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THE RELATIONSHIP BETWEEN MASCULINITY AND RACE ON COPING BEHAVIORS
AMONG BLACK MEN AT A HISTORICALLY WHITE INSTITUTION

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THE RELATIONSHIP BETWEEN MASCULINITY AND RACE ON COPING BEHAVIORS
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Abstract

Black men in the United States have the lowest life expectancy at birth compared to other racial/ethnic groups. Studies have investigated race-related stress and the ensuing coping strategies to explore men's health behaviors. Few studies have examined the role masculine ideology influences coping behaviors among this population. This study sought to a) develop a Brief Masculinity Inventory Scale (Brief MIS) and use it to explore influences on coping behaviors and b) examine how Black men at a Historically White Institution (HWI) cope with stress. A cross- sectional online survey was distributed to Black males who identified as students, faculty, staff, and alumni from an HWI in the southwestern region of the United States. An exploratory factor analysis was conducted to explore the validity of the items in the Brief MIS. Additionally, a Pearson correlation analysis was conducted to explore the relationship between masculinity and coping behaviors. Survey results (N= 78) showed that Black men in this sample most identified with mainstream society and black masculinity. Results also showed that the type of masculinity identified determined whether a positive or negative relationship existed with the type of coping behavior used. Lastly, there were differences in the degree to which participants identified with a particular masculinity identification and their sexual orientation. This study increases understanding of how masculinity influences stress coping. Implications are discussed.

Chapter 1: Introduction

Historical masculinity is a field of study that addresses manly ideals, behaviors, and stereotypes (Hammond & Mattis, 2005). While this research has been essential to understanding the male condition, it has not done an adequate job researching, representing, and giving voice to minority men, such as Black men. Understanding the conceptions of masculinity for Black men would provide a much-needed point of emphasis in this field as it relates to stress. Racism and discrimination has been linked to poor mental health, psychological stress, and adverse health outcomes, such as elevated blood pressure, and tension headaches among Black men (Hammond, 2012; Hammond & Mattis, 2005; Mahalik, Pierre, & Wan, 2006; Mincey, Alfonso, Hackney, & Luque, 2014b; Smith, Allen, & Danley, 2007). According to the National Vital Statistics Report (2016), Black men have the lowest life expectancy at birth compared to other racial and ethnic groups. This is significant because educational attainment has been linked to these health outcomes in ways that highlight the issue, but lacks the research support into the relationship between academic institutions and this specific group of people (Kaplan, Fang, & Kirby, 2017; Williams & Sternthal, 2010). Further research has found a relationship to exist between perceived racism in academic settings and higher daytime and nighttime diastolic blood pressure (Hill, Kobayashi, & Hughes, 2007). High blood pressure is a major risk factor for stroke and heart disease (Hill et al., 2007). According to the CDC (2013) African Americans have higher rates of hypertension than any other race/ethnic group since the 1960s.

Masculinity studies investigates the differences between men and women from both a biological and sociological perspective. Hegemonic masculinity is a concept that brought forth discussions of how men, through patterned behaviors and institutional methods built and

sustained their dominance over women (Connell & Messerschmidt, 2016). Hegemonic

masculinity from the western perspective can be viewed as a type of masculinity that can be

ascribed to white middle class men. Further, it is a concept that highlights the privilege these

men have over marginalized individuals such as men of color and women in general (Connell,

2014). Research regarding hegemonic masculinity was first introduced into the academic field

during the early 1980's when researchers were looking into social inequality along gender and

class lines in Australian society (Connell & Messerschmidt, 2016). Hegemonic masculinity was

defined as patterned behaviors and practices that sustained men's dominance over women and

could be upheld by violence (Connell & Messerschmidt, 2016).

The historicity of hegemonic masculinity and its use to understand all men homogenizes

this group. Chaney (2009) found this theory to be inadequate because it did not address the

power hierarchies that existed between men of different races, ethnicities, or sexual orientations,

nor did it highlight the unique experiences and perceptions Black men have about masculinity.

Moreover, this view of hegemonic masculinity has negatively portrayed Black men in the media.

Such view, have been found to conflate the Black male stereotype without addressing the

inequities such as lack of access to resources, education, and income that can further influence

and uphold those negative stereotypes (Chaney, 2009; Connell & Messerschmidt, 2016).

Exploitation and inequality produced black masculinity and as a result men began

attempting to perform in ways that opposed traditional norms (Lemelle, 1995). The development

and the production of black masculinity was a response to white cultural imperialism (Lemelle,

2010). This imperialism is a network of practices that create positions of domination and

subordination on the basis of race and gender (Lemelle, 1995). The result was that men and

women regardless of race would conform to the race and gender hierarchy. Conformity required

both dominate and subordinate groups to maintain their power in relation to other groups (Lemelle, 2010). This power relation exists between heterosexual Black males, Black women, and homosexual Black males. The deployment of an "other" form of masculinity is a direct confrontation with hegemonic masculinity (Lemelle, 2010). This deployment is meant to expose and establish difference between out-group males; Black males being the out-group and Black gay males being the subordinate of the subordinated out-group. The lack of a togetherness in racial identity between the two groups is the result of a rigid ideology that inculcates men to place value on sex and gender (Alexander, 2006).

African American males have historically been subjected to abuse, silence, and removal from theory (Curry, 2017). This exclusion has allowed the biased idea of black manhood to go mischaracterized and validated by media further stigmatizing the community (Chaney, 2009). Black male vulnerability can best be described as the plight Black males have faced compared to other oppressed groups due to incarceration, police brutality, murder, unemployment, discrimination, child abuse, and even rape (Curry, 2017; hooks, 2004). Curry (2017) proposed that susceptibility to victimhood and erasure from theory has justified their imprisonment and death. This denial of personal narrative and persistent portrayal of mis-information and negative stereotypes in the media have been found to effect the black men's aspirations and experiences (McClure, 2006). These messages are believed to contribute to the mischaracterization of black masculinity as something inherently flawed, inadequate, and deviant (Curry, 2017; hooks, 2004; McClure, 2006). Black men are then left to deal with the discriminatory attitudes, actions, and stereotypes from both their peers and mainstream society (Curry, 2017; Hunter & Davis, 1992, 1994).

Purpose

Research has found Black men to have different views on masculinity and manhood than men from other racial and/or sexual orientation backgrounds (Chaney, 2009; Mincey et al., 2014b). Traditional values of masculinity have been associated with negative health indicators such as lower self-esteem and psychological distress such as anxiety, anger, john henryism, hypertension, and even inability to sleep (Mahalik et al., 2006; Smith, Allen, et al., 2007).

Research about Black men in college has found that the college environment can be a stressful for these students (Hotchkins & Dancy, 2015; Smith, Allen, et al., 2007; Smith, Hung, & Franklin, 2011; Smith, Yosso, & Solórzano, 2007). Hill (2007) asserted that experiences with racial discrimination serve as an environmental stressor. Further, research has found Black males at historically white institutions to report racism, discrimination, and cultural conflict as sources of stress (Smith, Allen, et al., 2007; Watkins, Green, Goodson, Guidry, & Stanley, 2007). The term Historically White Institutions is used to denote the history of this university in which this university was created for white students while explicitly excluding other racialized groups. It is the historical infrastructure that has led to current racial campus environment that has an impact on minority students (Smith, Allen, et al., 2007). Racial Battle fatigue is a theory of the result of the physiological, psychological, cultural, and emotional coping with racial microaggressions in racially hostile or unsupportive environments (Smith, Allen, et al., 2007). Concurrently, John Henryism, which can be described as the overextension of oneself to achieve or handle a situation was identified as a psychological distress for African American college students in another sample (Blackmon, Coyle, Davenport, Owens, & Sparrow, 2016). Further, researchers found that being at institutions of higher learning was a form of overachievement that caused people to overwork (Blackmon et al., 2016).

On the University of Oklahoma's campus, there have been recent racially charged incidents (Chavez, 2019). During the 2018-2019 academic school year there were two black face incidents that impacted the campus community. Black face was used by white performers to mock Africans, who were enslaved in America (Kurr, 2019). Additionally, during the 2014-2015 academic year Sigma Alpha Epsilon was banned from the university after a video surfaced of fraternity members singing along to a racist chant. Both incidents started campus wide protests that demanded the expulsion of the students who participated in both incidents.

Given the literature regarding masculinity (Hunter & Davis, 1994; McClure, 2006; Mincey et al., 2014b) and its effect on mental health (Griffith, Gunter, & Watkins, 2012; Hammond, 2012; Mincey, Alfonso, Hackney, & Luque, 2015), researchers have recommended that masculinity and coping behaviors should be examined to see how masculinity could affect health (Chaney, 2009; Hammond & Mattis, 2005; Mincey et al., 2015). Moreover, Mincey (2014) recommended that future work should examine masculinity and the college environment because exposure to different cultures and situations may influence how black men see themselves. The Masculinity Inventory Scale (MIS), was a scale developed to understand the various elements that influence, define, and construct masculinity in Black men (Mincey et al., 2015). Specifically, this scale looked to examine if a relationship existed between the type of masculinity Black men identified (see Table 1 for definitions) with and the different coping behaviors identified in the Brief Cope (see Table 2 for example of questionnaire items per subscale) (Carver, 1997; Mincey et al., 2015). The Africentric Model groups the Brief Cope into four constructs that were designed to be culturally relevant among African-Americans (Greer, 2007). Further, this study looks to revise Mincey's scale to brief form, by reducing the items from 50 to 25. Thus, the purpose of this study is to build on the concepts of black masculinity

and coping as it relates to the college environment at a Historically White Institution.

Furthermore, the purpose of this study is to 1) develop a Brief Masculinity Inventory Scale and

use it to explore influences on coping behaviors, 2) to examine how black men in college cope

with stress.

