Community Cleavages: Gay and Bisexual Men’s Perceptions of Gay and Mainstream Community Acceptance in the Post-AIDS, Post-Rights Era

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Changes in gay and bisexual men’s connectedness to the gay community are related to the declining public visibility of HIV/AIDS and greater acceptance for homosexuality and bisexuality in mainstream society. Little work, however, has focused on perceived acceptance for subgroups within the gay community or broader society. Using interviews (n = 20) and a survey (n = 202) of gay
and bisexual men in a mid-sized Canadian city, we find perceived hierarchies of acceptance for the various subgroups as well as an age effect wherein middle-aged men perceive the least acceptance for all groups. These differences are linked with the uneven impact of social, political, and institutional changes relevant to gay and bisexual men in Canada.

KEYWORDS gay community, social inclusion, mental health, sexual health, HIV/AIDS, community development, social acceptance, homosexuality, bisexuality

During the past two decades, health and social science researchers have devoted considerable attention to the concept of gay community. Their work has typically focused on urban concentrations of gay and bisexual men, and sometimes lesbian and bisexual women, defined alternately in terms of geographic boundaries (Aldrich, 2004; Nash, 2006), sexual networks (Peacock et al., 2001), and participation in gay and bisexual friendships or organizations (Jin, 2002; Barrett & Pollack, 2005; Frost & Meyer, 2012; Holt et al., 2012; Veinot et al., 2013). Despite these definitional subtleties, gay community has often been described as a single, unified entity, especially since the height of the HIV/AIDS crisis in the 1990s. During these decades, the so-called gay community became the focal point of HIV surveillance and health promotion efforts aimed at gay and bisexual men (Zablotska, Holt, & Prestage, 2011; Wilkinson, 2011).

Today, the forces that solidified urban gay communities during the second half of the 20th century (e.g., political activism, HIV/AIDS) meet with technological and political changes (e.g., online communication, same-sex marriage, adoption rights) that may be leading to disinvestment in gay-specific organizations and venues (Rosser, West, & Weinmeyer, 2008; Zablotska, Holt, & Prestage, 2011) and greater association with multiple, mixed “personal communities” defined more by sociability than sexual identity (Holt, 2011; Wilkinson et al., 2011). At the same time, gay and lesbian “families of choice” and safe mortar-and-brick gathering places continue to act as insulators against homophobia, isolation, depression, and still-persistent social scripts that position same-sex attraction as sick or deviant (Weston, 1991; Meyer et al., 2003; McLaren et al., 2008; Kertzner et al., 2009; Hammack & Cohler, 2011; Frost & Meyer, 2012).

In an era where public awareness of the HIV/AIDS epidemic has declined and acceptance for sexual minority identities is ostensibly increasing, there is growing interest in (re-)assessing the meaning, durability, and potential social divisions within gay communities. Recent interventions have suggested that community and gay community specifically are problematic concepts. Both concepts mask contingencies in how individuals relate to
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others with presumably shared characteristics, or come to feel included or marginalized within identity-based groups and society at large (Howarth, 2001; Dowsett et al., 2001; Rowe & Dowsett, 2008; Holt, 2011). Some studies have also challenged the assumed positive effects of urban gay communities, noting potential associations with riskier behaviors (e.g., unprotected sex) alongside protective factors such as HIV testing and health information-seeking (Zablotska, Holt, & Prestage, 2011; Buttram & Kurtz, 2013). Still others have noted the persistent exclusion of older men, ethno-racial minorities, and HIV-positive individuals in traditional gay scenes (Han, 2007; Fraser, 2008). Most quantitative studies that gauge the importance of gay community to gay men, however, employ a model of community attachment based on activities such as spending free time with gay men and attending gay venues, rather than subjective experiences (Jin, 2002; Holt et al., 2012; Veinot et al., 2013).

Meanwhile, the few studies that have purposefully investigated class, race, or age-based divisions in the gay community have produced mixed results. Barrett and Pollack (2005), for example, found that primarily White, younger, and middle-class men tended to associate with traditional markers of gay community affiliation, such as coming out early in life, living in a gay neighborhood, and attending mostly gay social functions. In contrast, Frost and Meyer (2012), who used more flexible measures of community connectedness (e.g., “feeling a bond” with the gay community) found no gender-based or ethno-racially based differences, but found significantly lower connectedness among bisexual men and women. While these types of studies have highlighted potential social cleavages in gay communities, they also have some limitations. First, they tend to describe the symptoms of social division (e.g., less participation in gay organizations or feeling the lack of a bond) rather than potential root causes such as perceived exclusion based on age, class, or race. Second, they treat gay communities as unitary, static formations that can be accepted or left. However, historical changes such as same-sex marriage rights and broader acceptance of gay identities in mainstream society have changed the structure of community (e.g., fewer bars and organizations) and disproportionately benefited certain groups, such as a “homonormative” gay, coupled middle class (Duggan, 2002).

The broader social dynamics of gay communities are thus treated as incidental backdrops to the psychosocial processes of attachment and inclusion in question (Lewis, 2014). Yet there are potentially large differences in the types of communities formed in different geographical settings—for example, large nightlife and tourism-based communities that might support “fastlane” lifestyles with higher frequencies of drug use or unprotected sex (Buttram & Kurtz, 2013) versus those in smaller cities where sociality is equally or more present in private homes and groups (Knopp & Brown, 2003; Waitt & Gorman-Murray, 2007; Lewis, 2012). There are also differences in how various forms of urban gay communities have changed over time.
Most North American studies have examined large-city gay communities (e.g., New York, San Francisco, Toronto) that experienced familiar sets of transitions: formation of same-sex-attracted communities following influxes of single men and women after World War II (Duberman, 1986), subsequent in-migration of young, rurally situated gay men and lesbians (Weston, 1995), and solidification of geographic visibility in the form of urban gay villages (Nash, 2006).

Understandings of the gay experience in Canada tend to follow this imagined linear trajectory, ending with the successful attainment of equal rights (e.g., same-sex marriage in Canada since 2005, adoption by same-sex couples in Ontario since 1995) through lobbies and federal court cases (Smith, 2005; Weeks, 2007; Smith, 2008). These portrayals of gay and lesbian advancement mask the ongoing marginalization of lesbian, gay, bisexual, and transgender (LGBT) people in many settings in Canada. They also reinforce notions of gay communities as monolithic, usually metropolitan entities that—while still inclusive and protective—have accomplished their political mission and are beginning to decline (Rosser, West, & Weinmeyer, 2008). In this study, we ask whether gay communities within this new milieu offer a sense of acceptance among gay and bisexual men, how this differs from the perceived acceptance offered by the mainstream community, how acceptance is perceived both for and by different groups of gay and bisexual men, and the extent to which the experience of men living in a mid-sized city might differ from those in the metropolitan areas studied more commonly.

