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Clinicians

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Editor's Note

"We have a lot of work to do . . .": The Emergence of
The Association of Black Sexologists and Clinicians

I pondered for some time about what this editorial note would be about now that the Journal of Black Sexuality and Relationships launched this past October, 2014. In the first issue, I discussed how the Journal is finally here and how it emerged out of a necessity for scholars and clinicians to engage in ongoing dialogue about sexuality and relationship issues that have transhistorically woven themselves into the experiences of persons of African descent. When I wrote my last Editorial Note, I must confess that I did not imagine how much work we would collectively need to do in order to frame/reframe academic and lay discourse around sensitive issues (I say this after taking a deep breath while I write). There were several events that happened across the country that merit formal conversation between us and the communities we serve. Given that, at the conclusion of this article, I will offer a rationale for the development of an organization that specifically advocates for healthy sexuality expression and relational experiences of persons of color through scholarship and informed practices. I believe it to be necessary that our discussions and movements be intentional as we try to critically evaluate circumstances that are sensitive and have *always* been a part of the collective social fabric and consciousness.

For the past few months, the media and other social entities strategically used Black families, Black relationships, and Black sexuality as a means to ~~uplift and empower~~ . . . create additional chaos, toxicity, and stereotypes over dysfunctional patterns that exist in all races/ethnicities. I satirically use the strike through feature because there was minimal national dialogue about how to strengthen and improve *all families* who experience injustice, survive in abusive relationships, or engage in developmentally appropriate parenting. Conversations between viewers/listeners and "expert" panels in mainstream media outlets continuously pathologize Black males and fe-

males, Black relationships, and the social response of the Black community. Please keep in mind that the social pathology is meticulously sculpted by tools of privilege (McIntosh, 1988; Pulido, 2000), ignorance, tokenism (Dawson, 2014; Laws, 1975; Linkov, 2014; Roper, 2011; Wright, 2001), and systemic oppression (Applebaum, 2005; Feagin, 2013). These tools are fashioned by stereotypes and assumptions that seem to minimize, negate, and/or ridicule individual functioning and governance. As scholars, clinicians, and leaders it would be up to us to offer divergent viewpoints. It is also our responsibility to offer our expert perspective about potential familial and systemic shifts in society that may increase the likelihood of healthier decisions and functioning.

Police brutality/homicide, intimate partner violence, and variations in disciplining children were opined about on all major television channels and serve as conversation points in college classrooms, corporate break rooms, coffee shops, social media, and in our homes. Using the series of unfortunate events that happened in Ferguson, Missouri, the national spotlight on domestic violence among professional athletes, and the punitive disciplinary strategies of some families, here are a few assumptions that could be garnered over the past few months of 2014:

1. Some Black males will follow/not follow directions when detained by law enforcement and it is legally okay to use excessive forms of coercion (e.g., use of a Taser, gun, baton, tear gas, etc.) to subdue the individual. Families and communities will have minimal or no means of recourse. If they respond, it should be voting at the next election (which may be several months away).
2. It is okay for law enforcement officials to use excessive amounts of force (e.g., tear gas) when trying to control crowds who demonstrate peacefully.
3. Some people enjoy privileges and special treatment even when they have broken the law or done harm to another individual. Society is willing to look the other way or sweep despicable acts under the rug . . . as long as there is no video proof of what really happened.
4. It is okay for some Black men to be violent towards Black women as long as it is not caught on camera.
5. A strong Black woman should stand by her man even if her personal safety is compromised.

6. Black males have a difficult time governing their emotions appropriately and are verbally and physically reactive when confronted or challenged by their partners (or anyone else) (refer to item 1).
7. When a man becomes a father, it means that he knows how to be a father and has a sound understanding of developmentally appropriate discipline.
8. Only Black heterosexual relationships involve intimate partner violence.
9. Black children should not have a voice or have any decision-making capabilities because they never really know what they are talking about.
10. Black couples and families never need help from mental health professionals.
11. Only Black families use corporal punishment towards their children.
12. Media personalities, professional athletes, and talk show hosts have academic and professional backgrounds in mental health and can provide direction to society about familial and relational challenges.
13. When in doubt, it is okay to blame politicians, professional sports administrators, and society for our familial social challenges and shortcomings.
14. Professional athletes who are in dysfunctional relationships should apologize to the general public by means of a press conference when they are wrong.
15. Professional athletes should be socially and emotionally mature and make good decisions when they are in their early to mid twenties.

