

1-1-2021

## Understanding Parental Responses to Having an LGBTQ Child

Donnell McCutcheon Butler  
*Walden University*

Follow this and additional works at: <https://scholarworks.waldenu.edu/dissertations>

 Part of the [Lesbian, Gay, Bisexual, and Transgender Studies Commons](#)

---

This Dissertation is brought to you for free and open access by the Walden Dissertations and Doctoral Studies Collection at ScholarWorks. It has been accepted for inclusion in Walden Dissertations and Doctoral Studies by an authorized administrator of ScholarWorks. For more information, please contact [ScholarWorks@waldenu.edu](mailto:ScholarWorks@waldenu.edu).

# Walden University

College of Social and Behavioral Sciences

This is to certify that the doctoral dissertation by

Donnell Butler

has been found to be complete and satisfactory in all respects,  
and that any and all revisions required by  
the review committee have been made.

## Review Committee

Dr. Jill Bryant, Committee Chairperson, Counselor Education and Supervision Faculty

Dr. Rashunda Miller Reed, Committee Member, Counselor Education and Supervision  
Faculty

Dr. Julia Champe, University Reviewer, Counselor Education and Supervision Faculty

Chief Academic Officer and Provost  
Sue Subocz, Ph.D.

Walden University  
2021

Abstract

Understanding Parental Responses to Having an LGBTQ Child

by

Donnell M. Butler

MS, Walden University, 2016

BS, Colorado Christian University, 2001

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Counselor Education and Supervision

Walden University

February 2022

## Abstract

Current research about parents of lesbian, gay, bisexual, transgender, queer, or questioning (LGBTQ) children does not provide insight into whether attitudes towards sexual minorities, relational self-esteem, and sex-role stereotypes predict parents' emotional responses when learning their child is LGBTQ. The purpose of the study was to investigate factors influencing parental responses when learning about their children's LGBTQ identities using the social identity theory. The research questions were (a) are there statistically significant relationships between parental responses, negative attitudes toward sexual minorities, parents' relational self-esteem, and sex-role attitudes and (b) do negative attitudes toward sexual minorities, parents' relational self-esteem, and sex-role attitudes individually or collectively predict parents' emotional responses. A quantitative survey research design was used to gather data from 96 parents with LGBTQ children who disclosed their nonheterosexuality within the past 5 years. Using SPSS, correlational and regression analysis found a statistically significant relationship between parental negative affect and relational self-esteem (Pearson's  $r = -.380, p < .01$ ) with a medium effect size ( $f^2 = .20$ ). Relational self-esteem was a significant predictor of negative parental responses ( $F(1, 94) = 926.980, p < .001$ ) with an  $R^2$  of .135. The findings contribute to social change by implying that relational self-esteem, developed through their relationships with others, was predictive of negative parental responses, which can inform clinicians' work with families with LGBTQ children. Further research about relational self-esteem and its impact on individuals and families would reveal further insights about parental experiences when learning their child is a sexual minority.

Understanding Parental Responses to Having an LGBTQ Child

by

Donnell M. Butler

MS, Walden University, 2016

BS, Colorado Christian University, 2001

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Counselor Education and Supervision

Walden University

February 2022

## Table of Contents

List of Tables .....	v
List of Figures .....	vi
Chapter 1: Introduction to the Study.....	1
Background.....	3
Problem Statement.....	4
Purpose of the Study.....	6
Research Question and Hypotheses .....	7
Theoretical Framework for the Study.....	9
Nature of the Study.....	14
Definitions.....	15
Assumptions.....	18
Scope and Delimitations .....	19
Limitations .....	21
Significance.....	23
Summary .....	25
Chapter 2: Literature Review.....	26
Literature Search Strategy.....	27
Social Identity Theory.....	29
Rationale for Choice of Theory .....	31
Social Identity Theory and Parental Emotional Responses .....	33
Literature about Factors that Impact Parental Responses.....	34

Sex-Role Attitudes and Negative Attitudes Toward Sexual Minorities .....	35
Relational Self-Esteem.....	40
Parental Emotional Responses.....	43
Trends in Working with Parents of Sexual Minority Youth.....	50
Summary and Conclusions .....	51
Chapter 3: Research Method.....	53
Research Design and Rationale .....	53
Research Questions and Hypothesis .....	55
Methodology.....	56
Population .....	57
Sampling and Sampling Procedures .....	58
Procedures for Recruitment .....	60
Procedures for Participation.....	61
Data Collection .....	62
Instrumentation and Operationalization of Constructs .....	62
Data Analysis Plan.....	67
Threats to Validity .....	68
Ethical Procedures .....	69
Summary.....	70
Chapter 4: Results.....	72
Data Collection .....	73
Data Collection and Recruitment Methods.....	73

Instrumentation Deviation .....	75
The Positive and Negative Affect Schedule-Expanded Version .....	76
Instrumentation .....	79
PANAS-X .....	79
Attitudes Toward Sexual Minorities Scale .....	80
Attitudes Toward Women Scale - Short Version .....	80
Relational Self-Esteem Scale .....	81
Response Rates .....	82
Descriptive and Demographic Characteristics of the Sample.....	82
Representation of the Sample .....	85
Descriptive Statistics Mean.....	87
Results of the Study .....	90
Answering the Research Questions .....	92
RQ1 Outcomes.....	92
RQ2 Outcomes.....	95
RQ3 Outcomes.....	100
General Dimension Affective States Post Hoc Analysis .....	102
General Dimension Negative Affective State.....	102
General Dimension Positive Affective State .....	104
General Dimension Other Affective States.....	105
Summary .....	107
Chapter 5: Discussion, Conclusions, and Recommendations.....	109

Interpretations of the Findings .....	109
Limitations of the Study.....	114
Recommendations.....	115
Implications.....	116
Conclusion .....	120
References.....	121
Appendix A: Data Analysis Figures and Tables.....	139
Appendix B: Demographic Questionnaire.....	143
Appendix C: Survey Instrument Permissions .....	146

## List of Tables

Table 1 Categories of the PANAS-X Scales.....	77
Table 2 Demographic Information.....	84
Table 3 Bootstrap Statistics for Coefficients <sup>1</sup> .....	89
Table 4 Variable* Correlations.....	94
Table 5 Model Summary <sup>b</sup> for Regression.....	97
Table 6 Bootstrap for Model Summary .....	97
Table 7 ANOVA <sup>a</sup> .....	98
Table 8 Bootstrap for Model Summary .....	98
Table 9 Bootstrap for Coefficients.....	98
Table 10 Participant Response Counts for Significant Negative Responses.....	103
Table 11 Variable Correlations with Negative Affect and Negative Mood States.....	104
Table 12 Variable Correlations with Positive Mood States.....	105
Table 13 Variable Correlations with Other Affective States .....	106
Table 14 Model Summary for Regression.....	107
Table 15 Bootstrap for Model Summary .....	107
Table 16 ANOVA.....	107

## List of Figures

Figure A1 P-plot for Positive Emotional State .....	139
Figure A2 P-plot for Positive Emotional State .....	140
Figure A3 Scatterplot for Positive Emotional State.....	141
Figure A4 Scatterplot for Negative Emotional State .....	142

## Chapter 1: Introduction to the Study

Parental responses when their children disclose their sexual minority identities impact both the parents' and the children's emotional, physical, and psychological well-being (Baiocco et al., 2015). Families often undergo an adjustment process when a child discloses a lesbian, gay, bisexual, transgender, queer, or questioning (LGBTQ) identity (LaSala, 2000). According to The Williams Institute (2019), 4.5% of the U. S. population identifies as LGBTQ, placing most parents of sexual minorities as heterosexual. Heterosexual parents often do not have the personal experience and knowledge of the coming out process to facilitate their adjustment when learning their child identifies as a sexual minority (Goldstein, 2009). Parental responses to their children's coming out process directly impact the LGBTQ youths' mental wellness; however, few studies examine parental experiences from the parental perspectives (Saltzburg, 2004; Willoughby et al., 2008).

In the United States, social attitudes about same-sex marriage have changed; however, current views, assumptions, and laws based on heteronormativity remain deeply rooted in traditions and beliefs about interpersonal relationships (García, 2018). Heteronormative values contribute to family conflict, child maltreatment, stigmatization, and discrimination, increasing the risks of emotional dysregulation, maladaptive coping behaviors, victimization, perceived discrimination, and family rejection for sexual minority youth when disclosing their sexual minority identities to their families (LaSala, 2000; Russell & Fish, 2016; Taylor, 2019). Although the quality of the parent-child relationship predicts better mental health outcomes for parents and youth, there is limited

research describing the parental adjustment process when learning about their sexual minority child's sexual identity.

Public opinion polls collected between 1977 and 2014 demonstrated that attitudes about people who do not identify as heterosexual changed from intolerance to endorsement and acceptance, highlighting cultural shifts in people across generations (Flores, 2014). Flores (2014) and Walch et al. (2020) attributed the increased acceptance rates of sexual minorities to more people disclosing their sexual minority orientations and increased representation of LGBTQ characters in film, television, and the United States military. Public policy advancing marriage equality, decriminalizing same-sex relationships, and anti-discrimination laws facilitated the decrease in negative attitudes toward sexual minorities (Flores, 2014).

Given the recent changes in the social climate of the United States, it was relevant to revisit parental responses to their children's coming out processes. This quantitative research study examined whether parents followed societal trends of accepting sexual minorities by exploring the relationships between parents' emotional responses at the time of the child's disclosure and negative attitudes about sexual minorities, parental self-esteem, and sex-role attitudes. The study's findings might promote positive social change by informing mental health practitioners working with parents and families with sexual minority children, particularly when learning their child does not identify as heterosexual.

In this chapter, I identify the background of the study and the theoretical relationship between the variables, the problem statement, the purpose of the study. Information about the research question, the hypothesis, and the theoretical framework

used in the study is presented. Additionally, the variables and discussion about the significance of the study are discussed.

### **Background**

Sexual minorities' disclosure of their sexual orientation is an integral aspect of their identity development, yet they risk social, cognitive, and emotional isolation when disclosing their sexual minority identities to parents and families (Cass, 1979; Patterson, 1994). The negative physical and mental consequences associated with the levels of family rejection include increased risks of depression, psychological distress, and maladaptive coping behaviors (Baiocco et al., 2015; Doyle, 2018; Goodrich, 2009).

Some parents respond with understanding, acceptance, love, and support, while others react with shock, disbelief, anger, guilt, shame, and grief (Shpigel et al., 2015). Upward of 50% of parents respond negatively, with a small number of parents reacting with physical violence or banishment from the family home (D'Augelli et al., 2010). Parental acceptance of their sexual minority youth directly relates to the children's wellness across their lifespan (Heiden-Rootes et al., 2019). Yet, there is limited research describing the influences that may contribute to parents' positive or negative emotional responses when learning about their sexual minority youths' identities. The lack of current research literature about parents' emotional experiences of their child's sexual minority identity disclosure was the gap this research study filled.

