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A Systematic Review of Black American Same-Sex Couples Research: Laying the Groundwork for Culturally-Specific Research and Interventions

Jonathan M. Lassiter Rowan University, lassiter@rowan.edu

Jagadīśa-devaśrī Dacus

Mallory O. Johnson

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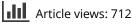
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A Systematic Review of Black American Same-Sex Couples Research: Laying the Groundwork for Culturally-Specific Research and Interventions

Jonathan Mathias Lassiter D^a, Jagadīša-devašrī Dacus D^b, and Mallory O. Johnson D^c

^aDepartment of Psychology, Rowan University; ^bThe Institute for Sexual and Gender Minority Health and Wellbeing at Northwestern University; ^cDepartment of Medicine, University of California

ABSTRACT

This article presents the findings of a systematic review of the empirical literature related to Black American same-sex couples (BASCs). We found 16 articles that met inclusion criteria. Most articles were published in journals that focused on interdisciplinary studies, HIV/AIDS, and couples and families' studies. Approximately 63% of the articles reported external funding support. However, only one of these grants was awarded to a Black investigator. Articles predominately focused on BASCs composed of Black sexual minority men residing in major U.S. cities. Only 25% of the articles focused on couples where both partners were Black. Most studies were cross-sectional, used convenience samples, and were reported without mention of a theoretical framework that explicated the philosophical assumptions that guided the research. The articles focused on a range of topics such as resilience, relationship dynamics, couple-level social support, rituals with extended families, and partner-health associations. The implications of these findings for advancing culturally-specific behavioral and social science health research and interventions with BASCs are presented.

Afrocentric psychologists have described an ancient African ethos that defines the self as inextricably tied to the collective (Akbar, 2003; Myers, 1993; Myers et al., 2018). The self does not exist in isolation of others. The principle of Ubuntu: "I am because we are; and because we are therefore I am" succinctly illustrates this perspective (Akbar, 2003, p. 68). It is believed that whatever happens to one's tribe (i.e., family, cultural group) also affects the individual, and vice versa. This includes one's romantic partners. The bidirectional influence of the individual and the relational unit, highlighted by this African ethos, has been found to be evident among contemporary Black couples in Western societies (Parham et al., 2016). A large body of couples research in Western societies has indicated that relationship health influences personal health, and vice versa (Loving & Slatcher, 2013; Thomas et al., 2017; Umberson & Karas Montez, 2010). However, reviews of couples research literature have revealed that most of the findings in this area are based on studies with couples who identify as or are presumed (i.e., sexual orientation and race were not assessed in the study) to be heterosexual and White (Spengler et al., 2020; Tseng et al., 2021). The general lack of representation of diverse couples in the empirical literature has contributed to an incomplete understanding of the interplay of health and romantic relationships among Black and same-sex couples, and those couples at the intersections of those identities like Black American same-sex couples (BASCs).

BASCs are often left out of conversations about Black romantic love, LGBTQ+ love, relationship health, and the pathways between relationship health and personal health across multiple domains (e.g., mental, physical, financial, sociopolitical, and spiritual health). This oversight is unfortunate given that, as a group, Black sexual minority (i.e., people who are romantically and sexually attracted to members of their same sex and gender identity; [SM]) people experience health inequities compared to their Black and White heterosexual peers and White SM counterparts (Follins & Lassiter, 2017). For example, Black lesbian women have been found to report 2 and 3 times higher rates of hypertension and obesity, respectively, compared to White lesbian women (B. A. Caceres, Veldhuis et al., 2019). These inequities often occur due to disproportionate exposure to oppression (e.g., anti-Blackness, homonegativity) based on Black SM people's intersecting marginalized social identities (Lassiter, Follins, et al., 2020). Such oppressive experiences contribute to health insurance barriers and discriminatory patient-provider interactions that may negatively impact health promoting behaviors and attitudes (Choi et al., 2021; Greene et al., 2021; Malone et al., 2019). These findings highlight the burden of oppression and disease among individual Black SM people. However, these factors do not necessarily disappear when Black SM individuals enter romantic relationships. BASCs must also grapple with oppressive forces and poor health conditions.

Now more than ever, BASCs' health needs to be centered and made to *matter* in the scientific literature. The recent reexamination of and reckoning on systemic and institutional racism and racial inequity have prompted a national discourse about how to address the totality of Black lives (Devakumar et al., 2020; Garcia & Sharif, 2015). This discourse has also begun to germinate more fully in the world of behavioral and social science research (Castle et al., 2019;

CONTACT Jonathan Mathias Lassiter in the provided and the

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Dressler et al., 2005; Hardeman et al., 2018; Hicken et al., 2018). Developing a knowledge base that specifically queries BASCs' health is imperative to enhancing the field's ability to effectively prevent and reduce health inequities among these couples. Given the pervasiveness of the impact of culture and systems of power, privilege, and oppression on health, any scientific inquiry or practice that ignores these factors is complicit in perpetuating health inequities and injustices (Devakumar et al., 2020). Thus, a scientific knowl-edgebase that seriously centers BASCs must be culturally grounded and intersectional, accounting for multilevel challenges and strengths among BASCs in the contexts they inhabit.

In an attempt to seriously center BASCs, this article describes a systematic review of the behavioral and social science literature to understand what we know and don't know about BASCs. We start with a brief overview of BASCs and their health concerns. We then outline two important factors related to culture and context (i.e., philosophical assumptions and research funding) that may be influencing our understanding of BASCs' health. Next, we describe the systematic review and its findings. We conclude the article with a discussion of the implications of our findings for advancing culturally-specific couples-based health research with BASCs.

Black American Same-sex Couples and Their Health Concerns

Available demographic data indicate that there are 56,000 same-sex couples (likely an underestimate) with at least one Black partner residing in the United States (U.S.; LGBT Demographic Data Interactive, 2019). Recent statistics indicate that approximately 12% of these couples are married and 28% of them are cohabitating (Choi et al., 2021). Most of these couples live in Southeastern and Northeastern states (LGBT Demographic Data Interactive, 2019). Population-based epidemiological data (Haley, 2018; Kastanis & Gates, 2013; Movement Advancement Project, Family Equality Council, Center for American Progress, 2012) have indicated that BASCs are more likely to be raising children than same-sex couples of other races and ethnicities. Additionally, female BASCs (44% vs 23%; Choi et al., 2021).

