

# Negotiating Connection to GLBT Experience: Family Members' Experience of Anti-GLBT Movements and Policies

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There have been numerous legislative initiatives to limit gay, lesbian, bisexual, and transgender (GLBT) people's rights at local, state, and national levels (G. M. Herek, 2006). Although research has focused on how GLBT people are affected by these initiatives, to date no research has explored the impact of this legislation upon the families of origin of GLBT people. This qualitative study sought to explore this topic. Through use of grounded theory methodology (B. G. Glaser & A. L. Strauss, 1967), 10 family members of GLBT people living in a state facing a marriage amendment to limit marriage to heterosexual couples were interviewed. All participants interviewed for this study were supportive of their GLBT relative. The results of this study reflected that anti-GLBT movements and policies affected participants' personal relationships, mental and physical health, perspectives about their country and government, and hopes about the future. Movements and policies shaped personal identity and beliefs for some participants. The clusters, underlying categories and a core category of this study, *Negotiating My Connection to GLBT experience*, are described with implications for counseling psychologists and other mental health professionals.

*Keywords:* gay, lesbian, family of origin, anti-GLBT legislation, minority stress

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*Sexual prejudice*, a persistent hostility toward homosexual behavior and gay, lesbian, and bisexual people, is prevalent throughout the United States (Herek, 1995, 2000). Such prejudice can be overt, as in the case of hate crimes, or subtle, for example, in the prizing of heterosexual relationships in wedding announcements to the exclusion of recognition of same-sex relationships. As well, this prejudice is manifested in present state and federal legislation when the rights of gay, lesbian, bisexual, and transgender (GLBT) individuals and same-sex couples are restricted in partnering and relationships, as well as employment. Although research has explored effects of anti-GLBT legislation for GLBT individuals (Levitt et al., 2009; Mathy & Lehmann, 2004; Russell, 2000; Russell & Richards, 2003), less is known about the experiences of family members of GLBT individuals in light of these initiatives. Therefore, we explored the experiences of family members of GLBT individuals just before a referendum to change a state

constitution and define marriage as a legal contract between one man and one woman.

## Existing Research on Family Members of GLB People

Family-of-origin research within the GLB literature primarily has focused on the perspectives of family members when they learn a family member is GLB (e.g., Beeler & DiProva, 1999; Ben-Ari, 1995a, 1995b; Herdt & Koff, 2000; Muller, 1987; Savin-Williams, 2001). Much less research attention has been given to disclosure by transgender individuals to their families of origin. Although family member's reactions to learning someone they love is gay, lesbian, or bisexual do vary, many experience initial negative emotional reactions (sadness, anger, guilt, and shock) and then adjust to the news over time (Savin-Williams & Dubé, 1998). Major life changes have been shown to relate to depression and

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Portions of this research were presented at the 115th Annual Convention of the American Psychological Association, San Francisco, CA. A companion research project conducted by an affiliated research team explored the experiences of gay, lesbian, bisexual, and transgender persons to the same political events described in this article. Please see Levitt et al. (2008). In the present study, 1 of the 10 participants was related to a research participant interviewed for this companion project (Participant J).

This study is one aspect of a larger research endeavor conducted by a team of researchers at The University of Memphis and University of Kentucky. The aim of the overarching initiative was to explore the impact of anti-GLBT legislation on the psychological well-being of GLBT individuals and their families. Both qualitative and quantitative methodologies

were used in this body of work. We wish to acknowledge Sharon Scales Rostosky and Ellen Riggle of The University of Kentucky for their collaboration on this initiative. We also acknowledge Sharon G. Horne's GLBT research team at The University of Memphis, who provided support throughout the investigation process. In particular, Brandy Smith, KT Hiestand, and Michael Bricker contributed perceptive observations and assisted with transcription. Lastly, we wish to pay our ongoing respect and gratitude to the participant family members of GLBT individuals who were willing to entrust us with their stories. Their unwavering loyalty to their families as well as their commitment to improving the lives of their GLBT family members were both moving and inspiring.

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mental health issues in general (Dohrenwend, 1973). Learning of a family member's GLB identity, which typically differs from other family members' orientations and can be experienced as threatening relationships with significant others, can be experienced as a major life change (Herdt & Koff, 2000).

How family members deal with societal stigma toward GLB people is a common theme in the literature. For example, accepting a child's GLB sexual orientation once it has been disclosed can be difficult when parents hold fears of judgment by others or endorse beliefs that having a GLB child is indicative of inadequate parenting (Bernstein, 1995). Family members commonly feel concern about their GLB family member's physical and emotional well-being and also worry about discrimination that their GLB family member might encounter (Beeler & DiProva, 1999; Ben-Ari, 1995b; Herdt & Koff, 2000; Muller, 1987).

Similar to other stigmatized groups, family members of GLB individuals may struggle with how to support their GLB family member. In his exploration of race relations in the United States, Shipler (1997) discusses challenges for parents with biracial or multiracial children. Both Black and White parents with biracial or multiracial children experienced pain when their children encountered prejudice related to their ethnic or racial background. Shipler also describes difficulties biracial children face as they struggle to sort through their biracial identities. Unless they themselves were biracial, parents grappled with how to help their children in this process. Analogous to parents with biracial or multiracial children, family members of GLB individuals typically do not share the same sexual identity as their GLB family member and may not have the experience or resources to manage stressors that occur as a result of being in connection to GLB experience (Herdt & Koff, 2000; Muller, 1987; Savin-Williams, 2001).

Research suggests individuals who are close with a person who has experienced trauma may also experience stress (Figley, 1998, 2002; Pearlman & Mac Ian, 1995; Rothschild, 2006). *Secondary traumatic stress* refers to the behaviors, thoughts, and feelings stemming from compassion for the experience of a significant other or, in the case of clinicians, clients who have experienced a traumatic event. Families of GLB individuals may also experience secondary stress through their relationship with a GLB person.

Whether family members of GLBT people experience a similar response due to sexual prejudice, in the form of anti-GLBT movements and policies, has yet to be explored through research. Research suggests that GLB people experience increased stressors due to dealing with stigma as a sexual minority (Meyer, 1995), often referred to as *minority stress* (Meyer, 2003). Minority stress has been shown to place GLB people at risk for mental health concerns (D'Augelli, 2002; Mays & Cochran, 2001; Meyer, 1995, 2003).

### Social and Political Context

In 1996, The Defense of Marriage Act was signed into law and allowed individual states to disregard same-sex unions recognized in other states (Herek, 2006). The debate regarding the legal recognition of same-sex relationships has continued within the political arena and throughout public discourse. At the time of this study, 45 states had laws or constitutional amendments that restricted marriage to unions between one man and one woman, whereas only one state (Massachusetts) issued marriage licenses to same-sex couples, and two states (Connecticut and Vermont) rec-

ognized same-sex relationships through civil unions (Human Rights Campaign, 2006). In November of 2006, the state of Tennessee passed an amendment to its constitution defining marriage as a legal contract between one man and one woman (Tennessee Department of State, 2006). It was passed by a popular vote of 81.26% (1,419,434 supported, 327,536 opposed; Tennessee Department of State, 2006), the highest percentage of passage of any state constitutional amendment vote on record. The interviews of this study were conducted in the 6 months preceding the passage of this amendment.

In addition to present laws that limit the rights of same-sex couples, legislation also discriminates against transgender individuals, regardless of their relationship status or sexual orientation. For example, the Tennessee state code specifically prohibits an individual from amending their birth certificate after sex-reassignment surgery. In addition, Tennessee's nondiscrimination law does not address gender identity discrimination, nor sexual orientation discrimination (Human Rights Campaign, 2007). The absence of this legislation means that GLBT people can lose their jobs, be evicted from their housing, or be denied services solely on the basis of their sexual orientation or gender expressions.