The purpose of this quantitative study was to examine parental emotional responses at the time of their sexual minority children's disclosure by exploring the relationships between parents' emotional responses, negative attitudes toward sexual

minorities, relational self-esteem, and sex-role attitudes. The results of this study may inform clinicians' work when working with parents with sexual minority children. For example, clinicians may choose therapeutic strategies that directly address negative attitudes towards individuals who do not identify as heterosexual, resolve gender role stereotypes, and promote parental wellness. The findings may contribute to social change at the individual, community, and societal levels as mental health professionals increase their awareness about whether attitudinal changes toward sexual minorities have occurred over the past several decades and the influences impacting parental responses (Astramovich et al., 2017; Flores, 2014)

### **Problem Statement**

Following the disclosure of one's nonheterosexual identity, family systems undergo changes and stressors. Parents may encounter periods of uncertainty, chaos within the family, and shifts in their parental identities when children disclose their sexual orientations (Fields, 2001; Savin-Williams & Dubé, 1998). Common parental reactions include shock, denial and isolation, anger, bargaining, depression, and acceptance (Savin-Williams & Dubé, 1998).

Parents and children often co-experience hardships associated with the disclosure process (Saltzburg, 2004). Parents often grieve the images and dreams they had for their children while the children who do not identify as heterosexual risk deterioration of family cohesion (Savin-Williams, 1998). Developmental models provide a basis for conceptualizing parental experiences (Chrisler, 2017); however, they do not offer clinical

insights that guide therapeutic approaches when working with parents with sexual minority youth.

Although most parents learn to accept their children's identity (Holtzen & Agresti, 1990; Savin-Williams, 2001; Willoughby et al., 2008), the evolution toward acceptance often lasts upwards of 5 years (Muller, 1987). Within the research literature, little information about influences impacting parental responses is known (Salzburg, 2004). For example, Shpigel et al. (2015) identified emotional responses as understanding, acceptance, love, support, shock, disbelief, anger, guilt, shame, and grief, yet the broad range of emotions does little to explain the influences impacting parental responses. The lack of information about parental reactions to learning their child sexual minority identity create undefined clinical approaches, thus extending parental and family distress and adjustment processes.

With the increasing numbers of sexual minority disclosures at younger ages (Flores, 2014; Russell & Fish, 2016), the paucity of research about parental responses stood out. There was a need for information about parental perspectives, affect, and other factors influencing parental responses as they became aware of their children's sexual minority identities. The study's results may also highlight whether parental responses remain overwhelmingly negative in today's society, as posited by earlier studies (Fields, 2001; Little, 2001; Herek, 1988). The information about parental responses may inform clinicians how parents respond, assign meaning, and adjust to having an LGBTQ child (Saltzburg, 2004). More recent data and insights about parental responses can support interventions that promote healthy parental adjustment and family functioning, which

may reduce the risks of emotional distress, anxiety, depression, hopelessness, self-harm, substance abuse, and suicidal behaviors among sexual minority youth (Mustanski et al., 2016).

### **Purpose of the Study**

The purpose of this quantitative study was to examine the relationships between parents' emotional responses at the time of the child's disclosure and negative attitudes toward sexual minorities, parents' relational self-esteem, and sex-role attitudes. From the social identity theory lens, some parents holding rigid bias against sexual minorities and strong beliefs that support gender-role stereotypes may experience increased distress when learning their child is a sexual minority. Similarly, parents with low self-esteem experience less satisfaction in their life experiences and relationships and, inversely, parents with high self-esteem experience more intimate relationships with their children (El Ghaziri & Darwiche, 2018). It was expected that parents with high levels of relational self-esteem would be more adaptive and accepting of their child's coming out process. The study explored parental responses and whether negative attitudes toward sexual minorities, parents' relational self-esteem, and sex-role attitudes contributed to parents' accepting and rejecting responses.

By quantitatively examining the relationships between parents' emotional responses at the time of the child's disclosure and negative attitudes towards sexual minorities, relational self-esteem, and sex-roles, this study provided more understanding of parental experiences during the coming out process. The results of this study demonstrated whether parental responses remain overwhelmingly negative in today's

society and identified some of the factors that contributed to parental responses (Fields, 2001; Herek, 1988; Little, 2001). The results obtained from this study may guide mental health professionals in the clinical selection of appropriate interventions when supporting parents of youth who do not identify as heterosexual and provide clinical insights about factors that contribute to parental responses when learning about their child's sexual minority identity. The study enhanced the scholarly knowledge of parental adjustment when learning their child is LGBTQ, thus informing mental health professionals' practices to create change within individuals, families, and communities.

### **Research Question and Hypotheses**

Parental emotional responses were assessed via survey research using the Positive and Negative Affect Schedule (PANAS; Watson et al., 1988). The Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), Attitudes Toward Women Scale (Spence et al., 1973), and Relational Self-Esteem Scale (Du et al., 2015) were employed to collect data about parents' beliefs and attitudes about sexual minorities, gender-role stereotypes, and their value within their family system. The data established whether relationships between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses when learning about their children's LGBTQ orientation exist. Additionally, the data demonstrated whether parents' homophobic attitudes, relational self-esteem, and sex-role attitudes individually or collectively predicted parental emotional responses at the time of their children's nonheterosexual identity disclosure.

Research Questions 1 (RQ1): Quantitative: Are there statistically significant relationships between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses when learning about their children's LGBTQ orientation?

*H<sub>01</sub>*—There are no statistically significant relationships between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses.

*H<sub>a1</sub>* —There are statistically significant relationships between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses.

Research Question 2 (RQ2): Quantitative: Do parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes individually predict parental emotional responses?

*H<sub>02</sub>*— Parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes do not individually predict parental emotional responses.

*H<sub>a2</sub>*— Parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes individually predict parental emotional responses.

Research Question 3 (RQ3): Quantitative: Do parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes collectively predict parental emotional responses?

*H<sub>03</sub>*— Parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes do not collectively predict parental emotional responses.

*H<sub>a3</sub>*— Parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes collectively predict parental emotional responses.

### **Theoretical Framework for the Study**

Henri Tajfel developed the social identity theory in 1979 (Rodriguez, 2019). The social identity theory posits that all individuals seek to establish and maintain a positive self-concept, which is constructed through their personal and social identities, affecting their self-esteem, beliefs, and attitudes (Tajfel & Turner, 1979). Inherently, people have an innate need to belong, and they seek to create safety, support, and connection with others through familial and social relationships (Keene, 2018). The disclosure of one's nonheterosexual identity may threaten familial and social relationships, causing distress within the family home and in their social groups (Fields, 2001; Graftsky, 2004; Saltzburg, 2004). For example, parents assume heterosexuality for their child and have social groups comprised of similarly opinioned parents (Cohen et al., 2006; Striepe & Tolman, 2003). The disclosure that one's child is a sexual minority challenges parents' beliefs and expectations for their children and threatens their standing within their social groups.

As parents experience a shift in their parental identities during their child's coming out (Fields, 2001; Goodrich, 2009), their relationships with family and friends also change due to feelings of distress associated with the adjustment process (Saltzburg, 2004). For example, coupled with the expectations of heterosexuality for their children (Cohen et al., 2006; Striepe & Tolman, 2003), if members of the parent's primary social groups share common themes of heteronormativity, the parent may withhold information

about their LGBTQ children, thus creating a sense of isolation and withdrawal for the parents (Saltzburg, 2009).

Individuals develop their personal identity from their individual traits, achievements, and qualities (Tajfel & Turner, 1979). Social identity development occurs as individuals align with others sharing similar personal identities or self-identified categories, such as religious affiliation, gender, or political ideology (Rodriguez, 2019). Social identities promote healthy self-concepts and enhance self-esteem as members choose to accept one group's values over another (Tajfel & Turner, 1979).

Parents rarely imagine a future for themselves and their families that include a sexual minority child (Phillips & Ancis, 2008). Parents may feel alienated from their child during the coming out process and mourn the heterosexual expectations of their child having children of their own (D'amico et al., 2015). Parents may also internalize the child's nonheterosexuality as a failure of their parental duties (D'amico et al., 2015). Studies about parents with sexual minority children revealed that parents often experience cognitive dissonance stemming from their love for their child and negative attitudes toward homosexuality and fears of stigmatization (Conley, 2011; D'amico et al., 2015; Fields, 2001).

Social support is defined as one's "social network's provision of psychological and material resources *intended to benefit an individual's ability to cope with stress*" (Cohen, 2004, p. 676). The ability to access social support and resources are embedded in one's connections with others and belonging to "like-minded" groups (Saltzburg, 2009). During periods of crisis and stress, social support and resources enhance one's coping

and well-being; however, when learning that one's child is a sexual minority, many parents socially withdraw and isolate as they process the new information and begin their adjustment processes (Salzburg, 2009).

According to the social identity theory, parents seek to validate their sense of self by either rejecting the child or assuming a response to elevate the social value of their family when learning about their child's LGBTQ identity (Rodriguez, 2019). For example, parents may either distance themselves from their sexual minority children or embrace a "social change" approach in which family members alter the family's image in efforts to elevate its social value (Rodriguez, 2019). As such, parents with increased negative emotional responses may be more inclined to reject the disclosure to their sexual minority child, particularly if their social groups endorse gender-role stereotypes and negative attitudes towards sexual minorities.

Tajfel (1982) stated that individuals develop their social identity through their judgments, stereotypes, and attitudes about their environments. Through their social identities, people build their self-esteem, attitudes, and beliefs. Relationships with others and memberships in social groups inform their views, emotional responses, and behavioral responses, especially in situations that challenge their beliefs (Du et al., 2017; Tajfel, 1982). When children disclose their nonheterosexual identities to parents, parents experience a period of unsettlement as they seek to balance their love for their child and their beliefs about sexual minorities (Holtzen & Agresti, 1990).

Some parents often lose the esteem that parenthood once afforded them as they adjust to the realization that a social stigma is now associated with their children (Fields,

2001). Other parents may also encounter stigmatization from their social groups, particularly if group values adhere to a set of shared beliefs that parents hold responsibility for their children's successes and failures (Fields, 2001). For example, parents with traditional views about gender, sexuality, and marriage may have a social support group with similar beliefs. By disclosing the LGBTQ identity of one's child, parents may compromise the esteem they once held within their social circle (Fields, 2001). Through the lens of the social identity theory, parents with fixed, rigid social systems may experience increased difficulty accepting their sexual minority children, whereas parents with higher esteem, fewer beliefs about gender-role stereotypes and homophobic attitudes may challenge existing norms to create a broader sense of inclusivity for their family members.

Some people adopt beliefs that parents must have done something wrong to cause their children to become sexual minorities and blame parents for their children's LGBTQ identity (Fields, 2001). Developing new perspectives about others and creating new social supports are two changes that promote parental adjustment when adapting to the latest information about their children (Gonzalez et al., 2013). The social identity theory includes the phenomena of in-group bias (Rodriguez, 2019). In-group bias, an innate tendency to prefer one's group over others, predicts that parents will adapt to their children's coming out disclosure and alter the image of themselves and their family in efforts to preserve and enhance their belongingness and identity. Fields (2001) described parental processes of adjustment that include shifting their identities from being 'parents' to being 'parents of lesbians and gays.'

People with higher self-esteem have more positive outlooks on life, life satisfaction, and relationships with others (Du et al., 2017). Similarly, higher levels of relational self-esteem and one's perceived value from social systems contribute to increased life satisfaction, positive affect, meaning in life, and happiness (Du et al., 2017). Following the coming out process, parents experience changes in their identities, social groups, and families. The social identity theory, with its emphasis on in-group and out-group memberships, provides the construct that accounts for some parents rejecting or distancing themselves from their children (Rodriguez, 2019). In contrast, other parents may seek to embrace and alter the image of themselves and their family when learning their child is LGBTQ (Rodriguez, 2019).