In a survey of 2,809 Black SM people and 69,979 heterosexual Black Americans (Choi et al., 2021), Black SM people had higher rates of unemployment (14% vs 10%) and lower levels of obtaining a college degree (25% vs 27%) compared to their Black heterosexual counterparts. They were also more likely to have incomes less than \$24,000 per year (39% vs 33%; Choi et al., 2021). This income inequity may be exacerbated for Black women in same-sex couples who have reported earning approximately \$5,000 less than Black men in same-sex couples (Movement Advancement Project, Family Equality Council, Center for American Progress, 2012). Furthermore, Black SM people were more likely to be medically uninsured (20% vs 15%) compared to Black heterosexual people. Overall, these socioeconomic factors have direct implications for Black SM people's health.

Health inequities research about Black SM individuals has revealed that this group is disproportionately diagnosed with physical and mental health conditions. Black SM people attempt and complete suicide at higher rates than their White counterparts and Black peers (Follins & Lassiter, 2017; Lassiter, Follins, et al., 2020). Gender also plays a role in the uneven mental health diagnostic rates among this group. Black SM women have reported experiencing worse psychological and social well-being than Black SM men (Calabrese et al., 2015). Compared to their Black heterosexual counterparts, Black SM women have disproportionate diagnoses of hypertension, stroke, diabetes, smoking, heavy drinking and poor sleep duration (< 7 hours per night; Molina et al., 2014; Trinh et al., 2017). For example, in Trinh et al.'s (2017) study, Black SM women had 1.5 times higher odds of heavy drinking, 3.5 times higher odds of stroke, and 3 times higher odds of depression compared to Black heterosexual women in the sample. Whereas Black SM men have disproportionate rates of HIV compared to non-Black SM and heterosexual people (Centers for Disease Control and Prevention [CDC], 2020), Black SM men also seem to have 2.35 and 6.07 times higher odds of experiencing very short sleep duration (<4 hours per night) compared to Black heterosexual men and White SM men, respectively (B. A. Caceres, Hickey et al., 2019). These conditions contribute to high mortality rates (Cochran et al., 2016). Overall, the socioeconomic, mental, and physical health outcomes described above are linked to several psychosocial, political, and spiritual factors such as intersectional stigma (English et al., 2020), internalized homonegativity (Graham et al., 2011), misogynoir (Bailey & Trudy, 2018), adverse childhood experiences (Nelson et al., 2017), and low spiritual consciousness (Lassiter & Mims, 2021) that impact Black SM people's lives. BASCs' relationship quality and health are likely to be influenced by similar factors.

People who are part of BASCs must contend with myriad intra- and intercommunal challenges. Both as individuals and as BASCs, they may be labeled "deviant" for being Black people who self-identify as LGBTQ+. For some, embracing a noncisgender and/or a non-heterosexual identity has been characterized as "a White thing" (Armengol, 2012). This labeling is based on the misconception that homosexuality and nonbinary gender presentations were not already present in African diasporic populations. Rather, some theorists believe that European colonialists introduced homosexuality and nonbinary gender expressions and use(d) them as a tool of White supremacy to dissolve the traditional Black family (Welsing, 1991).

More so, people in BASCs are thought to violate the social mores by being Black people in same-sex or same-gender relationships. Beyond being an LGBTQ+ individual, people in BASCs represent resistance to heteronormative cisgender gender role expectations and couplings by forming their unions and publicly expressing them to varying degrees of comfort. While subjected to actual and threatened verbal, physical, and social discrimination as individuals, people in BASCs also have to navigate these oppressive stressors together (Hemphill, 2007; Lorde, 2020). For these reasons, and many others, it is imperative to develop culturally-specific and intersectional approaches to BASCs' health that capitalize on this group's resistance and resilience while also attending to their unique needs. Developing these approaches will require a scientific knowledgebase that prioritizes BASCs' culture and context.

The Role of Philosophical Assumptions and BASCs Health Research

The philosophical assumptions (i.e., ontological, epistemological, axiological, and methodological) that underpin a scientific knowledgebase are particularly important as they are directly linked to the cultural frameworks and contexts researchers use to understand themselves and the subjects of their investigations. Briefly, ontology concerns the nature of reality, epistemology queries how we know what we know, axiology highlights our values in research, and methodology focuses on the processes we use in research (Creswell & Poth, 2017). These assumptions guide the ways in which policymakers and scientists prioritize health topics, methodologies, and dissemination outlets. For example, a deficit approach to public health research has been highlighted as potentially leading to a negative view of marginalized people, such as BASCs, by over-focusing on what is going wrong instead of acknowledging and leveraging strengths (Herrick et al., 2014). A research landscape that prioritizes deficit-based understandings of health possibly reveals a view of reality as adversity-laden and harmful with a value on individual over context, and avoidance of negative consequences (Herrick et al., 2014). Thus, strengths-based approaches and other research paradigms informed by philosophical assumptions that prioritize positive interactions and outcomes may be systematically overlooked in such a deficit-based research landscape.

Often, a researcher's philosophical assumptions are revealed in the theoretical framework they use to inform their scientific investigations. For example, a researcher who prioritizes the role of community, identity, and culture may choose a Black feminist theoretical framework (Collins, 2009) that emphasizes the role of socially constructed categories of race, gender, and class, and their corresponding systems of oppression and privilege, to guide their study of BASCs' health. Alternatively, a researcher who prioritizes knowledge mastery, individual responsibility, and taking action may utilize an informationmotivation-behavior theoretical framework (Fisher & Fisher, 2009) that emphasizes the influence of disease awareness, intrinsic and extrinsic motivation, and health behaviors to understand each partner's health in the context of their romantic relationship. In choosing or opting not to choose a theoretical framework, researchers provide information about the philosophical assumptions that guide their scientific investigations. Researchers' philosophical assumptions also inform decisions they make about what research is valuable and worthy of funding.