METHODS

This mixed-methods study (Yin, 2003) seeks to more accurately identify perceptions of acceptance for various age-, race-, and sexual identity-based segments of the population within the gay and mainstream communities at a pivotal time in the evolution of both urban gay communities and mainstream societal attitudes. While the use of survey data aligns with extant studies that measure gay community attachment (Barrett & Pollack, 2005; Frost & Meyer, 2012), the addition of interviews with self-identified gay and bisexual men and service providers allows for the creation of new, grounded theory (Strauss & Corbin, 1990) about gay community inclusion and its relationship to the changing social contexts of North America.

We employ the concept of perceived acceptance to gauge how the gay and mainstream communities—as imagined by individuals—are perceived to be oriented toward various groups (e.g., men of color, trans men), rather than measuring individuals’ levels of attachment to a pre-given gay community. This approach offers several advantages over measuring. First, measuring perceived acceptance is a more meaningful indicator of the inclusivity of gay and mainstream communities than simple attachment (i.e., participation). Second, asking respondents to identify levels of acceptance toward multiple
groups (e.g., men of color) and not just the one being surveyed (i.e., gay and bisexual men) allows individuals to reflect on personal exclusion or discrimination that might be associated with their other intersecting identities (Moghaddam & Studer, 1997). Finally, our mixed-methods approach allowed for interview narratives to inform our survey design and, through triangulation, corroborate and explain the results it produced.

This study is part of a larger project called Health in Middlesex Men Matters (HiMMM), which was initiated following a 2006 forum organized by the Regional HIV/AIDS Connection (RHAC, formerly AIDS Committee of London) to discuss health needs and challenges for London-Middlesex’s LGBT, two-spirit, and queer communities. The HiMMM Project was formed to examine how the forum-identified themes of community, communication, and homophobia influence the lives and health of local gay and bisexual men, specifically. As a community-based collaborative research project, partners on HiMMM include RHAC, the University of Western Ontario, Middlesex-London Health Unit, Options Clinic for HIV Testing at the London Intercommunity Health Centre, St. Joseph’s Infectious Diseases Care Program, and Gay Men’s Sexual Health Alliance of Ontario. London-Middlesex, Ontario, the study site, is located halfway between Toronto, Ontario, and Detroit, Michigan. London is the seat of Middlesex County and the eleventh largest city in Canada, comprising approximately 366,000 residents and another 70,000 in the surrounding county (Statistics Canada, 2011). Statistics Canada estimates that 34% of the Canadian population lives in areas considered to be London-Middlesex’s “peer group”: mixed urban-rural areas with average numbers of both Aboriginal residents and immigrants (Statistics Canada, 2009). As of 2006, 11.7% of the population of Middlesex County was a visible minority, with the largest populations being Black, Latin American, and Arab (about 2% of the population each) and Chinese and South Asian residents representing slightly smaller segments (Statistics Canada, 2006). The study sample, which generally mirrors these characteristics, therefore offers an opportunity to assess the dynamics of social acceptance outside of Canada’s largest cities.

HiMMM Project data were collected in two phases: an initial phase of qualitative semistructured interviews and a second phase of quantitative information gathered using an online questionnaire. During 2009, semistructured interviews were conducted with 15 local gay and bisexual community members and five service providers. Gay and bisexual men, 16 years or older and residing in Middlesex County, were sampled purposively based on age, ethnicity, HIV status, location, and sexual orientation. Service providers, which comprised a physician, an HIV testing provider, and counselors and coordinators from community organizations, were also sampled purposively based on their experiences working with local gay and bisexual men. Community members were asked about gay and bisexual community and identity; access to health and wellness services; and spiritual, emotional, and
sexual health. Service providers were asked about their experiences serving gay and bisexual populations, including coming out counseling and working with other local organizations to meet service user needs. Since gay- and bi-identified trans men (female-to-male) are increasingly viewed as part of the gay community (Bockting, Benner, & Coleman, 2009), and since some trans women (male-to-female) have histories or attachments within communities of gay and bisexual men, results relevant to these populations are also considered. Interviews lasted 30–120 minutes and were audio-recorded and transcribed verbatim. No remuneration was offered for participation. After reviewing the transcripts, the HiMMM team designed the survey, which was pretested and pilot-tested by local gay and bisexual volunteers.

The team collected online survey data from 202 gay and bisexual men in 2011–2012. Eligibility criteria allowing access to the online survey included age 18+, having an address in Middlesex County (though not necessarily a permanent address, as in the case of students), and identifying as gay, bisexual, or as a man who has had sexual experience with or strong, continual sexual attractions to another man. Questionnaire participants were recruited through online Web sites, smartphone apps, and informal referrals between gay and bisexual men. Demographic characteristics of the sample are shown in Table 1. Participants received a $10 gift card as a token gift for completing the survey, with chances to win additional prizes if they referred other gay and bisexual men who also completed the survey. Sociodemographic variables in the survey included age, ethno-racial identity, birth country, educational attainment, household income, employment status, area of residence, marital status, relationship status, and sexual orientation identity, adapted from the Canadian Community Health Survey (Statistics Canada, 2008) and other community surveys. The project team developed 10 questions assessing perceptions of acceptance of gay men, bisexual men, men of color (sexuality not specified), transgender men (sexuality not specified), and transgender women (sexuality not specified) from within the gay community and the broader Middlesex-London community. Responses to each question asking how accepting the broader and (separately) gay communities were toward each group were expressed in Likert scales ranging from 1 (not at all accepting) to 7 (completely accepting).