Following the coming out process, parents experience changes in their identities, social groups, and families. Parents may accept or challenge their beliefs, attitudes, and biases when adjusting to new information about their children's identities, threatening their sense of well-being. In alignment with the social identity theory, parents who experience feelings of despair, grief, sadness, or loss may reject or distance themselves from their children and the parents seeking to embrace changes to their images of themselves and their family may experience feelings of pride, acceptance, and love for their sexual minority child. According to Gonzalez et al. (2013), a sample of parents with LGBTQ children acknowledged adopting new perspectives, enhancing positive feelings for their child, participating in activism, developing social connections, and having closer familial bonds after children disclose their nonheterosexual identity. The social identity

theory explains, in part, parental emotional responses when learning about their children's LGBTQ identities.

### **Nature of the Study**

The study was a nonexperimental quantitative research design using linear regression analysis and post hoc tests to determine whether (a) statistically significant relationships between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses existed and (b) if parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes individually or collectively predicted parental emotional responses at the time of their LGBTQ children's disclosure.

Multiple regression analysis is conducive to studies in the social sciences (Snell & Marsh, 2012). Multiple regression analysis determined whether homophobic attitudes, relational self-esteem, and sex-role attitudes predicted parental emotional responses when a child discloses their nonheterosexual identity. An advantage of the regression model was the ability to assign numerical values to intangible variables, such as "emotions" (Snell, 2020). The study explored the possible relationships between variables and whether the variables independently or collectively predict parental responses. In the regression models, researchers can isolate and test variables to discover relationships between them (Snell, 2020). Additionally, researchers can establish validity with smaller samples (Snell, 2020).

In this research study, the parents' emotional responses are used as the criterion variables. The predictor variables were negative attitudes toward sexual minorities,

relational self-esteem, and sex-role stereotypes. The demographic information such as parental role, age range, race/ethnicity, household income, geographical location, education, parental sexual orientation, child's sexual orientation, number of children, and length of time since disclosure contributed to post hoc tests and data analysis. The data collected was statistically analyzed with SPSS 27.

Data were collected through a web-based, nonexperimental post facto survey research design. Research participants, parents with sexual minority children, provided data about their emotional responses at the time of their child's disclosure of their nonheterosexual identities. Using a multiple regression model, the relationships between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses were examined. Parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes were examined to determine whether they individually or collectively predicted parental emotional responses were explored using correlation and regression analyses. The survey responses were stored in an encrypted, password-protected account at SurveyMonkey.com, and downloaded the data in SPSS 27 for statistical analysis. A copy of the data in a password-protected external hard drive was maintained.

### **Definitions**

To facilitate an understanding of the research, the key variables used in the study are defined. The primary constructs in understanding parental responsiveness when their sexual minority children disclose their identities include parental emotional responses,

negative attitudes about homosexuality, sex-role stereotypes, and relational self-esteem.

In the following paragraphs, the variables and their value to the study are presented.

*Parent:* The term *parent* included biological parents, stepparents, single parents, adoptive parents, grandparents serving in parental roles, and guardians.

*Children:* Children referred to any biological, stepchild, adoptive child, and court-appointed child of any age.

*LGBTQ:* Lesbian, gay, bisexual, transgender, queer, or questioning individuals.

*Parental emotional responses:* Parental emotional responses included understanding, acceptance, love, support, shock, disbelief, anger, guilt, shame, and grief (Shpigel et al., 2015). The study targeted parents' self-reporting of their emotional states at the time of disclosure. While initial emotional responses impact the parent-child relationship at the time of disclosure, most parents become more accepting and comfortable with their children's sexual orientation with time (Holtzen & Agresti, 1990; Shpigel et al., 2015). Parental responses included ten positive affect state responses and ten negative affect state responses. The emotional constructs were collected via survey research through the Positive and Negative Affect Schedule (PANAS), that described parents' emotional state and as positive and negative affect conditions (Watson et al., 1988).

*Negative attitudes about sexual minorities:* People holding negative attitudes towards sexual minorities often report feelings of disgust and discomfort when socializing with a person believed to be nonheterosexual (Hotzen & Agresti, 1990).

Negative attitudes towards sexual minorities contribute to one's affect and expressions of

discontentment with sexual minorities (Holtzen & Agresti, 1990). Biases against sexual minorities were collected via survey research using the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016). Parents often experience changes in their views of homophobia, heterosexism, and stigma when adjusting to the knowledge that their child is LGBTQ (Trussell, 2017).

*Sex-role stereotypes:* Sex-role stereotypes, beliefs about the ‘acceptable’ behaviors for men and women, support negative attitudes toward sexual minorities (Holtzen & Agresti, 1990). Sex-role stereotypes shape beliefs and perceptions of others’ behaviors, thus casting judgments on others and allowing microaggressions to develop (Li et al., 2020; Linville, 2018; Tresemer & Pleck, 1974). Microaggressions and negative behaviors have a cumulative negative effect on the individuals who experience them and are often invisible to the offender (Linville, 2018; Sue et al., 2007). Parental beliefs about gender-role stereotypes were collected via survey research using the Attitudes Toward Women Scale - Short Version (Spence et al., 1973).

*Relational self-esteem:* Relational self-esteem encompasses the three dimensions of the self, including the personal, relational, and collective states of being (Brewer & Chen, 2007). The personal self describes one’s self-concept and uniqueness (Du et al., 2012). Individuals form their relational selves through connections with significant others, family, and close friends (Du et al., 2012). The collective self develops through relationships within one’s social groups (Du et al., 2012). Relational self-esteem is an indicator of psychological well-being, including hopefulness, positive affect, future goals, finding meaningfulness in life, and engaging in posttraumatic growth (Du et al., 2015).

The study measured relational self-esteem, a sense of self-worth developed through relationships with others (Li et al., 2019), to highlight the cultural contexts within families with sexual minority children. Parents' sense of value in the family system was collected via survey research using the Relational Self-Esteem Scale (Du et al., 2012).

*Coming out:* Coming out is a process of revealing one's LGBTQ identity to others (Cass, 1979; LaSala, 2000; Saltzburg, 2004).

### **Assumptions**

Families with LGBTQ children are diverse and multifaceted. Parents most often adjust to their child's sexual minority identity beginning at the time of disclosure (Holtzen & Agresti, 1990). According to Holtzen and Agresti (1990), acceptance levels change over time, with parents who have known about their child's sexuality for less than 2 years experiencing the most distress. The study assumed that most parents were on the continuum toward acceptance; however, more recently informed parents may report heightened conflict in their relationships with their children (Holtzen & Agresti, 1990; Shpigel et al., 2015). The study assumed parents would honestly endorse experiencing difficult or negative emotions when learning about their child's sexual minority identity. Furthermore, the study assumed the instruments would accurately identify homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses when learning about their children's LGBTQ orientation.

Parents likely experience conflicting emotions among their love for their child and beliefs about sex-roles and sexuality when learning their child is LGBTQ (Holtzen & Agresti, 1990). Smith et al. (2003) stated that people recall emotional memories more

accurately and consistently than memories without emotional attachment. As the nonheterosexual identity disclosure is emotionally impactful for most parents (Grafsky, 2014), parents may recall their emotional experience of their child's disclosure accurately. Since parental adjustment processes occur over a continuum of time, often lasting up upwards of 5 years, the inclusion criteria were limited to those who had knowledge of their children's nonheterosexual identity less than 5 years. Parents with knowledge of their children's nonheterosexual identity for longer than 5 years were excluded from the study, thus limiting the perspectives of parents who had time to adjust to their child's sexual minority identity and confront, if any, bias or negative beliefs about sexual minorities (Holtzen & Agresti, 1990; Muller, 1987, Savin-Williams, 2001; Willoughby et al., 2008).

### **Scope and Delimitations**

The scope of the study was limited to parents within the United States who had a minimum of one sexual minority child. The study included only those parents who learned of their child's sexual minority identity within the past 5 years. I limited participants to those who learned of their child's sexual minority identity within 5 years to increase the probability of accuracy when recalling their initial experiences of the coming out process (Smith et al., 2003). It was important to collect data based on experiences of their child's nonheterosexual identity disclosure and excess of 5 years' time lapse since disclosure may taint parents' recollection of their initial reactions (Holtzen & Agresti, 1990; Shpigel et al., 2015). The data collected allowed for the comparison of recent parental experiences of the disclosure process to previous research.

The findings illustrated whether parental responses are shifting with the social attitudes in the current culture of the United States. Additionally, parents with multiple sexual minority children may have previously worked through any negative attitudes about sexual minorities and gender-role stereotypes and experience positive emotions when a subsequent child discloses their sexual minority orientation.

The definition of *'family'* is a contemporary debate among legal professionals and social scientists (Holtzman, 2006; Powell et al., 2010). Typical American views about the concept of family includes the stereotyped group of married, heterosexual couples with children (Powell et al., 2010). However, parenthood is complex and multifaceted and the idea that parenthood belongs exclusively to one pair of recognized parents is obsolete and antiquated (Holtzman, 2006). As children form attachments to biological and nonbiological parental figures (Holtzman, 2006), this study included any adult performing a parental role with a sexual minority child. Previous research findings indicated that the parents' sexual orientation does not influence their children's sexual orientation or alter the outcomes for children (Adams & Light, 2015; Bos et al., 2016; Schumm & Crawford, 2019).

The study examined parental experiences of their children's LGBTQ identity disclosure. The study included any person acting in a parental role for a sexual minority child for several reasons. As of 2019, the LGBTQ population was approximately 4.5% of the total U.S. population (*The Williams Institute*, n.d.). Delineating potential research participants based on their sexual orientations or parenting roles could have decreased eligible research participants and minimize nontraditional, nonbiological families.

Parent included biological parents, stepparents, single parents, adoptive parents, foster parents, and grandparents serving in parental roles, and guardians. The term *children* was defined as any biological, stepchild, adoptive child, grandchild, or court-appointed child of any age. The intent of the study was to capture parental responses when learning their child is a sexual minority. Information about parental responses illustrated the changes occurring within families at the time of this study.

### **Limitations**

A web-based survey was used to create a sample of parents with LGBTQ children to understand whether the relationships between parents' homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses existed. The relationships between parental homophobic attitudes, relational self-esteem, and sex-role attitudes predicted parental emotional responses at the time of their LGBTQ children's disclosure were explored. A limitation of the study included the potential for a misrepresented segment of parents. For example, parents with strong rejecting behaviors may not have participated in the study. The web-based invitation may not have reached enough participants for the study, which created a limitation in the study's protocols. Potential research participants could delete the email invitations before reading the invitation or have email protocols flagging the invitations as spam. Too few research participants or a high number of nonresponse rates decreased the sample size, statistical power, and effect size of the findings (Creswell & Creswell, 2018). Additionally, the results were from self-reported information, which may introduce respondent bias and impact external validity.

Individual and family dynamics complicate the coming out process (Baiocco et al., 2015; Long et al., 2006). Attempts to contact parents with LGBTQ children through support organizations, social media, and snowballing efforts were made; however, it was likely the participants did not constitute a generalizable sample. For example, parents in rural areas, those unaffiliated with support agencies, or highly rejecting parents may not complete the research study, creating a nonrepresentative sample for the study. Additionally, the results of the study may not be generalizable to the entire population of parents with sexual minority children (Burkholder et al., 2016).