Funding and BASCs Health Research

Several empirical investigations have found that research conducted by and with Black people is systemically marginalized (Konkel, 2015; Lauer, 2019). Ginther et al. (2011) were among the first scientists to provide empirical evidence of the disproportionate rates of NIH funding awarded to Black researchers. They found that, "after controlling for the applicant's educational background, country of origin, training, previous research awards, publication record, and employer characteristics ... Black or African-American applicants remain 10 percentage points less likely than whites to be awarded NIH research funding" (Ginther et al., 2011, p. 1015). Several other scholars have found evidence of the ongoing inequity in funding, illuminating that one of the reasons Black investigators are awarded funding less is because they are more likely to be studying topics related to Black and other marginalized communities. For example, in a recent study by Hoppe et al. (2019) they found that for Black researchers applying for NIH R01 grants, their research topic accounted for a more than 20% funding gap compared to White applicants. This may be because the review process is not blinded and conducted almost exclusively by previously awarded scientists who are overwhelmingly White. These factors could contribute to these mostly White scientists awarding better scores to grants that align with their own philosophical assumptions and topics of interests. Thus, researchers whose work operates beyond those parameters may be likely to be denied funding. Philosophical assumptions and funding are two factors that are likely influencing what we know and don't know about BASCs' health.

Study Aims

Thus, this article aims to (a) understand the current topics of peer-reviewed BASCs health research, (b) identify patterns in philosophical assumptions and funding of BASCs health research, and (d) provide recommendations for advancing culturally-specific research about BASCs' health.

Method

We conducted this comprehensive systematic review in accordance with the PRISMA guidelines (Liberati et al., 2009). EBSCO Host (all databases described in the Appendix) and PubMed were searched on August 31, 2020 for all articles related to BASCs and health. We used a total of eight sets of search terms (i.e., three for the EBSCO Host databases, including PsycINFO, and five for PubMed) to find articles relevant to this systematic review. The terms for the EBSCO Host databases were: (1) Black or African American or African-American AND same sex couples or gay couples or lesbian couples AND health; (2) Black or African American or African-American AND same sex couples or gay couples or lesbian couples AND psychotherapy; (3) Black or African American or African-American AND same sex couples or gay couples or lesbian couples. The search terms for PubMed were: (1) Black or African American AND same sex couples AND health; (2) Black or African American AND same sex couples AND psychotherapy; (3) Black or African American AND same-sex couples; (4) Black or African American AND gay couples; and (5) Black or African American AND lesbian couples. We included the MeSH terms in the search only in the PubMed database. We also examined reference lists of retrieved publications for any additional relevant publications

that may not have appeared in the original search. No limitations or exclusions were made based on publication date.

Article Selection

We reviewed all records for duplicates. Duplicate, nonacademic (e.g., news reports) and irrelevant records were removed. Then abstracts were reviewed for relevance. Abstracts were deemed relevant if they mentioned anything pertaining to Black "same-sex couples," "same-sex partners," "romantic relationships," and "romantic lives." Next, we reviewed full articles to assess if they met eligibility criteria.

We deemed articles to have met eligibility criteria if they were published studies that were (1) peer-reviewed; (2) empirical; (3) conducted with a sample or subsample that comprised solely or mostly (80% or more) US-residing BASCs or individual Black SM people in a same-sex couple at time of study; (4) written to include results that reported only about BASCs or individual Black SM people in a same-sex couple at time of study *or* had separate analyses for the subsample of BASCs or individual Black SM people in a same-sex couple; and (5) conducted using couples as the unit of analysis or queried about couple dynamics, characteristics, or relationship status (not just partner gender) as the primary variables of interest.

Articles must have also included a variable that measured an aspect of health (i.e., mental, physical, financial, sociopolitical, and spiritual health). These aspects included traditional indicators of disease (e.g., substance dependence, HIV) and health behaviors (e.g., drug use, condom use). We also selected articles that included indicators of health that went beyond disease or absence of disease. Specifically, we selected studies that included health variables that aligned with Saylor's (2004)

definition of health which emphasizes both non-Western (e.g., resiliency, social support) and Western (e.g., happiness, occupational performance) components that combine in culturally-specific ways to induce optimal functioning, quality of life, and well-being. These inclusion criteria were chosen due to the authors' objective to examine the extent of what is known and not known across behavioral and social science academic disciplines, based on scientific inquiry, about BASCs and their health in the United States. Editorials, letters, technical reports, book reviews, theses, dissertations, and commentaries were excluded (See Figure 1).

Data Collection Process

We extracted several types of data from the articles. We extracted data related to publication characteristics and study design to determine the general state of the research literature related to BASCs. These data included: publication dates, journal in which the article was published, journal academic discipline, temporal design (e.g., cross-sectional, longitudinal, or intensive methods), type of data analysis (e.g., qualitative, quantitative, mixed-methods), whether the study presented descriptive or intervention data, level of data analysis (e.g., couples-level or individual-level), and main topic(s) of the study. We also collected information related to each study's theoretical framework(s) (i.e., theories that guided the study design, methods, and interpretation) to better understand the philosophical assumptions that guided the available literature related to BASCs. Finally, we collected information about external funding and race of principal investigator (PI) awarded external funding so that we could determine how funding impacts what we know and don't know about

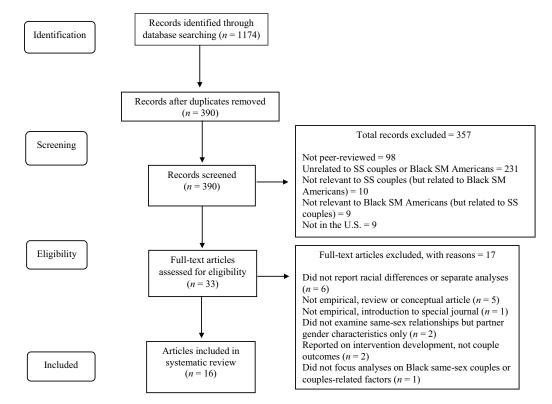


Figure 1. Black same-sex couples systematic review PRISMA flow chart.