Table 1 Masculinity Subscales

1. Mainstream Society	Societal views of what a man should be and act
2. Black Masculinity	View of what it means to be a Black man
3. Primary Group	Influences family have on male development
4. Mainstream Society/Black Masculinity	Societal views of what being a Black man is
5. Primary/Peer Group	Influence of fathers and friends on male development

Table 2 Brief Cope Subscales

Brief Coping Inventory Subscale	
Active Coping	a. I've been concentrating my efforts on doing something about the situation I'm in. b. I've been taking action to try to make the situation better
Planning	a. I've been trying to come up with a strategy about what to do b. I've been thinking hard about what steps to take
Positive reframing	a. I've been trying to see it in a different light, to make it seem more positive b. I've been looking for something good in what is happening
Acceptance	a. I've been accepting reality of the fact that it has happened b. I've been learning to live with it
Humor	a. I've been making jokes about it b. I've been making fun of the situation
Religion	a. I've been trying to find comfort in my religion or spiritual beliefs b. I've been praying or meditating
Emotional Support	a. I've been getting emotional support from others b. I've been getting comfort and understanding from someone
Instrumental Support	a. I've been trying to get advice or help from other people about what to do b. I've been getting help and advice from other people

Self-distraction	a. I've been turning to work or other activities to take my mind off things
	b. I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping
Denial	a. I've been saying to myself "this isn't real"
	b. I've been refusing that it has happened
Venting	a. I've been saying things to let my unpleasant feelings escape
	b. I've been expressing my negative feelings
Substance use	a. I've been using alcohol or other drugs to make myself feel better
	b. I've been using alcohol or other drugs to help me get through it
Behavioral Disengagement	a. I've been giving up trying to deal with it
	b. I've been giving up attempting to cope
Self-blame	a. I've been criticizing myself
	b. I've been blaming myself for things that happened

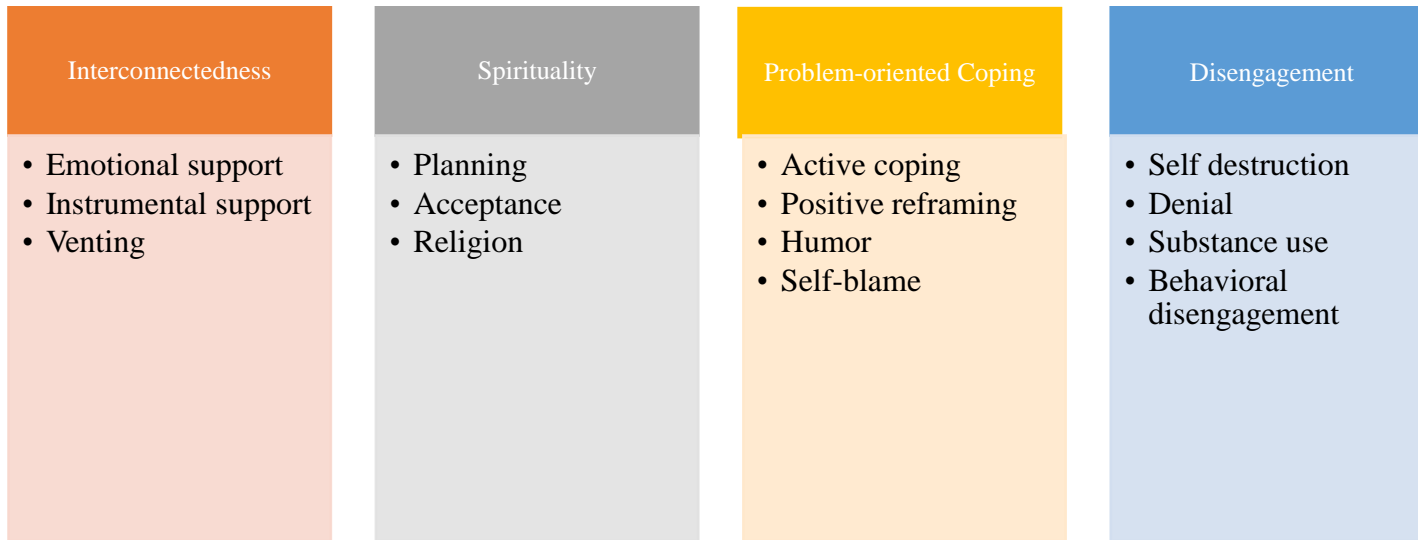| Interconnectedness	Spirituality	Problem-oriented Coping	Disengagement
• Emotional support • Instrumental support • Venting	• Planning • Acceptance • Religion	• Active coping • Positive reframing • Humor • Self-blame	• Self destruction • Denial • Substance use • Behavioral disengagement

Figure 1 Africentric Constructs for the Brief Cope

Research Aim
To develop a Brief Masculinity Inventory Scale

Research Questions
The research questions for this study include:

1. Is masculinity subscale identification associated with coping behaviors?

2. Is there a difference between masculinity subscale identification and sexual orientation?

Hypothesis
The hypothesis for this study includes:

Null Hypothesis
- There will not be an association between masculinity subscale identification and
  coping behaviors.

- There will not be a significant difference between masculinity subscale
  identification and sexual orientation.

Research Hypothesis
- There will be a significant association between the type of masculinity subscale Black
  men identify with and the coping behavior they use to deal with stress.

- There will be an association between masculinity subscale identification and sexual
  orientation.

Delimitations
- Black males

- Undergraduate and graduate students at the University of Oklahoma

- Alumni, Faculty and Staff members at the University of Oklahoma

Limitations

- Recent racial incidents on campus could cause heightened feelings of anxiety, depression, and other psychological distress that could impact participant view of their campus's inclusivity

- The interviews were conducted by a Black man and that may have cause bias regarding interpretation and meaning of certain statements, however because the researcher is a member of the community which is being examined it might also be a strength

- Due to the use of convenience sampling, no generalizations can be made about this population or the sample from which the population was drawn

Operational Definitions

Historically White Institutions (HWIs)- used to emphasize the history of the university in which the creation of the institution was for white students while explicitly excluding other racialized groups.

Historically Black College or University (HBCUs)- institutions of higher learning that were established to educate primarily African Americans

John Henryism- an individual's perception that through hard work and determination they can meet the demands of his/her environment

Hegemonic masculinity- a pattern of practice that allowed men's dominance over women to continue

University affiliation- the way in which an individual is connected to the university, whether they are a student, faculty, or staff member

Chapter 2: Literature Review

At Historically White Institutions Black men make up a minority of the populations and may have to deal with the stressors associated with that minority status, such as racism and discrimination (Mincey et al., 2014b; Watkins et al., 2007). Research shows that masculinity that is contingent on socially dominant influences is related to negative outcomes such as lower self-esteem (Burkley, Wong, & Bell, 2016). Further, increased blood pressure, depression, anxiety, and negative attitudes toward help seeking are additional ways in which masculine norms hinder health and well-being (Gerdes & Levant, 2018). Conformity to traditional masculine norms has been associated with negative mental health (Wong, Ho, Wang, & Miller, 2017). Wong et al. (2017) found that over self-reliance, playboy attitudes, and power over women were significantly associated with mental health. Some suggest that improving men's health will require educating men on behaviors that will promote health, while being mindful of the cultural influences that shape their genders identities (Gerdes & Levant, 2018; Wade, 2008).

The health and well-being of African American men need to be studied more. Specifically, the impact their intersecting identity as both Black and male should be given consideration as it might help to explain their coping behaviors as it relates to stress, coping, and the college environment in which they are situated. This chapter is broken up into seven different parts that investigates masculinity as a concept that can be used to understand health. Secondly, this chapter highlights some theories that have been used to understand how society places people into different racial and gender constructs that sustains oppression. Lastly, this chapter will explore the different coping mechanisms that have been used to highlight the unique experience of being a Black man at a university or college.

Masculinity

Masculinity is a structural concept that helps to identify and explain how males functions throughout the world (Connell, 2014). Hegemonic masculinity is regarded as the dominant cultural norm of the United States (Griffith et al., 2012). Physical capability, stable socioeconomic status, dominance, and unemotional tendencies are constructs associated with this type of masculinity (Griffith et al., 2012). Values aligned with this type of masculinity are not homogenous across various male perspectives. Black men in this regard do not enjoy the power and privilege of this masculinity, although they draw pieces of it to establish their own meanings and behaviors (Griffith et al., 2012).

Gender, Health, and Masculinity

Gender does not function as a stable manifestation of nature; it is informed through the way people behave, dress, and express themselves (Griffith et al., 2011). Gender is an important social determinant of health and it helps to guide understanding of health-related behaviors (Griffith et al., 2012). Health is an evolving process that requires the collaboration of educators, researchers, and policymakers to improve quality of life. It is believed that the social construction of gender is what plays a role in individuals realizing their optimal health (Doyal, 2001). Heterosexuality, dominant form of gender expression, is also linked to better health outcomes compared to other forms of sexuality (Perales, 2016). Traditionally, health seeking behaviors have been predominantly associated with "feminine" characteristics. The antithesis to this behavior for men is health risk taking behavior (Doyal, 2001). Due to societal influences, men and women are subjected to expectant patterns of behavior that abide by gender roles (Jones, Mendenhall, & Myers, 2016). Although men are socially and economically more advantaged than women, they have lower life expectancies that may be a result of risk-taking behaviors and adherence to gender role expectations (Griffith, Metzl, & Gunter, 2011).

Intersectionality. Born out of the social and systemic oppression and violence against women of color, intersectionality is a perspective that has been used to further understand how the identities people ascribe to influence their lives (Crenshaw, 1991). These identities, such as race, gender, socioeconomic status, and sexual orientation are a few that are now being used to explain health inequities that exist in the United States (Hankivsky, 2012). However, considerations about the potential intersections that can be made from these identities can improve and better inform public health practice (Bowleg, 2012). For Black men, research into their racial and gender identity are limited because their gender is considered a privilege; thus Black men are defined by the single subordinate identity which is being black (Curry, 2017). Curry offers an alternative perspective that being Black, and male is not a one-dimensional subordinate identity.