Using NVivo 10, qualitative interview texts were open-coded and grouped into categories and themes based on team discussions of themes emerging from both the initial forum and the interview data. The team then used coded data reports to outline perceived processes of community development and evolution. Quantitative analyses of the questionnaire data were conducted using SAS version 9.3.1. First, frequencies for sociodemographic variables were calculated for both the interview and survey samples. Next, paired t-tests were used to test for differences (\(\alpha = 0.05\)) between respondents’ perception scores for acceptance of different sexual orientation, race, and gender identity groups within the gay community. Similarly, tests were used to compare acceptance for those same groups within the broader
### TABLE 1 Demographic attributes of survey respondents and interview participants from the Health in Middlesex Men Matters (HiMMM) study

| Demographic Attribute                  | Survey Sample \(n = 202\) | Interview Sample \(n = 20\) |
|----------------------------------------|-----------------------------|-------------------------------|
| **Age group**                          |                             |                               |
| 18–24                                  | 48 (23.8)                   | 3                             |
| 25–34                                  | 62 (30.7)                   | 7                             |
| 35–44                                  | 30 (14.9)                   | 2                             |
| 45–54                                  | 39 (19.3)                   | 6                             |
| 55+                                    | 23 (11.4)                   | 2                             |
| **Ethno-racial group**                 |                             |                               |
| Non-aboriginal White                   | 176 (87.1)                  | 16                            |
| Non-aboriginal racialized             | 19 (9.4)                    | 3                             |
| Aboriginal                             | 7 (3.5)                     | 1                             |
| **Ethnic or cultural identity indicated** |                             |                               |
| White Canadian/American/European       | 180 (89.1)                  | 16                            |
| Aboriginal                             | 7 (3.5)                     | 0                             |
| East/South/Southeast Asian             | 7 (3.5)                     | 0                             |
| Latin American                         | 5 (2.5)                     | 1                             |
| Black Canadian/American/African/Caribbean| 4 (2.0)                  | 2                             |
| Middle Eastern                         | 3 (1.5)                     | 0                             |
| Indo-Caribbean                         | 3 (1.5)                     | 0                             |
| **Education**                          |                             |                               |
| High school not completed              | 12 (6.0)                    | 3                             |
| High school completed                  | 20 (10.0)                   | 5                             |
| Some postsecondary                    | 57 (28.4)                   | 8                             |
| Postsecondary graduate                | 112 (55.7)                  | 4                             |
| **Area of residence**                  |                             |                               |
| Non-rural                              | 194 (97.0)                  | 18                            |
| Rural                                  | 6 (3.0)                     | 2                             |
| **Marital status**                     |                             |                               |
| Married or living common-law with a man| 55 (27.4)                   | 8                             |
| Married or living common-law with a woman| 6 (3.0)                  | 0                             |
| Separated/Divorced/Widowed/Never married| 140 (69.7)                 | 12                            |
| **Sexual orientation identity**        |                             |                               |
| Homosexual                             | 153 (89.5)                  | 13                            |
| Bisexual                               | 17 (9.9)                    | 1                             |
| Don’t know/Would rather not say        | 1 (0.6)                     | 1                             |
| Heterosexual                           | 0 (0.0)                     | 5                             |
| **Trans-identified**                   |                             |                               |
| Yes                                    | 5 (2.5)                     | 1                             |
| No                                     | 195 (97.5)                  | 18                            |
| **Country of birth**                   |                             |                               |
| Canada                                 | 185 (91.6)                  | n/a                           |
| Other                                  | 17 (8.4)                    | n/a                           |
| **Household income per person**        |                             |                               |
| < $15,000                              | 30 (15.6)                   | 3                             |
| $15,000–$29,999                        | 65 (32.8)                   | 3                             |
| $30,000–$49,999                        | 48 (25.0)                   | 3                             |
| $50,000–$79,999                        | 28 (14.6)                   | 5                             |
| $80,000 +                              | 23 (12.0)                   | 3                             |
| **Employment status**                  |                             |                               |
| Employed                               | 163 (81.2)                  | 11                            |
| Non-employed                           | 38 (18.9)                   | 8                             |

*(Continued)*
community. Paired $t$-tests were also used to assess whether participants viewed the gay community and the broader community as different in their acceptance of each group. Finally, linear regression was used to model the association between age and the perception of acceptance of each group by the gay community, and again separately by the broader community. A quadratic term for age was used to allow for a nonlinear association. Following these analyses, the team used an iterative process to triangulate and establish complementarity of information across qualitative and quantitative data sources (Yin, 2003). Qualitative and quantitative phases of the HiMMM Project were approved by the Non-Medical Research Ethics Board at the University of Western Ontario. Signed consent forms were obtained from interview participants. For survey respondents, consent was implied upon reading the letter of information and starting the online survey.

RESULTS

Broader Community Acceptance

Within the broader community, survey respondents perceived distinct hierarchies of acceptance for men of various sexual orientation, genders, and racial identities, with men of color (sexuality not specified) being seen as most accepted and trans persons as least accepted (Table 1). As shown in Table 2, respondents reported significantly different levels of perceived broader community acceptance of each of the selected identity subgroups ($p < 0.01$), excepting perceived broader community acceptance of gay versus bisexual men. Racialization thus appeared to be less of a perceived detriment to acceptance than sexual minority or transgender status. We questioned whether this may be the result of optimistic perceptions of racial tolerance within our majority-White sample, but—as shown in Table 3—perceptions of broader community acceptance for all men of color did not differ significantly between Aboriginal participants (4.71 on a scale of 1–7),
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TABLE 2 Differences in gay and bisexual men’s mean perceived levels of broader community acceptance and gay community acceptance, comparisons of subgroups

|                               | Differencea | b         | p           |
|-------------------------------|-------------|-----------|-------------|
| Broader community acceptance  |             |           |             |
| Gay men compared to Bisexual men | 0.11        | 1.52      | 0.1305      |
| Gay men compared to Trans men  | 1.31        | 13.51     | < 0.0001    |
| Gay men compared to Trans women | 1.17        | 11.83     | < 0.0001    |
| Gay men compared to Men of color | -0.73     | -6.74     | < 0.0001    |
| Bisexual men compared to Trans men | 1.19        | 13.22     | < 0.0001    |
| Bisexual men compared to Trans women | 1.06        | 11.41     | < 0.0001    |
| Bisexual men compared to Men of color | -0.84      | -7.43     | < 0.0001    |
| Trans men compared to Trans women | -0.14      | -2.68     | 0.0081      |
| Trans men compared to Men of color | -2.04      | -17.95    | < 0.0001    |
| Trans women compared to Men of color | -1.90      | -16.01    | < 0.0001    |
| Gay community acceptance      |             |           |             |
| Gay men compared to Bisexual men | 0.91        | 9.63      | 0.1305      |
| Gay men compared to Trans men  | 1.43        | 13.4      | < 0.0001    |
| Gay men compared to Trans women | 1.44        | 13.18     | < 0.0001    |
| Gay men compared to Men of color | 0.17        | 1.71      | 0.088       |
| Bisexual men compared to Trans men | 0.53        | 5.37      | < 0.0001    |
| Bisexual men compared to Trans women | 0.56        | 5.31      | < 0.0001    |
| Bisexual men compared to Men of color | -0.76      | -6.79     | < 0.0001    |
| Trans men compared to Trans women | 0.03        | 0.65      | 0.51        |
| Trans men compared to Men of color | -1.27      | -11.64    | < 0.0001    |
| Trans women compared to Men of color | -1.31      | -11.76    | < 0.0001    |

a Differences based on a 7-point Likert scale measure.