Participant bias can introduce limitations to the study. According to Comstock (2013), bias in research skews the results and obscures the findings' truthfulness. In survey research, a common source of bias is participant responses that seek to present socially desirable answers (Comstock, 2013). The use of technology and electronic surveys can influence response rates because researchers have little control over participants' interest in participation, and they have limited access to email addresses or listservs (Sutherland et al., 2013). Although researchers using technology-based surveys cannot control the participation rates, they can increase interest by crafting an intriguing email subject title and choosing an appropriate email sender (Sutherland et al., 2013).

By identifying potential participants through their affiliation with a parental support group such as Parents and Friends of Lesbians and Gays (PFLAG) and snowballing methods, parents who rejected or banished their children from the family home were likely missing from the sample. Parents with extremely negative responses who did not participate in the study may have skewed research findings. The research

study may not have captured parents who oppose their children's disclosure, as most parents eventually achieve acceptance over time. Using the snowball method, participants referred other parents to participate in the study, which increased the chances of recruiting parents with extreme reactions to learning their child is LGBTQ.

The exploratory nature of the research study posed limitations to the study. For example, the research study explored concepts relating to parental responses; however, it could not provide conclusive answers to research problems (Singh, 2007). While the study provided insights about parental responses, it did not directly account for variations in parental responses when learning their child identifies as a sexual minority. Additionally, the study had a 6-week data collection window, which allowed me to meet educational goals and deadlines; however, the brief data collection process limited the study's response rates.

### **Significance**

In the United States today, there is a growing diversity of what it means to be a *'family.'* The two-parent, white middle class, heterosexual family model accounts for less than 50% of U.S. families today, rendering that particular definition of family obsolete (Hussong et al., 2018). There is little information about parental responses and attitudes about having sexual minority offspring in today's rapidly advancing and multicultural society. Parents' initial emotional reactions influence future accepting or rejecting behaviors towards their LGBTQ children (Goodrich, 2009). LaSala (2000) stated that some parents need to discuss their initial reactions to their child's sexual minority disclosure before healing, re-education, and acceptance occurs. However, few researchers

have explored parental reactions and the related factors contributing to their accepting or rejecting behaviors (Grafsky, 2014). By examining the relationships between parents' emotional responses at the time of the child's disclosure, and levels of homophobia, parental self-esteem, and sex-role stereotyping attitudes, clinicians can choose practical, relevant, and culturally appropriate interventions when working with parents of LGBTQ youth. The findings captured parental attitudes and initial responses at the time of their children's sexual minority disclosure to inform clinical practice in ways not understood previously.

Many parents respond to their children's disclosure with messages of warmth, acceptance, and unconditional love, and support, which promote the self-esteem, well-being, and development of parents and children (Williams & Chapman, 2012). Such positive parental responses serve as protective barriers against emotional distress, substance abuse, violence, and suicidal ideation in their children's development (Williams & Chapman, 2012). Parental acceptance and support of their children preserve family relationships, mental wellness, and enhance parental identity development (Baiocco et al., 2015; Fields, 2001). It is important to understand parental emotional responses when supporting families in transition, as gender-related cognitions are integral to one's well-being (Tate et al., 2015).

Understanding the contextual experiences of sexual minorities within their families is an important component of LGBTQ advocacy (Allen & Goljuch, 2019). There are urgent needs to decrease family-based stigma and discrimination against LGBTQ youth and identify factors related to parental reactions to their sexual minority

youth (Parker et al., 2018). Negative parental responses contribute to increased emotional distress risks, including anxiety, depression, hopelessness, self-harm, substance abuse, suicidal ideation, and suicidal behaviors among sexual minorities (Mustanski et al., 2016). Examining the relationship between parental emotional responses, attitudes toward sexual minorities, sex-role stereotyping, and self-esteem better inform clinical practices when working with parents with sexual minority children. Clinicians can work with parents to decrease sex-role biases and discrimination while implementing therapeutic approaches that enhance parental self-esteem and responsiveness throughout the adjustment period (Baiocco et al., 2015; Phillips & Ancis, 2008).

### **Summary**

Throughout Chapter 1, I described the background of the study and the theoretical relationship between the variables. I presented the problem statement, the purpose of the study, the research question, the hypothesis, and the theoretical framework used in the study. Additionally, I identified the variables and discussed the significance of the study. In Chapter 2, I present information about the scholarly research related to the variables; parental emotional responses, sex-role stereotypes, negative attitudes about homosexuality, and parental relational self-esteem. In Chapter 3, I describe the research approach and design used in the study. I provide a summary of the data collected in Chapter 4. Lastly, in Chapter 5, I present the research findings and the implications of the results.

## Chapter 2: Literature Review

Family systems experience changes and stressors when youth disclose their sexual minority identities (Fields, 2001; Savin-Williams & Dubé, 1998). Disruptions to family systems include negotiating new roles and identities among family members (Fields, 2001; Savin-Williams & Dubé, 1998). Parental reactions include shock, denial and isolation, anger, bargaining, depression, and acceptance (Savin-Williams & Dubé, 1998; Shpigel et al., 2015). Nonheterosexual children often experience fear of emotional rejection, family violence, and banishment from the family home when disclosing their sexual orientations to parents (Saltzburg, 2004). The potential for emotional volatility adds to the anticipatory fear, confusion, and chaos of the coming out process (Das, 2018).

Mental health clinicians need current information about parental perspectives, affect, and adjustment processes to effectively help families whose children disclose their LGBTQ identities. Insights about parental experiences of the coming out process will contribute to the research literature about parental adjustment. The study explored the relationships between parents' emotional responses at the time of the child's disclosure and the influences of negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes.

Parents most often respond to their children's coming out in less-than-optimal ways (Das, 2018; Savin-Williams & Dubé, 1998). Some parents respond in understanding, acceptance, and love; yet, others display shock, disbelief, and anger, thus initiating chaos within the family (Das, 2018; Shpigel et al., 2015). Although models for parental adjustment processes exist, there is little information about the underlying

factors contributing to parental responses. Flores (2014) stated that it is unknown whether parental views of sexual minorities mirror the advancements in society's cultural attitudes or how social attitudes and beliefs influence parental responses (Flores, 2014).

The present study provided insights into the underlying factors influencing parental responses when learning they have a child who does not identify as heterosexual. The study's results captured parental responses during the coming out period and provide insights about parents' views of LGBTQ persons. The results also revealed whether parents align with the generational shifts towards accepting LGBTQ individuals, as posited by Flores (2014). Additionally, the results provided information about parents' views about themselves within the family unit and their attitudes about sexual minorities when learning about their children's LGBTQ identities. In Chapter 2, information found in the scholarly literature is described, including scholarly research related to the variables: parental emotional responses, negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes. I also discuss the social identity theory as it relates to my study. A summary and conclusions are also provided.

### **Literature Search Strategy**

I searched for articles related to families with LGBTQ children through the library at Walden University. The keywords I searched were *parents with gay children, parents with LGBTQ children, parental adjustment, families with LGBTQ kids, moms of gay sons, mothers of lesbian daughters, fathers with gay sons, fathers of gay daughters, LGBTQ youth, coming out, identity development, parental identity development, straight parents, heterosexual parents, multiple gay offspring, multiple gay children, sexual*

*minority, LGBTQ advocacy, attitudes toward sexual minorities, sex-role stereotypes, gender-roles, homophobia, gay youth, heterosexism, and sexual minority youth and families.* I searched in the databases Education Source, EBSCO, ERIC, SAGE Journals, ProQuest Central, Academic Search Complete, Google Scholar, Thoreau multi-database search, PsycINFO, PsycARTICLES, SocINDEX with Full Text, and LGBTQ Life with Full Text.

To increase the potential for results, there were no limits on publication dates with the hopes of yielding as many research articles about homophobia and sex-role stereotypes in families with sexual minority offspring as possible. In addition to accessing multiple databases, I also searched the following journals: *Journal of Homosexuality, Parenting: Science & Practice, Sex Roles, Annual Review of Clinical Psychology, The Social Psychology of Intergroup Relations, American Psychologist, Professional Psychology, Research and Practice, Journal of Family Psychology, Journal of GLBT Family Studies, Journal of Family Social Work, Journal of LGBT Issues in Counseling, Sexuality & Culture, Journal of Sex Research, and Journal of Child & Family Studies.* This process further helped me locate articles about LGBTQ persons disclosing their identities to their parents.

Research literature into parental emotional responses when learning about their children's sexual minority identities was sparse, and the research literature leans heavily on early studies that demonstrated strongly negative parental responses. For example, Ben-Ari (1995), Fields (2001), and Saltzburg (2004) conducted studies that revealed that parents react negatively to learning their children are gay or lesbian. Other research

articles on families with sexual minority offspring demonstrated that homophobic attitudes and fears of stigmatization contributed to parents' rejecting and negative responses (Fields, 2001; Herek, 1988; Little, 2001; Russell & Fish, 2016).

I did not locate information indicating how the social identity theory applies to families; however, with families being the first social groups for all people (Anastasiu, 2012), the application of the social identity theory to families was relevant. There was a paucity of research literature about relational self-esteem in Western societies yet because relational self-esteem centers on the assumption that people generate their sense of value within the context of their social groups, including relational self-esteem in the exploratory research about parental responses to learning their child is a sexual minority was warranted. Similarly, the research literature indicated that homophobic attitudes and fears of stigmatization contributed to parents' rejecting behaviors toward their sexual minority offspring, which speaks to the influences that social groups have on parents' attitudes (Du et al., 2012; Fields, 2001; Herek, 1988; Little, 2001; Russell & Fish, 2016).

### **Social Identity Theory**

The social identity theory was developed by Henri Tajfel in 1978, influencing social psychologists understanding of intergroup relations since the early 1980s (Rodriguez, 2019). The social identity theory explains that all individuals work toward establishing and maintaining a positive self-concept by accepting one group over another (Tajfel & Turner, 1979). Group membership, including one's primary social group called 'family,' inform people's personal and social identities which directly influence the

constructs of self-esteem, belief systems, and social attitudes (Anastasiu, 2012; Tajfel & Turner, 1979).

According to the social identity theory, all individuals seek to establish and maintain a positive self-concept, conceptualized as blending their personal and social identities (Tajfel & Turner, 1979). Individual traits, achievements, characteristics, and qualities inform the personal identity while alignment with others who share similar values, attitudes, and beliefs establish the social identity (Tajfel & Turner, 1979). Integrating personal and social identities requires individuals to self-identify with others based on chosen categories or classifications, such as religious affiliation, gender, political ideology, interests, or values (Rodriguez, 2019). As individuals align with group norms, their social identities enhance their self-concepts and influence their self-esteem, beliefs, and attitudes (Tajfel & Turner, 1979).

Tajfel (1982) stated that individuals develop judgments, stereotypes, and attitudes based on their social identities. People define themselves through group inclusion and adoption of social group norms, and they develop biases based on the groups' attitudes, beliefs, and behaviors. By self-categorizing and aligning with ideals and values of one group (in-group), individuals become primed for social distancing and discriminating behaviors of nongroup members (out-groups; Tajfel, 1982; Tajfel & Turner, 1979). One's social identity and alignment with one's social groups' values over another group increases self-esteem and promotes negative stereotyping behaviors and beliefs.