Only a handful of studies have explored anti-GLBT movements and policies with GLBT individuals. Russell (2000) and Russell and Richards (2003) investigated the psychological consequences of a 1992 Colorado Amendment that banned GLB people from being allowed to request minority status, quota preferences, protected status, or assert discrimination. Many GLB people reported increases in symptoms of anxiety and depression (Russell, 2000). More recently, Mathy and Lehmann (2004) found that married heterosexual women were significantly less likely than partnered bisexual and lesbian participants to report suicidality, substance abuse, use of psychiatric medications or psychotherapy and attributed that difference to the increased stressors that lesbian and bisexual women face. On the basis of these findings, they suggested the United States Defense of Marriage Act poses a substantial public health risk for lesbians and bisexual women. Other research concurs that denial of marriage rights to same-sex couples is a significant stressor and an important health issue for GLBT individuals (Riggle & Rostosky, 2007; Riggle, Thomas, & Rostosky, 2005).

Despite a lack of attention to family members of GLBT people within the research literature on anti-GLBT legislation, Russell and Richards (2003) noted the role of *witnessing* by family members when GLB people encounter antigay campaigns and elections. When traumatic situations occur, witnesses recognize the traumatic event. Successful witnessing on the part of family members during anti-GLB legislation, demonstrated in offers of support, was found to be a source of resilience for GLB persons. In contrast, failed witnessing, when family members did not acknowledge the impact of anti-GLB legislation, was a significant stressor. Similarly, participants in a study of anti-GLBT initiatives (Levitt et al., 2009) reported that their personal relationships had become dichotomized due to the tensions or supports around anti-GLBT initiatives. Relationships that became conflicted due to initiatives could potentially exacerbate feelings of isolation. However, supportive relationships with family and friends were even more important precisely because these relationships were under threat. When participants found support in their relationships, they felt stronger. The effects of witnessing and involvement on family members, however, has been underexplored.

## The Consequences of Anti-GLBT Legislation for Family of Origin

Russell and Richard's (2003) work highlighted the important role heterosexual family members of GLB individuals play for GLBT people when dealing with anti-GLBT legislative efforts. It is likely that those closely related to GLBT people, such as family members, may encounter sexual prejudice and face personal and interpersonal challenges given the present climate. Some researchers have explored encounters with stigma after a relative comes out (Beeler and DiProva, 1999; Ben-Ari, 1995a, 1995b; Bernstein, 1995; Fields, 2001) and have found that dealing with such social hostility is not necessarily all negative. Fields (2001) suggested family members gained an awareness of their GLBT family member's experience in such instances and could better promote social change.

Social support and personal resilience may help buffer the effects of minority stress for GLBT people (Diaz, Ayala, & Bein, 2004; DiPlacido, 1998; Meyer, 2003) as well as for those related to a GLBT person. As family members of GLBT people have to cope with GLBT hostility and discrimination, they may draw on personal or social resources for support. Parents, Families and Friends of Lesbians and Gays (PFLAG) is a national organization set up to provide support to both relatives and GLBT people (PFLAG, 2006). Not only is this organization actively affirming of family, friends, and GLBT people, it also is involved in working toward rights for GLBT people through education and advocacy (Bernstein, 1995; PFLAG). Herdt and Koff (2000) reported that a large percentage of families who had successfully integrated their gay or lesbian family member into their family following coming out were involved with gay-supportive resources, in comparison to those families who had not integrated their family member. For example, Merighi and Grimes (2000) found that accessing gay-supportive resources was an important step for some parents in coming to accept their gay sons.

Given the lack of research studies exploring the experience of family members of GLBT people in dealing with anti-GLBT movements and policies, the aim of this study was to consider the depth and breadth of this experience. A qualitative research methodology was used because these approaches are effective for examining participants' experiences in a comprehensive manner (McLeod, 2001).

### Method

#### Participants

*Interviewees.* A sample of 10 participants were recruited from Memphis, Tennessee. Nine participants identified as White, and 1 identified as Black. Participants ranged in age from 21 to 85 years old ( $M = 54.20$ ,  $SD = 20.03$ ). Six participants identified themselves as middle class, 2 as high socioeconomic status, and 1 reported his socioeconomic status as "student." All except 2 participants had lived outside of Memphis, Tennessee at some point. Five participants were involved with PFLAG. Two participants were involved with another GLBT-affirmative group (1 of whom also attended PFLAG). Three were not engaged in a GLBT-affirmative group.

All participants were related to someone who identified as being GLBT. Six of the participants reported they were related to a gay or

homosexual male, 3 participants were related to a lesbian family member, and 1 participant was a family member of a bisexual, transgender person (female born, male identified). One participant reported also being related to other GLBT family members in his extended family in addition to the gay family member he referred to throughout the interview. All participants identified their own sexual orientation as heterosexual. There was diversity with respect to the participants' relationship to the GLBT person; participants were mothers (6), a father, an aunt, a brother, and a sister of a GLBT person.

One participant in this study was a mother of a transgender son who identified as bisexual. Her son shared being dually influenced by anti-GLBT movements and policies, due to both his sexual orientation and gender identity (see Levitt et al., 2009). Initiatives that limit the rights of GLB people may obstruct protections to transgender people as well. For example, rights for transgender individuals often are protected through legislation in tandem with GLB rights or after GLB rights have been granted. This participant addressed the effects of legislation on her son due to both his transgender identity (not allowed to change birth certificate to reflect presented gender) as well as his bisexual identity (could not marry his female partner due to same-sex marriage prohibition).

The length of time since participants' family members had shared their sexual orientation or gender identity ranged from 4 to 30 years ( $M = 12.80$ ,  $SD = 8.90$ ). However, 2 participants (whose family members came out 4 and 9 years ago) reported they had suspected their family members were GLBT prior to their "coming out." Six of the interviewees were married, 2 were single, 1 was divorced, and 1 was widowed. Six of the participants' GLBT family members were single, two were in a same-sex relationship, one was partnered, and the other married to their same-sex partner, although the participant was unsure of the details surrounding her family member's marriage. Six participants indicated a Christian faith or specific denomination of Christianity (Methodist, Catholic, or Disciples of Christ); the other 4 identified as Unitarian, Jewish, Buddhist, and Atheist (see Table 1 for demographic information by participant). All participants were relatively supportive of their GLBT family member.

*Investigators.* The investigators were three women from the fields of counseling and clinical psychology. Two of the researchers were psychologists and faculty members of a local university, and the primary investigator was a doctoral student in counseling psychology.<sup>1</sup> The researchers were GLBT-identified and identified themselves to participants as GLBT-positive. In half of the inter-

<sup>1</sup> All three authors of the present study contributed to the second study. Heidi Levitt was the primary investigator of Levitt et al., 2008. Jennifer R. Arm was an interviewer and contributed to the analysis of the data for the companion piece. Sharon G. Horne contributed to project development and was involved in the writing of the companion manuscript. The studies were run concurrently with overlapping data collection and analysis. Jennifer R. Arm was involved with analysis of the data for this study when she began work on the second study. We viewed the dual-project approach as a strength of these studies, as it facilitated our understanding of the topic and contributed to the dependability of the studies. In order to manage the influence the companion piece may have had on analysis of this study, Jennifer R. Arm kept detailed memos that documented similarities she noticed within the data and considered whether the similarities reflected undue sway or simply the common experiences of managing anti-GLBT legislation.

Table 1  
Demographic Information<sup>a</sup>

Participant	Age	Race	Gender	Relationship status	Relationship to relative	Religious affiliation	Gender and sexual orientation of relative	Years known relative is GLBT	Relationship status of relative
A	69	Caucasian	Male	Married	Father	Jewish	Gay male	~20	Partnered (~18 years)
B	59	Caucasian	Female	Married	Mother	Catholic	Gay male	~12	Same-gender relationship (not partnered)
C	50	Caucasian	Female	Married	Mother	Catholic	Homosexual male	6	Single
D	21	Black/African American	Female	Single	Sister	Christian	Lesbian woman	5	Married
E	67	Caucasian	Female	Married	Mother	Methodist (inactive)	Homosexual male	23	Single
F	85	Caucasian	Female	Widow	Mother	Methodist	Lesbian woman	30	Single
G	52	Caucasian	Female	Divorced	Mother	Christian	Gay male	9 (suspected prior to son coming out)	Single
H	66	Caucasian	Female	Married	Aunt	Unitarian	Lesbian woman	14	Single
I	23	Caucasian	Male	Single	Brother	Buddhist	Homosexual male	5 (suspected prior)	Single
J <sup>b</sup>	50	Caucasian	Female	Married	Mother	Atheist	Transgender male-identified bisexual	4 (suspected homosexuality for 10 years prior)	Monogamous relationship with female (4 years)

Note. GLBT = gay, lesbian, bisexual, transgender.

