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### Constructing Home and Family: How the Ballroom Community Supports African American GLBTQ Youth in the Face of HIV/AIDS

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## **Constructing Home and Family: How the Ballroom Community Supports African American GLBTQ Youth in the Face of HIV/AIDS**

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*This article focuses on the construction of homes and families within the ballroom community, a prominent feature of urban GLBTQ communities of color in cities across the United States. Based on two ethnographic studies with ballroom communities in the San Francisco Bay Area, California, and Detroit, Michigan, we explore the importance of gender and sexual identity in informing community practice around HIV prevention and treatment. As a community, the ballroom scene provides African American queer youth with support for same-sex desire and identity, along with multiple forms of support for HIV prevention. Our study of the ballroom community documents current forms of “intra-vention” occurring within the community and the importance of the gender-sex system in organizing these practices. We also offer recommendations for community-based organizations to partner with the ballroom community, making use of existing social structures within the community and the salient concepts of home and family, to provide HIV-related services and support. We argue for HIV-prevention interventions to take a more culturally appropriate, nuanced approach to reaching African American youth at risk, utilizing community and family structures, in whatever forms these may take.*

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*KEYWORDS* HIV/AIDS, African American MSM, social support, gender, kinship, youth culture

## INTRODUCTION

Recent studies have reported disproportionately high rates of HIV and AIDS among young African American men who have sex with men (YAAMSM), many of whom are unaware of their positive serostatus (Centers for Disease Control, 2004). These elevated rates indicate a need for the development of culturally appropriate, community-based approaches to HIV-related programming. With few exceptions (Manago, 2002; Peterson et al., 1996), HIV-prevention programs for YAAMSM have primarily been adapted from interventions designed for White or acculturated gay and bisexual-identified men and have not attended to the diversity of YAAMSM, which includes multiple communities of men who have sex with men (Kraft, Beeker, Stokes, & Peterson, 2000). These shortcomings may explain the limited effectiveness of HIV-related risk reduction programs and messages with this population (Wheeler, 2006).

Interventions that have attempted to take “culture” into account have done so by confusing racial or language-based groups (such as Latinos) with cultural groups (Beatty, Wheeler, & Gaiter, 2004; Williams, 2003), without attending to the diversity that is present within racial-ethnic communities. Although some of the literature has attempted to define the complexity of the African American male population, particularly with regard to sexuality, these findings have not yet penetrated public health settings to become integrated into approaches to HIV prevention for this population (Mays, Cochran, & Zamudio, 2004; Williams, Wyatt, Resell, Peterson, & Asuan-O’Brien, 2004; Wohl et al., 2002). For example, Lewis and Kertzner (2003) argue that several challenges within the public health literature prevent sexual health researchers from developing an improved interpretation of African American male sexualities. These challenges include incorrect assumptions of homogeneity of sexual behavior in African American men, as well as a lack of appreciation of the dynamic nature of sexuality and the meanings that particular sexual behaviors, and identities, may have for African American men. Thus far, there has been little to no research that takes the complexity of sexual and gender identities among YAAMSM into account to build culturally appropriate theoretical models to inform future HIV interventions for this population.

Along with the lack of rigorously evaluated, culturally appropriate interventions for YAAMSM, very few interventions have utilized existing social structures within communities. Indeed, many HIV-prevention programs are based on intervening at the level of the individual, often with counseling sessions (Chesney et al., 2003). Although a few interventions work at the community level, many public health approaches do not take into account

existing social structures and the various forms of “invention” that are organically taking place within the community (Friedman et al., 2004; Kegeles, Hays, & Coates, 1996). Furthermore, there has been little research into notions of kinship and “home” with YAAMSM, particularly in examining how these salient social structures can play an active role in the effort to prevent HIV transmission.

These gaps in public health intervention research are compounded by a dearth of research on the kinship practices of African American gay, lesbian, bisexual, transgender, and queer (GLBTQ) people. Studies of African American kinship are almost exclusively heterosexual and the literature on queer kinship generally focuses on White gays and lesbians. Much of the scholarship on African American kinship in the United States aptly challenges the Moynihan Report (1965), which blamed the social and economic problems that confront the African American community on a matriarchal Black family structure that is out of step with American society (Davis, 1990; Staples, 1984). African American family and kinship scholars refuted this assertion and argued for an analysis of African American family experiences that takes into account the distinct historical forms of race, class, and gender oppression to which African Americans have been subjected in the United States (Billingsley, 1968; Burton & Stack, 1974). Stack and Burton’s (1998) ethnographic work on low-income African Americans provides insight into the resilience and survival of Black kinship through “kinscripts,” the interplay of family ideology, norms, and behaviors over the life course that is passed from generation to generation. As Stack and Burton suggest, the concept of kinscripts offers a useful framework for studies on families and can be applied across race–ethnicity, socioeconomic class and a variety of family forms in the United States, yet this concept has not been applied to research with nonheteronormative family structures.