According to the social identity theory, discriminatory behaviors enhance one's sense of social identity and elevates group members' self-esteem (Houston &

Andreopoulou, 2003; Tajfel, 1982; Tajfel & Turner, 1979). The more positively differentiated in-group members become from out-groups, the higher the in-group members' sense of self-esteem (Houston & Andreopoulou, 2003). Therefore, one's social identity presents both individualistically and collectively, promoting and enhancing one's sense of self and self-esteem (Tajfel & Turner, 1979).

While the research literature frames social identity theory for social groups, organizations, and identity formation, the lack of research reflecting social identity theory related to families poses a limitation for the study. Information indicating how the social identity theory applies to families was not located; however, with families being the first social groups for all people (Anastasiu, 2012), the application of the social identity theory to families was reasonable and applicable. Because families are primary social groups, the expectation that parents derive self-value and self-esteem within those familial relationships was relevant. Furthermore, relational self-esteem, with its emphasis on gaining self-value from group memberships, warranted an investigation into systems that contributed to parents' rejecting or accepting behaviors when learning about their children's nonheterosexual identities

### **Rationale for Choice of Theory**

The social identity theory was used in this study about parental responses when learning their child identifies as a sexual minority. For example, there is a dichotomy in parental identity, including one's view of self as an individual and the simultaneous view of self within the context of the family relationships. The social identity theory lens was chosen because of the complex dynamics within the family unit. The social identity

theory explains, in part, (a) how individuals develop negative beliefs about sexual minorities and gender-role attitudes, (b) how the views threaten one's sense of self and (c) that challenging group norms threaten social relationships. According to the social identity theory, individuals develop their self-esteem through their personal attributes, relationships with others, and memberships in social groups (Du et al., 2017; Tajfel, 1982). The belongingness established in the social groups not only enhances one's identity, but it also influences their views and emotional responses to their environments (Du et al., 2017).

Self-esteem differs from relational self-esteem. One's personal skills, abilities, and sense of belongingness contribute to developing self-esteem (i.e., personal self), whereas relational self-esteem encompasses the three dimensions of the self, the personal, relational, and collective states of being (Brewer & Chan, 2007; Du et al., 2015; Schwager et al., 2020; Tajfel, 1982). The relational and collective selves develop through connections and relationships with significant others, family, and close friends (Du et al., 2012). Parents with LGBTQ children often experience changes in their identities, in part, because they must challenge their long-held beliefs of "normal," based most often in heteronormative values. Parents of sexual minorities risk losing their membership in their social groups and potentially losing their identities as parents, especially as they examine their attitudes and beliefs about nonheterosexuality throughout the coming out process. When working toward accepting their LGBTQ children's identities, parents must reassess their beliefs and attitudes about heteronormativity, themselves, and their children. Parents of sexual minorities also risk losing the esteem associated with parenthood during the

coming out process, especially as they shift from being parents with heteronormative values to minority group members of parents with nonheterosexual children (Fields, 2001).

Du et al. (2017) posited that people with higher self-esteem experience more positivity about life, life satisfaction, and relationships with others. Parents experience changes in their identities, social groups, and families as they challenge their beliefs, attitudes, and self-esteem in the adjustment period following a coming out disclosure. For example, parents lose their group memberships with others who promote heterosexual norms. Parents must also adjust to accommodate the new reality that includes the loss of alignment with heteronormative values and beliefs. The social identity theory explains, in part, challenges in parental adaptation at the time their child discloses their sexual minority identity.

### **Social Identity Theory and Parental Emotional Responses**

People have an innate need to belong, which creates a sense of safety, support, and connection with others (Keene, 2018). The social identity theory posits that all individuals seek to establish and maintain a positive self-concept through their self-esteem, beliefs, and attitudes (Tajfel & Turner, 1979). In developing and maintaining the self-concept, individuals make comparisons and distance themselves from group members holding with alternate values (Breshears & Beer, 2016). As social groups, families must learn to navigate changes in their identities and relationships when loved ones disclose their nonheterosexual identities.

According to Jans et al. (2019), when group members deviate from the group norms, they face rejection and exclusion from the group. In family systems, parents must re-evaluate their social group memberships to accommodate their children's out-group, minority identities, creating dissonance of their previously held expectations for heterosexual offspring. The adjustment process includes changes in one's identity as individuals, parents, and family members as their previous alignment with heteronormative values change.

The most common form of social groups is the family unit (Anastasiu, 2012). The family unit establishes the norms and expectations for its people, and when one member differs from the majority, questions about (a) whether one should accept and (b) how to accept the minority views disrupt the equilibrium in the family system (Anastasiu, 2012). Minority family members challenge the values, norms, and behaviors of the majority, subsequently becoming a member of the out-group. The disruption causes members to re-evaluate previously held beliefs, attitudes, and one's sense of self. The present study added to the social identity theory by its analysis of how personal and familial beliefs, attitudes, and individual identities influence emotional responses within the family's social institution.

### **Literature about Factors that Impact Parental Responses**

Group membership is present in almost all psychosocial models of stereotyping, prejudice, and discrimination (Mackie & Smith, 2015). The social identity theory provided a framework to conceptualize how individuals understand themselves through their social group affiliations (Blair & Holmberg, 2019). As previously stated, group

memberships offer the most effective social supports to members when coming from those who identify with similar values (Blair & Holmberg, 2019). The following paragraphs described the research literature about how in-group behaviors influence parental emotional responses, negative attitudes toward sexual minorities, sex-role attitudes, and relational self-esteem.

### **Sex-Role Attitudes and Negative Attitudes Toward Sexual Minorities**

Sex-role stereotypes, or gender-role bias, describe beliefs and attitudes that people consider ‘appropriate behaviors’ for each gender (Haslam et al., 1999). For example, people most often describe sex-role stereotypes in binary (male/female, man/woman) language, which enhance heterosexual norms (Haslam et al., 1999). The shared beliefs among group members promote stereotyped attitudes and beliefs (Haslam et al., 1999; Tajfel & Turner, 1979). The expectations and anticipated developmental trajectories for children are often within the scope of heterosexist norms, which parents place upon their children at birth (Cohen et al., 2006; Striepe & Tolman, 2003). Consequently, heteronormativity normalizes sex-role stereotyping, and it allows people to define and categorize others based on ‘acceptable’ and ‘unacceptable’ behaviors (Habarth, 2008).

When individuals become parents, gender-role behaviors tend to become more traditional (Endendijk et al., 2018). With the assumption of children’s heterosexuality, parents most often raise their children with the social expectations of gender-role behaviors. Traditional gender-roles negatively impact women’s career choices, promote gender inequality and stereotypes, and increase internalized sexual stigmatization and homophobia in children (Baiocco et al., 2015; Mayrhofer et al., 2008).

Dunbar et al. (1973) examined the relationships between attitudes towards homosexuality, heterosexuality, personal sex guilt, and sex-role stereotyping. Dunbar et al. (1973) investigated research participants' attitudes toward (a) homosexuality, (b) heterosexual sex practices, (c) general issues concerned with sexual freedom, and (c) one's own sexual impulses. The information collected from 126 Canadian male college students revealed that anti-homosexual individuals had less tolerance for 'deviant' sexual behaviors for heterosexual and nonheterosexual persons. Additionally, anti-homosexual individuals experienced greater sex-role stereotyping and experienced higher levels of guilt about sex than pro-homosexual students (Dunbar et al., 1973). From the study, researchers determined that people with stronger traditional sex-role beliefs hold stronger negative attitudes toward sexual minorities, suggesting that parents with traditional sex-role attitudes will experience increased distress when learning about their children's sexual minority identities.

Holtzen and Agresti (1990) investigated parental reactions when learning about their children's sexual minority identities. Fifty-five parents of lesbian and gay children completed the Index of Homophobia, the Coopersmith Self-Esteem Inventory for Adults, and short versions of the Attitudes Toward Women Scale and the Texas Social Behavior Inventory to measure homophobia, changes in self-esteem, and sex-role stereotyping (Holtzen & Agresti, 1990). The lapse of time between disclosure and participation in the study influenced parental attitudes and behaviors. The findings showed that parents experienced less distress the longer they knew about their child's sexuality (Holtzen &

Agresti, 1990). Furthermore, a relationship between sex-role stereotypes and homophobia existed (Holtzen & Agresti, 1990).

Individuals who embrace more traditional gender role attitudes have less tolerance towards sexual minorities (Kowalski & Scheitle, 2020). Sex-role stereotypes and gender-role attitudes intertwine with attitudes about sexuality (Lefkowitz et al., 2014). Parents adhering to more traditional sex-role stereotypes experience increased homophobic attitudes and decreased social self-esteem than parents with less rigid beliefs about sex and gender (Holtzen & Agresti, 1990). Gender-role concerns are a significant concern for African American parents of LGBTQ youth because of cultural values that reinforce beliefs and expectations that males present as macho, masculine, and heterosexually active (LaSala & Frierson, 2012). Within the African American community, expectations for black fathers' adherence to rigid gender-role expectations exist (LaSala & Frierson, 2012). A prominent expectation for black fathers is the exhibition of strength and masculine authority in their families (LaSala & Frierson, 2012). The social and cultural expectations create significant challenges for African American families when parents do not raise gender-conforming youth (LaSala & Frierson, 2012). The challenges then extend to the children who do not conform to societies' gender-role expectations (LaSala & Frierson, 2012).

Whitley (1987) sampled 124 female and 98 male heterosexual psychology students to assess the relationships between sex-role variables (self-esteem, traditional sex-role beliefs, sex-role self-concept, traditional sex-role behaviors) and attitudes toward sexual minorities. The regression analysis findings revealed that women held less

traditional sex-role beliefs than men, older respondents held fewer negative attitudes toward sexual minorities, and stronger traditional sex-role beliefs negatively impacted beliefs about sexual minorities (Whitley, 1987). As such, people who subscribe to sex-role stereotypes assessed others' behaviors as indicators of their sexuality.

Sex-role stereotypes prevent initial positive parental responses during their sexual minority children's coming out disclosure. There is prolific research literature positing that parental adherence to traditional sex-role attitudes contribute to negative parental responses when their children disclose their nonheterosexual identities (Baiocco et al. 2013; Conley, 2011; Savin-Williams, 2001). Furthermore, traditional attitudes about marriage and family values support sex-role expectations (Newman & Muzzonigro, 1993).

Newman and Muzzonigro (1993) collected data from 27 male youth between the ages of 17 and 20. Gay youth most often experienced discrimination when not meeting stereotypes (Newman & Muzzonigro, 1993). Additionally, people with higher traditional family value systems had more difficulty accepting sexual minority identities. When disclosing their nonheterosexual identities, sexual minority youths' from highly traditional families perceived the most disapproval from their families (Newman & Muzzonigro, 1993). Similarly, traditional beliefs about family values resulted in family members' decreased acceptance of homosexuality (Newman & Muzzonigro, 1993).

In 2007, Conley (2011) surveyed 350 heterosexual parents of lesbian and gay children to evaluate parental concerns about their children's nonheterosexual identities. Conley (2011) explored how family dynamics, religious affiliation, family cohesion,

concerns about conformity, gender, gender roles, racism, education, and family values contribute to parental reactions when learning about their child's sexual nonheterosexual orientation. Conley (2011) used the social constructionist and feminist constructs to frame the study. The social constructionist lens posits that stigma will powerfully impact parents' fears and concerns, and the feminist lens stresses the stigmatizing nature of transgressive gender identity and expression.