These assumptions and others keep our country socially and emotionally paralyzed because they do not enable constructive dialogue to occur between partners, parents, organizations, and institutions. One of the aims of my colleagues and I who put together the *Journal of Black Sexuality and Relationships* is to challenge these assumptions and engage in collective activism about the aforementioned sensitive topics. Keep in mind though, that culturally and racially sensitive conversations must be specific, intentional, and tailored to persons of African descent. If discourse becomes anything

other than addressing the specific needs of Black folks, then there exists the possibility that ideas and belief systems may become confounded. Please understand that I am not trying to create a monolith of ideas, beliefs, and behaviors regarding the expression of Black people. Actually, I am suggesting that the conversational efforts be more *relativistic, fluid, and socially constructed* to each participant who is active in the social exchange (Irvine, 1995). I am also advocating that there should be institutions and organizations that cater to facilitating both formal and informal discussions between scholars, clinicians, and educators with the lay community.

There are a number of professional sexuality and clinical mental health organizations that invite ongoing dialogue between its members and the lay community. Some of them even have credentialing processes that certify that some members are more capable than others at executing a particular clinical, counseling, or educational related task. From a transhistoric and evolutionary standpoint, these organizations emerged out of a need for scientists, scholars, practitioners, and other professionals to come together and exchange research and best practices in the field of sexology. The “need” emerged from a lack of understanding about human development and individual physiological response; inhumane and discriminative treatment of women, persons with mental health challenges, gays, lesbians, bisexuals, and transgendered communities; and an effort to advance contraceptive technology.

One organization, the Society for the Scientific Study of Sexuality (ssss) was “founded in 1957 to encourage the rigorous systematic study of sexuality.” According to the ssss website (2014), there are over 700 individuals who are members in this society. The mission statement reads:

The Society for the Scientific Study of Sexuality (ssss) is dedicated to advancing knowledge of sexuality and communicating scientifically-based sexuality research and scholarship to professionals, policy makers, and the general public. ssss fosters a worldwide community of diverse professionals committed to a scholarly and scientific approach to acquiring and disseminating accurate knowledge of sexuality. As a Society, we believe that freedom of inquiry is essential for the promotion of human welfare and the reduction of ignorance and prejudice about sexuality.

ssss has been a pillar in the field of sex research and training “the new generation” of sexologists. The promotion of freedom of inquiry and rigorous research are strong maxims offered by the organization. The organiza-

tion offers *The Journal of Sex Research* which invites scholars to submit articles of contemporary sexual inquiry.

Another organization, the American Association of Sex Educators, Counselors, and Therapists (AAECT) was founded by Patricia Schiller in 1967. The following passage is taken from the AAECT website (2014):

The story of the founding, and growth of AAECT (American Association of Sex Educators, Counselors, and Therapists) is inextricably mingled with the story of Patricia Schiller, its founder, along with other important contributors. As the new field of sex education, counseling and therapy began to emerge, and the need for some kind of order and direction became more and more apparent, Patricia Schiller was on the spot, with a wide background in social concerns, with the specialized training that qualified her as a professional and leader of professionals, in this field, and with the administrative experience, drive, and creative talent needed for undertaking the job at hand.

In September 1967, Patricia Schiller became the unpaid Found-Executive Director of the American Association of Sex Educators and Counselors (AAEC), eventually to become the American Association of Sex Educators, Counselors, and Therapists (AAECT). With the full support of her husband, she devoted three rooms in their house to office space for the fledgling organization, and loaned it \$1,000 from their personal funds to make it operational. A gift of \$500 from Philip Stern, a Washington philanthropist, paid for a mailing announcing the first annual meeting in April 1968. Closely associated with her from the days of the Washington Project in the District of Columbia, was Rosalie Blasky, her good friend who came with AAEC on a part-time basis at its inception, and who remained as her part-time aide until April 1980. Two additional factors helped launch the new organization. One was a strong Board of Directors, with Warren Johnson, Ed.D., as its first president. Other members included Jed Pearson MD, obstetrician and gynecologist; Berkely Hathorne, ThD, pastoral counselor; Susan Roth, MSW; Nancy Berliner BA, researcher and writer for Planned Parenthood; John Chandler MA, Executive Vice President of the National Association of Independent Schools; Elizabeth Nichols BA; Majorie Shumacher MS, Executive Directors of Planned Parenthood; and Florence Yohalem MA, social scientist. Morton Yohalem served as legal counsel from the beginning until his death in October, 1979. Thus, was born an interdisciplinary group dedicated to a worthy cause.