Multidimensionality. is a theory that seeks to investigate how various forms of identity are intertwined when trying to understand, contextualize, and fight oppression (Hutchinson, 2001). Under this theory categories such as race, gender, class, and sexual orientation must always be considered when trying to secure civil rights protections. Although multidimensionality arises out of intersectionality it did so out of the belief that historically intersectionality centered around the subordination of women of color. Within the framework of multidimensionality sexuality hierarchies are a central tenet in understanding heterosexist domination within a patriarchal society (Hutchinson, 2001). This means that heterosexual men and women of color have privileges gay, lesbian, bisexual, and transgendered people of color do not. Further, the failure to recognize these advantages and disadvantages among outgroup progressive movements is a form of patriarchal hegemony (Hutchinson, 2001; Lemelle, 2010).

Social Dominance Theory. Social dominance theory explains that societies are structured as group-based hierarchies (Sidanius, 1999). These groups are defined by, 1) age, 2) gender, and

3) arbitrary characteristics such as race and class (Sidanius, 1999). Defined dominant groups such as heterosexual white men and women have more privilege, access, and autonomy compared to subordinate groups (Sidanius, 1999). Thus, dominant group identification provides insight into how group identity forms ideologies that support and promote discrimination. Included in this theory is the subordinate male target hypothesis (SMTH). The SMTH asserts that subordinate male groups are the focus of oppression, caused primarily by dominant men (Sidanius, 1999). Consequently, subordinate men will experience more direct prejudice and discrimination compared to men and women from other racial groups.

College Environment for Black Men

At Historically White Institutions (HWIs), minorities such as African Americans and Hispanic have reported feeling discriminated against, stereotyped, and isolated (Mincey et al., 2014b; Smith, Yosso, et al., 2007; Watkins et al., 2007). In a study of 156 African American college men and women, researchers concluded that continued exposure to racial discrimination and oppression was associated with the development of a strong external locus of control where someone believes that their surroundings determine their life's outcomes (Brown, Rosnick, & Segrist, 2017). Moreover, individuals who had higher external locus of control and expressed higher levels of internalized racial oppression placed less value on higher education (Brown et al., 2017). The environment that people of color must navigate at these institutions must work to dismantle institutionalized discrimination. It must also work to uncover and dismantle the prejudices students bring with them to the university.

Education historically has been associated with upward mobility (Smith et al., 2011). For African Americans, influential leaders such as W.E.B. Dubois and Dr. Martin Luther King Jr. encouraged economic growth for African Americans through better jobs, health, and social capital (Smith et al., 2011). While educational attainment has a linear relationship with economic and social well-being, it is adversely related to psychological health for some populations, such as African Americans.

For black men enrollment at a Historically Black College or University (HBCU) or HWI can mitigate or exacerbate, respectively, race-related stress and lead to other potential health complications, as well as impact their ability to be successful (Mincey et al., 2014b). In a study comparing stressful life events such as financial stress, family stress, race-related stress, and school related stress among a group of black men at an HBCU and HWI, researchers found that

participants at a HWI reported major stressors because of school related stress, whereas HBCU attendants reported non-related school stressors as a concern (Watkins et al., 2007). Additionally, in this study, researchers discovered that students at an HWI centered discussions around racism, discrimination, and cultural conflict whereas students at a HBCU did not.

Characterizations of racism consisted of experiences such as staring, verbal expressions, and bad service (Cokley et al., 2017). A consequence of these experiences that cause stress (e.g. racism and discrimination) is that they can have a deleterious effect on psychological well-being (Reed et al., 2010; Watkins et al., 2007). Black men who attend HWIs are subject to more experiences of social exclusion, racial microaggressions, and stress due to the embedded nature of institutional racial ideologies (Smith et al., 2011). Further, evidence suggests that as educational attainment increases, so does stress due to microaggressions (Smith et al., 2011). Considering that there is an association between attainment and stress, Black` men are burdened with emotional distress at the expense of academic achievement and social mobility.

College Environment and Black Masculinity

Campus environments are intended to promote learning, community engagement, and inclusion; however, this ideal is not the reality for all students. Males at an HBCU have reported feeling supported and being a part of a positive environment, while men at the HWI have discussed their campus environments as a place of stress (Mincey et al., 2014b). Differences in how black males perceive their campus environments may be indicative of how they conceptualize their masculinity.

Due to the misconceptions portrayed in media black men on college campuses feel a sense of responsibility to not be the stereotype (McClure, 2006). While there are many ways to combat stereotypic views, some black men on college campus' join fraternal organizations. These

organizations provide black college men a supportive group that emphasizes community involvement, empowerment, and success (McClure, 2006). Members of the fraternity involved in this study believed that their fraternity helped to address the mis-information of black men constantly seen in the media (McClure, 2006). Historically, masculinity has been applied to men of color through the lens of hegemonic masculinity, which was constructed to explain white heterosexual male ideology, beliefs, and behaviors (Connell, 1995). It is through this lens that black men have been inaccurately represented within research pertaining to black manhood.

To bridge the gap in literature, studies on Black men ideology of manhood were conducted (Mincey, Alfonso, Hackney, & Luque, 2014a). Within a study of college Black men from one HBCU and one HWI, Black men reported different ideas of what it meant to be a man and what it meant to be a Black man. Based on their findings, (Mincey, 2014) developed a scale, the Masculinity Inventory Scale, that measured how Black men constructed their masculine views.

College Environment, Stress and Coping

African Americans are exposed to gendered racism at HWI as often as every two weeks (Smith, Yosso, et al., 2007; Swim, Hyers, Cohen, Fitzgerald, & Bylsma, 2003). Exposure to racism is stressful and plays a part in the lived experiences of African Americans. Stress also impacts academic performance and social well-being for African American students (Goodwill, Watkins, Johnson, & Allen, 2018).

Coping strategies are techniques that are used to manage stress. Some suggest that Black men are resistant to discussing psychological well-being with others due to the stigma associated with it (Ward & Besson, 2013). Not only is mental health a taboo topic for this population, it is underutilized (Hudson, Eaton, Banks, Sewell, & Neighbors, 2018). In an exploratory study about stress and coping among Black college men, researchers identified three types of coping strategies

commonly utilized: isolated coping, engaged coping, and disengaged coping (Goodwill et al., 2018). Isolated coping focused on relying on yourself and expressing anger or resentment about a situation. Engaged coping consisted of partaking in physical activities, hobbies, and social interaction, and disengaged coping was defined by not dealing with emotions, letting situations go undiscussed, or just forgetting about a situation (Goodwill et al., 2018).

Africultural Coping

Africultural coping is grounded in African centered philosophy that suggests that everything in the universe is connected and because of this harmonization, Africans of the diaspora have coping behaviors that are reflective of this philosophy (Utsey, Adams, & Bolden, 2000). The development of the Africultural Coping Systems Inventory (ACSI) was to address the gaps in other coping scales/inventories that did not accurately address the lived experiences and cultural differences of African Americans (Utsey et al., 2000). According to authors, Africultural coping includes 1. distraction and avoidance, 2. engaging in spiritual or religious activities, 3. collective coping, and 4. ritual-centered coping (Blackmon et al., 2016). Distraction and avoidance are described as adaptative reactions to environmental stressors. Spirit-centered coping had to deal with universal connectivity and connection with the creator. Collective coping could be described as group centered activities to cope with stressful situations, and ritual-based coping could consist of burning incense, lighting candles, and/or performing libations to manage stress (Constantine, Donnelly, & Myers, 2002).

Utsey et al. (2000), also concluded that collective coping was grounded in African-based cultural values which places the group over the individual. This understanding of coping and the stressors associated with being a college student on a campus that may harbor racial environments is a major reason to investigate the coping strategies that are used amongst color of people to better

inform collegiate programs and counselor communications. Furthermore, to be successful in school students need adaptative coping skills (Hope, Velez, Offidani-Bertrand, Keels, & Durkee, 2018). Without the necessary skills to cope students may find it difficult to be successful.

Chapter 3: Methodology

Masculinity and coping behaviors among Black men have been an understudied field. Few studies have looked at the influence masculinity construction has on the health behaviors of this population and fewer studies have researched college aged men specifically (Mincey et al., 2015). To fill this gap, this study aimed to better understand how Black men identify and construct their masculinity and the relationship between this masculine identity and their stress coping behavior. Research has shown college campuses to be a source of stress for Black men (Mincey et al., 2015). Additionally, literature has found stress related to racism and microaggressions have attributed to negative health outcomes such as anxiety, high blood pressure, and headaches among Black men (Smith, Allen, et al., 2007; Smith et al., 2011; Watkins et al., 2007).

Recruitment and Sampling Procedures

Participants in this study were Students, Faculty, Staff, and Alumni from an HWI in the Southwestern region of the United States. Inclusion criteria for study participants include the following: currently or previously enrolled/employed at the university being studied, 18 years of age and older, and self-identify as African American or Black male. Data collection took place over a three-month period from December 2019 to February 2020. Purposive and snowball sampling were used to recruit participants for this study. Purposive sampling is used when research participants meet a specific set of requirements (Baumgartner, 2013). Due to the specificity of the participant demographic, Black men, this sampling is justified. Surveys were distributed online through the University's database and via list serves (e.g. classes, student athletes, Black fraternities and organizations).

Research design and Protocol

A cross-sectional survey was used to examine the relationship between masculinity and coping behaviors among Black men. Surveys were distributed online through the University's database using Qualtrics. For the purpose of trying to gather information about masculinity and coping among a specific group of Black men at the University of Oklahoma this design best suited the study because there were no control groups and inferences can be made without the researcher controlling any specific variable.