Conley (2011) identified parental reactions and labeled them as homophobic, discriminatory behaviors rooted in fear, and heterosexist. Social structures defined the discriminatory behaviors. Parental concerns included (a) societal perceptions of them as parents, (b) fear of rejection by loved ones, and (c) their child's physical safety, social welfare, and psychological well-being. The gender of the parent, gender of the child, consciousness about stigma, and parental perceptions about their gender role attributes accounted for variances in parental responses (Conley, 2011).

Fields (2001) qualitatively explored how heteronormative understandings of gender, family, and sexuality influenced parents' understanding of sexualized stigmatization and their parental identities. Using queer theory, Fields (2001) worked with members of the parents and friends of lesbian and gays (PFLAG) organization. Queer theory argues that when people seek the causes of homosexuality, they are also confirming and asserting their beliefs that homosexuality is a problem (Fields, 2001). Research participants addressed topics related to social norms and stigma by advocating for inclusion for sexual minorities; however, they did not challenge the social norms that define dominant sexual hierarchies (Fields, 2001).

Parents undergo a shift in their identities when their children disclose their same-sex orientation (Fields, 2001). Parents often reach acceptance of their sexual minority children through identity work that affirms parents' views that they are good people (Fields, 2001). Additionally, by redefining concepts associated with morality for themselves and their children, parents negotiate the narrow definition of '*normal*' behavior (Fields, 2001). By altering their views about morality and sexuality, parents learn to define themselves and their children outside of socially defined constructs of sexual deviancy, gender, and normalcy (Fields, 2001). Heterosexist cultural norms and sex-role beliefs contribute to parental maladjustment when learning they have LGBTQ offspring (Fields, 2001).

Clinicians use research literature to develop knowledge about human development and inform their clinical practices. However, the literature does not reflect society's cultural changes that include an increased acceptance of nonheterosexual persons. Although earlier research supports the connection between traditional sex-role beliefs and negative attitudes toward sexual minorities (Dunbar et al., 1973; Herek, 1988; Thompson et al., 1985; Whitley, 1987), it is timely and relevant to reassess parents' attitudes toward sexual minorities as it relates to their children's coming out.

### **Relational Self-Esteem**

Relational self-esteem reflects an integration of the personal, relational, and collective dimensions of the self (Brewer & Chen, 2007). Unlike personal self-esteem, which reflects one's individual traits, characteristics, and qualities, the relational self-esteem reflects a person's sense of self-worth when evaluating themselves in relation to

significant others (Du et al., 2012; Li et al., 2019; Tajfel & Turner, 1979). Individuals develop their sense of relational self-esteem through their social groups and relationships with significant others, family, and close friends (Du et al., 2012; Li et al., 2019). Although research literature is growing, there remains little information about relational self-esteem within the context of families (Du et al., 2017).

Heteronormativity informs expectations for sex and gender roles in the family and society (Kowalski & Scheitle, 2020; Spence & Helmreich, 1979). Beliefs about gender and sexuality are salient characteristics for parents when they learn about their children's sexual minority identities (Kowalski & Scheitle, 2020). Relational self-esteem may influence parental responses. People with high levels of relational self-esteem experience enhanced senses of well-being (Du et al., 2012). Relational self-esteem is more salient than personal self-esteem in collectivist cultures. American families express collectivistic views in their attention to in-group and social behaviors and emphasize gaining group membership and maintaining harmonious relationships with significant others (Oyserman et al., 2002).

Li et al. (2019) studied the neural networks related to personal and relational self-esteem to assess differences in behaviors and neural activations. Li et al. (2019) collected data from 581 Chinese college students about their (a) personal self-esteem, a measure of their global sense of personal self-worth, (b) relational self-esteem, a measure of their self-worth attained through their relationships with others, and (c) participants' self-constructs, whether independently- or interdependently-defined sense of self (Singelis et al., 2000). Researchers determined that people with interdependent self-constructs

experienced higher levels of relational self-esteem and lower levels of personal self-esteem by examining participants' neural activations and behaviors. The findings support the premise that parental responses may, in part, develop from the potential loss of parental identity, shifts in social identities, and decreased relational self-esteem.

After collecting data from 179 Chinese college students, Du et al. (2017) studied personal self-esteem, relational self-esteem, and collective self-esteem to determine their subjective well-being. The findings demonstrated that collective self-esteem does not predict subjective well-being; however, relational self-esteem and personal self-esteem positively influence life satisfaction, positive affect, meaning in life, and happiness (Du et al., 2017). Relational self-esteem is a more salient feature of subjective well-being and, through relationships with significant others, people increase their sense of self-worth (Du et al., 2017).

Relational self-esteem impacts one's well-being and correlates negatively with depression and stress and positively with resilience (Du et al., 2013). Because self-worth is maintained and enhanced through membership in social groups and relationships with significant others, affirmative parental responses when learning of their children's sexual minority identities increase psychological wellness, self-perception, and self-esteem (Du et al., 2015; Savin-Williams, 1998). Positive relational self-esteem benefit individuals in terms of happiness, creativity, productivity, and resiliency (Baumeister et al., 2003; Taylor & Stanton, 2007).

Individuals develop judgments, stereotypes, and attitudes based on their social identities and typically adhere to social groups' norms (Tajfel, 1982). New parents expect

heterosexuality for their children from birth (Cohen et al., 2006; Striepe & Tolman, 2003). Bonding with other parents during the childrearing years can create social support groups for parents. Participating and belonging can increase one's sense of self-esteem (Jetten et al., 2015). In attempts to maintain control of parental identity and social group affiliations, parents may attempt to regulate their children's identities. Similarly, people motivated to maintain in-group values or goals attempt to regulate out-group members' emotions (Netzer, 2020). Relational self-esteem may mitigate adverse reactions when discovering their child is LGBTQ because of pre-established wellness and resiliency levels. Conversely, relational self-esteem may be a factor in negative parental responses when learning their child is a sexual minority, especially if parents subscribe to social groups that endorse heteronormativity.

### **Parental Emotional Responses**

Parental responses to their child's same-sex orientation disclosure not only influence the child's development but parental reactions also impact family dynamics, relationships, and parental wellness (Baiocco et al., 2015; Bregman et al., 2013; D'amico et al., 2015; & Goodrich, 2009). Family rejection contributes to harmful physical and mental consequences for sexual minority youth, and sexual minority youth risk parental rejection, bullying, discrimination, victimization, and prejudices (Baiocco et al., 2015; Doyle, 2018; Goodrich, 2009; LaSala, 2000). The research literature reflects themes about negative parental responses when discovering their child is LGBTQ, with little information about positive experiences during the coming out process.

Using data from 8 parents with lesbian and gay children, Saltzburg (2009) conducted a phenomenological inquiry about parental experiences of their child's coming out and perceptions of social support. The participants, members of the PFLAG organization, reflected themes that parents tend to either socially isolate or reconnect during the transition phase. Parents reported feeling alone, isolated, and socially unsupported after their children disclosed their nonheterosexual identities (Saltzburg, 2009). The social stigma associated with having a sexual minority child contributes to feelings of panic and despair, causing many parents to withdraw socially (Saltzburg, 2009). Upon learning their child is LGBTQ, parents experience changes in their personal and social identities, self-esteem, and relationships (Du et al., 2017; Saltzburg, 2009).

Savin-Williams and Dubé (1998) conducted a review of empirical studies that present parental responses to their children's coming out to explore whether parents follow developmental stages similar to those within grief and loss models. The results of the study revealed that common parental experiences of their child's disclosure process include family disruption, chaos, and uncertainty. Many parents endorsed feelings of disbelief, silence, guilt, grief-like symptoms, shame, and denial; however, relatively few parents responded with physical assault, hysteria, intolerance, anger, or rejection, and no parent evicted their child from the family home.

Savin-Williams and Ream (2003) collected data from 164 participants between the ages of 17 and 25 about their lesbian and gay coming out experiences. Based on the same-sex oriented youths' interviews about their perceptions of parental responses, Savin-Williams and Ream (2003) revealed that children most often view parental

reactions as accepting or slightly negative for most youth. Few youths viewed their parents' reactions as rejecting or violent (Savin-Williams & Ream, 2003). Parental victimization and severe harassment of their sexual minority youth occur at low levels, contradicting negative stereotypes or expectations that most parents will respond negatively (Savin-Williams & Ream, 2003). When participants chose not to disclose to their mothers, they cited timing and developmental issues as impediments; however, participants cited emotional distance as barriers to disclosing to their fathers (Savin-Williams & Ream, 2003). Additionally, sons, more than daughters, feared parents' adverse reactions; however, mothers and fathers responded in supportive or slightly negative manners for both sons and daughters (Savin-Williams & Ream, 2003).

Shpigel et al. (2015) confirmed previous findings that parental rejection and negative reactions increased the risks for depression and suicidal ideation in LGBTQ populations. The researchers found that rejecting parents attributed their child's sexual minority orientation on external factors, such as peer pressure, an absent parent, or a smothering mother instead of biological factors. As a result, parents experienced an increase in feelings of anger, rejection, blame, and guilt. As parents adjust and learn to accept that the child's sexual orientation is static and biological, parents experience an increase in empathy, tolerance, and acceptance of their child. The researchers highlighted the importance of parental relationships, thus supporting counselors' role in restoring balance, love, and acceptance in the parent-child relationship.

Researchers consistently agree that parental responses are critical in children's identity development and influence the ways children perceive themselves (Baiocco et

al., 2015; Chrisler, 2017; Goodrich & Gilbride, 2010; Willoughby et al., 2008). Parental acceptance promotes positive behavioral and psychological outcomes in children, such as satisfaction with interpersonal relationships, pro-social behaviors, and positive peer relationships, while negative reactions can result in the development of attachment disorders, academic disturbances, substance abuse, depression, conduct problems, and difficulty with interpersonal relationships (Baiocco et al., 2015; Bregman et al., 2013; D'amico et al., 2015; Goodrich & Gilbride, 2010; Williams & Chapman, 2012; Willoughby et al., 2008). One study reported that parents have higher levels of concerns for the well-being of their gay sons than lesbian daughters (Conley, 2011), and lower acceptance levels for a lesbian daughter than a gay son; however, other studies did not report gender differences in parental reactions (D'amico et al., 2015).

Baiocco et al. (2015) investigated lesbian and gay youths' perceptions about their parents' responses to their coming out disclosure and the differences between the mothers' and fathers' responses to their coming out process. The study participants, self-identified as lesbian or gay young adults between the ages of 18 and 26, discussed their perceptions of parental reactions to when they disclosed their same-sex orientation. The findings revealed that parents' right-wing political conservatism, strong religious beliefs, and higher scores in rigidity and enmeshment predicted negative reactions to the disclosure. Additionally, results confirm that inadequate family resources and strong traditional values influenced negative parental reactions. Baiocco et al. (2015) stated that parents who are the same biological sex as their lesbian or gay child experienced more

negative responses, yet subsequent studies have not confirmed these results (Baiocco et al., 2015).

Baiocco et al. (2015) conducted their study using Italian research participants. The study addressed the young adults' perceptions of their parents' responses, which may not accurately reflect the parents' actual emotions. Additionally, Italian and American families differ in culture, traditions, and parenting. According to Claes et al. (2018), Americans value personal independence over community ideals while Italians value family tradition over individual goals. As such, American families advocate for independence and autonomy while Italian families expect emotional closeness and loyalty to the family system from its members (Claes et al., 2018). The disparity between cultures may partially account for the prevalence of negative responses in the study by Baiocco et al. (2015).