b Paired t-test.

c As an example, gay/bi men perceived that gay men’s acceptance within the broader London community was, on average, 0.11 points higher than bisexual men’s acceptance, using a 7-point Likert scale to measure acceptance. This was not a statistically significant difference (p = 0.1305).

The high levels of perceived acceptance for gay men in the broader mainstream community align with an emerging narrative of equal rights and greater social acceptance for gay identities in Western countries (Weeks, 2007; Smith, 2008). One interview participant reflected on an adoption support group meeting where he saw widespread support for a middle-class gay couple:

I went to these meetings by myself and there were maybe primarily five or six [male/female] couples . . . but there was two men there . . . they presented themselves as a couple awaiting an adoption and I was very pleased to see that the other couples interacted with these two men as they would all of the other couples . . . like, you know, “I hope you get a child soon” and that kind of thing . . . so that was very affirming. (Peter, 51, gay-identified)
TABLE 3 Differences in gay and bisexual men’s mean perceived levels of broader community acceptance and gay community acceptance of men of color, comparisons between respondent ethno-racial groups

|                                      | Difference | t \(^b\) | p  |
|--------------------------------------|------------|----------|----|
| Broader community acceptance of men of color |            |          |    |
| Aboriginal compared to White \(^c\)   | 0.10       | 0.18     | 0.86|
| Aboriginal compared to Men of color    | 0.03       | 0.04     | 0.96|
| White compared to Men of color         | −0.07      | −0.20    | 0.84|
| Gay community acceptance of men of color |            |          |    |
| Aboriginal compared to White           | 0.30       | 0.53     | 0.60|
| Aboriginal compared to Men of color    | 0.92       | 1.10     | 0.28|
| White compared to Men of color         | 0.61       | 1.69     | 0.09|

\(^a\) Differences based on a 7-point Likert scale measure.

\(^b\) Unpaired \(t\)-test.

\(^c\) As an example, gay/bi Aboriginal men’s perception of the broader community’s acceptance of men of color was on average 0.10 points more than White gay/bi men’s perception of the broader community’s acceptance of Men of Color \((p = 0.086)\).

Others felt that gay identities had become widely acceptable in the broader London community:

Um, I think [visibility is] a good thing and I’m not one of those people who is really out there or I need to put myself out there. Um, if it comes up in conversation then we’ll talk about it or . . . if I’m at an event . . . so, the visibility for [my partner and me] has been very good and it hasn’t been very negative because of our positions and our reputations in the [London] community. (Mark, 31, gay-identified)

A very mainstream, you know, social organization [United Church of Canada] linking themselves with Gay Pride, I mean that’s a very positive thing. It’s certainly not an alternative organization or a community-based group. (Peter, 51, gay-identified)

At the same time, historical events in London suggest a more mixed attitude toward gay and bisexual men within the broader community. In 1993, two local men were arrested on child pornography charges following the discovery of bags of videotapes in a nearby river. Over the next two years, a widely publicized police investigation called “Project Guardian” linked the gay community with the possible existence of a large child pornography ring. While only the initial two men arrested were convicted on child pornography charges, at least 2,296 interviews were conducted by police, 64 men were charged for various offenses, some were arrested, and several were also outed (Sas & Hurley, 1997). During the same period, the London police arrested large numbers of men for cruising in bathrooms and parks (Janoff, 2005, pp. 232–233). In 1995, the year that Project Guardian concluded, former mayor Diane Haskett refused the Homophile Association
of London Ontario’s (HALO’s) request for the city to issue a proclamation for the London Gay Pride celebration. Haskett insisted that she would not issue “controversial” proclamations, and the city council voted 13–5 against it. HALO filed a complaint with the Human Rights Commission of Ontario, which decided in 1997 that both Haskett and the London City Council had discriminated against HALO. The mayor and council were each fined $5,000. Haskett subsequently posted an ad in the *London Free Press* claiming the decision was incorrect and violated constitutional freedoms.

In this historically hostile social environment, it is feasible that the overall high reported acceptance for gay and bisexual identities masks some variation in men’s experiences based on their socioeconomic and professional positions. Those who do not fit easily into the mainstream or require services tend to suffer from the lack of visibility and resources in a smaller community where “the closet may be bigger than people on the street” (Carl, 54, MSM-identified). Mainstream public health services in London-Middlesex, for example, have built only limited capacity to address LGBT health needs. “[W]e live in a conservative government who doesn’t care about gay issues, MSM issues, the health aspects of a small minute population and there are no services,” one participant said. “There is a variety of mental health services, um, but again, they’re not directed to the gay population and oftentimes there you may have to go to through two or three counsellors before you find one that’s appropriate” (Steve, 45, gay-identified). Another compared the availability of health information in London and Toronto: “in Toronto, you know, you have a community that’s so well connected and so well informed that information is just, you know, jumping off the trees really. But in London you really have to . . . go searching for it to find it” (Dean, 27, White, gay-identified). Concerns about anonymity of services in a mid-sized city may discourage some from using the limited services available. One provider recounted,

> When I first started [at a satellite clinic] and I couldn’t draw blood very well, I would say you can come by tomorrow to our main site and they would say “no, no I can’t go down there because so and so works there. I don’t want them to know that I’m getting blood work for HIV . . . cause I’m not out to her in the community. (Jason, 53, service provider)

Another participant reflected that the continued marginalization of gay and bisexual men in mainstream health care settings had made the local HIV clinic and counseling center an important support structure for local gay and bisexual men.