<sup>a</sup> Readers will note that the descriptors of each category vary across participants. We used open-ended questions to elicit participant's information in order to reflect their own understandings of their identity, information about their GLBT relative, and pertinent demographic information. <sup>b</sup> Participant J is the mother of participant J in the companion research study (Levitt et al., 2008).

views, the researchers did not identify as GLBT themselves until the conclusion of the meeting because they did not want to bias participants to be more favorable toward GLBT individuals if that was not indeed the case. However, the 5 participants in PFLAG already knew that the researchers were GLBT-identified due to prior casual contact in the community. Some social science researchers argue that familiarity may actually enhance the process of gathering information because of a better working relationship (Burman, 1999; Hesse-Biber, 2007). At the end of the interviews, participants were asked whether knowing that the researchers were GLBT (or not knowing) made a difference in what they disclosed; all participants reported that they did not think it influenced their responses.

In the early stages of analysis, initial meaning units and categories were shared with colleagues on a local GLBT research team in a brief, informal consultation. Jennifer R. Arm reflected on group feedback and considered whether it fit with the research data. This consultation primarily contributed to the development of Cluster 2, which describes participants' sense of perseverance in maintaining their convictions amidst anti-GLBT movements and policies.

### Procedure

Grounded theory method (Glaser & Strauss, 1967) guided the entire research process. Grounded theory is used to develop a theory based on the experiences participants share about their lives (Fassinger, 2005) and can be understood within a framework of hermeneutic analysis (Rennie, 2000). Hermeneutic approaches tend to explore the creation of meaning as inherently a constructivist process as opposed to an objectivist one.

**Recruitment.** The investigators sought to solicit participants with diverse racial, ethnic, age, and socioeconomic backgrounds. Participants were recruited through organizations in the area that served GLBT people and their families (e.g., PFLAG, a local gay and lesbian community center, and the like), and through word of mouth. Announcements about the study were posted at various locations throughout the city: a local gay and lesbian bar, GLBT-affirming restaurants or coffee shops, at the researchers' university, and the gay and lesbian community center.

**Interviews.** All three investigators conducted interviews with participants, although the majority of the interviews were carried out by Jennifer R. Arm after receiving training in qualitative interviewing techniques. The interviews were audio recorded, lasted approximately 1–1.5 hr in duration, and were semistructured. The interviews focused on the overarching question, "What is it like having a family member who is GLBT during this time of anti-GLBT movements and policies?" Subquestions related to this overarching question asked the participants to describe how anti-GLBT legislation impacted them personally, in their family relationships, and in their relationships with people outside of the family (e.g., work, with strangers). These questions were open ended, non leading, and designed to encourage participants to share any experiences related to the main question. The full interview protocol is included in an online supplement to this article.

**Analysis.** Transcripts of the interviews were analyzed in accordance with the grounded theory method (Glaser & Strauss, 1967) as laid out by Rennie, Phillips, and Quartaro (1988). This method is based on an inductive process in which patterns that are observed within the data are assessed and refined through

continued data collection and analysis (Rennie, 2000). To do this, the interview transcripts were divided into meaning units that each contained one meaning (Giorgi, 1970). These meaning units then were compared with all other meaning units and “subcategories” were formed that represented common themes among them. Because a meaning unit may be relevant to more than one theme, meaning units can be coded under multiple subcategories. Once subcategories were developed, they were compared with each other to develop upper level “categories.” This process of comparison continued in this way, forming a data hierarchy until “clusters” of categories developed. The clusters consisted of groups of categories that represented the most salient themes. A “core category” was formed at the apex of the hierarchy, encompassing the underlying clusters and categories. The meanings conveyed in higher levels of the hierarchy are more abstract than the categories beneath them.

Given that research topics can yield different types, quantities, and codes of data, the number of levels within the final hierarchy varies according to the data. In grounded theory, data collection continues until new data ceases to add new meanings to the hierarchy and “saturation” is reached (Fassinger, 2005). In this project, the hierarchy was saturated at the eighth interview, meaning that no new categories were created from the ninth or tenth interviews, suggesting that the analysis was comprehensive. Furthermore, the use of memoing tracked our understandings of the data, and we felt confident that data analysis reflected depth as well as complexity. All three authors of the present study contributed to data analysis.

*Memoing.* Throughout the process of conducting this study, the researchers wrote memos to monitor the research process, including their ideas, potential biases, and method-related decisions (Fassinger, 2005; Rennie, 2000). Furthermore, this memoing was used in order to minimize the effect of biases that could have influenced the analysis.

*Credibility checks.* This study involved three checks to assess the rigor of the study. (a) At the end of each interview, the interviewers asked credibility questions to assess the thoroughness of the interview (e.g., asking whether there was anything they wished to add that had not been asked, whether they had feedback concerning the interview process, and whether they would summarize their experience related to the overarching research question). In response to the credibility questions, many of the participants confirmed or elaborated on what had just been discussed and stated they did not have anything new to add. (b) Participants were provided a summary of the findings of the study and asked to provide feedback about those findings on a questionnaire that included a Likert-type scale and open-ended questions. These summaries contained an abbreviated description of each cluster and category. Six participants returned the questionnaires. Upon receipt of these questionnaires, we followed-up via e-mail or phone with 3 participants who indicated the core category did not accurately reflect their experience in order to solicit their perspectives and then amended the findings to more accurately convey the results. A description of the initial core category and the amended category follows in the *Results* section. When asked whether the summary of the research findings overall accurately reflected the types of experiences that family members of GLBT people are having during this time of antigay movements and policies,

participants tended to concur ( $M = 6.00$ ,  $SD = 1.10$ ; 1 = *not at all*, 7 = *very much*). Also, they indicated the findings did not contradict the types of experiences that family members of GLBT people were having ( $M = 1.17$ ,  $SD = 0.41$ ; 1 = *not at all contradicted*, 7 = *very much contradicted*). (c) Lastly, a process of consensus is used in qualitative studies as a credibility check to demonstrate that different people are interpreting the data in a similar fashion (e.g., Hill et al., 2005). Jennifer R. Arm was primarily responsible for analyzing the data but worked closely with her coresearchers, working toward consensus on the data interpretation. In accordance with a methodological hermeneutic epistemology (Rennie, 2000), Jennifer R. Arm’s interpretations were given priority if any conflict occurred, as she was present at all interviews, conducted the initial data analyses and therefore had a broader lived experience of the data. However, the three authors’ understandings of the data primarily corresponded.

## Results

The final hierarchy included a total of 793 meaning units dispersed across five levels: one core category encompassed six underlying clusters that, in turn, subsumed three or four categories each. Categories contained two to five subcategories. In this hierarchy, there were two levels of subcategories. The lowest subcategory and most basic level of the hierarchy consisted of groups of meaning units. Each cluster and its categories are described, followed by a description of the core category (see Table 2). An expanded version of Table 2, which includes the first of the subcategory levels, is available as an online supplement to this article. The following results are supplemented with quotes from the interviewees, which are identified with uppercase letters and correspond to the individuals described in Table 1.

### *Cluster 1: “Too Close to Home: The Closer I Perceive Anti-GLBT Movements and Policies to my Family Member, Family, or Myself, the More Distressed I Feel”*

Within this cluster, participants described the ways that anti-GLBT initiatives and movements had impacted their family. When participants saw initiatives interfering with their GLBT family member and/or their family life, they became more distressed. All 10 participants contributed to this cluster. This cluster contained three categories.

