about it, shared that his mother was his go-to person for relationship advice. To Paolosi, his mother’s concern about his relationship dynamics when giving advice indicates to him that she has accepted his sexuality:

My mother is an honest person. She will advise me on how I should use condoms. I think my mother thinks I am cheap at times because she will say, ‘You are always broke. Aren't the men that you sleep with giving you some money?’ But it is kind of nice the way she speaks to me, because it shows that she has accepted.

Similarly, Unathi, a 21-year-old gay-identified student, shared that his grandmother advises him about relationships and supports him emotionally:

She gives me support in everything that I’m doing. Like when I was in a relationship, she tried to convince me that I mustn’t force myself into things that I can’t stand for, so I must just wait for the right time and then for now I should just live life as it is.

In addition to emotional and financial support, some participants’ family members also provided support by defending them from bullying related to their gender and sexual identities. Butholezwe, for example, shared that his mother defended him from some of his gay friends who bully him because of his gender expression. He explained:
As gays we are not the same and you find that my friends, the boy ones, say something
mean to me and I explain to my mother and she speaks to them and she explains to them
what kind of person I am and what I don’t like and they say they didn’t know that I am
that type of person.

Lesebo, a young trans woman, similarly shared that her mother “doesn’t discriminate or she
doesn’t fight with me or against me, she always stands by my side."

**The Impact of Family Members’ Diverse Responses**

Among participants with family members who were aware of their sexual identity or
practices, the impact of family members’ responses was diverse, and not always aligned with
how they were actually treated by members of their family. Not all participants whose families
were supportive felt accepted or happy, nor did all those whose families viewed their sexuality
negatively feel depressed or rejected.

Many of the participants whose families were aware of their sexuality felt accepted by
family members even though several had at least one family member who fully or partially
disapproved of their sexuality. For those who felt accepted by family, acceptance primarily
meant not being disowned, attacked, kicked out, or other such negative responses. These criteria
for acceptance indicated that the participants defined acceptance in terms of the absence of
extreme criticism rather than the presence of support and affirmation.

Many of the participants felt “happy,” “proud,” or “lucky” that their family was
supportive or had not disowned them after they disclosed their sexual identity. They felt this way
because their family defended them, and did not judge or disown them. Thebe, a 27-year-old
gay- and masculine-identifying man, explained that he felt very proud because “even if people
say bad things about my sexuality, my family stands up for me.”

Family support seemed to help some of the participants feel more comfortable about
themselves and come out to other people. For example, Baruti, who identified as “straight-acting,
straight-looking”, shared, “I think it has helped me a lot because my family supported me ever since I came out when I was a teenager and that actually made me not to be scared of coming out and being who I was.” He elaborated that his family did not have specific expectations of him in terms of his future, “They would not even ask me about girlfriends or boyfriends, they just told me that as long as I'm happy then they are fine.”

While many of the participants felt positive about their family’s responses, some of them expressed being depressed, suicidal, or sad about their sexuality and/or the disapproval of family members. Themba, the participant whose younger brother disowned him, explained how that affected him, “I was depressed. I was like you know what, if me being me is going to affect people in this manner, let me…just be Themba who dates chicks, will kiss and do that and not have sex.”

Kefentse, a 26-year-old participant who described herself as a homosexual straight girl, explained her struggle with suicide ideation. She was particularly depressed and suicidal because she did not understand why she liked men and was feminine and also because she wanted to be accepted at home. She explained,

Sometimes I would want to kill myself, I didn't understand why I am like this or maybe it is a curse or what, you know. I would have fun outside, I would take my sisters clothes wear them and pack them again and take them back. I would be free outside, but I needed to be accepted at home.

Some participants felt simultaneously happy and sad. This was illustrated by Niku, a 32-year-old participant with a girlfriend who did not specify a sexual identity. Niku felt supported by his other family members but his brother disapproved of his sexuality and was sometimes violent towards him. He explained, “For my mother and my brothers and the wife, it’s like they make me happy. But if [my brother] is not free with me, sometimes it makes me sad, but I
understand his situation, so for me it’s like sometimes it just makes me happy, sometimes I feel bad.”