> There’s a fundamental belief that even within the structured systems that [gay people are] not right, you know, and I’m talking about the AIDS Committee focusing on *gay* issues . . . as a necessity rather than
simply focusing on HIV issues . . . even though all the psychologists and psychiatrists say, you know, this is natural. (Steve, 45, gay-identified)

In other institutions, such as schools and media outlets, the subtle, ongoing erasure of LGBT issues and identities persists despite official proclamations of equality, diversity, and inclusion (see Young & Meyer, 2005; Bauer et al., 2009). While the London region is associated increasingly with a “creative cities” discourse that equates certain local industries (e.g., education, biosciences) with cosmopolitanism and tolerance (Bradford, 2010), other dominant sectors such as finance (e.g., London Life Insurance), manufacturing (General Motors, Toyota, McCormick Foods), and military-industrial (General Dynamics Land Systems tank manufacturing), have been associated with heteronormative and sometimes homophobic work cultures and environments (McDowell, 2001; Embrick, Walther, & Wickens, 2007). According to one participant, even the higher education sector in London-Middlesex suppressed gay visibilities intermittently:

At Kings [College] there was a group of students last year who wanted to do something in the cafeteria in conjunction with Pride activities on main campus at [University of] Western [Ontario] and they were initially refused to do that . . . they could have a booth and they could educate about sexual orientation but not celebrate . . . use words that were like too condoning. (Peter, 51, gay-identified, White)

In local high schools, suppression of gay identities has been often more overt: “we have the safe schools project here and since that’s been instigated, numerous teachers have been made to take down their safe space signage because of objections from parents, so it was a good idea but the follow through is lousy” (Steve, 45, gay-identified).

Others felt that the inaccessibility of the local media limited the possibility of a more connected, supportive gay community. “The media is not promoting,” one participant said,

small groups like [RHAC] can’t afford to take out full page ads each September or the high schools won’t print them in their newsletters that there is a safe space to come talk about your issues or concerns . . . so the problem isn’t necessarily the resource being available, it’s the awareness of the availability of the resources and either we don’t have the financial resource to make that happen or we live in a culture that doesn’t want it to happen. (Steve, 45, gay-identified)

He added that the London-Middlesex mainstream media also seemed to ignore ongoing homophobia and hate crime in the region: “I saw on [gay hook-up site] Squirt today there that somebody was assaulted a couple days ago here and someone in Kitchener got the crap beat out of them too . . .
So gay violence is on the rise again, but you know, you don’t ever hear it.” Another agreed, “In London we don’t hear about it on the news . . . it’s all hush-hush and not publicized” (Joe, 18, gay-identified). Although both national-level advances in rights and ongoing, more localized marginalization might be therefore described as issues affecting the Canadian LGBT community at large, they have been experienced differently by the various subgroups of gay and bisexual men, potentially leading to the diverging perceptions of inclusion in both the gay community and broader society.

Acceptance of gay and bisexual men in the mainstream community, then, may be reserved largely for middle-class community members (e.g., business owners) who, in turn, mask or minimize their sexual expression to continue being accepted.

There’s a number of high profile gay [-owned] businesses opened up and they really revitalized the core, but for the most part their sexuality has been downplayed [in the media]. They’re “young, exciting, interesting entrepreneurs bringing diversity to our core” . . . many of the senior gay businesses, the people who I knew were gay had visible, high traffic locations, had the resources to make an impact and change, they didn’t want to be associated with Gay Pride or gay business, exclusively because the comment was 90% or more of their business comes from a heterosexual population who enjoy the sass, that classing up and London is an upper middle-class community and so they appreciate that sense of decadence . . . not necessarily going to buy into it but they appreciate it. (Steve, 45, White)

Another added, “There’s more publications geared to a gay audience now than ever,” “but if you witness the way media is going over the last number of years . . . it used to be issue oriented. Canadian gay magazines, like Fab and Outlook are becoming lifestyle magazines . . . It’s not about developing a community, it’s using the community to profit from” (Steve, 45, gay-identified).

Middle-class participants also tended to deal with perceived exclusion or marginalization in the broader community by seeking services elsewhere or relocating altogether. One talked about his past unwillingness to disclose his sexual identity to local doctors and, eventually, the choice to have a doctor in Toronto: “I’ve had doctors in the past where I haven’t disclosed . . . my sexual orientation out of fear of being rejected and, you know, I’m pretty sure that it would have happened before because not all doctors are as good as my GP [general practitioner] in Toronto” (Dean, 27, gay-identified). Another found acceptance primarily in white-collar institutions he worked in:
I think [acceptance in London is] pretty good . . . to the extent that people feel comfortable sort of being out and you know public in their sexuality in a sense they don’t hide it . . . people will support that and I’d certainly in my experience here at the firm . . . they’ve been extremely supportive at the law school and . . . in undergrad that’s sort of when I was coming out. I’ve never had an issue with that . . . I mean, you don’t have to make an apology for it because, you know, you’re fortunate where you work that it’s just not an issue. (Will, 29, gay-identified)

In contrast, he downplays persistent harassment among gay men in London’s social spaces as part of the “human condition”:

I mean, sure yeah, sometimes you’ll see people in bars or something who are jerks, but that’s just you know the human condition . . . I think London is a fairly progressive-minded town and um, you know, it’s got a fairly educated population between the university and the hospital system and the health system so you know it’s really not a bad place to be gay.

Respondents also perceived high acceptance for men of color (sexual orientation not specified) in the broader London-Middlesex community, even more than for gay and bisexual men. As noted, the mean perceived acceptance for all men of color did not differ statistically for participants from different ethno-racial groups. However, research participants may be more likely to report discrimination toward the identity group that is the study’s focus (gay and bisexual men, in this case) than they are to report personal discrimination, which may be connected to intersecting statuses such as race (Moghaddam & Studer, 1997).

In contrast, participants observed sustained exclusion of transgender individuals in London-Middlesex, mirroring research reporting profound transphobia in Ontario’s health care institutions and communities more generally (Bauer et al., 2009). One explained that trans persons in London self-protect by remaining invisible: “I knew there was a large trans population but it’s not a very visible one . . . I mean those boys and girls they keep themselves well hidden . . . I believe they just allowed gender reassignment surgeries to be covered by [universal public health insurance] again but for years that was taken out” (Steve, 45, gay-identified).