BASCs. It should be noted that race of PI awarded external funding was assessed by (a) examining published articles for investigator names and grant numbers listed in acknowledgments and funding disclosures, (b) searching the investigators' names and grant numbers using publicly available grants databases (e.g., NIH RePORTER, Grantome) and checking authors' CVs to verify who was listed as PI on the grant(s), and (c) conducting a Google search of the PI and examining their institution-affiliated biographies and official pictures for indicators of their race.

We also examined the demographic characteristics of the samples that were studied in each article. These included: gender composition, racial composition, geographic location, HIV-status, income level or employment status, educational level, mean age in years, time in current relationship, sample type (e.g., convenience, probability), and sample size. It should be noted that while HIV was not the focus of this review, we collected information about the participants' HIV status due to a preponderance of HIV-related literature about Black SM men.

Results

We found 16 articles that met inclusion criteria. Fourteen studies were represented across these articles. The articles

were published between 1993 and 2019. Authors published research about BASCs in journals that represented a range of academic disciplines. Most studies were published in journals that focused on interdisciplinary studies (i.e., involving two or more academic disciplines; 31.25%), HIV/AIDS (18.50%), and couples and family studies (i.e., empirical studies focused on theory, research, and healthcare practice with couples and families; 12.50%). Surprisingly, we only found one article (6.25%) about BASCs published in an exclusively public health journal (see Table 1). The overwhelming majority of articles (87.50%) presented findings from cross-sectional studies. Although five of the articles used data from larger intervention trials (i.e., articles by DuBois, Tan et al., Wu), all articles presented only descriptive findings. Thus, the current scholarly literature only gives a snapshot of BASCs' lives and no information about culturally-specific health interventions. Authors used mostly quantitative (50%) and qualitative (43.75%) methods. There was one study that described the use of mixedmethods. Authors used mostly (56.25%) individual-level analyses, followed by couple-level analyses (31.25%). Two studies utilized both.

We found that the samples included in the published BASCs research were mostly composed of adult men in major U.S. cities (see Table 2). Specifically, men in BASCs were predominately the focus (56.3%), followed by women (25%).

Author(s)	Publication Date	Journal	Journal Discipline	Temporal Design	Type of Data Analysis	Couple-level or Individual-level Analysis	Topic of Study
Applewhite & Littlefield	2015	Journal of Black Sexuality and Relationships	Interdisciplinary	Cross- sectional	Qualitative	Couple-level	Resilience and anti- resilience behaviors
Campbell et al.	2014	Archives of Sexual Behavior	Sexology	Cross- sectional	Qualitative	Couple-level	Condom decision-making processes
Dang & Frazer	2005	The Western Journal of Black Studies	Sexology	Cross- sectional	Quantitative	Individual-level	Sociodemographics of U.S. Black same-sex couples
Del Rio & Alonso- Villar	2019	Industrial Relations	Labor and employment	Cross- sectional	Quantitative	Individual-level	Occupational achievements of U.S. sample sex couples
DuBois et al.	2018	Journal of Black Sexuality and Relationships	Interdisciplinary	Cross- sectional	Quantitative	Individual-level	Partner-health associations
Edwards	2016	Deviant Behavior	Interdisciplinary	Cross- sectional	Quantitative	Individual-level	Relationship satisfaction
Glass	2014	Journal of GLBT Family Studies	Interdisciplinary	Cross- sectional	Qualitative	Couple-level	Rituals with extended families
Glass & Few- Demo	2013	Family Relations	Applied family studies	Cross- sectional	Qualitative	Couple-level	Couple-level social support
Gonzales & Ortiz	2015	American Journal of Public Health	Public health	Cross- sectional	Quantitative	Individual-level	Health insurance inequities
Mays et al.	1993	Journal of Homosexuality	Interdisciplinary	Cross- sectional	Qualitative	Individual-level	Associations between discrimination and health
McLean et al.	2003	The Family Journal: Counseling and Therapy for Couples and Families	Couples and family counseling	Cross- sectional	Quantitative	Individual-level	Racial identity and relationship satisfaction
Moore	2008	American Sociological Review	Sociology	Longitudinal	Convergent mixed- methods	Both	Power relations
Tan, Campbell, et al.	2018	AIDS Patient Care and STDs	HIV/AIDS care	Cross- sectional	Qualitative	Both	Couple-level dynamics and multilevel challenges
Tan, Campbell, Tabrisky, et al.	2018	AIDS and Behavior	AIDS behavioral research	Cross- sectional	Qualitative	Couple-level	Dyadic HIV care engagement
Tan, Pollack, et al.	2018	AIDS and Behavior	AIDS behavioral research	Cross- sectional	Quantitative	Individual-level	HIV care engagement outcomes
Wu et al.	2015	Journal of Interpersonal Violence	Interpersonal violence	Cross- sectional	Quantitative	Individual-level	Substance use and intimate partner violence

Table 1. Study and design characteristics.