Other participants displayed resilience even when met with less than supportive responses from their family members. For these participants, being able to live their lives freely and non-secretively was more important than the negative responses they experienced being open about their same-sex interests. To illustrate this, Sizwe, a 25-year-old gay-identified participant, explained that his happiness was the most important factor in his life and not what other people thought of him, “I don’t care about the next person, what he or she says about me, as long as I’m happy…I’m not going to live for them. I’m going to live for myself…[And] I’ve got friends who support me through all of this.” Sizwe shared that he was in control of how he chose to live his life despite not wanting to disappoint family members. When asked about what his family expects of him in the future, he replied:

I think they expect me to be married to a woman and have kids. That’s what my momma expects from me, so I’m not going to disappoint them in a way and I’m not going to please them at the same time, and I’m not going to say that I’m going to marry a girl or what. I’m not going to change my life just because of them. I’m just going to live my life because of myself. I’m going to have whatever I want…If I want a guy, I am going to get that guy who is going to marry me, that’s it, period.

Discussion

Findings in this study suggest that the process of disclosing one’s same-sex sexual identity and intimate relations to family members is a difficult, challenging, and complex one for Black MSM in South Africa, with numerous factors impacting whether and how they disclose to family members. The majority of study participants had disclosed their sexual identity or practices to family members, a quarter had not disclosed, and a few assumed that family members were aware. The proportion of participants that were out to family was much higher
than that reported in the only other study in sub-Saharan Africa (Malawi, Botswana, and Namibia) we are aware of to have an estimate of MSM (about 55%) who have disclosed their sexuality to a family member (Fay et al., 2011). For some of these participants, the act of disclosing was within their control and was done proactively. For others, disclosure was passive and usually took the form of direct confrontation by a family member or being outed to family by a friend, partner, or acquaintance. These forms of disclosure are consistent with findings of other studies documenting one’s disclosure of sexuality to family (D’Augelli et al., 1998; The NEST Collective, 2015).

A key finding of the study is that gender and sexual identity had a significant impact on participants’ disclosure experiences. In particular, family members’ awareness of the participants’ sexual identities and practices appeared related to the participants’ non-verbal expressions of their identities (e.g., mannerisms and dress), as well as sexual and gender self-identification. A majority of those who had not disclosed to family members self-identified as masculine and as non-gay, straight, or did not identify with any label. A smaller number of those had not disclosed their sexual identity or practices to family members identified as bisexual, gay, or homosexual. In contrast, participants who had disclosed their sexuality to families were more likely to identify as feminine and as gay, homosexual, drag queen, or use a combination of these labels. Most of those who assumed their family knew about their sexuality identified as gay and feminine. These findings suggest that: 1) adopting and claiming a discrete gay identity appear to be related to disclosure of sexual identity and sexual practices; 2) those with feminine gender expression are perceived to be homosexual by people in their social environment, which may lead to passive disclosure of their sexuality to family members; and 3) participants’ disclosure
experiences are shaped by gender normative ideals of how men and women should behave and heteronormative expectations such as marriage to and children with a woman.

In terms of reasons for participants’ disclosure, those who had disclosed their sexual identity wanted to live freely and openly with their sexuality around their family. Others were compelled to disclose in response to their family’s suspicion that they may be interested in men. People who had not yet disclosed their sexual identity and practices to family members feared not living up to or disappointing family expectations of them to marry a woman and start a family. They were also concerned about being disowned, experiencing violence, and/or losing financial support due to social stigma against same-sex sexualities. These fears were consistent with other studies about coming out to family members in South Africa and other geographic contexts, which also report that fear of a negative response from family hinders disclosure of sexuality (D’Augelli et al., 1998; Kotze, 2012; Potoczniak, Crosbie-Burnett, & Saltzburg, 2009; The NEST Collective, 2015). Others assumed that their family was aware of their sexuality, however, they had not yet disclosed to them or confirmed their suspicions because they thought it was obvious or wanted family to figure it out on their own. Notably, religion was not identified as a significant factor shaping disclosure experiences, even though numerous studies demonstrate that religious institutions and beliefs play a major role in the lived experiences of many Black LGBTQ people within and outside of Africa (Balaji et al., 2012; Kaoma, 2009; Mbote, Sandfort, Waweru, & Zapfel, 2016; Wilson, Wittlin, Muñoz-Laboy, & Parker, 2011).