Measures

Using the Brief Masculinity Inventory Scale (MIS) and the Brief COPE scale, this study investigated if there was a relationship between the type of masculinity Black men identify with more and their preferred coping style (Carver, 1997; Mincey et al., 2015)

Coping. The Brief COPE scale which consists of 14 scales will be used to measure coping (Carver, 1997). According to this scale, there are 14 coping styles: 1) *active coping-* actionable efforts towards dealing with a stressor; 2) *planning-* strategizing about ways to take action; 3) *positive reframing-* changing perspective of a negative situation into a positive one; 4) *acceptance-* accepting the stressor for what it is; 5) *humor-* laughing as a mechanism to cope; 6) *religion-* spiritual release as a mechanism to cope; 7) *emotional support-* seeking support and understanding from others; 8) *instrumental support-* seeking help and advice from others; 9) *self-distraction-* using other activities to take your mind off of the stressor; 10) *denial-* refusal to believe the stressful event happened; 11) *venting-* expressing your feelings; 12) *substance use-* using alcohol or drugs to help yourself get through it; 13) *behavioral disengagement-* giving up trying to cope with the stress; 14) *self-blame-* blaming yourself for the situation (Carver, 1997). Respondents indicated how often they use or engage in the stated strategy. Response options

were measured on a 4-point Likert scale, from 0 (I haven't been doing this at all) to 3 (I've been

doing this a lot). (Mincey et al., 2015), changed response "I've been doing this a medium

amount" to "I've been doing this occasionally", after conducting a pilot test that showed the

original language to be confusing. For the sake of trying to reduce confusion, the current study

adopted this language. To calculate the subscales, the two items associated with each subscale

were added together. Receiving a high score on any subscale indicated the respondents use of

that particular stress coping strategy (Greer, 2007).

The Africentric Latent Model (ALM) was used to analyze the brief COPE (Greer, 2007).

This model was created to be culturally relevant to the understanding of coping behaviors among

African-Americans. The ALM groups the subscales of the Brief COPE into four constructs that

make up the ALM. The constructs of this model are 1) *Interconnectedness-* connecting with

others as a means of emotional support, 2) *Spirituality*, 3) *Problem-oriented coping-* behaviors

and/or attitudes that target the problem experienced, and 4) *Disengagement-* maladaptive

behaviors and/or attitudes. For this research, the subscales *emotion support, instrumental*

support, and *venting* will be grouped under the construct of *Interconnectedness*. Subscales

planning, acceptance, and religion will be associated with *Spirituality*. *Active, positive*

reframing, humor, self-blame will be associated with *Problem-oriented coping*, and *self-*

destruction, denial, substance use, and *behavioral disengagement* will be associated with

Disengagement. Calculating the values of the four constructs is done by adding together the

values of the subscales connected with each construct. Receiving a high score on any subscale

indicates that there is a tendency to use that coping technique.

Masculinity. Masculinity was measured using the Brief MIS, a shortened version of the

Masculinity Inventory Scale (MIS) (Mincey et al., 2014a). The MIS was developed as a

culturally sensitive scale for Black men to understand the influences and elements that define

masculinity for Black men (Mincey et al., 2015). While the original scale consisted of 50 items,

the Brief MIS was adapted to 25 items that measured the five subscales of masculinity:

mainstream society, black masculinity, mainstream society/black masculinity, primary group,

and primary/peer group. *Mainstream Society* was defined as the societal views of what a man

should be and act. It was measured by asking how much participants agreed with statements,

such as, "a man provides for his family, children, or other family members." *Black Masculinity*

was defined as the view of what it means to be a black man. It was measured by statements such

as, "it's hard overcoming how we're viewed as Black men" and "Black men have fewer

opportunities than White men." *Primary Group* was defined as the influence's family have on

male development. It was measured using statements such as, "the women in my family showed

me how to be a man." *Mainstream/Black Masculinity* was defined as societal views of what

being a Black man is. It was measured using statements such as, "my father has instilled in me

the characteristics of a man." "the men in my family showed me how to be a man" and 5)

Primary/Peer Group was defined as influence of fathers and friends on male development. Items

were measured with agreement to statements, such as, "having friends back me up is powerful"

and "it's easier to go through my day when I have someone to talk to."

Responses to such statements were measured on a 5-point Likert scale, ranging from 1 (strongly

disagree) to 5 (strongly agree). Similar to the MIS, the mean of each subscale was calculated.

Higher mean scores of subscales indicated higher endorsement of the respective masculinity

(Mincey et al., 2015).

Threats to Validity

Threats to validity of which to be mindful are history. For participants who are upperclassmen (sophomores, juniors, seniors, graduate students), the University has been home to racial acts that given rise to students coming together to protest these events and demand institutional change regarding those cases. Participants who were present during these events could answer questions differently than their peers who were not present at the time they occurred. Another threat is selection bias. By limiting this study to Black men at the University of Oklahoma, results cannot be generalized to all black men.

Data Management

Data will be collected and stored in Qualtrics.

Data analysis

First an Exploratory Factor Analysis was conducted to explore the validity of the items in the Masculinity Inventory Scale. An oblique rotation was conducted to determine the correlation between factors. Either a principle's axis factor would be used to extract the factor structure if the normality assumptions are violated or a maximum likelihood extraction method will be used if all normality assumptions are met. Lastly, a Cronbach's alpha was used to determine the reliability of each masculinity subscale (Cronbach, 1951).

Survey data were analyzed using SPSS software. Correlation analysis using Pearson will be run with Brief masculinity subscales and Africentric COPE subscales to explore the relationship between variables. Separate ANOVAs will be conducted to examine the differences between class rank (students only), sexual orientation, and each masculinity subscale. Based on G power analysis this study needs 280 participants in order to find significance.

Chapter 4: Manuscript

Title: Masculinity and Coping Among Black Men at an HWI

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Abstract

Objective. 1) To develop a Brief Masculinity Inventory Scale and use it to explore influences on coping behaviors and 2) to examine how Black men at a Historically White Institution cope with stress.

Methods. A cross- sectional online survey was distributed to Black males from an HWI in the southwestern region of the United States. Data collection took place between December 2019-February 2020. Survey participants consisted of 108 Black men.

Results. Cronbach's alpha for all subscales except *Male influences* indicated acceptable reliability: *Mainstream Society* ($\alpha = 0.848$), *Black Masculinity* ($\alpha = 0.862$), *Male Influences* ($\alpha = 0.400$), *Primary Group* ($\alpha = 0.835$), *Primary/Peer Group* ($\alpha = 0.717$). The alpha value for the complete scale was ($\alpha = 0.712$).

Conclusions. Black men in this sample most identified with mainstream society and black masculinity. The type of masculinity identified with determined whether a positive or negative relationship existed with the type of coping behavior used. Lastly, there were differences in the degree to which participants identified with a particular masculinity identification and their sexual orientation.

Introduction

According to the NationalVitalStatisticsReport (2019), Black men have the lowest life

expectancy at birth compared to other racial and ethnic groups. Concurrently, they have the

highest unemployment rate 5.8% compared to Black women 4.8%, White men 2.9%, and White

women 2.8% (Statistics, 2020) . Black men are six times more likely to be incarcerated as white

men; black males 18-19 years of age are 12 times more likely than white men to be incarcerated;

and black males 20- 24 years are 7.5 times more likely than white men and 2.3 times more likely

than Hispanic men to be incarcerated (Bronson, 2019). Additionally, Black men are more likely

to experience discrimination and poverty over their life course, which has been associated with

greater mental health issues (Britt-Spells, Slebodnik, Sands, & Rollock, 2018). These social,

cultural, and economic conditions Black men have experienced has been attributed to racism and

discrimination and contributes to acute and chronic stress. These social injustices not only impact

Black men's well-being, but they have also been linked to elevated blood pressure, tension

headaches, cardiovascular disease, and other adverse health outcomes (Hammond, 2012;

Hammond & Mattis, 2005; Mahalik et al., 2006; Mincey et al., 2014b; Smith, Allen, et al.,

2007).

Although educational attainment is usually linked with improved health status, this may

not be the case for Black men (Kaplan et al., 2017; Williams & Sternthal, 2010). The college

environment can be particularly stressful for Black men who report experiences with racial

discrimination throughout their collegiate career (Hill et al., 2007; Hotchkins & Dancy, 2015;

Smith, Allen, et al., 2007; Smith et al., 2011; Smith, Yosso, et al., 2007). Further, research has

found Black males at historically white institutions to report racism, discrimination, and cultural

conflict as sources of stress (Smith, Allen, et al., 2007; Watkins et al., 2007).

Blackmon (2016) reported that African American students found being at institutions of

higher learning was a form of overachievement. This stress may be amplified among Black and

African American students who experience John Henryism. John Henryism is a theory of high

effort coping that was developed for the Black community in response to overcoming obstacles

due to racism and discrimination (Sanders & Mahalingam, 2012). In a study of 156 African

American college men and women, researchers concluded that continued exposure to racial

discrimination and oppression was associated with the development of a strong external locus of

control where someone believes that their surroundings determine their life's outcomes (Brown

et al., 2017). For Black men, enrollment at a Historically Black College or University (HBCU) or

Historically White Institution (HWI) has been found to mitigate or exacerbate, respectively, race-

related stress (Mincey et al., 2014b). In a study comparing stressful life events such as financial

stress, family stress, race-related stress, and school related stress among a group of black men at

an HBCU and HWI, researchers found that participants at a HWI reported major stressors to

include school related stress, whereas HBCU attendants reported non-related school stressors as

a concern (Watkins et al., 2007). Additionally, students at an HWI centered discussions around

racism, discrimination, and cultural conflict whereas students at a HBCU did not.