Among queer kinship studies, Weston’s (1991) ethnography examines the ways in which mostly White gays and lesbians recast their friends and comrades as kin as a part of a queer community practice. Hawkeswood’s (1996) ethnography of African American gay men in Harlem reveals how Black gay men in New York City forge alternative familial networks as a part of larger community formations. In his study, Black gay men construct family for themselves, creating a viable alternative to the biological family from which they have been excluded. Still, there is no literature on the ways in which YAAMSM pursue and forge kin-ties and the implications that these efforts have for HIV/AIDS prevention among YAAMSM.

Our study of the ballroom community attempts to address the aforementioned gaps in the research so that culturally appropriate, sustainable HIV-prevention interventions can be developed that will better serve YAAMSM. Towards this end, we aim to illuminate the existing social structures within the community and the ways in which concepts of home and family are redrawn to meet the needs of its members. The ballroom community is a

complex and longstanding form of cultural practice within the African American GLBTQ community, in which young people deliberately form and maintain kin-ties, constructing both homes and families for themselves. Despite the longstanding nature of this cultural practice, no public health research has examined the HIV-related prevention education and support that takes place through the ballroom community's social structures, the houses and the balls, or the impact of these efforts on the lives of young people who participate in the community.

### Introduction to the Ballroom Community

Ballroom culture, sometimes called "house culture," is a clandestine community consisting of African American and (in some locations like New York, Miami, and Los Angeles) Latino/a GLBTQ people. Since its beginnings in Harlem, New York, more than 50 years ago, ballroom culture has expanded rapidly to every major city in the United States, including Chicago, Atlanta, Washington, DC, Baltimore, Charlotte, Cleveland, and Philadelphia. Despite the sustained and growing involvement in ballroom culture over the years, initially captured in Jennie Livingston's documentary film, *Paris is Burning* (1991), which highlights ballroom culture in the late 1980s in New York City, this unique community of Black and Latino/a queer people has received limited scholarly attention.

Ballroom culture consists of two primary features: anchoring family-like structures, called houses, and the flamboyant competitive balls that they produce. Houses are a part of a national social network and many have several chapters throughout the country. Led by house mothers and fathers, houses function as families whose main purpose is to organize elaborate balls and to provide support for their children to compete in balls as well as to survive in society as marginalized members of their communities of origin. Houses offer their children multiple forms of social support, a network of friends, and a social setting that allows free gender and sexual expression. Ultimately, houses within the ballroom community constitute figurative, and sometimes literal, "homes" for the diverse range of members involved in them.

Generally, in ballroom culture, there are no houses without balls and there are no balls without houses. At balls, members of the ballroom community draw from existing traditions of African American cultural performance to create an alternative world (Browning, 1998; Diawara, 1993). House parents recruit and prepare their children to compete in runway categories that are based on the deployment of performative gender and sexual identities, vogue and theatrical performances, and the effective presentation of fashion and physical attributes. House members compete individually and/or "as a house" in a diverse and forever evolving array of categories. The intense,

often collectively competitive performances create a space of celebration, affirmation, and critique.

Although ballroom culture is a very complex sociocultural phenomenon, we are going to limit our discussion to the role that the houses and balls play in providing HIV-related social support to community members, particularly within the broader domestic context of “home.” Because YAAMSM are disproportionately impacted by HIV, we focus our analysis on the potential of the ballroom community to support HIV prevention for these particular members. We argue that the ballroom community’s reconstitution of home, family and community offers possibilities for effective HIV/AIDS prevention and treatment for and among its YAAMSM members.

## METHODS

In an attempt to capture the expansive and transient nature of the ballroom community as well as the different regional influences on community practices, in this study, we merge data gathered from two regionally distinct ballroom communities, one in the San Francisco Bay Area (including San Francisco and Oakland, CA), and one in Detroit, MI.

The ethnographic study of the ballroom community in the San Francisco Bay Area was conducted from February to September of 2006. We conducted in-depth interviews with a total of 15 young African American gay and bisexual men and transgender women who participated in the ballroom community. We interviewed the “children” of several houses, two house mothers, one house overseer for the Bay Area, as well as one former house father who is no longer an active participant in the ballroom community. The interviews typically lasted between 1 and 3 hours. Topics included current living situation, family history, history of ballroom community involvement, current house dynamics and relationships, forms of social support received through house involvement, HIV-prevention efforts within the house and ballroom scene in general, and HIV-related risk behavior and testing history. The interviews were audio recorded, transcribed, and summarized. Participant observation also took place at local balls, as well as at Los Angeles-based ballroom events. To augment the participant observation we conducted during formal balls, we also conducted participant observation with members of the ballroom community in other sites around the Bay Area where they spent time socializing, including bars, clubs, GLBTQ community events, and community-based organizations (CBOs). Fieldnotes were written up following participant observation, describing the events as well as the social and cultural dynamics within the ballroom community. Fieldnotes, interview transcripts, and interview summaries were entered into our database for analysis. All study procedures were approved by the University of California–San Francisco Committee on Human Research.