Family responses to participants’ disclosure of their sexuality varied, with most of these responses falling within D’Augelli and colleagues’ (1998) four categories of reactions by family members to the coming out of LGB youth: accepting, tolerant, intolerant, and rejecting. Many of the reactions are also reflected in one or multiple stages of Savin-Williams’ and Dube’s (1998)
Developmental Model of Parental Reactions: 1) shock, 2) denial and isolation, 3) anger, 4) bargaining, and 5) acceptance. Some family members were in denial, some accepted it immediately or eventually, some provided different types of support, while some reacted with anger, violence, or rejection. Family members’ assumption that the participants’ sexuality was a phase they would eventually grow out of, was also found by Wandrey, Mosack, and Moore’s (2015) in a study on coming out experiences of bisexual women in the U.S. context. It is worth noting, however, that, based on the studies referenced, silence around participants’ sexuality, regardless of whether or not the family accepted their sexuality, appeared to be more prominent in the South African context compared to the U.S. context. We also found that some family members referred participants to a counselor or traditional healer (Sangoma or Inyanga) to cure them of their homosexuality, a common experience among Black LGBTQ South Africans (Graziano, 2004b; Reygan & Lynette, 2014).

Among those who disclosed, many felt free and liberated, or did not care what their family members thought. For them, being able to live their lives freely and non-secretively was more important than the negative responses they experience living openly about their same-sex sexuality. On the other hand, in the terms of openness with family about sexuality, many participants were discreet about their sexual identity and practices or felt guilty or embarrassed, regardless of their disclosure status. Further, a majority of participants were concerned about disappointing or disrespecting their family with their sexual identity and preferences and thus
were silent, secretive or private about the sexual and romantic relationships. Many felt emotionally or financially supported by family members but could not see themselves openly relating to them in terms of sexual identity and practices. As numerous studies in sub-Saharan Africa demonstrate, a lack of social support and acceptance of LGBTQ populations are associated with negative mental health outcomes and risk behaviors (Baral et al., 2009, 2011; Makofane et al., 2014; Poteat et al., 2011; Santos et al., 2013) and should be further studied.

Alongside the discretion practiced by study participants, family members were silent about participants’ sexuality as previously mentioned. This silence—although most likely shaped by homophobia and heteronormativity—might also be a product of what Dankwa (2009) has described in her work on Ghanaian female same-sex intimacies as a culture of discretion and indirection. In such a culture, sex, whether heterosexual or not, is not directly talked about generally or in intergenerational communication due to modesty and out of respect (Dankwa, 2009). These characteristics of discretion and indirection within the culture of silence may be at play in the South African context and possibly more pronounced for same-sex sexualities and intimacies. The impact of this culture of silence on LGBTQ populations’ health must be further studied as previous research demonstrate that such silence around same-sex sexualities
contribute to the exclusion and marginalization of African MSM in HIV policies and programs (Epprecht, 2013; Reddy, Sandfort, & Rispel, 2009).

There are a few study limitations that are worth noting. First, the study is qualitative and interviews a sample of Black South Africans within four townships in the Tshwane Municipality. Findings from the study about disclosure to family, thus, cannot be generalized to all Black MSM or non-Black MSM in South Africa. However, a key strength of the study is that within the sample, there was a diversity of sexual and gender identities and sexual practices. Another limitation in related to the inclusion of transgender individuals in a study on MSM. Although we expected gender diversity among MSM, our study was not initially planning on studying transgender individuals. However, in the process of recruitment, we learned that some of the participants in the study identified as female. After consultation with the study’s Community Advisory Board, they encouraged the recruitment of individuals assigned male sex who were diverse in their gender expressions and met other eligibility criteria. Another limitation is that it is possible our study oversampled MSM who were out about their sexuality given that much of the recruitment was done with the assistance of community organizations and through MSM networks.

Despite these limitations, this is the first study of its kind to examine whether and how Black South African MSM disclosed their sexual identity or practices to family, the reasons for maintaining their disclosure status, the responses of family members, and how these responses impacted them. The findings provide critical insights into the lived experiences of gay, bisexual, and other Black MSM in South Africa regarding family relations and same-sex sexualities. These insights contribute important knowledge about the social realities faced by this population, which is at high risk for HIV, with a prevalence ranging from 13% to 49% across different regions in
the country (University of California San Francisco, 2015). In addition to all the other social realities, they have to navigate coming out in a country that provides legal protection but in which there are also high levels of stigma, oppression, and violence against LGBTQ people, which is compounded by social distresses, alienation, and lack of support. Moreover, the in-depth interviewing methods enabled us to generate detailed narratives about the process, challenges, and benefits of disclosure of one’s sexuality to family members. This knowledge will be informative to future researchers and health interventionists to understand factors that affect the process of coming out to family members and getting social support. These factors should be integrated in HIV and STI prevention programing focused on this population.