Like SSSS, AASECT was formed to promote healthy sexuality and provide a professional outlet for educators, counselors, and therapists to become leaders in the field of human sexuality. Scholar practitioners from around the world are members within both of these organizations.

Another organization, the Society for Sex Therapy and Research (SSTAR), was founded the following decade in 1975. Similar to SSSS and AASECT, it is an organization devoted to growing and refining the field of human sexuality by galvanizing its professionals. SSSS arose for sexuality research, AASECT was developed for improving sexuality education, counseling and therapy, and SSTAR emerged out of the need to:

. . . facilitate communication among clinicians who treat problems of sexual function, sexual identity, and reproductive life. SSTAR strives to provide a forum for exchange of ideas between those interested in research in human sexuality and those whose primary activities are patient care through annual meetings, fall clinical conferences, membership newsletters, and an e-mail list-serv for members. SSTAR membership is multidisciplinary. Members must be actively involved in treatment or research of sexual disorders/sexuality and possess superior clinical competence and high ethical standards (2014).

Like the other two organizations, SSTAR serves the field of human sexuality by offering scholarship and clinical opportunities to its membership and the community.

While these three organizations (SSSS, AASECT, SSTAR) help advance the field of human sexuality, they may not have adequately addressed the needs of some targeted populations (e.g., persons of African descent). To illustrate this point, none of them have a history of electing leadership who are persons of African ancestry. Moreover, none of them have offered public position statements that address contemporary issues of intersectionality that have affected our country over the past year (e.g., events in Ferguson, Missouri; intimate partner violence among Black couples; the use of corporal punishment by Black parents; sexual decision making of Black adolescents and young adults; high level of violent Black crime among some Black men in Chicago, Illinois; high levels of incarceration of Black men; disproportionate HIV infection rates of Black women; etc.). Thus, it seems necessary that an organization be formed that specifically targets the socio-systemic and individual needs of persons of African descent.

A group of professionals have had ongoing conversation over the past

year about developing a journal and organization that intentionally address the confluence of race, sexuality, and mental health needs through research. The Journal of Black Sexuality and Relationships (JBSR) was recently published in Summer/Fall, 2014 to serve as a medium in which inquiry and scholarship could help advance information about the experiences of persons of African ancestry. In the same vein, members of the JBSR editorial board voted on an organizational name, The Association of Black Sexologists and Clinicians in order to organize, share, collaborate, and network with professionals who have a research and/or clinical interest in the sexual expression and mental health issues of Black people. The organization *specifically* targets the sophistication, complexities, and layers that exist when discussing sensitive issues about the intersection of race, sexuality, and gender. There are other organizations that aim at the psychological functioning (American Association of Black Psychologists), social work care (National Association of Black Social Workers), and scholarship (National Association of African American Studies) targeted at the history and experiences of Black people. While these organizations have served our communities for decades, none of them have consistently addressed sexuality functioning of persons of African ancestry.

My colleagues and I are proud to welcome you into our professional family and into the Association of Black Sexologists and Clinicians (ABSC). The ABSC is an interdisciplinary professional organization dedicated to improving the sexual expression and lives of persons of African descent. The organization was formed out of a need to formally address the juncture of race and sexuality through research, clinical practice, and social discourse. The organization is comprised of sociologists, social workers, psychologists, professional counselors, mental health practitioners and coaches, clergy members, marriage and family counselors and therapists, family planning specialists and researchers, as well as students in various relevant professional disciplines.