The Detroit-based ethnographic study took place over an approximately 4-year period (from December of 2001 through August of 2005), including 8 consecutive months of concentrated fieldwork working with The Men of Color Motivational Group Inc.'s ballroom community HIV-prevention program in Detroit, MI. We conducted extensive interviews with African American gay and bisexual men and transgender women who were members of the ballroom community during the time of the study. Over the period of data collection, we conducted interviews with a total of 25 members of the ballroom community: 15 members participated in individual in-depth interviews, while 10 participated in group interviews. This study also includes multiple interviews with six HIV/AIDS-prevention workers who were also members of the ballroom community. Interviews ranged from 3 to 5 hours, and were either audio or video recorded and then transcribed. During the final 8 months of the research, Dr. Bailey was invited to join the Detroit chapter of the Legendary House of Prestige. Thus, as a African American MSM, Dr. Bailey engaged in a performance ethnographic approach because not only did he compete in balls as a member of his house; he attended house meetings, house social outings, and ball reunion events; and he traveled with fellow house members to national balls and meetings in Philadelphia, New York, Atlanta, Louisville, and Los Angeles. As is the case for the Bay Area study, all fieldnotes, interview transcripts, and interview summaries were entered into our database for analysis. All study procedures utilized in the Detroit study were approved by the University of California-Berkeley Committee on Human Research.

At both sites, we used a grounded theory approach to guide both the data collection as well as the data analysis for this project (Strauss & Corbin, 1990, 1998). Using grounded theory to guide the data analysis, we identified themes in the ethnographic fieldnotes and in-depth interview transcripts regarding the organic forms of HIV prevention and support within the ballroom community, both within the structures of the houses and the balls. Relying closely on the textual data, we crafted analysis memos to flesh out the emergent themes, comparing the forms of intravention across sites and delving deeply into the domestic structures of the houses, and their implications for HIV-prevention efforts occurring within the ballroom community.

## FINDINGS

### Gender and its Role in Organizing the Ballroom Community

The identities that members of the ballroom community claim are based on a gender-sex system created by the community itself. Moreover, the gender-sex system shapes the gender and sexual relations in the houses, serves as the basis for the competitive categories at balls, and also informs the kinds of HIV-prevention work done through the houses. This gender-sex

system offers more gender and sexual identities from which to choose than are available to members in the “outside” world. Therefore, to gain an understanding of how HIV-prevention work takes place within the ballroom community, one must first become familiar with the ballroom gender-sexual identity system:

1. Butch queens (gay men)
2. Femme queens (male to female transgender people at various stages of reassignment)
3. Butch queen up in drags (gay men that dress and perform as women)
4. Butches (female to male transgender people at various stages of reassignment)
5. Men (males born as male and that live as men but do not identify as gay)
6. Women (females born as female and live as female and are straight, lesbian, or queer)

Within the houses, femme queens, more feminine presenting butch queens, and butch queens up in drags could take on the role of house mother, while butches, more masculine presenting butch queens, and men could assume the position of house father. In the ballroom community, the gender-sexual identity system organizes the social relationships within the houses, including the roles that various house members play in carrying out HIV-prevention activities and providing support within the community.

### A Glamorous Celebration and Acceptance of GLBTQ Identities

For many community members, the ballroom community offered a glamorous and sophisticated social world through which to reenvision their lives as GLBTQ-identified African American youth. Young people become involved in the ballroom community for the space it creates to express non-heteronormative sexual and gender identities. Balls often occur “under the radar,” taking place in theaters, halls, and other community spaces in the middle of the night, the details for which are circulated through a relatively closed community. As one Bay Area informant puts it,

The ballroom community was like really fun and exciting and to see how everybody changed at night . . . It’s like you could see somebody on a regular day and they just be in jeans and T-shirt and then that night they’re like a total different person. It’s like the glamour, the possibility, and all that was like, “ooh” to me. It was very exciting.

This excitement generates interest in joining a house to partake of the glamour surrounding ballroom events.