Most of the interviewees (9 of 10) felt personal pain related to discrimination and movements and policies. This theme is conveyed in the first category of this cluster (1.1). Participants explained that having a GLBT relative was an essential “truth of my life” (Participant B), but they struggled to express this truth as they feared others would misunderstand them or GLBT issues. Furthermore, participants explained the ways in which movements and policies led to rejection by others, loss of friendships, or pain associated with discrimination. One mother described:

Everybody’s supposed to have the same rights, period, end of story . . . . I’m the mother of a gay son . . . . I want him to be able to do whatever he wants to do just like everyone gets to, including [being married] if that’s what he wants to do . . . . And I ask people, “If my

Table 2  
*Clusters and Categories, With Number of Participants Who Contributed Units to Each*

Cluster	Category
1. <i>Too Close to Home: The closer I perceive anti-GLBT movements and policies to my family member, family, or myself, the more distressed I feel.</i> (10) <sup>a</sup>	1.1 My family member and I have both felt pain, as we have both been hurt by discrimination, movements, and policies. I struggle to express this truth of my life to others because I fear others won't hear me. (9)
	1.2 When movements and policies are separate from family life, I am not as concerned about my family member being hurt by movements and policies within our family. (8)
	1.3 Wanting to protect my family member from the consequences of movements and policies fuels my desire to try to change the world to gain rights for all GLBT people. (10)
2. <i>Ideological Conviction Over Pain: I keep fighting the good fight despite discouraging interactions with others and self-doubt because I believe in what I am doing.</i> (9)	2.1 It's discouraging and confusing that others, especially GLBT people, or parents/family of GLBT people, don't believe in or help with GLBT rights, but I'm still involved. (8)
	2.2 I wonder and judge how I should react and how I should act in dealing with movements and policies because I want to do the best I possibly can for my family member. (5)
	2.3 I am still "fighting the good fight" despite having doubts about my effectiveness. (8)
3. <i>Emotion Management: I have to be vigilant in managing the reactions I feel about movements and policies; otherwise, I become distraught due to the intensity of fear I feel for my family member.</i> (8)	3.1 I become politically active about GLBT rights because the anger and fear I felt about movements and policies were affecting my health. (3)
	3.2 The personal consequences (such as stress, anxiety, depression, poor health) of talking with people about GLBT rights and defending my family member are too high when I won't change their mind anyway; now I don't try to change their mind. (4)
	3.3 I am angry and hurt about movements and policies, but I try to keep calm so that it does not affect my daily life. (6)
	3.4 Because the fear I have for my family member around safety and movement and policies is overwhelming, I need to recognize that my family member's safety and experience of movements and policies is out of my control. (4)
4. <i>Future Expectations Are Characterized as Strained Hopefulness: I am not getting my hopes too high for fear I become discouraged about this country if it takes a long time to get GLBT rights.</i> (10)	4.1 It is comforting to think of other marginalized groups who have been granted, equal rights and notice younger generations are more accepting of GLBT people; this gives me hope for the future that we will achieve GLBT rights. (3)
	4.2 I get discouraged that GLBT rights will take too long to achieve; this makes me feel impatient and afraid for GLBT people that discrimination will continue. (7)
	4.3 When I see GLBT people hurt by movements and policies or fear growing limits to civil rights, I lose faith in governing bodies and the political process. (10)
5. <i>Confusing Relationship Boundaries: When I feel understood, those relationships are a place of solace; meanwhile, other relationships have become thorny.</i> (10)	5.1 I hold back from talking about movements and policies with others when I suspect I may damage a relationship, fear being misunderstood, or struggle to understand the boundary between my relationships and movements and policies. (9)
	5.2 I attend PFLAG (or support group) because others understand what it is like to have a GLBT child amidst movements and policies; however, this poses challenges also, as focusing on political losses can be disheartening and depressing. (4)
	5.3 Having friends and family who are supportive of me and my family member has helped me feel happier and stronger in the face of movements and policies. (8)
	5.4 Movements and policies have a good impact on me because I feel better now that people are talking about GLBT issues; in the past, I felt silenced, no one to talk to about my worry for my GLBT child. (3)
6. <i>Identity Quandary: I have been challenged to consider and strengthen my own identity and beliefs because movements and policies present a different version of reality than my own.</i> (9)	6.1 I am stunned when movements and policies conflict with what I believe to be true about my GLBT family member, civil rights, or this country. (4)
	6.2 Movements and policies have changed my perspective and/or participation in my faith, as religion and politics feel all connected. (8)
	6.3 Movements and policies have had a good impact on my life because in reaction to movements and policies, I have learned important lessons and feel a sense of accomplishment as I contribute to fight for GLBT rights. (7)
	6.4 Movements and policies have changed my sense of self: I'm stronger, but sometimes I am also less likable. (3)

*Note.* The number in parentheses reflects the number of participants who contributed to each cluster and category. GLBT = gay, lesbian, bisexual, transgender; PFLAG = parents, Families and Friends of Lesbians and Gays.

son gets married will you come?" You know, when we're kind of joking about it, and go "Yeah, you know, whatever," I know there's some people who wouldn't. They would be mortified, and they would not come and I just, I, that just breaks my heart. (G)

This quotation highlights the distress expressed by participants when they felt others did not comprehend their experience with anti-GLBT movements and policies.

In Category 1.2, participants (8 of 10) described that when anti-GLBT movements and policies were separate from their fam-

ily life, they were not as concerned about their family member being hurt by movements and policies within the family. For instance, anti-GLBT movements did not cause strife in the family when family members' shared similar perspectives about GLBT rights and when anti-GLBT family members were not considered to be immediate family. One participant reported deliberately keeping politics separate within her family in order to maintain an open dialogue about GLBT rights with conservative family members. In contrast, movements had the potential to

infiltrate the family. When participants witnessed their GLBT family members or other family members being upset about these movements and policies, it contributed to their own feelings of distress. The same mother who discussed deliberately keeping politics separate also described her hurt, knowing her husband had been a military officer for 25 years, yet her son could not serve:

This is, is my country hurting my son, and it won't even let him join the military . . . but this ambiguous feeling is contradictory for him, "but they don't want me to join because I'm gay. They didn't mind me living on the base, going for the boy scouts, being involved, my dad going to war, but they don't want me." You know, that hurts and that has made me bitter. (E)

These participants emphasized the ways in which GLBT hostility affected not only their GLBT relative but also other family members who held similar empathy toward GLBT concerns.

The last category in this cluster (1.3) captured the need that participants' (10 of 10) had to protect their family member beyond the familial context, which compelled in them a desire to gain rights for all GLBT people. This desire could be characterized by emotional support for their family member and/or by active engagement in advocacy for GLBT rights. A mother of a gay son described putting herself at risk out of protection for her son and her desire to educate others:

My son didn't want me to even put a bumper sticker on the car years ago. I said, "(son's name), I am putting it there because you're afraid." I said, "Don't put one on your car, but if somebody hurts a grandmother, a straight grandmother, they're gonna look a whole lot worse than if they hurt you. I'll put a bumper sticker on my car." (E)

These participants took steps to support and protect their GLBT family member in ways that GLBT individuals might not feel safe enough to pursue. When asked to give feedback on a description of this cluster, participants positively endorsed this finding ( $M = 5.00$ ,  $SD = 1.79$ ; where 1 = *not at all*, 7 = *very much*).

*Cluster 2: "Ideological Conviction Over Pain: I Keep Fighting the Good Fight Despite Discouraging Interactions With Others and Self-Doubt Because I Believe in What I Am Doing"*

Most participants (9 of 10) explained that their own beliefs in equal rights for GLBT people as well as their own sense of social justice propelled them to advocate for GLBT rights despite discouraging experiences or doubts about their own effectiveness. Within this cluster, the three underlying categories reflected a sense of perseverance.

Category 2.1 contained themes of confusion and frustration when participants (8 of 10) either encountered people who were rejecting of GLBT people or did not support efforts to obtain GLBT rights. Some participants reported expecting to experience alienation from others due to their personal activism and yet, they made concerted choices to remain active due to their relationships with their GLBT family member and/or because of their beliefs about social justice. Lack of support came not only from outside the GLBT community but also from other relatives and GLBT peoples themselves. For example, one mother wondered about her efforts when her gay son asked her why she was involved and

expressed a lack of concern as to whether a marriage amendment passed:

I think, "Well, and why am I doing all of this if that doesn't really bother him that much?" . . . you know, he doesn't really understand why I'm active in that kind of thing . . . I just want to try to do the best, you know, if I can help, ah, for him, you know. I mean, yeah, mostly it's been because of him that I do this. (C)

Despite wondering about her involvement, similar to other participants, this mother's personal beliefs and desire to support her son kept her committed to GLBT rights work.