Richter et al. (2017) studied 90 parent-child dyads about their memories of the coming out experiences and explored ethnic differences in parental rejection of lesbian, gay, or bisexual youth. The study included White, Hispanic, Black, and multiethnic parents and youth. After controlling for parents' age and income, ethnic minority parents and youth reported increased parental rejection, homonegativity, and traditional gender role beliefs than ethnic majority parents and youth (Richter et al., 2017). Negative parental responses increase family stress and exacerbate mental health issues for parents and their children (Bregman et al., 2013; Willoughby et al., 2008).

Using the social constructionist and feminist theoretical frameworks, Conley (2011) explored parental concerns about their child's same-sex orientation. The

theoretical lenses suggest that social stigma and minority status concerns influence parents' responses about having a sexual minority child. Conley (2011) collected data from 350 parents of lesbian or gay children and participants in the PFLAG organization about gender, gender-role perception, stigma consciousness, parents' race, education, income levels, and parental responses. The results of the study indicate that mothers expressed more concern for their child's well-being than fathers. Additionally, awareness of social stigma and stigma consciousness positively corresponded with parental concerns for their children's well-being, and parents of gay sons experience more concerns than parents of lesbian daughters (Conley, 2011).

According to Goodrich (2009), there is a lack of information about parental reactions to the nonheterosexual disclosure of their LGBTQ children and how parents experience the disclosure process. Parental responses, which can be positive and accepting or negative and judgmental, are critical to the youth's self-concepts and identity development (Baiocco et al., 2015; Chrisler, 2017; Goodrich & Gilbride, 2010; Willoughby et al., 2008). Parental responses impact the lesbian or gay youth's identity development and contribute to the parent's identity development and well-being (Baiocco et al., 2015; Goodrich, 2009). According to Savin-Williams and Dubé (1998), the developmental model of parental adjustment suggests that parental reactions will progress through a range of emotions, including shock, denial and isolation, anger, bargaining, depression, and acceptance. Upwards of one-half and two-thirds of parents reported reactions that included disbelief, silence, guilt, grief-like symptoms, and shame; some parents respond with physical assault, hysteria, intolerance, and rejection (D'Augelli et

al., 2010; Savin-Williams & Dubé, 1998). Parental responses to their children's coming out directly impact the parents' and children's psychological well-being. Negative or rejecting responses place parents and their sexual minority offspring at risk for depression, psychological distress, and maladaptive coping behaviors (Baiocco et al., 2015; Goodrich, 2009).

The studies provided a foundation for building knowledge. Although the information was relevant to the current study, there are limitations in their approaches. For example, Dunbar et al. (1973), Conley (2011), Herek (1988), and Whitley (1987) used samples of heterosexual individuals to complete their studies. Using heterosexual research samples does not reflect the perspectives of LGBTQ family members or children. Fields (2001) studies parents with lesbian or gay children; however, the sample included only twelve parents. While the studies provided information about sex-role stereotypes and negative attitudes towards sexual minorities, excluding nonheterosexual parents limits the application of research outcomes to clinical practices.

Du et al. (2017) identified relational self-esteem in collectivist Eastern cultures, stating that East Asians relied more heavily on relational self-esteem than personal self-esteem. Conversely, Western societies relied primarily on their sense of personal self-esteem (Du et al., 2013). Through relational self-esteem, families, as collectivist entities, may provide its members with more adaptive flexibility, resilience, and positive regard (Oyserman et al., 2002). A limitation of available research about relational self-esteem was the lack of application in Western families, specifically with families with nonheterosexual members.

The research literature provided a context for understanding parental responses, yet little information exists about parental or family characteristics that contribute to positive and accepting reactions when a child discloses their sexual minority identities. Additionally, the research literature did not describe how sex-role stereotypes promote homophobic attitudes toward sexual minorities within the family system reflect current acceptance trends in today's society.

### **Trends in Working with Parents of Sexual Minority Youth**

Theoretical and developmental parental adjustment models tend to reflect a single aspect of the parent experience (Chrisler, 2017). Current models of conceptualizing parental processes include the grief and loss model (Phillips & Ancis, 2008; Savin-Williams & Dube, 1998). Clinicians can work with parents to decrease sex-role biases and discrimination while implementing therapeutic approaches that enhance parental self-esteem and responsiveness throughout the adjustment period (Baiocco et al., 2015; Phillips & Ancis, 2008). Holtzen and Agresti (1990) suggested that parents may need to address their feelings about sex-role stereotypes when working toward accepting their LGBTQ children. Using perspective-taking techniques, processing parental emotional responses, and exploring expectations may help parents adjust to their children's nonheterosexual identity disclosure (Pornprasit & Boonyasiriwat, 2018). However, using perspective-taking techniques with parents high in relational self-esteem could negatively impact sought after therapeutic goals of acceptance and understanding (Pornprasit & Boonyasiriwat, 2018).

## Summary and Conclusions

Parents often struggle to accept their children's nonheterosexual identities (Holtzen & Agresti, 1990). Despite efforts to understand or model parental processes of acceptance, the literature research has little information about parental emotional responses (Saltzburg, 2004; Willoughby et al., 2008). The research literature reflected a theme that parental responses to their children's coming out are primarily negative and rejecting, citing heteronormative values and gender role attitudes as contributing factors in parental experiences (Baiocco et al., 2015; Ben-Ari, 1995; D'Augelli et al., 2010; Doyle, 2018; Fields, 2001; Goodrich, 2009; Shpigel et al., 2015; Saltzburg, 2004). The coming out process causes family members to accommodate changes to their identities as they question their belief systems and sense of belongingness (Fields, 2001), yet there was little current research that explores parental acceptance or rejection of the sexual minority children, particularly within the context of the social trends toward acceptance (Flores, 2014).

The study's findings contributed to research literature about parental responses to their children's coming out and whether parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes influences parental emotional responses when learning about their children's LGBTQ orientation. Societal acceptance of sexual minorities has increased (Flores, 2014), yet perspectives that parents respond poorly remains. The research findings demonstrated whether parents' relational self-esteem influenced their emotional responses to learning their child was LGBTQ. For example, if

parents experienced high levels of relational self-esteem, they may be less distressed or challenged when their child shared their nonheterosexual identities.

Throughout Chapter 2, the scholarly research related to the variables: parental emotional responses, sex-role stereotypes, negative attitudes about homosexuality, and parental relational self-esteem was described. In Chapter 3, the research approach and design used in the study to examine parental emotional responses, sex-role stereotypes, negative attitudes towards sexual minorities, and relational self-esteem are explained. The data analysis is provided in Chapter 4. Lastly, a summary of the research findings and the implications of the results are shown in Chapter 5.

### Chapter 3: Research Method

The quantitative study examined parental patterns of acceptance of their sexual minority children by exploring the relationships between parents' emotional responses at the time the child discloses their sexual minority orientation and whether levels of homophobia, relational self-esteem, and sex-role attitudes predict parental emotional responses. By quantitatively examining the relationships between parents' emotional responses when learning their child does not identify as heterosexual to levels of homophobia, parental relational self-esteem, and sex-role stereotyping and attitudes, mental health professionals can better understand the influences impacting parental behaviors when learning their child is LGBTQ.

The following sections of this chapter identify the independent and dependent variables and described the research design. In addition, there is a discussion about the justification for the research design, its connection to the research questions, the target population, the sampling and sampling procedures, and descriptions of the procedures for recruiting research participants. The research instruments and data collection methods used in the study are introduced, including information about the data analysis plan. Lastly, the threats to validity and ethical procedures are identified.

#### **Research Design and Rationale**

In this research study, I used a nonexperimental post facto survey research design to examine (a) whether parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes related to parental emotional responses and (b) whether parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes individually

or collectively predicted parental emotional responses. Survey research incorporates a set of principles and procedures to collect information about the social and economic worlds and is relevant when determining factors that contribute to parental responses when a child discloses their sexual minority orientation (Groves et al., 2009).

I chose to use survey research for this study to maximize the potential of reaching parents (a) with different backgrounds, (b) in different locations across the United States, and (c) to maximize participation rates. The technology-based survey is an effective and cost-efficient method of reaching parents of LGBTQ children (*Foundations of Social Work*, 2020). The study included time constraints for the data collection process. The study had a 6-week window for data collection to allow me to meet educational goals and deadlines.

Survey research utilizes questionnaires for data collection to generalize the information from the sample to the population (Groves et al., 2009). Technologically based surveys reduce measurement error and participants' inclinations to report socially desired responses (Groves et al., 2009). The study findings provided insights into parental responses to better understand parental processes when learning they have a sexual minority child.

The research questions in this study assessed parental emotional responses when learning of the nonheterosexual children's identity and the influences of negative attitudes toward sexual minorities, relational self-esteem, and sex-role stereotyping on parental affect. The criterion variable was parental emotional responses. The predictor variables were parental negative attitudes toward sexual minorities, relational self-

esteem, and sex-role stereotypes. The demographic information, parental role, age range, race/ethnicity, household income, geographical location, education, parental sexual orientation, child's sexual orientation, number of children, and length of time since disclosure contributed to post hoc tests and data analysis.

Participants provided information through Internet-based survey research. The quantitative study evaluated parental responses in two phases. I first evaluated whether statistically significant relationships between parental emotional response and homophobic attitudes, relational self-esteem, and sex-role stereotyping existed. The second phase determined whether homophobic attitudes, relational self-esteem, and sex-role attitudes individually or collectively predicted parental emotional responses during their children's coming out processes.

### **Research Questions and Hypothesis**

RQ1: Quantitative: Are there statistically significant relationships between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses when learning about their children's LGBTQ orientation?

*H*<sub>01</sub>—There are no statistically significant relationships between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses.

*H*<sub>a1</sub>—There are statistically significant relationships between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses.

RQ2: Quantitative: Do parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes individually predict parental emotional responses?

*H<sub>02</sub>*— Parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes do not individually predict parental emotional responses.

*H<sub>a2</sub>*— Parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes individually predict parental emotional responses.

RQ3: Quantitative: Do parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes collectively predict parental emotional responses?

*H<sub>03</sub>*— Parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes do not collectively predict parental emotional responses.

*H<sub>a3</sub>*— Parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes collectively predict parental emotional responses.

## **Methodology**

A multiple regression model illustrates whether relationships exist between variables (Frankfort-Nachmias & Leon-Guerrero, 2018). Using the data collected from the survey research, the multiple linear regression model was used to determine whether there were statistically significant relationships between parental relational self-esteem, negative attitudes about sexual minorities, and sex-role stereotyping behaviors and parental emotional responses when their LGBTQ children disclose their identity for the first time. Multiple regression analysis is a statistical model that will indicate whether homophobic attitudes, relational self-esteem, and sex-role attitudes predict parental emotional responses (Multiple Logistic Regression Analysis, 2013). Parental responses

were categorized as either positive or negative affect, based on the Positive and Negative Affect Scale survey data analysis.

### **Population**

The study population was parents in the United States with one or more LGBTQ children who disclosed their sexual minority orientation within the past 5 years. The term ‘parent’ included biological parents, stepparents, single parents, adoptive parents, foster parents, and grandparents serving in parental roles, and guardians. To promote continuity within the data, parents with more than one sexual minority child were asked to provide insights about their experiences when their first child disclosed their sexual minority identity. To increase the accuracy and consistency of parental recall of the coming out experience (Smith et al., 2003), the study included only those parents who learned of their child’s sexual minority identity within the past 5 years. The research participants were asked to provide information about their attitudes about sex minorities, relational self-esteem, sex-role stereotypes, and emotional responses when their child disclosed their LGBTQ orientation to determine whether relationships exist and whether attitudes about sex minorities, relational self-esteem, sex-role stereotypes individually or collectively predicted parental emotional responses when their child disclosed their LGBTQ orientation.