## Finding a Welcoming Home

Once young people join a house, they not only find like-minded individuals who support gender and sexual diversity, but many experience a feeling of acceptance that they otherwise may not encounter in their biological families and communities of origin. Houses become figurative and sometimes literal “homes” for many members. Here, a member of the Detroit House of Escada explains the warmth his house provides, which extends beyond the balls:

Even when a person gets their props and kudos from the community-at-large, no other feeling is greater than knowing that you have succeeded on behalf of your house. It is this process of congratulating and advising one another on our various specialties that begins the bonding process for us from individuals to family members . . . Once you walk, even if there is shade thrown at you, you can always look to your other family members to be there to support you—even sometimes ready to fight on your behalf. Sometimes it’s more theatrics than it is a family bond, but nine-times-outta-ten, it is because you genuinely have begun to care for these people on a deeper level. Just as real family, you are not going to get along with every member, every time. But the balls always give us a chance to put all that down—if only for an evening.

The sense of family, emphasized by the ongoing support and connection between parents and children, brothers and sisters, promoted the necessary unity and cohesion for the houses to win at the balls:

It’s more than, “I’ll see you when I see you.” Or “I’ll see you at the function.” We talk to each other. We talk to each other on like a weekly basis or whatever. And we keep in touch and whenever we doing something we’re like, “Girl, what do you think about this?” and “How you feel about that?” and “Do you think we should come like this?” We all like—we talk about it, and so when we do do it, we hit hard and we turn it.

The relationships forged between house members extended beyond the balls themselves and became sources of support and friendship. Thus, the ballroom community signified what a member from the House of Bvlgari in Detroit called a “fictitious existence,” a world that facilitates the means through which African American GLBTQ members recast their lives and families in the midst of rejection and marginalization from their biological kin, African American communities, and society at large.

## House Parenting and Domestic Responsibilities: Mothering and Fathering

House mothers and fathers uphold domesticated notions of gender, reflecting a division of labor that is consistent with mainstream heteronormative family ideals of feminized mothering and masculinized fathering, with the caveat that usually both parents embrace nonheteronormative identities, most often as gay men (butch queens) or transgender women (femme queens). The gender-sex system within the ballroom community organizes the roles and responsibilities for house “mothering” and house “fathering.”

### Nurturing Mothers

The house mother of the Detroit chapter of the Legendary House of Prestige, a butch queen, articulated some specific “motherly” qualities when asked to describe his role:

MB: What does it mean to be a house mother?

Trinity: Just being loving, caring, you know, just being able to listen as well as have people confide in you.

MB: What do you offer that their biological mother doesn't offer?

Trinity: Something they can't talk to their biological mother about, something that they can talk to me about . . . Like as far as the lifestyle or as far as relationship problems or whatever, things they just need to talk about that's dealing with the life.

Children of the houses told us that the house mother is also the house parent who takes care of them in a crisis. Here one of our Bay Area informants talks about trying to get home from Los Angeles after a ball, since she got in food fight and lost her wallet. Her house mother helped her:

I'm like, “Oh my God I don't know what to do.” So I'm just outside crying, smoking cigarettes back to back to back. And so my house mother came and she's like, “Well don't worry about it. You're gonna get home, don't worry about that. You never have to worry about food. I'm always here, you don't pay for no hotel. You stay with me. You're okay.” I'm like, “Well mommy my cards and everything,” and she's like, “Look, just calm down. You can go home; take your picture for ID. Just calm down,” and she gave me fifty dollars to get home.

The former mother of the Oakland House of Ultra Omni discussed how she often took care of her children, being “there” for them morning and night, including providing them with shelter, food, and an understanding, nurturing presence:

I had a very good relationship with them . . . and my door was always open at home, my phones are always open . . . I've had kids call my cell phone at four or five in the morning snotting and crying, yelling and screaming, arguing. "My mother's getting on my nerves. Can I come to your house?" or, "My dude kicked me out," or, "Oh somebody just stole my money, I have nowhere to go, I'm hungry." I've had kids come bang on my door you know 5, 4:30 in the morning, 3 in the morning. "Can I?" "Honey come on in, just pull up a blanket. Sleep on the floor." I give them the couch or I sleep on the floor or something.

House mothers also took on the gendered roles of cooking or monitoring their children's diets. Many reported that they cooked for their houses when they assembled for the weekend of a ball, or for house meetings, taking on "feminized" domestic labor in their capacities as mothers. Here, the mother of the West Coast House of Infiniti, a femme queen, describes her concerns about her children's eating habits:

All of our diets had to change. Not just mine, but I told them, "Your diets have to change. I'm not saying go on a diet. Change your diet. Give yourself a cut-off time for eating, up your water intake." . . . And I had a lot of kids, I had to fight with them on that. "I don't like water. Water is nasty." "How can you say water is nasty? It is a colorless tasteless substance you know. Put some ice in it honey. It won't hurt you. Get you some bottled water. It won't hurt, as much as they say it's spring I know it's tapped." But water intake had to come up, you know.

Thus, the health of the children of the house, their diets, and their sleeping habits fell under the auspices of the house mothers in their capacities as "nurturers" of the house.