Research has examined the relationship between masculinity and mental health among

Black men (Hudson et al., 2018). Historically, masculinity is a field of study that addresses

manly ideals, behaviors, and stereotypes (Hammond & Mattis, 2005). Hegemony is the social,

cultural, ideological influence exerted by a dominant group. Lemelle (2010) views hegemony as

a strategy for power, that can be reproduced and maintained in a variety of different social

interactions and relationships among any groups within the hierarchy. Therefore, hegemonic

masculinity is a concept that recognized men, through patterned behaviors and institutional

methods have created and sustained their dominance over women (Connell & Messerschmidt,

2016). When initially introduced, hegemonic masculinity was used to analyze middle class

Australian society (Connell, 1995). Although novel, Chaney (2009) found this theory to be

inadequate because it did not address the power hierarchies that existed between men of different

races, ethnicities, or sexual orientations, nor did it highlight the unique experiences and

perceptions Black men have about masculinity. More research is needed to understand how

beliefs about manhood and masculinity affect physical and mental health for Black men

(Hammond & Mattis, 2005; Mincey et al., 2015; Ward, 2005). Similarly, it is unknown how

race, class, sexual orientation, and other systems of oppression intersect to influence health for

Black men (Griffith, 2018). Griffith (2018) recommends that men's health should be viewed

through contexts and conditions that locate their health in the larger social, cultural, and

economic contexts to better understand how men recreate and redefine masculinity.

The purpose of this study is to explore on the concepts of masculinity and coping as it

relates to Black men at a HWI. Furthermore, this study seeks to 1) develop a Brief Masculinity

Inventory Scale, 2) explore how masculinity influences coping behaviors of Black men at a

HWI, and 3) examine differences in masculinity identification and stress coping by sexual

orientation.

Methods

Participants

Students, Faculty, Staff, and Alumni from an HWI in the Southwestern region of the

United States were recruited to participate in a cross- sectional, online survey. Inclusion criteria

for study participants include the following: undergraduate and graduate standing, currently or

previously enrolled/employed at the university being studied, 18 years of age and older, and

self-identify as African American or Black male. Data collection took place between December

2019- February 2020.

Recruitment & Procedure

Purposive and snowball sampling were used to recruit participants for this study (n =

108). The survey was distributed electronically through the University's online database and

via list serves (e.g. classes, student athletes, Black fraternities and organizations). Informed

consent was obtained on the first page of the online survey.

Measures

In addition to demographic items (e.g. age, sexual orientation), participants also

responded to items about masculinity and coping. For full demographic information, see Table 1.

Brief MIS Scale Development. Masculinity was measured using the Brief MIS, a

shortened version of the Masculinity Inventory Scale (MIS) (Mincey et al., 2014a). The MIS was

developed as a culturally sensitive scale for Black men to understand the influences and elements

that define masculinity for Black men (Mincey et al., 2015). While the original scale consisted of

50 items, the Brief MIS was adapted to 25 items that measured the five subscales of masculinity:

mainstream society, black masculinity, mainstream society/black masculinity, primary group,

and primary/peer group. *Mainstream Society* was defined as the societal views of what a man

should be and act. It was measured by asking how much participants agreed with statements,

such as, "a man provides for his family, children, or other family members." *Black Masculinity*

was defined as the view of what it means to be a black man. It was measured by statements such

as, "it's hard overcoming how we're viewed as Black men" and "Black men have fewer

opportunities than White men." *Primary Group* was defined as the influence's family have on

male development. It was measured using statements such as, "the women in my family showed

me how to be a man." *Mainstream/Black Masculinity* was defined as societal views of what

being a Black man is. It was measured using statements such as, "my father has instilled in me

the characteristics of a man." "the men in my family showed me how to be a man" and 5)

Primary/Peer Group was defined as influence of fathers and friends on male development. Items

were measured with agreement to statements, such as, "having friends back me up is powerful"

and "it's easier to go through my day when I have someone to talk to."

Responses to such statements were measured on a 5-point Likert scale, ranging from 1 (strongly

disagree) to 5 (strongly agree). Similar to the MIS, the mean of each subscale was calculated.

Higher mean scores of subscales indicated higher endorsement of the respective masculinity

(Mincey et al., 2015).

      Brief COPE. Stress coping was measured using the Brief COPE scale, a 28- item scale

that measured 14 constructs (two items per construct) of stress coping: active coping, planning,

positive reframing, acceptance, humor, religion, emotional support, instrumental support, self-

distraction, denial, venting, and substance use (Carver, 1997). *Active coping* was defined as

actionable efforts used to deal with a stressor and was measured using two items: "I've been

concentrating my efforts on doing something about the situation I'm in" and "I've been taking

action to try to make the situation better." *Planning* was defined as strategizing about ways to

take action to reduce stress and was measured by how much participants agreed with the

following statements, "I've been trying to come up with a strategy about what to do" and "I've

been thinking hard about what steps to take." *Positive reframing* was defined as changing

perspective of a negative situation into a positive one and was measured by how much

participants agreed with the following statements, "I've been trying to see it in a different light,

to make it seem more positive" and "I've been looking for something good in what is happening.

Acceptance was defined as accepting the stressor for what it is and was measured by the following statements, "I've been accepting the reality of the fact that it has happened" and "I've been learning to live with it." *Humor* was defined as laughing as a mechanism to cope and was measured by the following statements, "I've been making jokes about it" and "I've been making fun of the situation." *Religion* was defined as the use of spiritual release as a coping mechanism. The two items to measure this construct were, "I've been trying to find comfort in my religion or spiritual beliefs" and "I've been praying or meditating." *Emotional support* was defined as seeking support and understanding from others and was measured by the following statements, "I've been getting emotional support from others" and "I've been getting comfort and understanding from someone." *Instrumental support* was defined as seeking help and advice from others and was measured using two items: "I've been trying to get advice or help from other people about what to do" and "I've been getting help and advice from other people." *Self-distraction* was defined as using other activities to take your mind off of the stressor. Two items used to measure self-distraction were, "I've been turning to work or other activities to take my mind off things" and "I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping." *Denial* was defined as- refusal to believe the stressful event happened. Two items used to measure denial were, I've been saying to myself this isn't real" and "I've been refusing to believe that it has happened." *Venting* was defined as expressing your feelings. Two items used to measure venting were, "I've been saying things to let my unpleasant feelings escape" and "I've been expressing my negative feelings." *Substance use* was defined as using alcohol or drugs to reduce stress. Two items used to measure substance use were, "I've been using alcohol or other drugs to make myself feel better" and "I've been using alcohol or drugs to help me get through it." *Behavioral disengagement* was defined as

giving up trying to cope with the stress. Two items used to measure disengagement were, "I've

been giving up trying to deal with it" and "I've been giving up the attempt to cope." *Self-blame*

was defined as blaming yourself for the situation and was measured using two items: "I've been

criticizing myself" and "I've been blaming myself for things that happened (Carver, 1997).

Responses for all Brief COPE items were measured on a 4-point Likert scale: (0 = I

haven't been doing this at all), (1 = I've been doing this some of the time), (2 = I've been doing

this most of the time), and (3 = I've been doing this a lot). Mincey et al (2015), changed the

response "I've been doing this a medium amount" to "I've been doing this some of the time",

after conducting a pilot test that showed the original language was confusing. Thus, the current

study adopted this language. To calculate the subscales, the two items associated with each

subscale were added together. High score on any subscale indicated the respondents used that

particular stress coping strategy more often (Greer, 2007).

Next, Africentric Latent Model was used to analyze the brief COPE (Greer, 2007). This

model was created to provide a culturally relevant understanding of the Brief COPE among

African Americans. This model groups the subscales of the Brief COPE into four sub-constructs,

Interconnectedness, *Spirituality*, *Problem-oriented coping*, and *Disengagement*.

Interconnectedness was defined as one's connection with others as a means of emotional

support. Sub-constructs of interconnectedness include emotional support, and venting.

Spirituality was defined as relying and/or seeking assistance from God or a higher power to work

through challenges. Sub-constructs of spirituality include planning, religion, and acceptance.

Problem-oriented coping was defined as behaviors and/or attitudes that target the problem

experienced. Sub-constructs of problem- oriented coping include active coping, positive

reframing, humor, and self-blame. *Disengagement* was defined as maladaptive behaviors and/or

attitudes. Sub-constructs of disengagement within this model include self-distraction, behavioral disengagement, substance use, and denial. Sub-construct items were measured by summing the values of the Brief COPE subscales connected with each construct. Cronbach's alpha values for the sub constructs within the current study indicated acceptable reliability: for *Interconnectedness (α= .723)*, for *Spirituality (α= .640)*, for *Problem-oriented coping (α= .624)*, and for *Disengagement (α= .732)*. Higher score values on any subscale indicated a greater tendency to use that coping technique.

Data analysis

All survey data were analyzed using SPSS 24 software (IBM Corp, 2016). After examining frequencies of the demographic information, an Exploratory Factor Analysis (EFA) was conducted to explore the validity of the items in the Brief Masculinity Inventory Scale. A principle's axis factoring was used to extract the factor structure because the normality assumptions were violated, see Table 3. An oblique rotation was employed to meet the necessary assumptions of a simple structure, and items that cross loaded on multiple factors over 0.20 or had factor loadings below 0.40 were deleted (DeVellis, 1991; DiIorio, 2005). Cronbach's alpha will be used to determine the reliability of each masculinity subscale (Cronbach, 1951).

Pearson correlation analysis were conducted to explore the relationship between the Brief masculinity subscales and Africentric COPE subscales variables. Additionally, independent t-tests were conducted to examine if masculinity subscales were significantly different between sexual orientation categories.

Results

Survey participants consisted of 108 Black men. Participants ranged in age from 18 to 52 years (M = 24.6, SD = 7.4). Seniors (31.2%) and Graduate students (20.8%) accounted for more than half of the participant pool. Overall, 80.8% of respondents identified as heterosexual and 17.6% identified as gay, bisexual, or other (GB+). Additionally, 60.4% of participants were involved in a school activity (e.g. fraternity, student athlete, clubs). Almost half of respondents (48.1%) were working part-time, and 41 were first-generation college students. Cases where the race selected was not Black and those missing 10% or more values were deleted (n = 30). After data were cleaned, 78 surveys were used for analysis. See table 1 for full demographic information.