Table 2. Sample	Sample characteristics.	tics.								
Author(s)	Gender Composition	Racial Composition	Geographic Location	HIV-status	Income/Employment	Educational Level	Mean Age in Years (Age Range)	Time in Relationship	Sample Type	Sample Size
Applewhite & Littlefield	Male	Black-Black couples	New York City	HIV+ and HIV- seroconcordant; HIV serodiscordant couples	52% employed	70% had at least some college	35.6 (no range reported)	66% in a relationship for at least 6 months; range = less than 3 months - more than a year	Convenience sample	20 Black couples
Campbell et al.	Male	31 couples with at least one Black partner (out of 47 total couples)	New York City and San Francisco	HIV- seroconcordant; HIV serodiscordant couples	53% employed	57% had at least some college	31 (18–66)	Mean of 3.6 years; range = 6 months – 20 years	Convenience sample	16 Black-Black couples; 15 Black-White couples (out of 48 total couples)
Dang & Frazer	Mixed	All couples with at least one Black partner	U.S. national sample	Not reported	Median annual income of Black male SS couples: \$50 K; \$40 K for Black female SS couples	Not reported	Not reported	Not reported	U.S. Census data, year 2000	85,000 Black same-sex "unmarried partners"
Del Rio & Alonso-Villar	Mixed	All couples with at least one Black partner	U.S. national sample	Not reported	Not reported	30% of Black lesbians had at least some college; 33% of Black gay men had at least some college	88% of Black lesbians age 54 or younger; 84% of Black gay men age 54 or younger	Not reported	American Community Survey, 2010–2014 (5 waves)	1685 Black women & 1131 men in same-sex couples (part of a larger racially diverse sample)
DuBois et al.	Male	Black	Chicago	46.7% HIV-; 44.5% HIV +	31.8% employed	49.4% had at least some college	35 (18–58)	Not reported	Convenience sample	229 Black sexual minority men (62% in a same-sex couple)
Edwards	Male	Black-Black couples	U.S., state not reported	Not reported	Not reported	93% had at least some college	72% were 39 or younger; no mean age reported	88% in a relationship for at least 1 year; (range = less than a year to more than 10 years)	Convenience sample	19 couples representing 38 partners, and fourindividuals (their partners did not return a completed survev)
Glass	Female	Black-Black couples	New York, New Jersey, Washington, D.C., North Carolina, Maryland; Virginia	Not reported	90.9% employed	63.6% had at least some college	34.6 (27–49)	Mean of 5 years	Convenience sample	11 Black-Black couples
Glass & Few- Demo	Female	Black-Black couples	Major cities in the southeast and midwest	Not reported	Author wrote: "Majority" were employed (no statistic provided)	Author wrote: "Majority" were college educated (no statistic provided)	27–44; no mean age reported	Mean of 5 years	Convenience sample	11 Black-Black couples
Gonzales & Ortiz	Mixed	Black	U.S. national sample	Not reported	57% employed	26.9% of Black men had a college degree; 24.3% of Black women had a college degree	25–64; no mean age reported	Not reported	American Community Survey, 2010–2014 (5 waves)	753 Black men (subsample) in same-sex couples; 1109 Black women (subsample) in same-sex couples
Mays et al.	Female	Black	U.S., state not reported	Not reported	Not reported	Not reported	26–60; no mean age reported	At least one year	Convenience sample	8 Black women in a same-sex relationships with other Black women
McLean et al.	Male	Black	Nine states and Washington, D.C.	Not reported	55% reported earning at least \$20,000 a year	50% had at least a college degree	26–60; no mean age reported	Mean of 4.5 years	Convenience sample	67 Black men in same-sex couples
Moore	Female	All couples with at least one Black partner	New York City	Not reported	84.4% reported earning at least \$30,000 a year	93.8% had at least some college	37.4 (24–61)	Mean of 3.2 years	Convenience sample	32 Black women, in same-sex couples, living in stepfamilies
Tan, Campbell, et al.	Male	All couples with at least one Black partner	San Francisco Bay Area	HIV+ seroconcordant couples; HIV serodiscordant couples	50% of sample reported earning \$20,000 or less a year	Not reported	48.8 (no range reported)	Mean of 6.6 years	Convenience sample	14 Black couples
Tan, Campbell, Tabrisky, et al.	Male	All couples with at least one Black partner	San Francisco Bay Area	HIV+ seroconcordant couples; HIV serodiscordant couples	50% of sample reported earning \$20,000 or less a year	Not reported	48.8 (no range reported)	Mean of 6.6 years	Convenience sample	14 Black couples
Tan, Pollack, et al.	Male	All couples with at least one Black partner	San Francisco Bay Area	HIV+ seroconcordant couples; HIV serodiscordant couples	69.4% employed	50% had at least some college	92% age 21 or older (18–29)	Mean of 2.5 years	Convenience sample	350 Black sexual minority men; 51.1% reported being in a same-sex couple
Wu et al.	Male	All couples with at least one Black partner	New York City	HIV+ seroconcordant couples; HIV serodiscordant couples	Mean income was \$12,600 a year	82% had at least a high school diploma or GED	41.8 (21–59)	Mean of 1.9 years	Convenience sample	37 Black couples

There were three articles (18.75%) that included both male and female couples. We found no articles that focused specifically on Black sexual minority people of trans experience and their romantic relationships. Authors tended to include either individual Black people (for individual-level analyses) or couples where only one partner was required to be Black (for couplelevel analyses). Only 25% of the articles focused on couples in which both partners were Black. Most articles (68.75%) reported on BASCs residing in large U.S. cities such as New York City and San Francisco. There were three articles that presented findings about national samples of BASCs. These articles described secondary data analysis findings from general survey studies (e.g., U.S. Census) and not national studies that focused solely on BASCs. Across articles, most couples were employed (81.25%). Of the articles that reported sample education (75%), half of them reported findings among samples where the most endorsed education level was at least some college education. Most articles (56.25%) reported on couples between the ages of 18 and 66, with a mean age between 30 and 49. Of the articles where authors reported the mean time that couples had been in a relationship with each other (56.25%), the mean relationship duration was 4.32 years. Authors predominately used convenience samples (81.25%). Of the articles that reported on studies that recruited BASCs (56.25%), the average number of couples enrolled was 19. Of the seven articles (43.75%) that reported HIV status of couples, all of them focused only on males and included couples with a range of HIV serostatuses, including HIV+ and HIV- seroconcordant as well as HIV-serodiscordant couples.