Participants (5 of 10) questioned how they should engage with anti-GLBT movements and policies. This theme is represented in the second category in this cluster (2.2). The participants who contributed meaning units to this category expressed feelings of guilt that they should do more for GLBT rights or for their GLBT family member. The mother of a transgender, bisexual individual explained her personal pain when she learned her child was being picked on at school:

I thought that as long as the parents in the home were very accepting of the child that everything would be okay. But I was naïve as to the influence of the outside world . . . she mostly had the problem in the Catholic school with anyone who doesn't conform is a subject of ridicule and humiliation. And I felt really bad about not realizing that for a long time, and I think that was the root of [my child's] problem . . . that was very painful for me. I felt like the worst mother in the world . . . I felt like I had let [her] down. (J)

As characterized by this mother, participants could blame themselves for not fully realizing the effects of anti-GLBT sentiments, movements, and policies.

Despite having doubts about their effectiveness, many participants (8 of 10) kept "fighting the good fight," which was captured in Category 2.3. Such work included educating others in both formal and informal settings, speaking out against anti-GLBT remarks, writing letters to legislators, attending pro-GLBT rights demonstrations, careful selection in voting for political representatives, and attending a support group. Participants sometimes disclosed to others they had a GLBT relative as a form of advocacy. A father of a gay male spoke of the frustration he felt despite working for GLBT rights at both the local and national level.

A: I think some of it is frustration with me . . . why am I not able to impart to them [other family members of GLBT individuals] the feelings that I got from PFLAG when I went there? The desire to go out and change the world and make the world better for my child . . . And so some of that, I'm frustrated with me, not being able to be more effective and do more than what I can do.

Interviewer: What could you do to be more effective?

A: I don't know. I don't know. You know I, I speak, I talk, I write, you know. I cajole, I get one on one with people. I don't know. I'd like to know.

Participants also explained feeling frustrated that other family members were not involved with advocacy. Despite these frustrations, participants who contributed to this category spoke of persistent advocacy efforts. It is of interest that 3 of the participants who contributed meaning units to this category explicitly stated that they were not "into" political activism, although they also

described their involvement. Participants responded affirmatively that the second cluster of results represented the experience of being a family member of a GLBT person ( $M = 5.83$ ,  $SD = 1.33$ ; 1 = *not at all*, 7 = *very much*).

*Cluster 3: "Emotion Management: I Have to Be Vigilant in Managing the Reactions I Feel About Movements and Policies; Otherwise, I Become Distraught due to the Intensity of Fear I Feel for my Family Member"*

This cluster highlights the ways in which family members (8 of 10) managed their strong emotion about anti-GLBT movements and policies and its impact on their relative's personal safety. Coping with the intensity of fear participants shared about their GLBT relative's safety could require concerted effort and vigilance. Many family members in this study had developed strategies to deal with personal ramifications on their emotional health. There were four categories in this cluster.

Whereas Category 2.3 reflected participants' desire to contribute to GLBT advocacy efforts due to their personal beliefs, analysis of the data revealed that some participants' needed to do something with their anger and fear, which led them to become politically involved. Category 3.1 conveyed the fueling of emotion into action and was described by 3 participants. Quite directly, a mother of a gay son said, "I had to use my anger in a positive way or it would kill me" (E). The same mother explained the noticeable impact on her physical health when she described reading the newspaper:

I read letters to the editor and a couple of weeks ago, I went upstairs, and I took my blood pressure, because [I] take medicine, you know, I mean I'm old. I take medicine for things. I don't need to be upset. I shouldn't let it upset me, but I can't stop it. My blood pressure was sky high from reading [homophobic] letters to the editor! It affects me like that. It affects my health and makes me anxious, and it no longer makes me depressed, but I'm still very angry. (E)

Other participants also reported experiencing distressing reactions to images and messages from the media about present legislation initiatives and anti-GLBT groups, which incited them to action.

Participants varied vastly in their ability to cope with their reactions, and, for some, there were tremendous consequences. Category 3.2 also reflected health consequences as participants reported stress, anxiety, depressive affect, and health problems (specifically, high blood pressure). In contrast to the preceding category, 2 participants explained that they had disengaged from discussing GLBT rights with others as they had in the past. A mother of a gay son described feeling less anxious when she stopped trying to change people's minds to support GLBT rights:

I don't mind discussing it [GLBT rights] with people at the time, but later I'll keep thinking about it for a long time. You know, you go home, you think about [GLBT rights] . . . you go to work, you think about it. You know, you try to sleep, and you start thinking about it, and it's really not worth it to me to cause that kind of anxiety. You know, I don't know that you can really change peoples' beliefs . . . I feel like the people who don't want to see the issues, they're going to go on with their life, and they're not going to think anything about it. They didn't go home and worry about it and think about it, but, I

did, so, um, I just don't think that's worth it. And ah, so anyways, I try not to do that anymore. (C)

The experience of this mother illustrates that some participants found it necessary to disengage from GLBT issues, at times, in order to take care of their own personal health rather than face potential adverse reactions.

The majority of participants used cognitive techniques to manage their reactions, which were found in the last two categories of this cluster. In Category 3.3, 6 out of 10 participants explained their need to try to keep calm despite feeling angry and hurt about movements and policies in order to keep reactions from affecting their daily life. Participants reported remaining composed by rationalizing their feelings and not dwelling on their frustration and disappointment. One participant described self-soothing by understanding that anti-GLBT legislation was "just politics:"

It should make anybody upset. You know, so yeah, but if you got upset, you shot yourself over every one of these things that happened to these people, dead forty times over, but you just have to realize these people are doing this for power and money and the election and the rest of that. It doesn't have anything to do with my child. (A)

This participant's beliefs about politicians helped him to keep anti-GLBT legislation on a level that felt less like a personal attack on his own adult gay son.

In Category 3.4, participants (4 out of 10) described a need to acknowledge that their family member's safety and experience of movements and policies was beyond their control, despite their worries. A mother spoke of a number of fears she had for her gay son, including murder or abuse due to hate crimes:

Well, fear of what is going to happen to him, but now, and you know, I'm better because I can't do anything about it and that people make choices . . . I am powerless . . . When you realize you don't have control, then at least then you're able to let go of it and then the fear leaves. (B)

Participants described that "letting go of control" led to a change in their emotional experience and could make it more bearable to continue to deal with GLBT issues. When asked to provide feedback about this cluster, most of the participants agreed this cluster reflected the experiences of family members of GLBT people ( $M = 5.67$ ,  $SD = 1.21$ ; 1 = *not at all*, 7 = *very much*).

*Cluster 4: "Future Expectations Are Characterized as Strained Hopefulness: I Am not Getting my Hopes too High for Fear I Become Discouraged About This Country if it Takes a Long Time to get GLBT Rights"*

All 10 participants contributed meaning units to Cluster 4. The themes of this cluster centered around participants' perceptions and feelings regarding the future and GLBT rights while living in the United States. Within this cluster, there were three categories. Together these categories conveyed mixed emotions: hope on the one hand, fear on the other.

Some participants (3 of 10) gathered hope by reflecting on other marginalized groups who had once been denied equal rights (Category 4.1). For example, a father of a gay son shared his beliefs that marriage equality would be granted "some day:"

I'm sanguine enough to know that some day we're going to have ah, marriage equality for everyone. It may not be in my lifetime, may not be in my grandchildren's lifetime, but it will come . . . . Just like the Baptist church had to apologize to Black people, one day they're going to have to apologize to gay people. They're not going to do it right now, you know, but they will. Is it unfair that a Black person and a White person couldn't get married? Yeah, that was unfair, but now that's been changed, you know. (A)

This father seemed able to hold on to this belief even with the reality at present.

Despite this father's sentiments, in Category 4.2, many of the participants (7) shared an opposing view or mixed anticipation about the future. This category described participants' feelings of discouragement that GLBT rights would take too long to achieve and discrimination would continue. They seemed to hold vague sentiments of hope in check due to having some doubt about how quickly anti-GLBT legislation would change. A mother of a gay son explained her feelings:

Well, I don't exactly know what to do about it . . . [it] just kind of makes me sick. I get very discouraged, kind of, because I'm thinking, "Oh no . . . all these states are doing this." It's almost like trying to start all over. And I realize in my lifetime it's not going to be different probably. (G)

Some participants explained they needed to be patient precisely because this process would take a long time. In addition, one participant spoke of his concern that children were being taught to hate, and this hate would perpetuate anti-GLBT attitudes in future generations.