Brief MIS EFA

The scree plot indicated a drop off around factors 4 or 5, suggesting the value of a 5 factor model (Mincey et al., 2015). These five factors accounted for 59% of the total item variance. Three items from the Brief MIS ("I have to prove myself in social situations", "I have to prove to myself and everybody that my life has purpose", and "When I carry myself like my father or better I'll be a man") were removed from the subscale due to cross loading. As a result, the final model had a total of 22 items that loaded onto a five- factor model. The fourth subscale that measured mainstream society/black masculinity in the originally developed 50- item measure (Mincey et al., 2014a) was converted to Male Influences dues to items being related to fathers and men in the family. See Table 2 for factor loading of the final 22- item scale.

The Cronbach's alpha for all subscales except *Male influences* indicated acceptable reliability: *Mainstream Society* (α = 0.848), *Black Masculinity* (α = 0.862), *Male Influences* (α = 0.400), *Primary Group* (α = 0.835), *Primary/Peer Group* (α = 0.717). The alpha value for the complete scale was (α = 0.712).

Masculinity and Coping

Bivariate correlations examined relationships between masculinity scales using the Brief MIS and coping strategies using the Brief COPE. *Black Masculinity* was positively correlated with *Spirituality coping* (r = .40, *p < .01*) and *Problem-Oriented coping* (r = .36, *p < .01*). Within Spirituality, *black masculinity was positively correlated with Planning* (r = .28, *p < .05*) and *Acceptance* (r = .31, *p < .01*).

Mainstream Society were negatively correlated with *Interconnectedness* (r = -.27, *p < .05*). *Male influences* were negatively correlated with *Interconnectedness* (r = -.32, *p < .01*). When interconnectedness was analyzed by each subscale, correlation values indicated that *Mainstream Society* was negatively correlated with *Instrumental support* (r = -.27, *p < .05*). Correlation analysis with the subscales of Problem- oriented coping showed that *Mainstream society* was negatively correlated with Humor (r = -.24, *p < .05*). *Black masculinity* was positively correlated with Active coping (r = .39, p < .01) and Positive reframing (r = .27, *p < .05*). *Male Influences* was negatively correlated with *Instrumental support* (r= -.33, *p < .01*), and *Primary Group* was positively correlated with *Emotional support* (r= .28, *p < .05*). See Table 5.

Masculinity and sexuality

Those who identified as heterosexual were found to have a significantly higher *Mainstream society* score (M = 20.6, SD = 3.3) than participants who identified as GB+ (M = 16.7, SD = 5.6); (t (16.3) = 2.6, p < .018). Levene's test for equality of variance found unequal variance; thus, the degrees of freedom were adjusted from 76 to 16.3. Further, heterosexual males had a significant difference in *Male influence* (M = 13.7, SD = 2.9) than GB+ identified males (M = 10.8, SD = 3.7); (t (76) = 3.2, p < .002). Levene's test indicated equal variance.

Additionally, Black Masculinity, Primary Group, or Primary/Peer Group were not significantly different between sexual orientation categories (See table 4).

Discussion

This study built on previous studies that revealed a relationship between the type of masculinity of Black men and the type of coping methods they use to deal with stress (Mincey et al., 2015). Firstly, this study sought to develop a Brief Masculinity Inventory Scale (Brief MIS). Our findings suggest this scale adequately measured masculinity of Black men. Further, it provided a shorter version of the MIS that effectively captured the central ideas of black masculinity. The Mainstream Society/Black Masculinity construct from the MIS was converted to Male Influences for the Brief MIS because items related to this construct was measured by statements such as, "the men in my family showed me how to be a man," "my father instilled in me the characteristics of being a man," and "I wasn't prepared to be a man, but I was on my own." The items loaded strongly for this construct indicating that the men in this study were not heavily influenced by the men in their families. Additionally, this construct was negatively associated with the subconstruct coping strategy of interconnectedness, which may suggest that men within a family unit are essential to coping strategies that highlight the importance of family unity.

Similar to Mincey's study (2015), Black men in our sample endorsed *Planning*, *Acceptance*, *Active*, and *Positive reframing* as the most common stress coping strategies. Based on these results, Black men in our sample reported cope with stress in positive ways. Grouping the Brief COPE subscales, based on the Africentric Latent Model, revealed support of the *Mainstream Society* and *Male Influences* subscale was negatively related to the subconstruct of *Interconnectedness*. Support of the *Black Masculinity* subscale was associated with the

mechanisms of *Problem-oriented coping* and *Spirituality*. As Black men increase educational

attainment, research has found their stress levels increase, suggesting that managing their stress

is necessary to succeed in such environments (i.e. academic institutions) (Brown et al., 2017;

Smith et al., 2011).

Within Black communities, homophobia, the dislike of or prejudice against homosexual

people, has been an issue that highlights the restrictiveness of masculinity and how traditional

ideology impacts well-being (Amola & Grimmett, 2015; Ward, 2005). Amola & Grimmett

(2015), found that gay and bisexual Black males who experienced higher levels of internalized

homophobia were more likely to engage in risky sexual behaviors, higher substance use, and

report higher levels of mental health issues. For these men, sexual minority status was not

aligned with being African American, thus they did not feel comfortable openly identifying as

gay/bisexual men (Amola & Grimmett, 2015).

Sexual minority status is considered a subordinate identity in dominant ideologies about

sexuality (Griffith, 2018). Although there were significant differences in the endorsement of

Mainstream Society and *Male Influences* between groups, both groups reported a positive

correlation with the item I wasn't prepared to be a man, but I was on my own. This may indicate

that this sample did not have men in their families to look up to or model themselves after.

Limitations

Limitations of this study included a small sample (n = 78). Also, due to the sampling

methods and cross- sectional research design, no casual claims can be made about Black men or

even men at the campus from which data were collected. Additionally, survey respondents may

have over or underreported their beliefs about different aspects of masculinity. This over or

underreporting may have missed significant associations between different aspects of

masculinity. Male Influence subscale had negative correlations that suggest men in participants families had no influence in their lives. However, items did not take into consideration male influences or role models outside of the family unit.

Despite these limitations, this study adds to the current literature about masculinity and stress coping among Black males at an HWI, an understudied area. Further, this research developed a scale, that allows researchers to uncover ideas about being a man and a Black man. It highlights that sexual orientation influences masculine ideology, which impacts coping strategy. Hankivsky (2012) asserts that intersectional frames allow researchers to contextual social categories and their relationships as a means to explore health inequities. With intersectional frames in mind, this study highlights sexual orientation as an important category that should be looked at further in understanding Black males and coping.

Implications

Based on the findings from this study, future research in the area of masculinity and coping in Black men should focus on investigating the role all men have in developing masculine ideals. Specifically, the contexts in which these scripts are being communicated and who is communicating those messages. Additionally, researchers should look to contextualize these scripts within the social, cultural, and economic conditions that may be more prevalent to Black men such as incarceration, unemployment, lack of adequate education, lack of property ownership, and adherence to strict gender role performance (Griffith, 2018; Malebranche, 2003).

Future research might investigate whether this scale is appropriate for Black men of all ages and backgrounds. If found to be appropriate among different settings and groups, this measure could explore could how masculinity influences health outcomes (Hammond, 2012; Mincey et al., 2015).

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Table 1. Characteristics of Survey Participants (N=78)

Characteristics	N	n (%)
Age	85	
18		5 (6.4)
19		11 (14.1)
20		6 (7.7)
21		14 (17.9)
Over 21		42 (60.3)
Class rank	77	
Freshman		7 (9.1)
Sophomore		13 (16.9)
Junior		8 (10.4)
Senior		24 (31.2)
Graduate Student		16 (20.8)
Other		9 (11.7)
1St Generation Student	78	
Yes		32 (41)
No		42 (59)
Sexual Orientation		n= 78
Heterosexual		63 (80.8)
GLB+		15 (19.2)
Activities	78	
No		31 (39.7)
Fraternity		12 (15.4)
Student Athlete		1 (1.3)
On-Campus clubs		24 (30.8)
Off-Campus clubs		2 (2.6)
Other		8 (10.3)
Money	78	
Working part-time		37 (48.1)
Working full-time		23 (29.9)
On scholarship		4 (5.2)
Loans		3 (3.9)
Work study		4 (5.2)
Other		6 (7.8)

Table 2. Brief Masculinity Inventory Scale Factor Analysis

Item content	Black masculinity	Mainstream society	Male influences	Primary Group	Peer/Primary group
1. There are certain things a man must go through in order to become a man	-0.09	**0.733**	-0.161	-0.196	-0.084
2. A man does things he may not want to do to get the job done	0.057	**0.768**	-0.185	-0.064	0.001
3. A man handles his responsibilities	0.119	**0.774**	-0.015	0.069	0.091
4. A man provides for his family, children, or other family members	0.029	**0.846**	-0.064	0.003	0.055
5. A man supports himself completely	-0.048	**0.696**	0.263	0.199	-0.095
6. I have to prove stereotypes against Black men wrong	**0.686**	0.077	0.117	-0.045	0.07
7. It's hard overcoming how we're viewed as Black men	**0.835**	0.089	0.004	-0.098	0.012
8. I have to deal with a lot of negative stereotypes	**0.798**	0.026	-0.049	0.068	0.1
9. White men are introduced to more things than Black men	**0.813**	-0.099	0.025	-0.167	-0.208
10. Black men have fewer opportunities than White men	**0.777**	-0.331	-0.102	-0.066	-0.159
11. The men in my family showed me how to be a man	-0.053	0.349	**-0.706**	-0.143	0.024
12. The women in my family informed me on how to be a man	-0.023	0.052	-0.033	**-0.823**	0.188
13. My mother showed me how to work hard	0.028	0.1	0.193	**-0.875**	0.031
14. My grandmother showed me how to work hard	0.055	-0.033	0.083	**-0.634**	0.083
15. My mother gave me the confidence and strength to keep moving	0.116	-0.023	-0.158	**-0.857**	-0.102
16. I wasn't prepared to be a man, but I was on my own	0.092	0.161	**0.692**	0.207	0.035
17. I have to prove myself in academic situations	**0.663**	0.17	0.031	0.122	0.162
18. A man takes care of everything	-0.071	**0.676**	0.038	-0.092	-0.289
19. My father has instilled in me the characteristics of a man	0.028	0.08	**-0.882**	0.214	0.048
20. I admire the way that my father carries himself	0.048	0.06	**-0.878**	0.244	0.039
21. Having friends back me up is powerful	-0.045	-0.061	-0.063	-0.247	**0.743**
22. It's easier to go through my day when I have someone to talk to	0.072	-0.1	0.009	-0.001	**0.873**