The articles covered a wide range of topics. Among male BASCs, topics included (a) resilience and anti-resilience behaviors within one's romantic relationship, (b) condom decisionmaking, (c) the influence of being in a romantic relationship on psychosocial health and health behaviors such as drug use and condomless sex, (d) relationship factors associated with romantic relationship satisfaction, (e) the association between racial identity and romantic relationship satisfaction, (f) couple-level dynamics and HIV care, (g) dyadic HIV care engagement, (h) the interplay between partnership status and HIV care engagement outcomes such as medication adherence and having a regular healthcare provider, and (i) the association between substance use and intimate partner violence. Topics in articles focused exclusively on female BASCs included: (a) relationship social support (b) rituals with extended family among Black lesbian couples, (c) the influence of discrimination on romantic and platonic relationships, and (d) power relations and household decision-making among Black lesbian couples. Topics in articles that included both Black men and women in same-sex romantic relationships were: (a) sociodemographic characteristics, (b) occupational achievements, and (c) health insurance inequities.

The majority of authors (62.50%) presented their work about BASCs without mention of a theoretical framework that provided guidance for how they understood these couples. Of the articles that reported a guiding theoretical framework, they listed: interdependence theory (6.25%), integrative framework of symbolic interactionism and Black feminist theory (12.50%), gender relations perspective framework (6.25%), social epidemiological framework (6.25%), and social cognitive theory (6.25%). Similarly, most (81.25%) did not report a data analytic theoretical framework that described how they conceptualized their data analysis methodologies. Of the three articles (18.75%) that did, they all reported using grounded theory qualitative methodology (see Table 3).

Ten out of the 16 articles (62.50%) reported some type of external funding (see Table 3). Some of the articles reported multiple sources of funding awarded to one or more of its authors. Therefore, the percentages below may exceed 100%. Approximately 31% of the articles reported funding from the National Institutes of Health (NIH). Of the articles that reported NIH funding, 80% of those funds were awarded through training grants or career development awards with only two articles reporting funding from R01 grants. None of the NIH grants were awarded directly to Black American PIs. However, monies from one of the NIH training grants was awarded to a Black male as a subaward PI. Overall, four of the 10 (40%) articles reported funding awarded to White women, one reported funding to a White man, and the other two articles reported funding awarded to an Asian woman and an Asian man, respectively. Only one article was supported by funding awarded to a Black PI. This funding was provided by the Russell Sage Foundation and the Andrew W. Mellon Foundation to a Black woman. There were three articles that reported funding to authors whose race could not be ascertained. These articles included one that reported funding from the CDC, one that reported funding from the Robert Wood Johnson Foundation, and one that reported funding from three governmental agencies in Spain. We were unable to determine the demographics of the grant PIs for these articles as the grant details could not be found in online databases or ascertained from CVs.

Discussion

Summary of Findings

This systematic review represents one of the first attempts to determine and synthesize what is known and not known about BASCs across the behavioral and social science peer-reviewed empirical literature. Fourteen studies across ten academic disciplines were described in 16 scholarly articles. The literature predominately focused on Black SM men, relied on crosssectional data, lacked guiding theoretical frameworks, and used convenience samples. Furthermore, six of the nine articles (67%) about male BASCs focused on sexual risk, violence, and problematic drug use. Thus, our understanding of Black men in BASCs is overwhelmingly through the lens of pathology that perpetuates gendered racist stereotypes about Black SM men (Grov et al., 2015). This myopic focus on male BASCs' sexuality and drug use bolsters an epistemology of ignorance (Bowleg et al., 2017). Epistemologies of ignorance refer to the study of knowledge in which different forms of ignorance (e.g., Eurocentrism, heterosexism), in the process of scientific investigation, are produced and sustained and have roles in knowledge practices (Sullivan & Tuana, 2007). Our systematic review highlights the epistemology of ignorance operating in the scientific literature related to BASCs.

Black women in BASCs were underrepresented in the empirical literature, with only four articles (25%) exclusively

Table 3. Funding and theoretical frameworks.

Author(s)	Funding Source	Race and Gender of Principal Investigator Listed on Grant	Overarching Theoretical Framework	Data Analysis Theoretical Framework
Applewhite & Littlefield	R25 MH067127 from the National Institute of Mental Health and the Borough of Manhattan Community College's Presidential Scholars Grant	Pl: White male; Subaward Pl: Black male	Interdependence theory	None reported
Campbell et al.	R01 MH089276 from the National Institute of Mental Health	White woman	None reported	Grounded theory
Dang & Frazer	No funding reported	N/A	None reported	None reported
Del Rio & Alonso- Villar	Ministerio de Econom_ıa, Industria y Competitividad, the Agencia Estatal de Investigaci_on, and Fondo Europeo de Desarrollo Regional (ECO2016–76506-C4-2-R and ECO2017-82241-R) and Xunta de Galicia (ED431B2019/34)	Unable to determine	None reported	None reported
DuBois et al.	Cooperative agreement with the CDC, Division of HIV/AIDS Prevention, Prevention Research Branch	Unable to determine	None reported	None reported
Edwards	No funding reported	N/A	None reported	None reported
Glass	No funding reported	N/A	Integrated framework of symbolic interactionism and Black feminist theory	Grounded theory
Glass & Few- Demo	No funding reported	N/A	Integrated framework of symbolic interactionism and Black feminist theory	Grounded theory
Gonzales & Ortiz	Robert Wood Johnson Foundation (Grant 65,902)	Unable to determine	None reported	None reported
Mays et al.	University of California Academic Senate, National Institute of Mental Health (NIMH) Scientist Development Award (K21MH00878)	White woman	None reported	None reported
McLean et al.	No funding reported	N/A	None reported	None reported
Moore	Russell Sage Foundation Visiting Scholar program, the Woodrow Wilson Faculty Career Enhancement Fellowship funded by the Andrew W. Mellon Foundation	Black woman	A gender relations perspective framework	None reported
Tan, Campbell, et al.	No funding reported	N/A	None reported	None reported
Tan, Campbell, Tabrisky, et al.	National Institute of Mental Health (NIMH) Mentored Research Scientist Award (K01 MH106416) & NIMH Mentored Research Scientist Award (K01 MH107331)	Asian woman; White woman	None reported	None reported
Tan, Pollack, et al.	CDC (5UR6PS000334); National Institute for Mental Health (R01 MH096690); National Institute of Mental Health (NIMH) Mentored Research Scientist Development Award (K01 MH106416)	White woman; Asian woman	Social epidemiological framework	None reported
Wu et al.	Centers for Disease Control and Prevention (CDC), grant # UR6PS000300	Asian man	Social cognitive theory	None reported