All 10 participants contributed meaning units to the last category (4.3). Participants shared they had lost faith in governing bodies and the political process and feared increasing limits to GLBT civil rights. They were concerned or fretful that religion and government were intertwined and reported feeling alarmed about growing censorship and fewer civil liberties for people. Although 2 participants reported simply that movements and policies had not effected how they felt about their environment, the other participants reported feeling embarrassed, bitter, frustrated, and betrayed by their city, state, region (the southern United States) and/or the country. These feelings often stemmed from their GLBT family member and/or other GLBT people experiencing harassment due to their sexual orientation or gender identity. Some participants reported they considered moving themselves or wished their GLBT family member would move to another region where they may have a better quality of life. One participant, the brother of a gay male, explained his reaction following the 2004 elections, when there was a marriage amendment on the ballot in the state in which he was residing at the time:

I go and vote, and I vote against this measure, and I vote for a Democrat, and I feel like I have done my part to influence the world. And then—the measure passes, President Bush is reelected, you know, nothing changes . . . . I essentially had a break down after that election . . . . And I'm seeing just one useless thing after another happening, and it really starts to sink in that, you know, these hopes I had as a child, these [positive] assumptions I had about my country, they weren't really real to begin with. You know, they just kind of faded away when seeing this. You know, since then it's just, it's gotten worse . . . I just, I went into a deep depression. You know, I,

withdrew from everybody. Changed my major first off; I got out of politics. I said, "I just can't do this anymore." (I)

This participant's story highlighted the ways in which participants experienced the personal ramifications of anti-GLBT legislation on their own sense of community beyond witnessing its impact on their GLBT family member and family. Those participants who provided feedback strongly endorsed this cluster ( $M = 5.83$ ,  $SD = 0.98$ ; 1 = *not at all*, 7 = *very much*).

*Cluster 5: "Confusing Relationship Boundaries: When I Feel Understood, Those Relationships Are a Place of Solace; Meanwhile, Other Relationships Have Become Thorny"*

Throughout the interviews, themes related to confusion about personal relationships emerged. Participants connoted the ways in which some relationships were a place of solace while other relationships had become difficult. Relationships were further complicated when they held juxtaposing qualities of being both safe and complex. All 10 participants had meaning units assigned to this cluster. There were four categories within this cluster.

Category 5.1 described that participants' (9 of 10) made the decision to hold back from talking about anti-GLBT movements and policies when they feared they might damage a particular relationship. They tended to be cautious when the other person held a different opinion about GLBT rights and/or when they did not know of a person's position on GLBT rights. For instance, one mother described the ways in which her son's sexual orientation had influenced her romantic relationships:

I just kind of felt like I had nothing to offer [a dating partner] because I had too many things going on. And because of his [my son's] other [mental health] issues, [due to] even him dealing with himself being gay—he had such a hard time with that at first. And it was just, I think it would have been too much for a stepparent or a, or somebody I was just dating. (G)

For this mother, initiating and developing dating relationships was difficult. Participants also described it could be threatening to maintain already established relationships that did not support the interviewee's efforts to support their GLBT relative.

Eight participants shared they had difficulties trying to link movements and policies and their personal relationships. Two participants found it confusing to think about how their relationships were influenced by movements and policies. Many participants provided seemingly inconsistent reports as to whether they believed anti-GLBT movements and policies had affected their relationships. For example, a sister of a lesbian (D) reported anti-GLBT movements and policies had not affected her relationship with others, but she also reported feeling embarrassed that people did not want to visit her sister's house, and she avoided people who made derogatory comments toward GLBT people. Participants wrestled with whether discriminatory legislation caused people to be anti-GLBT or whether animosity toward GLBT people was the source of discriminatory legislation and religious movements.

Involvement with PFLAG or similar support groups also proved to be multifaceted for participants, which was captured by Category 5.2. Four participants contributed to this category. When

participants encountered homophobic attitudes and lost friendships due to anti-GLBT discrimination, these groups provided a sanctuary where others would comprehend and empathize with how difficult these experiences were. Their participation also could lead to challenges, however. In particular, one participant described feeling disheartened when the group's focus was advocacy related, as she was reminded of political defeats:

PFLAG is very good, and I think it's, you know, needed, but it's very politically oriented, and you don't get too much positive feedback, you get mostly negative . . . it's a little disheartening . . . (C)

This participant also described PFLAG as the only place where she had a voice to express her views in support of her son and the GLBT community. She acknowledged the important role of PFLAG, but she also emphasized the challenges regarding her involvement.

As with the preceding categories of the fifth cluster, participants shared their mixed experiences with their relationships in context to movements and policies. This particular theme was found within Category 5.3. Many participants (8 of 10) were clear that support from family and friends supported them to feel happier and stronger in the face of anti-GLBT movements and policies. However, participants (5 of 10) also described an uneasy tension within their family due to differing views about GLBT issues and approaches to dealing with movements and policies. Participant G communicated this theme as she spoke of her desire for her heterosexual son to be both more aware of present anti-GLBT legislation and more compassionate toward his gay brother:

We just don't talk about it [anti-GLBT legislation] much cause he's just not, you know, he doesn't know what's going on. You know, if it's not under the hood of a car, he really doesn't really know what's going on and doesn't, doesn't pay any attention. And sometimes I wish he would. Sometimes I wish he would understand a little more of what other folks are going through. (G)

At the same time, this mother also explained that she felt grateful her son was accepting of his gay brother. This example shows the ways family members, although torn at times regarding tensions within the family, were appreciative of any support they received because they knew family could reject them or their GLBT family member.

In the last category of this cluster (5.4), 3 family members (of 10) conveyed that movements and policies had a positive impact because people now are talking about GLBT issues, whereas before the prevalence of anti-GLBT legislation, GLBT individuals tended to be invisible. They described the lack of awareness of GLBT issues and silence regarding GLBT people within the United States 14–30 years ago. GLBT issues in the present public discourse appeared to provide some relief for the participants who contributed to this category.

When providing feedback about the results, participants reported that this category somewhat reflected the experiences of family members of GLBT people ( $M = 3.83$ ,  $SD = 1.94$ ; 1 = *not at all*, 7 = *very much*). Feedback scores and comments from 2 participants may help explain these ratings further. One participant indicated this cluster did not reflect all the experiences of family members (score = 1). She reported, "I personally never hold back, though I know some that do." Another participant indicated that

the cluster did not represent the experience of being a family member, as her own family is not anti-GLBT. The findings in this cluster, therefore, might be most relevant to people who either have significant others who are anti-GLBT rights or who are concerned about losing relationships due to differences in opinions on GLBT issues.

*Cluster 6: "Identity Quandary: I Have Been Challenged to Consider and Strengthen my own Identity and Beliefs Because Movements and Policies Present a Different Version of Reality Than my own"*

In this cluster, participants (9 of 10) explored the ways in which anti-GLBT movements and policies had challenged their own personal identity and beliefs. For many, this testing led to a personal strengthening of their convictions. This cluster contained four categories.

The first category within this cluster (6.1) describes how participants (4 of 10) were shocked when movements and policies conflicted with what they believed to be true about their GLBT family member, civil rights, or this country. In addition, participants stressed feeling more upset about their faith adopting anti-GLBT stances than about anti-GLBT legislation. One participant explained he was more upset about religious movements than about present legislation and described his reactions to Fred Phelps, a pastor and leader of an independent Baptist church who preaches against homosexuality:

Probably, the worst feeling that I've ever had has been the two or three times I've come up against Fred Phelps and his demonstrators. Those people are just, just, you know, just remind me of horror and evil. And I had this just tremendous almost like nausea around those people. It's, they really produce more negative feelings than almost anybody else did. I feel much more negative around them than I do about the legislative thing, ah, and it's, I don't know, it's just an abhorrence, ah, an intolerance. (A)

This participant struggled to comprehend the clash between his own beliefs and the values of this religious movement, which left him reeling.