Gay Community Acceptance

Measuring perceived acceptance of various groups within the London gay community elicited responses markedly different from those regarding the broader London community (see Table 2). Here, being a man of color or gay was perceived as most acceptable, with bisexuality less acceptable, and being a transgender man or woman even less so. As shown in Table 2, perceived
TABLE 4 Differences in gay and bisexual men’s mean perceived levels of acceptance of subgroups, broader community compared to the gay community

| Broader community acceptance compared to gay community acceptance of . . . | Difference$^a$ | t$^b$    | p            |
|--------------------------------------------------------------------------|-----------------|---------|--------------|
| Gay men                                                                  | −1.21           | −11.43  | <0.0001      |
| Bisexual men                                                              | −0.42           | −4.45   | <0.0001      |
| Trans men                                                                 | −1.09           | −10.15  | <0.0001      |
| Trans women                                                               | −0.92           | −8.68   | <0.0001      |
| Men of color                                                              | −0.32           | −3.96   | <0.0001      |

$^a$ Differences based on a 7-point Likert scale measure.
$^b$ Paired t-test.
$^c$ As an example, gay/bi men perceived that the level of acceptance for gay men within broader community was on average 1.21 points less than their acceptance within the gay community ($p < 0.0001$).

acceptance levels for each group differed significantly from one another at $p < 0.0001$, excepting gay men versus men of color, and transgender men versus transgender women; neither of these comparisons were statistically significant ($p > 0.05$). Finally, as shown in Table 4, the broader London community was perceived as being less accepting than the gay community for each group ($p < 0.0001$ for each comparison).

The high perceived acceptance for gay men within the gay community is perhaps an unsurprising finding. Located within a rural, regional Bible belt, London acts as a magnet for younger, rurally situated LGBT people moving from homophobic environments (Bruce & Harper, 2011). At the same time, because it is also located less than 200 miles from Toronto, groups such as gay students and white-collar workers might travel to Toronto for nightlife and services, or eventually move there (Rowe & Dowsett, 2008; Lewis, 2012). The London-Middlesex gay community is also a transient entity whose shifting dynamics affect the durability of community infrastructures. In 2005, HALO, the city’s central gay community nonprofit organization, bar, and referral center, closed permanently. HALO’s closure left a large physical and psychological gap in the community, leaving a rotating circuit of 1–2 bars, a bathhouse, and the local AIDS service organization (ASO) as the only visible community entry points. For gay men who might not fit easily into the remaining gay commercial scene, the ASO is an important support structure.

[Volunteering at RHAC is] an activity that just makes me feel so good inside and you know, it’s a reason to get out of bed in the morning. If it wasn’t for [RHAC], you know, I would not want to see where I would be at just because, you know, coming to [RHAC] and having that social interaction and knowing that I’m not being judged for being gay, I’m not being judged for being HIV positive . . . It’s really important that I come here” (Dean, 27, gay-identified)
Some felt, however, that RHAC was still perceived primarily as a place for the economically disadvantaged or HIV-positive despite its broadened service umbrella. “[RHAC] primarily supports . . . more marginalized members of society,” one said (Will, 29, gay-identified). Another added, “[London’s gay men’s community is] either for people . . . who like the bar scene or who are [HIV-] infected, but nothing . . . nothing for anybody else. That’s just my take on what I’m hearing” (Jason, 53, service provider).

As in the analysis of the broader community, the high reported perceived acceptance for men of color may mask important differences in how White men and men of color perceive the local gay community. One participant recounted:

I saw one person of colour in the [Pride London] parade and I don’t remember seeing any persons of color observing the parade . . . people of colour, um, generally don’t advertise their lives . . . But if I’m one who was interested in [the parade] . . . I’m going to, you know, enthusiastically provide that information to other black people so they can be there too. I don’t want to be the only token person. (Ronald, did not wish to share age or sexual identity)

He explained further that gay and bisexual men of color may also feel marginalized where few health or social resources are geared to their specific needs and experiences:

You won’t get a black person or a person of colour coming into the group that has 30 white people, one Indian and one Chinese people and expecting them to share and be open . . . But if they’re in a group with people that are in the same health circumstances that they are in and they’re all the same colour, then there’s gonna be more openness . . . If there were 10 support groups right now and none of them were multicultural I wouldn’t go to none of them even if I felt that I needed them.

Ronald’s narrative indicates that men of color may feel disconnected from the gay community unless providers make efforts to create communal experiences, avoid tokenization, and allay fears of being outing.

Trans participants also delineated themselves as separate from a “mainstream” gay community that they equated with socializing and nightlife at gay venues. One trans-identified participant stated: “I would say the community that I have run into that’s more of the mainstream community, you know, downtown at the clubs and things like that . . . that is a community that I am uncomfortable around . . . You know there is like the club-hopping community and the not-club hopping community I guess that is what I’d call it” (Rory, 18, straight-identified). This echoes Browne and Lim’s (2010) study
of Brighton (England’s “gay capital”), which found that trans residents connected more closely—geographically and psychologically—with a regional gender clinic than the local gay community defined by tourism and nightlife.

Age-Based Differences in Perceptions of Mainstream and Gay Community Acceptance

Middle-aged respondents perceived the lowest levels of acceptance for the various identity subgroups in the broader London-Middlesex community (see Figure 1). When asked to evaluate acceptance for the same subgroups within the gay community, middle-aged respondents again reported lower levels of acceptance than younger or older respondents (see Figure 2). We found a significant age effect (as indicated by a statistically significant quadratic term) on the assessment of acceptance of all groups other than bisexual men.

Younger gay men, who have come of age in a milieu of greater social acceptance and gay rights (Hammack & Cohler, 2011), typically demonstrated the most optimism about the inclusion of sexual minorities within mainstream society: “I have a lot of straight friends too that are fine with me being gay and one of my straight friends is really adamant about gay rights . . . I think it’s come a long way in both communities because people in the straight community are more accepting now and we are more willing to answer that acceptance and speak out for ourselves” (Joe, 17, gay-identified). Bisexuality was deemed equally acceptable as we observed no statistically significant difference in gay and bisexual men’s perceived acceptance of bisexual versus gay men in the broader London community, though some suggested that the acceptance was due to perceptions of bisexuality

![Figure 1](image-url)
as a stepping stone to being gay rather than a distinct identity. At the same time, the levels of perceived acceptance for gay men compared with other sexual/gender minority groups echoes recent work claiming that developments in gay rights have cultivated a group of inoffensive, “normal” gay male subjects that are acceptable to mainstream society, while other groups (e.g., trans people) are made marginal (Duggan, 2002).