focusing on their relationships. Our findings support previous investigations with Black SM women that found that they are underrepresented in the behavioral and social science literature (Cerezo et al., 2020; Lassiter, 2017). This lack of adequate representation is indicative of the intersectional invisibility that Black SM women navigate due to possessing multiple intersecting social identities that are considered subordinate in ethnocentric, heterocentric, and androcentric paradigms that preference White heterosexual males (Purdie-Vaughns & Eibach, 2008). Although the number of articles focused exclusively on female BASCs was low, the research about them was more contextual and did not overemphasize HIV. Instead, research with female BASCs focused on family relationships, couples' power dynamics, and the influence of discrimination on health. This focus on who female BASCs were in the context of their families and how they made decisions in the context of their romantic relationships contributes to a more holistic view of these couples. However, the lack of focus on their medical and physical health could also contribute to perpetuating health inequities among this group by making their medical and physical health risks and protective factors invisible. Research about female BASCs is needed that examines their health across multiple domains (e.g., medical, physical, relational, spiritual) in their culturally-specific contexts.

The research literature about general samples of BASCs (including both male and female couples) was descriptive in nature, focusing on socioeconomic factors, and taken from largescale survey studies (e.g., American Community Survey, Census). These studies did not collect information about sexual orientation but instead asked about unmarried partners and categorized couples where both partners shared the same sex as same-sex couples. This contributes to a literature that overlooks the importance of self-definition in how people make meaning of their lives and their health beyond financial and social indices. Relatedly, most articles (93.75%) in our systematic review described BASCs' sexual orientations using mainstream labels (e.g., lesbian, gay, men who have sex with men) that represent an etic approach to identity and not culturally distinct identifiers (e.g., same gender loving) that represent an emic approach to BASCs' self-definition (Black Men's Xchange, 2012; Douglas & Turner, 2017). These sexual orientation labels highlight a Eurocentric and behaviorallyfocused approach to sexual orientation that erases the cultural complexity of BASCs, emphasizing behavior and body over mind and spirit (Young & Meyer, 2005). Furthermore, no articles reported on BASCs with gender expansive identities which represents another gap in the literature. More research is needed about BASCs as a community across gender lines and beyond bigenderism.

The available research provides little information about same-sex couples in which both partners are Black or couples who have been in long-term relationships beyond 5 years. This limitation of the literature makes it difficult to understand health-related intracultural factors within couples who share the same societal challenges and cultural strengths due to having the same race and sexual orientation. For example, same-sex couples in which both partners are Black may possess forms of cultural resilience (i.e., the way that the one's cultural background, supports, values, and environmental experiences help facilitate overcoming adversity) that are not present in interracial couples where only one partner is Black (Nightingale et al., 2019). In addition, there are relationship strengths and challenges that may evolve as a couple stays in a romantic relationship with each other over time (e.g., commitment through illness, long-term financial planning, retirement, making health decisions for medically impaired partners, aging, navigating existential concerns). There is a need for health-related research with BASCs that query the long-term processes and experiences of couples who have been together more than five years.

Altogether, the empirical knowledgebase we have about BASCs is limited in its quantity, design, sample inclusion, and topic focus. These limitations contribute to poor empirical data with which to understand BASCs' health. This lack of information about BASCs' health hinders scientists' ability to develop and evaluate culturally-appropriate interventions that effectively reduce health inequities among this group. The findings from our systematic review suggest that (a) lack of culturally-specific philosophical assumptions that guide the research process and (b) racial discrimination in external funding may be two particularly influential factors contributing to the quality of information we have about BASCs' health.

Lack of Culturally-Specific Philosophical Assumptions to Guide Research with BASCs

Approximately 63% and 81% of the articles in our systematic review did not mention using either an overarching theoretical framework in their study design or their data analysis, respectively. Theoretical frameworks are essential in conducting any research because they hint at researchers' philosophical assumptions that guide study design, execution, and dissemination (Given, 2008). They are even more essential in conducting work with BASCs given the ways in which this group has been and continues to be marginalized in Eurocentric, heterosexual, and cisgender spaces. Two articles (i.e., Glass, 2014; Glass & Few-Demo, 2013) reporting on different findings from the same study highlighted Black feminist theory as one of its guiding theoretical frameworks. Although Black feminist theory is more culturally aligned with BASCs than alternative theories used to guide other studies in this review (e.g., interdependence theory, social cognitive theory), it still does not fully take into account sexual orientation and the role of precolonial Afrocentric values that may be particularly relevant for BASCs (Follins & Lassiter, 2017; Lassiter, Brewer, et al., 2020). Most articles in this review did not frame the research about BASCs' health within culturally aligned theoretical frameworks which suggests that the findings related to BASCs could have

been interpreted in ways that may constitute a transubstantive error (i.e., misinterpreting a group's reality using the definitions and meaning-making systems not created by that group or aligned with their deep cultural worldview; Azibo, 1996; Nobles, 2006). Such transubstantive errors in research with BASCs could contribute to them (a) being pathologized for culturally-aligned behavior and perspectives, (b) not being the focus of scientific funding initiatives and inquiry at the same level as non-BASCs, and (c) being treated as fragmented scientific subjects with the focus being on one or two aspects of them (e.g., over-focusing on sexual behavior) and not their holistic selves. To counter these largely atheoretical and culturallyincongruent theoretical perspectives, we posit that frameworks that integrate Afrocentric and intersectional perspectives may be particularly appropriate in guiding policymakers' and scientists' decisions about funding, design, execution, and dissemination of BASCs health research.