Participants (8 of 10) also described how anti-GLBT religious movements and policies changed their perspectives on and/or participation in their faiths (category 6.2). Two participants reported leaving their church after they became aware of anti-GLBT prejudice within their church, whereas other participants changed the nature of their involvement. One mother reported that religious movements had led to isolation for her as an atheist because having a GLBT child conflicted with the attitudes of the predominantly Christian neighborhood in which she lived.

In the next category (6.3), participants (7 out of 10) reported that they had learned important lessons from anti-GLBT movements and felt a sense of accomplishment as they contributed to the fight for GLBT rights. An aunt of a lesbian noted:

It [anti-GLBT legislation] does energize and make me angry and . . . that makes me want to continue to push . . . Ah, it keeps everybody on their toes. It keeps me aware of the issues. It, ah, makes me want to—stop the anti-GLBT movement. (H)

For some participants, being committed to GLBT rights gave them a sense of empowerment.

Category 6.4 reflected participants' (3 of 10) feelings that movements and policies had changed their sense of themselves and led them to become stronger. One participant, a mother of a gay son, described the ways in which she changed since she first learned her son was gay:

He told me more than once, "Mom, that is only a part of my life." I said, "I know that [son's name], but I am so disturbed and angry inside that if I don't act and I try to keep it in, it hurts me." And when I found myself out holding a sign up one day, and I had always been your typical Southern woman, we didn't do that kind of thing. You didn't want your name in the paper. And I'm thinking, "I'm standing on this street corner, protesting with a sign in my hand, and there's no going back for me now. I'll never be that woman again." I don't want to be. (E)

This mother also noted that as she has become stronger, she had also become less likeable. The process of reconciling their own values with present movements and policies posed a dilemma for participants and reflected an identity quandary that could be resolved with an increased sense of self and personal integrity. Participants' feedback responses reflected they tended to agree with the themes in this cluster ( $M = 6.0$ ,  $SD = 1.55$ ; 1 = *not at all*, 7 = *very much*).

#### *Core Category: Negotiating My Connection to GLBT Experience*

The core category is an overarching theme that encompasses lower level clusters and categories. Participants were asked to provide feedback about the core category prior to finalizing the category. This preliminary category was *The process of negotiating my distance to GLBT experience: Avoiding both merging (due to the hazards of vicarious minority stress) and disengagement (due to the desire to maintain connection), brings about an evolution of self that allows for a safe distance to engage in advocacy*. Although participants had primarily agreed with the findings of the clusters and categories, participant feedback about the core category was variable ( $M = 4.67$ ,  $SD = 2.58$ ; 1 = *not at all*, 7 = *very much*), reflecting moderate endorsement of the overarching core theme. Three participants strongly endorsed this core category (score = 7), but 3 other participants reported a score of 2 or 3. One respondent reported he/she had "trouble wrapping my mind around" the core category. On the basis of this feedback, we contacted the 3 participants and inquired further. Overall, it seemed these participants found the core category confusing and unwieldy. Therefore, we revised the core category through discussion and consensus, striving to render the core category clearer.

The amended category was *Negotiating my connection to GLBT experience: To find a safe distance to engage in advocacy, it can help to (1) strive to maintain my connection with my GLBT relative while (2) using effective coping strategies to avoid experiencing secondary minority stress and (3) affirming my own identity and social justice values*. We sought additional feedback from participants on the amended core category. Those participants who provided feedback (6 of 10) strongly endorsed this category ( $M = 6.58$ ,  $SD = .38$ ; 1 = *not at all*, 7 = *very much*). We deemed these responses sufficient grounds to finalize the core category.

In order to develop the core category, we attempted to pull the clusters into a conceptual overview of the data. We believe the core category reflects each of the six clusters because negotiating

connection to GLBT experience is present in each cluster. Cluster 1 conveys participants' desire to maintain their connection with their GLBT family member, whereas Cluster 3 and Cluster 5 demonstrate consequences to mental health as a result of dealing with movements and policies. However, Clusters 3 and 5 also reflect participants' use of coping strategies. The commonalities between Clusters 2 and 6 highlight participant's affirmation of their own social justice values and identity.

Participants grappled with striking a balance between wanting to find ways to distance from anti-GLBT movements and policies that could be disturbing but remain in connection to their GLBT relatives' experiences. Many of the family members were empathically attuned to issues for their relative and other GLBT individuals. When participants found themselves identifying strongly with GLBT experience, it often resulted in experiencing painful consequences (such as anxiety, stress, depression, negative health consequences), reflecting secondary minority stress. However, emotionally and cognitively severing from GLBT issues also meant disengagement with advocacy and both its social and personal benefits.

Each participant used different strategies to help them cope with the hazards of these two poles. For some, advocacy work appeared to provide an outlet for anger about movements and policies. For others, being connected to a politically active group facilitated their advocacy and offered personal support. In contrast, some participants needed to pull back from their advocacy, as it was taking a toll on their physical and mental health and happiness. Most participants felt stronger when they relied on support provided by people who understood their experience of movements and policies. Although there was no perfect balance for managing these complex concerns, grappling with these issues led some GLBT family members to feel stronger about their values and to develop an identity more firmly grounded in social justice.

#### *Discussion*

This study provided a framework for understanding the experiences of people with GLBT family members during a time of anti-GLBT movements and policies—an area in which there is little research. From this investigation, implications of anti-GLBT political initiatives and movements can be considered.

#### *The Effects of Secondary Minority Stress on People With GLBT Family Members*

At the initiation of the study, we expected participants may have considerable anger and distress regarding anti-GLBT movements and policies. We were surprised, however, at the range of mental and physical health as well as interpersonal concerns that participants described. These themes were consistent with the findings of Russell (2000), who found that GLB people dealing with antigay legislation experienced increases in symptoms associated with generalized anxiety, depression, and posttraumatic stress disorder. However, this study suggests that family members may experience secondary minority stress as well.

We conceptualized secondary minority stress as similar to secondary trauma. *Secondary trauma* refers to stress experienced by individuals who help or care for a person who has been traumatized. This stress can lead to emotional burnout and affect mental

health; family, friends, significant others, and clinicians who work with trauma survivors are those typically at risk for secondary trauma (Figley, 1998, 2002; Rothschild, 2006). Figley (2002) wrote,

compassion fatigue is defined as a state of tension and preoccupation with the traumatized patients by re-experiencing the traumatic events, avoidance/numbing of reminders, and persistent arousal (e.g., anxiety) associated with that patient. It is a function of bearing witness to the suffering of others. (p. 1435)

As the families in this study bore witness to the struggles of their GLBT family member, they sometimes experienced similar symptoms or developed effective strategies to help cope with the empathy and identification they felt for their son, daughter, sister, brother, or niece.

Research studies have found support for the secondary trauma theory with respect to sexual abuse and partners of trauma survivors (Dirkzwager, Bramsen, Adèr, & van der Ploeg, 2005; Manion et al., 1996; Nelson & Wampler, 2000). For example, Manion et al. (1996) learned that mothers of children who had been sexually abused by an individual outside the family had significantly higher levels of emotional distress, poorer family functioning, and less satisfaction in their role as a parent compared with mothers of children who had not been sexually abused. Fathers of sexually abused children reported significantly more global distress than comparison fathers. Secondary trauma symptoms have also been reported among partners of trauma survivors (Nelson & Wampler, 2000) and partners of military peacekeepers with posttraumatic stress disorder (PTSD; Dirkzwager et al., 2005).

Some participants in this study reported personal health consequences through their close relationship to GLBT issues. When participants experienced anti-GLBT legislation as nearer to or interfering with their lives, participants became more distressed. Russell (2000) found in her research of the effects of the 1992 Colorado antigay ballot initiative that those GLBT individuals who lived in Colorado Springs, home of a number of groups associated with the religious right, experienced the highest posttraumatic symptoms when compared with those GLBT people who lived in the rest of the state.

Some participants identified so deeply with their family member's experience that they felt equally attacked by these movements and policies. They considered themselves members of the GLBT community and experienced rejection by others for being a GLBT family member.