Middle-aged men’s more pessimistic perceptions of community acceptance appeared based, in part, on experiences from earlier in life (see also Kertzner, 2001; Hammack & Cohler, 2011). One spoke about experiences of school-based, family-based, and sometimes internalized homophobia among middle-aged men who had grown up in the surrounding rural areas.

He continued, “Our school system . . . where you get the majority of this . . . very few parents . . . who would even consider that [their] child may be homosexual . . . for the most part, no, and it’s a sense of failure. It’s like having a disabled, crippled child. You know, there’s tons of guilt. I’m sure my parents went through all of that.”

Other middle-aged participants’ perceptions were influenced by religious upbringings in the London-Middlesex region. One noted that experiences of self-devaluation relating to religion were common among his peers,
but also among younger men: “You know, so many guys . . . the family was so darn religious . . . you’re a gay man, well, the devil was punishing you and stuff like . . . I’m still hearing that, you know from young guys that come out and say I was abused like whoa . . . there’s still a lot of discrimination, there’s still even from within” (Carl, 54, MSM-identified). Internalized guilt and shame may therefore keep some men from coming out or participating in gay community until later in life:

I haven’t heard a lot of people coming through saying that um, they’ve been shunned, except you know, unless they’ve been shunned by their family or by their community . . . um, I think the lack of acceptance is often from within . . . a lot of people who are reassessing their sexuality or . . . 40 years into a marriage to a woman . . . where the intimacy is long gone and everything is great except that they wind up down at the bathhouse and they’re feeling terrible about it. (Jason, 53, service provider)

Men in midlife also appeared most likely to carry forward trauma from events in the community’s past: “I’ve heard like historically you know going back to days where, you know, the mayor wouldn’t declare Gay Pride Day and . . . right-wing groups demonstrating at some Pride activities and how much of that is still happening” (Peter, 51, gay-identified). Younger men, in contrast, were more likely to dismiss discrimination from the mainstream community as a thing of the past.

I think people perceive London as being more conservative than it actually is . . . It’s something that sort of is like the, you know, Diane Haskett thing from years ago, but I mean, you’d think surely after she gets trounced in the subsequent election [in 2006, despite being re-elected immediately after the legal decision in 1997] that people would say “oh, maybe it’s not so bad. (Will, 29, gay-identified)

Mirroring their perceptions of low acceptance for gay and bisexual groups in London, men in or approaching midlife felt especially disenfranchised by “a funny split . . . like young people as in university students or college students and then everyone else” (Will, 29, gay-identified). While younger men tend to join university and college LGBT groups and continue to patronize the city’s main commercial gay bar, men in midlife have been left with fewer social supports and opportunities to connect with other men their age.

There’s been inklings in attempts to have a support group for older adults, [young adult groups are] basically up to 25, so if you’re coming out at 30 or in a married relationship and that falls apart because you really
Middle-aged participants also commented on the limited number of gay-associated activities and venues that they felt were age-appropriate or interesting.

Not all gays/bisexual or men having sex with men are into drag . . . they’re not all into bingo . . . I’m sure there’s a lot of gay men that love to go boating . . . Maybe I’m at an age where I do my own thing. (Carl, 54, MSM-identified)

With the demise of HALO a few years ago there is no social network or body as such, and typically I’ll hear this at the bathhouse, the folks are there, and you know they’re not especially sexual but, they don’t like the bar scene, they don’t like the music, they don’t like the atmosphere or what the bathhouse is, but they’ll go but saying “why is there nothing for folks . . . for whom sex is not the be all and the end all?” (Jason, 53, service provider)

The comments indicate that while some gay community infrastructure exists in the London region, it is seen as supporting primarily a younger, often transient population. While there was insufficient qualitative evidence to examine why older men demonstrated less pessimism about acceptance than middle-aged men, it is possible that this generation sees the current state of the community as more positive because they have survived the AIDS epidemic, a long-term lack of human rights protections, and the pathologization and criminalization of sexuality.

DISCUSSION AND LIMITATIONS

With regard to both the broader London community and the local gay community, respondents perceived a hierarchy of acceptance, with men of color and gay men perceived as most accepted, bisexual men as somewhat less accepted, and trans men and women as least accepted. At the same time, notable variations emerged. Respondents perceived that in the broader community, men of color were more accepted than gay men and bisexual men (who were deemed to be roughly equally accepted). With regard to the gay
community, it was men of color and gay men who were deemed equally accepted, while bisexual men were seen as less accepted. Respondents also perceived overall greater acceptance in the gay community than in the broader London-Middlesex community. In addition, middle-aged respondents perceived less acceptance for all groups than did younger and older respondents.

The high level of perceived acceptance for gay men may signify the growing normalization of gay identities and advances in gay rights. At the same time, comments suggested that acceptance might be directed specifically toward upwardly mobile, professional gay men, and that these segments of the community are also those most able to overcome the lack of social supports in a mid-sized city with a long history of intolerance. The figures for men of color suggested that respondents felt that racial diversity was as accepted as sexual diversity in the gay community, and even more accepted than sexual diversity within the broader community. Although the lack of differentiation for acceptance of gay men and men of color in the gay community could be due simply to higher perceived acceptance for gay men in the gay community (and not lower acceptance for men of color), the qualitative comments suggested that there was only limited integration of those with non-White identities into London’s gay community. At the same time, the high perceived acceptance for men of color in the broader community might be inflated due to predominance of White respondents in the sample. The high overall perceived acceptance for all men of color in both gay and broader communities and limited quantifiable differences in perceptions of acceptance across race groups mirrors Frost and Meyer’s (2012) finding that there are few differences in gay community attachment by race group. However, the qualitative comments regarding perceived invisibility of men of color in the gay community echo other recent qualitative work noting racial hierarchies within gay communities (e.g., Han, 2007).

While the difference in perceived acceptance for men of color and gay men in the gay community was diminished (compared with the broader community), the difference for bisexual men and gay men was amplified (though not significantly so). This might be due to the perception of bisexuality as a conflicted or incomplete sexual identity within the gay community, but as roughly analogous to homosexuality (in terms of acceptability) within the broader community. Trans persons were perceived as least accepted from both the mainstream community and the gay community. Trans persons have not necessarily enjoyed the greater mainstream social acceptance recently achieved for gay men and other sexual minorities, and they may also lack safe, inclusive spaces within urban gay communities characterized more by nightlife and social scenes dominated by gay men than by mutually supportive interaction between multiple sexual and gender minority groups.