Although South Africa has a liberal constitution that enshrines equal legal protections for LGBTQ South Africans, gay, bisexual, and other Black MSM in South Africa do not enjoy an equal social status with their heterosexual counterparts. Moreover, social attitudes appear to lag behind these legal protections. A recent survey on social attitudes towards homosexuality and gender non-conformity in South Africa found that while 55% of South Africans reported that they would “accept” a gay family member, only 27% reported knowing a family member who is homosexual (Human Sciences Resource Council, 2016). In the same study, 72% indicated that homosexuality was morally wrong. Similarly, a Pew Research Center (2013) survey found that 61% of South African respondents reported that homosexuality should not be socially accepted.

Our study findings offer important lessons to those who work with LGBTQ populations. Of note, the experiences of our participants suggest that despite the protective legal environment, Black South African MSM residing in Townships need more support in coming out to family members. In addition, youth and families would benefit from enhanced education, with direct interventions in developing appropriate content in curricula on sexual and gender diversity and
social services to support the coming out process. The capacity of schools, cultural, faith-based organizations and LGBT community organizations to provide such services is an area for further study and investment. At a broader level, media-based interventions to educate the public about the rights and needs of LGBTQ people and the importance of upholding the values of the Constitution for them, namely equality, respect and dignity, remain central to improving social attitudes about same-sex sexualities.

More studies are needed in different African contexts to examine LGBTQ people’s coming out experiences and factors shaping those experiences. Given that South Africa has rights protections for LGBTQ populations and a network of LGBTQ rights organizations and activists, it is possible that the proportion of MSM and other LGBTQ populations who are out to their family members is much lower outside of South Africa. It is also possible that those who are out to family in other African contexts may experience less supportive responses than we found in our study, and may be more socially isolated due to a smaller or more marginalized LGBTQ community. Finally, longitudinal research, involving sexual and gender minority persons and critical persons in their social environment, should examine the process and long-term effects of disclosure and non-disclosure of sexual identity to family members on the psychosocial well-being and sexual and physical health of gay, bisexual, and other MSM.
References


Kotze, E. S. G. (2012). Lesbians’ coming-out stories as confessional practices: Liberatory politics or an incitement to discourse?


http://doi.org/10.2190/HS.44.4.b


http://doi.org/10.1080/00224499.2016.1255702


https://globalhealthsciences.ucsf.edu/sites/globalhealthsciences.ucsf.edu/files/pub/msm-triangulation-south-africa.pdf


http://doi.org/10.1007/BF01543301


http://doi.org/10.1300/J082v37n02_05

http://doi.org/10.1080/15299716.2015.1018657


http://doi.org/10.1080/17441692.2011.605068


http://doi.org/10.1371/journal.pone.0147156
Figure 1 Model of Sexuality Disclosure to Family. Illustrates participants’ status in disclosing same-sex sexual identity and practices to family, reasons for maintaining disclosure status, family responses to those who have disclosed, and impact of responses on participants.

**Status**
- Not disclosed
- Assumes family knows
- Disclosed

**Reasons**
- **Not disclosed**
  - Fear losing family
  - Fear violent or negative reaction
  - Don’t want to disrespect or embarrass family
  - Want to fulfill family expectations
  - Don’t feel comfortable with their sexuality
  - Believe same-sex desire was a phase

- **Assumes family knows**
  - Feminine gender presentation
  - Hinted sexual identity to family
  - Family saw them with a same-sex romantic partner

- **Disclosed**
  - Active disclosure
    - Wanted to live freely/openly
    - Wanted to be honest to family
    - Family suspected they were interested in men
  - Passive disclosure
    - Outed to family by others
    - Family confronted/forced them to disclose
    - Outed under circumstances outside their control (i.e., medical emergencies)

**Family Responses**
- **Supportive**: emotional support, defense against anti-gay attitudes, relationship/sex advice
- **Unsupportive**: disownment, use of conversion methods
- Confusion about sexual identity
- Silence about sexuality

**Impact of Family Responses**
- **Positive**: Feel free/open about sexual identity; lucky, happy, proud to have family support or not be rejected; feel accepted by family
- **Negative**: Depressed, suicidal, sad, feel guilty/ashamed, wish they weren’t attracted to men
- **Mixed**: Feel both sad and happy; mix of negative and positive feelings
- Resilient despite mixed or negative family responses