Although a detailed explication of the ways in which an integrated intersectional Afrocentric framework could inform research agendas and policies about BASCs' health is beyond the scope of this article, we do provide a few recommendations. Policymakers and researchers need to reeducate themselves about intersectionality frameworks and Afrocentric theories by scholars such as Akbar (2003), Bowleg (2012), Collins and Bilge (2016), Crenshaw (1989, 2017), Myers (1993), and Myers and Speight (2010). Intersectionality theories are too often referenced incorrectly with researchers and policymakers focusing on the experience of health inequities due to possessing multiple marginalized social identities at the individual level in an additive manner (Bowleg, 2008; Parent et al., 2013). This approach contributes to missed opportunities to fully understand the phenomenological experiences and intracultural complexity of BASCs. Furthermore, research with BASCs would benefit from grounding itself more firmly in these couples' experiences of their multiple marginalized identities as integrated within each partner and the couple, as well as how they understand their health experiences in relationship to systems of oppression and strengths (historically and contemporarily) at the societal level (Hancock, 2007). Afrocentric theories require policymakers and scientists to put more emphasis on spirituality, interdependence, and cultural knowledge as strengths within BASCs (Akbar, 2003; Maat, 2010). A strengths-based focus would highlight ways in which BASCSs thrive through resilience and resistance despite navigating myriad oppressive experiences (Lassiter & Mims, 2021; Myers, 1993; Poteat & Lassiter, 2019). Afrocentric theories offer an opportunity for empirical investigation of innovative culturally-embedded health determinants and practices such as music, ritual, and trance/possession (Williams, 2016). Furthermore, an Afrocentric approach to BASCs research would require that empirical studies emphasize Black liberation and community-based action, not only scientific curiosity or mechanistic discovery, as desirable aims and outcomes. However, an embrace of intersectional Afrocentric frameworks has limited utility if the structural systems (e.g., funding agencies) that support couples-based research do not allow space for such culturally-specific theoretical approaches that explicitly locate themselves outside of Eurocentric, heterosexist, and cisgenderist theoretical paradigms.

Racial Discrimination in Funding

The findings from our systematic review suggest that racial discrimination in research funding may be contributing to the lack of focus on BASCs in behavioral and social scientific research. No NIH funding was awarded directly to a Black PI for any of the articles in the systematic review. Overall, there were only two Black investigators who did receive funding for their work with BASCs. One of them was awarded as a subaward PI to a larger training grant and the other through nonprofit foundation grants. A review of the main topics that scientists were funded to study reveal that only three PIs - none of whom were Black - were funded to study BASCs specifically (i.e., Moore, Tan, Wu). These funding practices contribute to BASCs' narratives in the behavioral and social science literature being filtered through the lens of community outsiders who may not be as adept at interpreting BASCs' lives as a community insider might be. The federal funding structure acts as a systemic barrier to Black scientists' ability to advance the knowledgebase related to BASCs (Hoppe et al., 2019). This may be especially true for Black scientists whose work is grounded in philosophical assumptions that lie beyond Eurocentric, heteronormative, and cisgender perspectives. To counter implicit and overt bias in funding, we recommend that funding agencies specifically designate grants to be managed and distributed by Black SM scientists and SM-allied Black heterosexual scientists to support research by Black investigators that is guided by intersectional and Afrocentric philosophical assumptions that further our understanding of BASCs' health in a more well-rounded, nuanced, multidimensional, and liberatory manner.

Limitations

Although this review has been conducted to ensure rigor, clarity, and transparency, there are some limitations that should be noted. We focused exclusively on peer-reviewed publications and did not include editorials, letters, technical reports, theses, dissertations, or commentaries. These excluded publications, while not peer-reviewed for their rigor, may have contributed to a more in-depth understanding of BASCs. We used two databases: EBSCO Host databases and PubMed. While these databases comprise a total of 27 repositories that included scholarly articles in a range of behavioral and social science disciplines (e.g., psychology, public health, sociology), there may still be some disciplines that were not sampled. Thus, we may have unintentionally missed more specialized information related to BASCs. Furthermore, publication bias (e.g., the tendency of authors to not publish their nonsignificant or negative findings) may have hindered our ability to capture a truly diverse sample of studies about BASCs. Finally, while we triangulated multiple sources (e.g., bios, CVs, and professional photos), we were only able to assess racial self-identification in cases where PIs included explicit statements of racial identification in these materials. Therefore, the measure of race in this study should be understood as perceived race. Furthermore, PI race was reviewed by only one author.

Conclusion

Despite these caveats, this article breaks new ground in its description of the current behavioral and social science empirical literature related to BASCs' health. It provides a detailed summary as a starting place and offers recommendations to guide the way ahead. The ultimate goal is to advance culturally-specific, strengths-based, holistic research about BASCs' health.

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ORCID

Jonathan Mathias Lassiter () http://orcid.org/0000-0003-4004-1731 Jagadīśa-devaśrī Dacus () http://orcid.org/0000-0002-3824-8058 Mallory O. Johnson () http://orcid.org/0000-0003-0480-2804

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Appendix

Databases searched:

- Academic Search Premier
- AHFS Consumer Medication Information ٠
- Alt HealthWatch
- ٠ **APA PsycArticles**
- APA PsycBooks
- APA PsycExtra
- APA PsycInfo
- APA PsycTests
- **Business Source Complete**
- eBook Collection (EBSCOhost) •
 - Education Research Complete
- ERIC
- ٠ Funk & Wagnalls New World Encyclopedia •
 - GreenFILE
- Health Source Consumer Edition
- Health Source: Nursing/Academic Edition
- Library, Information Science & Technology Abstracts
- MAS Reference eBook Collection
- MAS Ultra - School Edition
- MEDLINE with Full Text •
- Mental Measurements Yearbook with Tests in Print
- Military & Government Collection
- Newspaper Source ٠
- Primary Search
- Primary Search Reference eBook Collection
- Regional Business News
- SocINDEX with Full Text
- PubMed