Table 3. Item Distribution Brief MIS

	M	SD	Skewness	Kurtosis
Item 1	3.49	1.203	-0.52	-0.607
Item 2	3.95	1.056	-1.188	1.258
Item 3	4.45	0.847	-2.201	6.065
Item 4	4.17	0.999	-1.468	2.228
Item 5	3.79	1.121	-0.775	-0.163
Item 6	3.79	1.199	-0.937	0.129
Item 7	4.03	1.162	-1.428	1.416
Item 8	3.82	1.102	-0.949	0.399
Item 9	4.12	1.081	-1.375	1.569
Item 10	4.18	1.148	-1.472	1.343
Item 11	3.78	1.286	-0.934	-0.22
Item 12	3.82	1.114	-1.082	0.704
Item 13	4.35	0.895	-1.642	2.743
Item 14	3.81	1.129	-0.721	-0.256
Item 15	4.32	1	-1.888	3.484
Item 16	2.59	1.314	0.488	-0.793
Item 17	4.03	1.057	-1.273	1.22
Item 18	3.09	1.175	0.068	-0.892
Item 19	3.45	1.474	-0.446	-1.294
Item 20	3.4	1.435	-0.471	-1.146
Item 21	4.28	0.754	-1.082	1.388
Item 22	4.15	0.898	-1.084	1.177

Table 4. Sexual Orientation and Masculinity Subscales Differences

	Group 1 M (SD) N=63	Group 2 M (SD) N=15	*p* value
Mainstream Society	20.6 (3.3)	16.7 (5.6)	.018
Male Influences	13.7 (2.9)	10.8 (3.7)	.002
Black Masculinity	24.3 (4.7)	22.7 (7.0)	.407
Primary Group	16.4 (2.9)	15.6 (5.0)	.528
Primary/Peer Group	8.5 (1.3)	8.1 (2.0)	.505

Table 5. Africentric COPE Scales and Masculinity Correlation Values

	Masculinity Subscales				
	Mainstream Society	Male influences	Primary Group	Primary/Peer Group	Black Masculinity
Interconnectedness	-.269*	-.322**	0.18	0.11	0.09
Venting	-0.13	-0.17	-0.13	0.02	0.16
Emotional support	-0.21	-0.17	.279*	0.07	0.05
Instrumental Support	-.270*	-.333**	0.14	0.11	0.02
Spirituality	0.04	-0.02	0.10	-0.04	.396**
Planning	0.09	0.03	-0.03	-0.04	.285*
Religion	-0.02	-0.04	0.04	-0.09	0.17
Acceptance	-0.03	-0.04	0.18	0.17	.312**
Problem Oriented Coping	-0.04	-0.01	0.06	0.19	.356**
Active	-0.03	-0.10	0.13	0.08	.381**
Positive reframing	0.00	-0.08	0.04	0.11	.270*
Humor	-.239*	-0.05	0.09	0.19	0.07
Self-Blame	0.12	0.13	-0.22	0.13	0.19
Disengagement	0.15	0.08	0.01	0.08	0.14
Self-Distraction	0.16	-0.11	0.04	0.13	0.20
Behavioral Dis-engagement	0.05	0.19	-0.15	-0.11	-0.08
Substance Use	0.10	0.17	0.06	0.14	0.07
Denial	0.03	-0.12	-0.06	-0.07	0.09

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

Chapter 5: Reflections and Future Research

I attended Frederick Douglass Academy in Harlem, New York from 2009 until I graduated in 2013, where our school motto was "Without struggle there is no progress." I roamed the halls taking for granted the opportunity to receive an education that would adequately prepare me for college. I did not understand the significance of being at a school named after one of the most prominent black abolitionists who dedicated their lives to freedom and justice. In that building, I have two distinct memories that helped mold me into the person I am today. The first one was with my tenth grade English teacher Ms. Fearron, who asked me, "are you living or existing? Because it seems like you just existing." I left that conversation upset because I felt that she had reduced me to an object, like an ornament. Something that might be aesthetically pleasing, but lacking substance. The next memory was with my senior year AP Government and Politics teacher Mr. Harris, who consistently let me know that he would fail me because I wasn't prepared for that class or the world for that matter and that the world did not care if I was or not. I failed his class consistently, but I am prepared. These moments allowed me to seriously think about myself as a Black man in a world that appears to not care about people that look like me. I wanted to be more than a thing. I wanted to be a Black man of value.

As I reflect on my thesis experience, I am grateful for the opportunity to be a part of the community of knowledge producers. I understand that there is a responsibility to represent, protect, provide, critique, and uplift Black men who have long been considered a social problem. With this in mind, I wanted to investigate black masculinity and coping with stress because we are not impenetrable, emotionless, or a social problem that is the result of our own inherent dysfunction as society might make us out to be. I wanted to emphasize the need to

contextualize and center the black male experience. Overall, I loved every phase of working on

this thesis from conducting the literature review to making what felt like endless edits, it has

made me a better writer, thinker, and advocate. It has revealed to me that learning truly is a

lasting frontier.

Future Research

Over the next few years, I plan to expand my research to include a qualitative method

that would provide more insight into the themes presented in the Brief MIS. Specifically,

attention should be paid to the social and cultural contexts masculine scripts are being

presented and the degree to which those messages are internalized and influence behavior.

Further, I want to investigate whether this scale is appropriate for Black men of all ages and the

role Adverse Childhood Experiences (ACEs) might play in their stress coping strategies.

Lastly, I want to use this research to develop health programs tailored to improving the lives of

all Black men.

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Appendix

Appendix I. Recruitment Email
Research for Black Men Who Are Current Students, Faculty, or Staff at OU

Researchers from the University of Oklahoma are currently seeking Black Men who are currently affiliated with this institution. Affiliation is defined as someone who is currently enrolled as a student or an employed faculty or staff member. This study asks about attitudes about masculinity identification, experiences with racism and discrimination, and coping strategies used. To participate, you must be at least 18 years old, and a resident of the United States. The online survey should take 15 minutes to complete. If you would like to participant, please use the link below. For more information before or after participating, please contact Dr. Page Dobbs, Department of Health and Exercise Science, at page.dobbs@ou.edu.

IRB: 11359

IRB Approval Date:

Appendix II. Recruitment Flyer

BLACK MEN AT OU NEEDED FOR STUDY

Male participants needed for research study investigating attitudes about masculinity, experiences with racism and discrimination, and how these perceptions and experiences may influence coping strategies within a specific institutional setting. To participate, you must be 18 years or older, consider yourself to be black and male, currently enrolled and/or working within the University of Oklahoma, and a U.S. citizen. The survey will take about 10-15 minutes to complete. After completing the survey, the participant will have the option of entering their name for a drawing to receive a $25 gift card. You can follow the link or QR code below to the online survey.

If you have any questions prior to taking the survey, please contact: page.dobbs@ou.edu or jerell.decaille@ou.edu

If you do not qualify: thank you for your willingness to participate in this study

If you know someone else that may qualify: please share their contact information with us (preferably email) so we can send them a link to the survey

IRB: 11359

IRB Approval Date: 11/16/2019

https://ousurvey.qualtrics.com/jfe/form/SV_0 0wAgSieoFxGgZL

Appendix III. Consent Form

I am Jerell DeCaille from the Department of Health and Exercise Science, and I invite you to participate in my research project titled, Masculinity and Race on the Coping Behaviors of Black Men at a Historically White Institution. This anonymous online survey asks questions about your beliefs about manhood and masculinity and how these perceptions may influence coping strategies within a specific institutional setting. This is a confidential survey. You were selected as a possible participant because you consider yourself to be Black and male. You must be at

least 18 years of age, an alumni, and/or currently enrolled and/or working within the University of Oklahoma.

Please read this document BEFORE agreeing to take part in my research.

What is the purpose of this study?
The purpose of this study is to investigate the relationship between masculinity and race on the coping behaviors of Black men

About how many participants will be in this research?
About 300 people

What will I be asked to do?
If you agree to take part in this research, you will complete an online survey.

How long will I be in the study?
The survey will take about 10-15 minutes to complete.

What are the possible risks and/or benefits if I participate?
There are no risks from being involved in this research. Even if you choose to participate now, you may stop participating at any time and for any reason. Your data may be used in future research studies, unless you contact me to withdraw your data.

Will I be compensated for participating?
There will be a drawing for 4 $25 gift cards. Those drawn will be notified via email.

Who will see my information?
All information will be kept confidential to the extent allowed by law and University policy. All published work and research reports will be reported using group data, no personal identifiers will be included, to ensure you will not be connected to your responses and your privacy will be protected. Research records will be stored securely and only approved researchers and OU Institutional Review Board will have access to records. Data are collected via an online survey system that has its own privacy and security policies for keeping your information confidential. No assurance can be made as to their use of the data you provide.

Do I have to participate?
No. Your participation in this study is voluntary. You may choose not to participate or, if you agree to participate, you do not have to answer all questions, and/or you can withdraw your participation at any time without penalty or loss of benefits to which you are otherwise entitled.

What will happen to my data in the future? We might share your data with other researchers or use it in future research without obtaining additional consent from you.