Participants were dually impacted by movements and policies when they questioned their own effectiveness. Some participants reported feeling guilty that they were not doing enough to help advance GLBT rights. An explicit link between doubts about their effectiveness and consequences to mental health could not be discerned from the present study, although this did appear to be the case for some family members. Russell and Richards (2003) found *failed witnessing*, the lack of acknowledgement of the impact of antigay legislation by family members, was a significant stressor among GLB individuals. It is possible that among family members who are supportive of their GLB family member, feelings of ineffectiveness in supporting their GLB family member constitutes an additional stressor for family members beyond those of having a GLB relative.

### *Implications for Counseling Psychologists*

Counseling psychologists and other helping professionals may need to be alert to the potential for distress among family members of GLBT people during anti-GLBT legislative movements. Although clinicians may be familiar with counseling approaches to assist family members with the coming out process of their GLBT family members or in dealing with sexual prejudice, the findings of this study underscore the importance of clinician's attunement to the potential struggles for families of origin of GLBT people, especially during times of increased anti-GLBT movements and policies. It may be that family members of GLBT people may not recognize their own mental health risks if they are accustomed to focusing on ramifications of anti-GLBT hostility on their GLBT family member. Furthermore, this study suggests that family members may be more willing to put themselves in harms way to protect their GLBT family member and perhaps perceive themselves as less likely to be harmed than GLBT people.

Counseling psychologists may help clients become aware of their personal, emotional, and cognitive responses to anti-GLBT movements and policies. They may consider introducing advocacy on behalf of GLBT issues as a coping strategy for clients struggling with the impact of anti-GLBT policies. However, the topic of anti-GLBT movements and policies may be particularly sensitive for some clinicians (e.g., those who are passionate about social justice and activism and those who identify as GLBT or as allies who have been hurt by engagement in GLBT advocacy). As clinicians make decisions regarding activism as a form of coping, they may need to consider their own countertransference reactions, closely monitoring so as not to push personal agendas in favor of social justice. However, clinicians should be careful not to shy away from social advocacy due to their own discomfort. Although activism may be an effective coping strategy for some individuals, this involvement may be stressful and draining for others. Recent research has found that engagement in GLBT activism is associated with greater psychological distress for both GLBT individuals and family members of GLBT individuals (Horne, Rostosky, Riggle, & Martens, 2008; Rostosky, Riggle, Horne, & Miller, 2009).

Clinicians may want to discuss the risks and benefits of becoming involved in activism efforts in order to help their clients make safe choices. Although family members may have less control over anti-GLBT movements and policies, underscoring their own choices in responding to these initiatives may help family members gain a sense of personal power. When family members of GLBT people place themselves in dangerous situations and/or experience mental and physical health consequences, helping professionals may wish to encourage family members to seek social support through groups like PFLAG or to increase strategies for self-care.

We believe the findings of this study and the methods participants developed to deal with movements and policies may be helpful to other family members. For example, family members may want to identify those individuals who are supportive while preparing how they would respond to people who express anti-GLBT attitudes. Because some participants felt immobilized in reaction to movements and policies, role-playing ways to respond to sexual prejudice so that clients are empowered to counter anti-GLBT hostilities may be helpful. Clients can be supported to

identify subtle forms of heterosexism and to understand how social attitudes are constructed.

The results of this study suggest those who may be most at risk for secondary minority stress are those who either feel personally attacked by anti-GLBT movements policies or feel their personal values are attacked, as well as those who are highly involved with fighting for GLBT rights and do not have a support system or effective coping skills to disengage. Counseling may involve helping clients to depersonalize anti-GLBT sentiments. Russell and Richards (2003) made a similar suggestion stemming from their work with GLB people and the 1992 Colorado amendment. They suggested that GLB individuals adopt a "movement perspective," placing painful experiences "into a broader and perhaps less personalized context" (p. 326). Participants in this study appeared to benefit from this cognitive strategy. As one father explained, he found it helpful to remind himself these movements are "just politics" rather than personal to his child.

Self-care strategies are important on an individual level and central to counseling work. The work of counseling psychologists also involves social justice work (Hage et al., 2007). Russell and Bohan (2006) proposed erasing the conceptual boundary between the individual and collective sexual prejudice because sexual prejudice is pervasive. They suggest this theoretical shift determines a fundamental shift in praxis, from one that relies primarily on clinical work that helps those suffering mental health consequences of sexual prejudice, to one that regards social and political activism as another viable approach for combating sexual prejudice. Counseling psychologists should work closely with institutions, systems, and governments, developing programs and advocating for legislation that facilitates the well-being of GLB people and their families. For example, psychologists may share with legislators findings from this study and other studies on anti-GLBT initiatives and its affects (e.g., Levitt et al., 2009; Mathy & Lehmann, 2004; Riggle & Rostosky, 2007; Riggle et al., 2005; Russell, 2000; Russell & Richards, 2003).

Future research may consider associations between relationship bonds between family members and psychological health, in a time of anti-GLBT initiatives. Given the important role social support played in helping family members feel positive and stronger in dealing with anti-GLBT movements and policies, future research could explore the role of social support and self-disclosure in psychological health for family members.

### *Strengths and Limitations*

In terms of transferability, this study has limitations, as it was conducted in a Southern state, and these findings may not be found among family members living in other states with more affirming legislative policies toward GLBT people. However, the thick description of the data, the use of quotes, and the inclusion of relevant demographic information can allow readers to determine how transferable these findings are to populations of interest. Also, the data analysis reached saturation, which suggests that the analysis is thorough. Most of the participants in this study were Caucasian and of middle-class background. Although the investigators attempted to seek participants of diverse racial and ethnic backgrounds and contacted organizations that specifically serve GLBT persons of color, only 1 participant of color was recruited through these efforts. Further

research on this issue with participants of color and those of lower socioeconomic status is warranted.

In this study, the participants reported varying degrees of closeness with their family member, but all reported regular contact with their GLBT family member, being supportive of their GLBT family member and affirming of their sexual orientation or partnership with a person of the same sex. Six of the participants were involved in PFLAG or a similar group. Future research may explore the experiences of families who accept their GLBT relatives without active engagement with the GLBT community and its ally groups. Future studies are needed to explore the experience of anti-GLBT movements and policies for those who are not close with their GLBT family member and/or hold anti-GLBT attitudes.

Despite these limitations, this study included a number of credibility checks, suggesting that the interpretation of the data has support from coinvestigators and participants alike. Also, it reached saturation, suggesting that the data collection process was comprehensive. Dependability was strengthened, as a companion study with GLBT people was conducted in parallel with this project (Levitt et al., 2009). Although themes emerged that were particular to each study, several common themes became apparent—particularly the finding that GLBT advocacy can hold personal dangers for people close to these issues. Memoing through the course of this study also improved the confirmability of the findings, as it allowed careful records to be kept of the study procedures and interpretations of data. In addition, Sharon G. Horne and Heidi M. Levitt, who coconducted several interviews with Jennifer R. Arm, provided feedback on the analytic work of Jennifer R. Arm and agreed with her interpretations of the data.

### *Conclusion: Anti-GLBT Movements and Policies as Initiating an Evolution of Self*

Becoming an ally for a GLBT family member can entail a shift in identity. It may mean becoming outspoken or standing up against homophobic groups or movements. This struggle was not described as easy or straightforward; rather, it was complicated by contemplation about one's faith in light of anti-GLBT religious movements, what it means to have a GLBT family member, one's beliefs about equality, and decisions about whether and how to engage with activism. Whereas some participants proudly claimed an activist identity, others seemed hesitant to label some of their activities working for GLBT rights as activism. However, it is significant that anti-GLBT movements and policies pushed GLBT family members to examine closely what they felt was right or wrong in our culture and in themselves.

Throughout the interviews, there were references to the "truth." Although their beliefs were challenged when movements and policies conflicted with what participants believed to be true about their GLBT family member, civil rights, or this country, these participants came to view the harmful effects of discrimination as an important truth. When participants were able to effectively alter or affirm their beliefs and their family relationships in the face of anti-GLBT movements, they reported becoming stronger and more empowered as advocates. This strengthening, in turn, shaped their identities and helped them express the truth of their lives: their personal connection to a GLBT loved one.

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