Finally, the age-based segmentation of perceived acceptance suggests differing experiences of the London region and its gay community
among men of different generations. While younger men emphasized recent advances in rights and potential for the future, men at middle age frequently mentioned both individual traumas from growing up in homophobic environments as well as more recent traumas (e.g., Project Guardian, the Pride controversy) affecting their perceived acceptance of sexual and gender diversity in broader London and its gay community. In addition, these feelings may be amplified among older, long-term residents of the region compared with a younger, transient population who fits more easily into the commercial gay scene and may be living in London only temporarily. These trends mirror Barrett and Pollack’s (2005) study noting less gay community attachment among older and working-class men, as well as qualitative interventions that observe age, gender, and generational differences in broader experiences of gay community (Browne & Lim, 2010; Zablotska, Holt, & Prestage, 2011; Wilkinson, 2011; Hammack & Cohler, 2011).

The differences also reflect social, political, and institutional changes that have occurred across Canada but that affect different geographic regions and community subgroups differently. In Canada, the advent of legal rights such as same-sex marriage, adoption, and pension benefits have been treated as roughly universal goods for gay communities (Smith, 2008). Even so, their lived impacts across the sub-communities and sociodemographic groups within them may be more mixed. In the new milieu of rights-based activism, greater social inclusion in the form of same-sex marriage, pension, and adoption rights was pursued in the federal courts, while conservative-led regional governments (e.g., Ontario’s Harris administration during the 1990s and early 2000s) and federal government (the Harper administration since 2006) disinvested in health and social services infrastructure geared toward vulnerable and minority groups (Hackworth, 2008; Whiteside, 2009). Sustained, grassroots LGBT movements in large cities (e.g., Toronto) have effectively resisted the trend of rollback neoliberal governance in Canada, running services through critical masses of volunteers, in-kind donations, and petitions for public funding. However, smaller cities have not been able to rely on these types of infrastructures (Smith, 2005). A lack of gay community connectedness among some groups in London-Middlesex, then, may reflect declining infrastructures and services more than it does assimilation into mainstream society (Weeks, 2007) or an individualist gravitation toward personal communities (Holt, 2011).

The qualitative evidence suggests that class also mediates the observed hierarchies of perceived acceptance among respondents. For younger gay and bisexual men who are also middle-class, optimistic perceptions of acceptance may stem from coming of age during the promotion of human rights protections for sexual orientation in Canada, insulation within a university environment, ability to participate in the limited nightlife scene, or assuredness of their ability to move (e.g., to Toronto). For middle-aged gay and bisexual respondents, class status in the form of white-collar jobs,
dual incomes, or ability to engage in more normative practices (e.g., raising children) may to counteract the overall less optimistic perceptions of acceptance. Middle-class respondents also seem most able to dismiss, bypass, or circumvent the (under-) development of more inclusive, sustained community infrastructures by socializing in private and traveling elsewhere, while other groups (e.g., trans men) may remain marginalized.

While our study did not compare the survey and interview responses with those from a big-city referent group (e.g., gay and bisexual men in Toronto), our preliminary results suggests that recent advances in gay rights and mainstream social acceptance may have a mixed effect in smaller and mid-sized cities. As recent interventions have shown (Knopp & Brown, 2003; Lewis, 2013), cultural hierarchies that position large metropolitan, commercial gay scenes as the birthplaces and anchors of gay community never truly applied to smaller cities such as London. In the 1980s and 1990s, a single venue, HALO, fostered an active, self-sustaining gay community. It is only in the new milieu of advanced rights, reduced funding for health and social services, and the closure of organizations such as HALO, that Toronto—a city with established LGBT services, networks, and neighborhoods—emerges as the region’s dominant urban gay community while smaller-city communities experience continued disinvestment and social fragmentation. Incidentally, the relative security of community identity and visibility in Toronto has spawned both a “post-mo” media discourse that suggests a declining need for village-based gay venues and the emergence of alternative, non-bar queer spaces as well as trans and people of color spaces (Nash, 2013).

London-Middlesex, in contrast, seems to have suffered many of the drawbacks of the new right-based milieu (e.g., homonormativity and gay community disinvestment) without seeing the supposed benefits, such as visibilities for more diverse gay and bisexual groups or the development of a rich array of alternative gay and queer spaces. London and other mid-size or small cities might therefore benefit from community centers that offer opportunities for volunteering and networking across identity-based groups. Such centers—even in an online capacity—would offer new health promotion opportunities amid persistent perceptions of ASOs as spaces solely for the HIV-infected (Zablotska, Holt, & Prestage, 2011). Creating such spaces, however, may require public endorsements, funding mechanisms, or public–private partnerships (Lewis, 2013). Meanwhile, groups who are perceived as most marginalized within the gay community (e.g., trans people, racialized immigrants) might be included through greater network-building with extant organizations such as student groups or the local newcomer settlement center, and through explicitly multicultural and gender-fluid events. Thus, for London and potentially other mid-sized cities, narrowing the social cleavages among gay and bisexual men may require reframing the form and function of gay community rather than merely celebrating ascendance to a “post-mo”
era. More work, therefore, needs to be done to assess whether gay communities are beginning to evolve differently in smaller cities than they are in large metropolitan areas.

The conclusions drawn in this study, however, must also be considered in light of several limitations. First, as a small-scale, convenience-sample study, the results cannot easily be extrapolated to gay and bisexual men and communities more generally, though it may suggest possibilities for this larger group. Second, while the inferential statistics used in this study highlight gradients in perceived social acceptance among gay and bisexual men, they cannot be interpreted in the same way as in a larger, random-sample study. This is primarily a descriptive analysis, and the quantitative analysis does not provide information as to why differences in perceived acceptance exist. However, the study’s mixed-methods design overcomes some of this limitation, in allowing more detailed explanation. Third, since we queried perceived acceptance for men of color without sexual identity being specified, we cannot comment on the acceptance of gay or bisexual men of color. Fourth, the higher perceived acceptance for all groups within the gay community may be due to positive bias stemming from surveying respondents who are members of the community they are being asked to describe. Despite these limitations, the study provides an important point of departure for monitoring and assessing emerging cleavages in both gay communities and gay “equalities,” particularly in mid-sized cities that do not follow dominant metropolitan narratives of gay advancement.

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