### Fathers as Guides

House fathers, on the other hand, took on roles related to upholding the image of the house, the house reputation, and therefore they were seen as mentors for their children. According to a former member of the Detroit chapter of the House of Prestige but now the house father of the Missouri chapter, and a butch queen, fathering is about instilling the values by which he lives in his children:

I want my children to stand for the exact same things I stand for, like being an overall good person, basically, put it that way. They should take care of business. I say, "be me but be you." Or we'll say it like this, "still be yourself, but try to act like me." I want to be able to look at my child and be like, that's *my* child.

Interestingly, this gendered division of labor is something that the “children” in the scene perceive, shaping the relationships between parents and children. Similar to the gender dynamics in house children’s biological families, children seek out mothers for comforting and caring, while fathers are seen as mentors or authority figures to impress. A member of the West Coast House of Prodigy talks about his relationships with his house parents:

My house mother is a wonderful, wonderful person. And she’s really taken on that kind of like really a mother role you know. She calls me all the time to check up on me and see how I’m doing and when I’m down there I always have a place to stay. I always have a hot meal to eat . . . Like a lot of people have the perception that people want to be in those higher positions just for the name, and the status. But she truly, really cares about taking care of her house members. And my house father . . . our relationship’s kinda funny. Cause when I first wanted to join the house he didn’t really approve. He didn’t think I really had what it took. And I walked this ball in—like when you walk streetwear sometimes people peel into different outfits and stuff like that. I think I peeled out of like eight outfits and he kinda just was wowed. And we’ve been really close since then.

For house parents, the division of labor adheres to heteronormative gender roles, with house mothers performing as feminine nurturers, while house fathers reinforce expectations for their children and serve as models to guide their children to adulthood. The gendered division of “work” within the houses has enormous implications for the kinds of HIV-prevention work done throughout the ballroom community.

### Gender Performance and the Role of the Houses in HIV Prevention and Support

Houses, as metaphorical homes for African American gay youth, also provide various forms of support for HIV prevention. As the former house mother of the Detroit chapter of the Legendary House of Prestige and supervisor of the ballroom culture and HIV/AIDS prevention program at Men of Color Motivational Group Inc. contends,

The structure of the ballroom community already allows for prevention work, you know, just in the fact that someone can say to you, “now you know you need to wear a condom” and it be from someone that you have built that trust factor with. People in the community do prevention work all of the time.

Interestingly, however, these protective forms of support for HIV prevention were also scripted by notions of gender.

### House Mothers: Nurturing and HIV Prevention

Mothers provided safer sex advice based on life experience, their involvement in professional HIV-prevention work, and also (in some cases) sex work. For example, mothers help children “come of age” in the ballroom community. This reflects a larger notion of the ballroom life cycle, where, upon entering the scene, people can be sexually exploited unless they have the proper guidance and mentorship (which often took the form of parents or “older” siblings in a house). Here, the Oakland mother of the House of Ultra Omni explains the integration of HIV prevention into her mothering duties:

Teaching them ... what are low risk behaviors; what are higher risk behaviors. Or what can keep them safe; what may keep them safe; what won't keep them safe. So if they had questions. I can remember house meetings when I was just a member or a child in the house. “I know you girls are sleeping with each other.” ... Not labeling or pointing the finger but, “I know you girls are doing that. I know you girls are sleeping with other people in the ball scene. You have to be very careful. Things are out there; you can easily acquire them.” ... And then to start doing the work and see statistics for myself in a number of cities. And then to know these cities are also ballroom cities and then it's just like, “Well if CDC has these stats and they're just talking about these cities and states in general and I know these are ballroom cities and states, I can gather the majority of these people, if not 50% of them, are ballroom people. They have to be walking around positive as well, or with something. Gonorrhea, syphilis, something.” So universal precautions always. You have to think that everybody has it.

House mothers, especially, provided support for using condoms because, according one mother, “You can't trust anyone.” Thus, house mothers were the primary providers of information and support for seeking out HIV testing, and they were also seen as a good source of support for relationship and sexual advice.

### House Fathers: House Expectations, Long-term Goals, and HIV Prevention

The approach house fathers took differed from that of house mothers. Fathers often focused on structural factors pertaining to vulnerability to HIV, such as improving the socioeconomic circumstances of their children. The fathers'

interventions were concerned with the lifelong personal development of their children. As the Godfather of the Legendary House of Prestige, a butch, stated, "It is our role to help the kids to learn to help themselves. We are guides."

For children to be part of a house, they must prove themselves worthy of being affiliated with it, whether this entails walking particular categories to snatch a trophy, or conducting yourself with a particular level of professionalism, dedication, and respectability. Within the San Francisco House of Davoucci, the expectations for membership were upheld by the house father. According to the house father, house members had to be "actively bettering themselves." Thus, his children had to be pursuing careers or educational goals to better themselves, with the expectation that they would give back to the community, through volunteer work or through material support of younger house members. The emphasis on education and community building was taken seriously and supported within the house. In fact, the father of the house was sending two of his children to a local community college and paying for their books, ultimately changing the structural conditions of their lives. Addressing vulnerability to HIV by reducing the structural oppression that YAAMSM may experience by virtue of their race, educational status, homosexuality, and lower economic status typically fell under the purview of house fathers.