The mission reads:

The Association of Black Sexologists and Clinicians promotes the sexual health of individuals, couples, families, and communities by advocating for culturally sensitive research, informed clinical practice, and culturally sensitive educational curricula. The organization seeks to foster ongoing dialogue in an effort to reduce and or prevent adverse sexual health outcomes. As a welcoming and affirming organization, we advocate for sexual, racial, and gender equality.

The organizational vision asserts:

The Association of Black Sexologists and Clinicians will change or enhance the way you think about intersectionality. In addition, we strive to offer research, clinical, and educational opportunities that revolve around sexuality and race. We seek to empower our community by engaging, informing, dialoguing, learning and collaborating about sexual health issues.

It should be noted that there are other organizations that have sprouted that target the healthy sexual expression of persons of color including (but not limited to): The Society of Black Scholars in Human Sexuality; LGBTQ Scholars of Color Network; and the Women of Color Sexual Health Network. What's exciting about these organizations, as well as the Association of Black Sexologists and Clinicians, is that all of them seek to provide scholarship, education, and informed clinical mental health practices towards populations that have been misrepresented, underserved, and/or marginalized.

We hope that you share your research, clinical best practices, conceptual essays, book reviews, and letters to the editor with our community through the *Journal of Black Sexuality and Relationships*. Troubling and challenging events across the country and the globe will continue to occur. The ABSC and this journal will strive to remain sensitive to the social and sexual health needs and expression of persons of African origin as well as advocate for equality across the lines of racial, gender, and sexual orientation.

In this issue of the *Journal of Black Sexuality and Relationships*, Dr. JaNelle Ricks of Emory University and her colleagues, qualitatively explore condom use and negotiation and the impact of several factors (social, economic, and political context). Their manuscript, "I Don't Have a Problem With It, But Other Guys Do': An Exploration of Condom Negotiation among Young Black Men Who Have Sex with Men in the South," is profound as it discusses the Theory of Reasoned Action (TRA) and its influence on sexual decision making. The authors are able to uncover some of the attitudes and intentions of condom use among Black men who have sex with men.

Similarly, the next article, "In the Context of Concurrency and Monogamy: Ideal Partner Matching in Predicting Coital Behaviors among African American Adolescents," by Dr. Candace Best and her colleagues, examines the connection between coital frequency, condom use, and partner matching. The authors were able to gather compelling data from 268 African American young women and 173 African American young men.

The following article, “Sex as a Concealed Weapon: Race, Gender and Incivility of Office Politics” also examines men’s attitudes about sexuality. Dr. Leah Hollis surveyed 141 employed, Black men and asked about their use of flirtation as a work advancement strategy. She offers insight into some of the historical, economic, and sociological substrates that may underpin flirtatious behavior in the workplace by some Black men.

Within a similar light, Dr. Dianne Brown of Widener University offers us, “Grounded Theory: Exploring Sexual Attitudes and Beliefs Influencing Black Fathers’ Decisions Not to Marry.” What is intriguing about this qualitative inquiry is that she uses focus groups to capture some Black fathers’ decisions to marry or not marry the mothers of their children. Her research gives voice to this phenomenon and she offers several recommendations for the field.

Finally, a new component has been added to the *JBSR*. It is a “Perspectives” section. This portion of the Journal is devoted to members of the *JBSR* Editorial Board who choose a topic and engage a mentee for writing. It is important that we offer an opportunity to the next generation of scholars to publish their perspectives about how the field has shifted over time as well as offer their insight on current issues. Dr. Bridgette Peteet, of the University of Cincinnati, and mentees Caravella McQuistian and Quiera Lige present their perspective about Black online dating. “Something New: A Scholarly Review and Clinical Perspective of Black Online Dating” explores some of the parameters, nuances, and barriers to internet courtship processes.

We are looking forward to hearing from you and welcome your feedback. Finally, we would like to extend an invitation to you to come to Philadelphia, Pennsylvania on October 1–3, 2015 to share your research and/or clinical best practices with our community. The Black Families, Black Relationships, Black Sexuality Conference will host scholars and clinicians from around the world who will continue to shape the field of sexology and sexuality consultation. I hope that you will join us and celebrate the work that you have already done or currently do. More information is available at theabsc.com and at thejbsr.com.

HAPPY NEW YEAR AND BEST WISHES!!!

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