Who can I contact if I have questions, concerns, or complaints about the study?
If you would like additional information concerning this study before or after it is completed, please feel free to contact Page Dobbs, page.dobbs@ou.edu.

You can contact the University of Oklahoma – Norman Campus Institutional Review Board (OU-NC IRB) at (405) 325-8110 or irb@ou.edu if you have questions, concerns, or complaints about your rights as a research participant, or if you don't want to talk to the researcher.

This research has been approved by the University of Oklahoma, Norman Campus IRB.
IRB Number: 11359   Approval date:

Appendix IV. Thesis Survey Questions
Masculinity and race thesis

Q81 Are you currently a student, faculty, or staff member at the University of Oklahoma?

○ Yes (1)

○ No (2)

Skip To: End of Survey If Are you currently a student, faculty, or staff member at the University of Oklahoma? = No

---

Q80 Do you consider yourself to be a Black man?

○ Yes (1)

○ No (2)

Skip To: End of Survey If Do you consider yourself to be a Black man? = No

---

Q25 What is your sexual orientation

○ Straight (1)

○ Gay (2)

○ Lesbian (3)

○ Bisexual (4)

○ Other (5)

Q79 How old are you ?

_____

Q86 Are you a first generation college student?

○ Yes (1)

○ No (2)

Q82 What is your class rank?

○ Freshman (1)

○ Sophomore (2)

○ Junior (3)

○ Senior (4)

○ Graduate Student (5)

○ Other (6)

Q83 If you are current faculty or staff, what is your position at the University of Oklahoma?

_____

Q84 Are you currently involved in any extra-curricular activities at the University?

○ Fraternity (1)

○ Student-athlete (2)

○ On-campus clubs (3)

○ Off-campus clubs (4)

○ Other (5)

○ No (6)

Q85 What is your current job status?

○ working part-time (1)

○ working full-time (2)

○ On scholarship (3)

○ Loans (4)

○ Work study (5)

○ Other (6)

Page Break

Q1 Masculinity

	Strongly Disagree (1)	Disagree (2)	Neither agree nor disagree (3)	Agree (4)	Strongly agree (5)
There are certain things a man must go through in order to become a man (1)	○	○	○	○	○
A man takes care of business and does what needs to be done (2)	○	○	○	○	○
A man handles his responsibilities (3)	○	○	○	○	○
A man provides for his family, children, or other family members (4)	○	○	○	○	○
A man thinks about how he can influence younger people (5)	○	○	○	○	○

Page Break

Q5 Masculinity

	Strongly disagree (1)	Disagree (2)	Neither agree nor disagree (3)	Agree (4)	Strongly agree (5)
A man thinks about how he can influence younger people (1)	○	○	○	○	○
A man mentors other people (2)	○	○	○	○	○
A man supports himself completely (3)	○	○	○	○	○
A man makes sacrifices for his family (4)	○	○	○	○	○
A man does things he may not want to do to get the job done (5)	○	○	○	○	○

Page Break

Q10 Masculinity

	Strongly disagree (1)	Disagree (2)	Neither agree nor disagree (3)	Agree (4)	Strongly agree (5)
A man makes things happen for his family (1)	○	○	○	○	○
A man takes care of his kids (2)	○	○	○	○	○
Challenges encourage me to go above and beyond (3)	○	○	○	○	○
It's hard to show that I'm not like other Black men (4)	○	○	○	○	○
I have to prove stereotypes against Black men wrong (5)	○	○	○	○	○

Page Break

Q14 Masculinity

	Strongly disagree (1)	Disagree (2)	Neither agree nor disagree (3)	Agree (4)	Strongly agree (5)
I have to prove stereotypes against Black men wrong (1)	○	○	○	○	○
As a Black man, you're up against a lot from birth (2)	○	○	○	○	○
It's hard overcoming how we're viewed as Black men (3)	○	○	○	○	○
I have to deal with a lot of negative stereotypes (4)	○	○	○	○	○
Life is easier for White men than Black men (5)	○	○	○	○	○

Page Break

Q18 Masculinity

	Strongly disagree (1)	Disagree (2)	Neither agree nor disagree (3)	Agree (4)	Strongly agree (5)
The road to success is easier for White men than Black men (1)	○	○	○	○	○
White men are introduced to more things than Black men (2)	○	○	○	○	○
Life situations forced me to become a man before I was ready (3)	○	○	○	○	○
White men have more opportunities than Black men (4)	○	○	○	○	○
I am the only person responsible for me (5)	○	○	○	○	○

Page Break

Q24 Masculinity

	Strongly disagree (1)	Disagree (2)	Neither agree nor disagree (3)	Agree (4)	Strongly agree (5)
My mother showed me how to work hard for anything you want (1)	○	○	○	○	○
My mother gave me the confidence and strength to keep moving (2)	○	○	○	○	○
My aunt(s) showed me how to work hard for anything you want (3)	○	○	○	○	○
My grandmother showed me how to work hard for anything you want (4)	○	○	○	○	○
My brother(s) showed me how to be a man (5)	○	○	○	○	○

Page Break

Q29 Masculinity

	Strongly disagree (1)	Disagree (2)	Neither agree nor disagree (3)	Agree (4)	Strongly agree (5)
My sister(s) informed me about how to be a man (1)	○	○	○	○	○
My grandfather showed me about how to be a man (2)	○	○	○	○	○
My mom informed me about how to be a man (3)	○	○	○	○	○
My female cousins(s) informed me about how to be a man (4)	○	○	○	○	○
My male cousin(s) showed me about how to be a man (5)	○	○	○	○	○

Page Break

Q34 Masculinity

	Strongly disagree (1)	Disagree (2)	Neither agree nor disagree (3)	Agree (4)	Strongly agree (5)
A man takes care of everything without depending on other people (1)	○	○	○	○	○
A man takes care of everything (2)	○	○	○	○	○
A man is able to control his emotions (3)	○	○	○	○	○
A man does not cry (4)	○	○	○	○	○
I have to prove to myself and everybody else that my life has a purpose (5)	○	○	○	○	○

Page Break

Q39 Masculinity

	Strongly disagree (1)	Disagree (2)	Neither agree nor disagree (3)	Agree (4)	Strongly agree (5)
I have to prove myself in academic situations (1)	○	○	○	○	○
I have to prove myself in social situations (2)	○	○	○	○	○
I have a lot to live up to (3)	○	○	○	○	○
White and Black men have the same opportunities (4)	○	○	○	○	○
White and Black men are equal in today's society (5)	○	○	○	○	○

Page Break

Q44 Masculinity

	Strongly disagree (1)	Disagree (2)	Neither agree nor disagree (3)	Agree (4)	Strongly agree (5)
I taught myself how to become a man (1)	○	○	○	○	○
I wasn't prepared to be a man, but I was basically on my own (2)	○	○	○	○	○
My father instilled in me the characteristics of a man (3)	○	○	○	○	○
When I carry myself like my father or better I'll be a man (4)	○	○	○	○	○
I admire the way my father carries himself (5)	○	○	○	○	○
Having friends back me up is powerful (6)	○	○	○	○	○
It's easier for me to go through my day when I have someone I can talk to (7)	○	○	○	○	○

Q51 Coping

	I haven't been doing this at all (1)	I've been doing this some of the time (2)	I've been doing this most of the time (3)	I've been doing this a lot (4)
I've been concentrating my efforts on doing something about the situation I'm in (1)	○	○	○	○
I've been taking action to try to make the situation better (2)	○	○	○	○
I've been trying to come up with a strategy about what to do (3)	○	○	○	○
I've been thinking hard about what steps to take (4)	○	○	○	○

Q55 Coping

	I haven't been doing this at all (1)	I've been doing this some of the time (2)	I've been doing this most of the time (3)	I've been doing this a lot (4)
I've been trying to see it in a different light, to make it seem more positive (1)	○	○	○	○
I've been looking for something good in what is happening (2)	○	○	○	○
I've been making jokes about it (3)	○	○	○	○
I've been making fun of the situation (4)	○	○	○	○

Page Break

Q59 Coping

	I haven't been doing this at all (1)	I've been doing this some of the time (2)	I've been doing this most of the time (3)	I've been doing this a lot (4)
I've been accepting the reality of the fact that it has happened (1)	○	○	○	○
I've been learning to live with it (2)	○	○	○	○
I've been trying to find comfort in my religion or spiritual beliefs (3)	○	○	○	○
I've been praying and meditating (4)	○	○	○	○

Page Break

Q63 Coping

	I haven't been doing this at all (1)	I've been doing this some of the time (2)	I've been doing this most of the time (3)	I've been doing this a lot (4)
I've been getting emotional support from others (1)	○	○	○	○
I've been getting comfort and understanding from someone (2)	○	○	○	○
I've been trying to get advice or help from other people about what to do (3)	○	○	○	○
I've been getting help and advice from other people (4)	○	○	○	○
I've been turning to work or other activities to take my mind off things (5)	○	○	○	○
I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping. (6)	○	○	○	○

Page Break

Q69 Coping

	I haven't been doing this at all (1)	I've been doing this some of the time (2)	I've been doing this most of the time (3)	I've been doing this a lot (4)
I've been saying to myself "this isn't real" (1)	○	○	○	○
I've been refusing to believe that it has happened (2)	○	○	○	○
I've been saying things to let my unpleasant feelings escape (3)	○	○	○	○
I've been expressing my negative feelings (4)	○	○	○	○
I've been using alcohol or other drugs to make myself feel better (5)	○	○	○	○
I've been using alcohol or other drugs to help me get through it (6)	○	○	○	○

Page Break

Q75 Coping

	I haven't been doing this at all (1)	I've been doing this some of the time (2)	I've been doing this most of the time (3)	I've been doing this a lot (4)
I've been giving up trying to deal with it (1)	○	○	○	○
I've been giving up the attempt to cope (2)	○	○	○	○
I've been criticizing myself (3)	○	○	○	○
I've been blaming myself for things that happened (4)	○	○	○	○

End of Block: Cope