## DISCUSSION

Historically, HIV-prevention interventions have not attended to the diversity of African American men, and have not dealt with the contingencies of sexuality, its fluidity, or its contextual nature. While a great deal of attention has been paid to the importance of gender in creating HIV-prevention interventions for heterosexual women, the importance of gender has tended to fall out of interventions designed for MSM populations (Mays et al., 2004; Millett, Peterson, Wolitski, & Stall, 2006), as though all members of the MSM population, especially African American MSM, claim and experience gender identities in the same way. Our work describes the powerful dynamic impact that gender has in determining social behavior for YAAMSM, which has important implications for HIV-prevention and community-level work.

The social practices of kin-making and gender revision in the ballroom community point to the need for public health practitioners and researchers to attend to cultural diversity within populations of GLBTQ youth, and YAAMSM in particular, who are disproportionately impacted by the HIV epidemic. In general, culture is central to shaping the social meanings of sexual behaviors and gender and sexual identities (Airhihenbuwa, DiClemente, Wingood, & Lowe, 1992; Carrillo, 2002; Parker, 1999). For YAAMSM, sexual and gender roles and expectations are predicated on one's race-ethnicity,

socioeconomic status, religious affiliation, and geo-cultural factors (Malebranche, 2003). For the YAAMSM members of the ballroom community, the sex-gender system, the houses, and the balls foster and affirm more flexible and expansive gender and sexual expressions and identities not available to them in overall society, and allow them to forge kin-ties and construct homes based on these more expansive identities (Namaste, 1998; Strongman, 2002).

The sex-gender system underpins the gender and sexual relations within houses, and this aspect of the ballroom community is integral to providing and supporting unique forms of HIV prevention and treatment to community members. The house is the core unit of the kinship structure in the ballroom community and is an outgrowth of both dominant and alternative forms of kinship. Thus, ballroom houses do not break totally from dominant kinscripts, rather, they find ways to appropriate some elements and revise other aspects of these norms (Burton & Stack, 1998). Indeed, the distribution of kin labor is gendered, particularly for house parents, but members recast which biological bodies engage in the domestic labor of the house.

Masculinity, whether attached to and/or performed by male, female, or transgender bodies, enjoys privilege within the ballroom community as it does outside of it. Thus, the kind of masculinity or femininity community members embody, perform, and represent influences whether members are assigned or choose to be referred to as fathers or as mothers. The gender roles and performance attached to mothering and fathering are informed by larger heteronormative notions of masculine and feminine forms of domestic labor. Mothers bear the brunt of the work of parenting within the house, often encompassing cooking, providing shelter, advice, information, and generally “nurturing” the children of the house. This labor is primarily undertaken by butch queens and femme queens, who are biological men or transgender women, but who perform femininized roles as mothers in their houses. Similarly, house fathers are linked to fetishized notions of masculinity, and their roles are performed by butch queens (biological men) or butches (biological women), who take on responsibilities such as setting and enforcing house expectations and providing mentoring and guidance, both forms of domestic labor more associated with masculinity. The recasting of gender and parental roles is an accepted “norm” among members of the ballroom community. In other words, the GLBTQ youth within the ballroom community view and look up to their butch-queen and femme-queen mothers and their butch-queen and butch fathers as parents, not only because they have more experience and respect within the scene, but also because both the children and their parents occupy similar marginalized social positions, as African American GLBTQ people, in larger society.

We demonstrate that within these constructed forms of kinship, gender plays an enormous role in how house parents intervene and support their children to maintain their health and to avoid HIV transmission in the

following ways. First, as nurturers and confidants, butch queen or femme queen mothers are the key people that young people turn to when discussing the intimate details of their sexual encounters. Second, mothers play a crucial role in teaching their house members to be safe and to use condoms with their partners, giving men specific practical tips on how to manage and negotiate sexual encounters. Third, house mothers provide support when young men engage in risky activities, by taking young house members for HIV testing, and by identifying various resources such as housing, medical care, and support groups for house members living with HIV/AIDS. Fourth, butch queen or butch fathers help their house members to address the larger structural factors that contribute to HIV vulnerability in the first place. For example, fathers enforce the rules of membership, such as seeking education and maintaining steady employment in some cases. Finally, fathers provide material support for attaining educational goals, by buying books or paying for course fees, and provide contacts for young people seeking jobs. Albeit indirect perhaps, these efforts also play a crucial role in preventing HIV. Overall, for the members of the ballroom community, revising the heteronormative link between bodies, gender roles, and parental roles (i.e. biological men and transgender women are mothers and therefore the nurturers), has enormous implications for the ways in which messages and values about HIV prevention and risk reduction are disseminated.

Regardless of the gendered labor of care that structures the roles in which mothers and fathers play within the house in terms of HIV prevention, within these houses, members consult with their parents and their house siblings on issues that, either by choice or necessity, they do not discuss at home with their biological kin. The houses, as constructed families and homes for members of the ballroom community, offered young people this crucial support in terms of prevention and treatment.

### Suggestions for Program Development

Notwithstanding the contradictions and limitations found in the ballroom community, it is a site for potentially effective and sustained interventions. Here, we offer recommendations on how to make the collaborations between CBOs and the ballroom community more effective at reducing HIV incidence rates among YAAMSM.

First, CBOs should tap into the structure of ballroom culture as a network of support. Staff members should work with house parents to devise strategies for prevention within the house such as organizing special house meetings and events focused on information about sex and HIV/AIDS prevention. In many cases, members of the ballroom community are also HIV/AIDS prevention workers and therefore occupy a pivotal position to facilitate relationships between the community and the organization. Parents

of houses are central to establishing prevention peer norms within the houses. Hence, we have learned that gender roles play a part in establishing the kinds of prevention work house parents do for their children, mainly because the revised gender relations within the houses shape the interaction between parents and children. Our research demonstrates that house mothers, more so than fathers, are directly involved in advising their children about sex, relationships, health, and wellbeing. Given their central roles as nurturers and providers of information regarding negotiating sexual relationships and encounters, prevention programs should collaborate more closely with house mothers. Working with house mothers to get their children tested and to make sure that they know the best ways to avoid HIV transmission is the best way to disseminate information among the members of the ballroom community. Fathers, on the other hand, are instrumental in helping provide children with long term goals, such as completing one's education and seeking good employment opportunities, that can reduce vulnerability to HIV by improving the social and economic circumstances of house members. Programs that have access to employment training, GED programming, and that promote educational opportunities should collaborate more closely with house fathers to make these resources more accessible for ballroom community members. An awareness of and a commitment to work within the gendered division of labor within the houses can make linkages between CBOs and the ballroom community much more effective.

## CONCLUSION

The ballroom community represents a celebratory site where queer gender and sexual identities are presented, accepted, and judged, in all of their complexity. We found that the acceptance and celebration of an array of gender and sexual identities had a direct impact on how young people perceived the houses and the balls. Houses, and the people who run them, became literal and figurative homes for many of the young people we interviewed. More importantly, the houses represented a community resource that young people relied on as they not only negotiated their performances on the runway, but also as they negotiated their sexual identities, their social and sexual relationships, and their economic circumstances and opportunities. House mothers, fathers, and siblings provided a constellation of support, some of it general support, and some of it specific to HIV. These organic forms of support, information, love, and acceptance often go unnoticed by health and social service professionals, who tend to define family and home in terms of biology. We found that the houses are constructed as families for the young people in the ballroom community and the forms of intravention that take place through the houses and the balls have a profound impact on the wellbeing of ballroom community members.

## REFERENCES

- Airhihenbuwa, C. O., DiClemente, R. J., Wingood, G. M., & Lowe, A. (1992). HIV/AIDS education and prevention among African-Americans: A focus on culture. *AIDS Education & Prevention, 4*(3), 267–276.
- Beatty, L. A., Wheeler, D., & Gaiter, J. (2004). HIV prevention research for African Americans: Current and future directions. *Journal of Black Psychology, 30*(1), 40.
- Billingsley, A. (1968). *Black families in White America*. Englewood Cliffs, NJ: Prentice-Hall.
- Browning, B. (1998). *Infectious rhythm: Metaphors of contagion and the spread of African culture*. New York: Routledge.
- Burton, Carol B., LMS. (1998). Kinscripts. In K. V. Hanson and A. Gay (Ed.), *Families in the U.S.: Kinship and domestic politics* (pp. 405–411). Philadelphia: Temple University Press.
- Carrillo, H. (2002). *The night is young: Sexuality in Mexico in the time of AIDS*. Chicago: University of Chicago Press.
- Centers for Disease Control. (2004). HIV transmission among Black college student and non-student men who have sex with men—North Carolina, 2003. *MMWR Morbidity and Mortality Weekly Report, 53*(32), 731–734.
- Chesney, M. A., Koblin, B. A., Barresi, P. J., Husnik, M. J., Celum, C. L., Colfax, G., et al. (2003). An individually tailored intervention for HIV prevention: Baseline data from the EXPLORE Study. *American Journal of Public Health, 93*(6), 933–938.
- Davis, A. Y. (1990). *Women, culture & politics* (1st ed.). New York: Vintage Books.
- Diawara, M. (1993). Black studies, cultural studies, performative acts. In C. McCarthy and W. Crichlow (Ed.), *Race, identity, and representation in education* (pp. 262–267). New York: Routledge.
- Friedman, S. R., Maslow, C., Bolyard, M., Sandoval, M., Mateu-Gelabert, P., & Neaigus, A. (2004). Urging others to be healthy: “Intravention” by injection drug users as a community prevention goal. *AIDS Education and Prevention, 16*(3), 250–263.
- Hawkeswood, W. G. (1996). *One of the children: Gay Black men in Harlem*. Berkeley, CA: University of California Press.
- Kegeles, S. M., Hays, R. B., & Coates, T. M. (1996). The Mpowerment project: A community-level HIV prevention intervention for young gay men. *American Journal of Public Health, 86*(8), 1129–1136.
- Kraft, J. M., Beeker, C., Stokes, J. P., & Peterson, J. L. (2000). Finding the “community” in community-level HIV/AIDS interventions: Formative research with young African American men who have sex with men. *Health Education and Behavior, 27*(4), 430–441.
- Lewis, L. J., & Kertzner, R. M. (2003). Toward improved interpretation and theory building of African American male sexualities. *Journal of Sex Research, 40*(4), 383.
- Livingston, J. (Writer). (1991). *Paris is Burning [Motion picture]*. Off White. Miramax.
- Malebranche, D. J. (2003). Black men who have sex with men and the HIV epidemic: Next steps for public health. *American Journal of Public Health, 93*(6), 862–865.

- Manago, C. (2002). *The critical thinking and cultural affirmation model—a strategy for African American health*. Los Angeles: African, American, Advocacy Services-Support and Survival Institute.
- Mays, V. M., Cochran, S. D., & Zamudio, A. (2004). HIV prevention research: Are we meeting the needs of African American men who have sex with men? *Journal of Black Psychology*, 30(1), 78.
- Millett, G. A., Peterson, J. L., Wolitski, R. J., & Stall, R. (2006). Greater risk for HIV infection of Black men who have sex with men: A critical literature review. *American Journal of Public Health*, 96(6), 1007–1019.
- Moynihan, D. P. (1965). *The Negro family: The case for national action*. Washington, DC: Government Printing Office.
- Namaste, K. (1998). The everyday bisexual as problematic: Research methods beyond monosexism. In J. L. Ristock and C. G. Taylor (Ed.), *Inside the academy and out: Lesbian/gay/queer studies and social action* (pp. 111–135). Toronto: University of Toronto Press.
- Parker, R. (1999). *Beneath the equator: Cultures of desire, male homosexuality, and emerging gay communities in Brazil*. New York: Routledge.
- Peterson, J. L., Coates, T. J., Catania, J., Hauck, W. W., Acree, M., Daigle, D., et al. (1996). Evaluation of an HIV risk reduction intervention among African-American homosexual and bisexual men. *Aids*, 10(3), 319–325.
- Stack, C. B. (1974). *All our kin: Strategies for survival in a Black community*. New York: Harper & Row.
- Staples, L. (1984). *Roots to power: A manual for grassroots organizing*. New York: Praeger.
- Strauss, A., & Corbin, J. (1990). *Basics of qualitative research: Grounded theory, procedures, and techniques*. Newbury Park, CA: Sage.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory*. Thousand Oaks, CA: Sage.
- Strongman, R. (2002). Syncretic religion and dissident sexualities. In A. Cruz-Malave and M. Manalansan (Ed.), *Queer globalization: Citizenship and the afterlife of colonialism* (pp. 176–192). New York: New York University Press.
- Weston, K. (1991). *Families we choose: Lesbians, gays, kinship*. New York: Columbia University Press.
- Wheeler, D. P. (2006). Exploring HIV prevention needs for nongay-identified Black and African American men who have sex with men: a qualitative exploration. *Sexually Transmitted Disease*, 33(Suppl. 7), S11–16.
- Williams, J. K., Wyatt, G. E., Resell, J., Peterson, J., & Asuan-O'Brien, A. (2004). Psychosocial issues among gay- and non-gay-identifying HIV-seropositive African American and Latino MSM. *Cultural Diversity and Ethnic Minority Psychology*, 10(3), 268–286.
- Williams, P. B. (2003). HIV/AIDS case profile of African Americans: Guidelines for ethnic-specific health promotion, education, and risk reduction activities for African Americans. *Fam Community Health*, 26(4), 289–306.
- Wohl, A. R., Johnson, D. F., Lu, S., Jordan, W., Beall, G., Currier, J., & Simon, P. A. (2002). HIV risk behaviors among African American men in Los Angeles County who self-identify as heterosexual. *Journal of Acquired Immune Deficiency Syndromes*, 31(3), 354.