As of 2019, the lesbian, gay, bisexual, and transgender population is approximately 4.5% of the US population (*The Williams Institute*, n.d.). To create a representative sample, the number of research participants is 95 (Sample Size Calculator, n.d.). The 95 research surveys highlighted the potential relationships between parental

emotional responses, levels of homophobia, relational self-esteem, and sex-role stereotypes with a 90% confidence level and a 10% margin of error (Sample Size Calculator, n.d.).

### **Sampling and Sampling Procedures**

For this research proposal, purposive sampling and snowball sampling were used to conduct a web-based survey. Purposive sampling is a sampling design where participants must meet the pre-established inclusion criteria of being a parent of a sexual minority child who disclosed their same-sex orientation to the participating parent within the previous 5 years (Burkholder et al., 2016). For this study, the term *parent* included biological parents, stepparents, single parents, adoptive parents, grandparents serving in parental roles, and guardians.

Snowball sampling is a method of recruiting research participants to refer potential participants to the researcher or study (Ungvarsky, 2017). Members of the community were invited to refer potential candidates to the study. Using the snowball sampling method, potential participants may experience the risk of disappointing their referral source should they choose not to complete the survey; however, the risk of discomfort or disappointment was minimal, particularly as there is no compensation or recognition for referring others or completion of the study. The data collected through this research survey identified factors relating to parental emotional responses when their LGBTQ child disclosed their orientation to the parent.

Through the effect size, the strength of the relationship between the variables, was determined (Frankfort-Nachmias & Leon-Guerrero, 2018). Cohen (1992) outlined effect

sizes as small ( $f^2 = .02$ ), medium ( $f^2 = .15$ ), and large ( $f^2 = .35$ ) effect sizes. Effect sizes provided estimates about the association between variables and were resistant to sample size (Ferguson, 2016). Using an adjusted  $R^2$ , the potential for sampling error introduced by having a small sample size was reduced (Ferguson, 2016). To create a representative sample, a minimum of 377 research participants was needed to demonstrate relationships between parental emotional responses, levels of homophobia, relational self-esteem, and sex-role stereotypes with a 95% confidence level and a 5% margin of error (Sample Size Calculator, n.d.). However, additional statistical testing to reduce the sample size and the use of medium effect size helped determine whether relationships between the variables exist for timeliness and practicality were included. For timeliness and efficiency purposes, confidence levels were reduced to 90% with a 10% margin of error, reducing the sample size to 95 (Sample Size Calculator, n.d.).

Data collected from the completed packets of the research questionnaires and used to conduct multiple regression analyses that identified relationships between the variables, levels of homophobia, sex-role stereotyping, and self-esteem. Because participants must meet the inclusion criteria of being a parent of a sexual minority child who disclosed their orientation within the past 5 years, purposive sampling was an appropriate sampling method design (Burkholder et al., 2016). Goodrich and Gilbride (2010) used purposive sampling in a study to validate a theory of family functioning after children disclosed their same-sex or bisexual orientation.

A known limitation of purposive sampling is the risk that the results may not be generalizable to the entire population (Burkholder et al., 2016). However, the results are

relevant to clinicians working with individuals and families with nonheterosexual members. The sample provided awareness about parental beliefs to promote parental and family adjustment when learning their child is LGBTQ.

### **Procedures for Recruitment**

After gaining permissions to pursue the research topic and proposed methodology from the committee chairperson, a request for approval from the Institutional Review Board (IRB) at Walden University was submitted. The Walden IRB provides oversight to research projects, ensuring proper ethical protections exist throughout the study. When conducting social research, it is imperative that researchers adhere to established ethical procedures.

To identify potential participants, the plan included contacting the nonprofit organization Parents, Families, and Friends of Lesbians and Gays (PFLAG) to request permission to work with a moderator. Once approved to work with the representative, an electronic letter of intent and an electronic link to the survey instruments to the contact person listed for the PFLAG chapters within the United States was to be sent. The PFLAG representatives were to forward the letter to PFLAG registered with their organization. In addition to identifying potential participants through the PFLAG organization, the plan included contacting LGBTQ support organizations in the Northern Colorado region of the US requesting referral information. Additionally, the plan included placing an advertisement to the study and its purpose on the PFLAG website and two social media platforms, specifically Facebook and Twitter.

The recruitment plan included placing invitations with the survey link on sexual minority friendly media sights, specifically PFLAG websites, Facebook pages, and Twitter using the hashtags *#ParentsOfLGBTQ*, *#LGBTQparents*, and *#LGBTQ*. The survey link directed participants to a web-based survey, located on SurveyMonkey. Survey Monkey, an Internet survey platform often used by researchers for data collection, has become a commonly used strategy proposed to university research ethics boards (Colvin & Lanigan, 2005).

The survey landing page offered an informed consent statement, and participants acknowledged their consent by participating in the study. Participants completed a demographic portion of the survey, in which they disclosed their parental role, age range, race/ethnicity, household income, geographical location, education, and sexual orientation for post hoc testing. Participants then completed questions from the Positive and Negative Affect Scale (Watson et al., 1988), Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), Attitudes Toward Women Scale - Short Version (Spence et al., 1973), and Relational Self-Esteem Scale (Du et al., 2012).

### **Procedures for Participation**

The research participants identified as parents of an LGBTQ child who has disclosed their nonheterosexual orientation within the past 5 years. Research participants read a statement of the survey's intent and purpose, the potential risk for discomfort, confidentiality, and privacy protection measures at the beginning of the survey (Groves et al., 2009). The participants acknowledged informed consent statements before accessing the SurveyMonkey link. The informed consent acknowledgment statement included the

purpose of the study, the use of the data, an explanation of participants' rights to privacy, and the procedures to withdraw from the study (Gupta, 2017). Research participants could withdraw their consent to participate during the study by closing out of the program or contacting me after submitting their responses. The survey was scheduled to remain open for 6 weeks.

### **Data Collection**

Research participants provided demographic information in the web-based survey and verified they met the inclusion requirements. Participants disclosed their parental role, age range, race/ethnicity, household income, geographical location, education, and sexual orientation for post hoc testing. The informed consent and demographic portion of the survey took approximately five minutes to complete. The Attitudes Toward Sexual Minorities Scale, Attitudes Toward Women Scale - Short Version, Relational Self-Esteem Scale took approximately fifteen minutes to complete.

The method of data collection used for the survey research was Survey Monkey. Creswell and Creswell (2018) stated that online survey methods could improve data collection through the research process. As research participants completed the surveys using survey software programs, the answers were organized electronically for data analysis, decreasing data entry errors (Creswell & Creswell, 2018).

### **Instrumentation and Operationalization of Constructs**

#### ***The Positive and Negative Affect Schedule (PANAS)***

The PANAS measures positive and negative emotions using a 20-item, self-reported questionnaire (Watson et al., 1988). Positive affect emotions are attentive,

active, alert, excited, enthusiastic, determined, inspired, proud, interested, strong (Watson et al., 1988). Negative affect emotions are hostile, irritable, ashamed, guilty, distressed, upset, scared, afraid, jittery, and nervous (Watson et al., 1988). Using a 5-point scale where 1 = *this concept applies very little or not at all* and 5 = *this concept applies very much*, participants rated the extent to which they agree with the listed affect state (Watson et al., 1988). The PANAS internal consistency reliabilities, measured by Cronbach's coefficient alpha, range from .86 to .90 for positive affect and from .84 to .87 for negative affect (Watson et al., 1988). According to Watson et al. (1988), the correlation between the negative and positive affect scores ranges from -.12 to -.23, with variance between 1% and 5%. In developing scales, the test developers collected most of the data from employees and undergraduate students enrolled in various psychology courses at a private southwestern university and 53 adults with no university affiliation (Watson et al., 1988). The information about the positive affect and negative affect correlation was unaffected by the tested time frame, ranging from *in this moment*, to *today* to *the past few days* to *the past few weeks* to *the past year* to *in general* (Watson et al., 1988).

### ***Attitudes Toward Sexual Minorities Scale***

The Attitudes Toward Sexual Minorities Scale measures homophobic attitudes toward sexual minorities (Jaffee et al., 2016). The scale is a 6-item scale with questions about covert biases toward sexual minorities (Jaffee et al., 2016). Using a 5-point scale, where 1 = *Strongly Disagree* and 5 = *Strongly Agree*, each item was rated and averaged the scores (Jaffee et al., 2016). Three items were reverse-coded, and the mean score was a

measure of subtle attitudes toward lesbian, gay, and bisexual people. Higher scores indicated more affirming attitudes (Jaffee et al., 2016).

The Attitudes Toward Sexual Minorities Scale measures contemporary and subtle biases toward lesbian, gay, and bisexual people (Jaffee et al., 2016). The scale developers used a sample of incoming master students studying social work and, using Cronbach's alpha, has a reliability of .78 (Jaffee et al., 2016). In this study, the scale measured covert negative attitudes towards sexual minorities. The study included contemporary language to explore subtle biases, and the results of the study will reveal current trends in parental attitudes and homophobic biases.

#### ***Attitudes Toward Women Scale - Short Form***

The Attitudes Toward Women Scale (AWS) is a 25-item inventory of sex-role stereotypes, scored on a 4-point Likert-type scale (Spence et al., 1973). The scale developers tested the scale using statements about women's rights and roles about various topics, including employment, education, intellectual activities, dating behaviors, sexual behaviors, and marriage (Spence et al., 1973).

Research participants expressed their feelings by indicating whether they (a) *Agree Strongly*, (b) *Agree Mildly*, (c) *Disagree Mildly*, or (d) *Disagree Strongly* with the statements provided (Spence et al., 1973). The reliability scores for the data collected from 286 male and 241 female students enrolled in psychology courses at a Texas university are .968 and .969, respectively (Spence et al., 1973). The test developers tested data from 292 mothers and 232 fathers of the students, yielding reliability scores of .956 and .963, respectively (Spence et al., 1973). In this study, the AWS measured parents'

sex-role stereotyping attitudes and beliefs and will reveal whether parents potentially have sex-role biases against their children. The responses, ranging from 0-75, where lower scores reflect more traditional attitudes, and higher scores will indicate more non-traditional attitudes were scored.

### ***Relational Self-Esteem Scale***

The Relational Self-Esteem Scale (RSE) is a 7-item, Likert-scale measuring how individuals value themselves in their relationships with family members and friends (Du et al., 2012). “I am proud of my family” is an example of a statement in the RSE scale (Du et al., 2015). Using a 4-point Likert scale, where 1 = *Strongly Disagree* and 4 = *Strongly Agree* rated each item and average the scores (Du et al., 2012). Higher scores indicated higher levels of relational self-esteem (Du et al., 2015).

The scale developers administered questionnaires to 109 female and 47 male students between the ages of 17 and 29 (Du et al., 2012). The scale assesses one’s sense of self-worth within the context of relationships with significant others (i.e., family and close friends) and the valuation of one’s relationships with significant others (Du et al., 2012). The Relational Self-Esteem Scale has a high reliability score ( $\alpha = 0.86$ ,  $M = 2.60$ ,  $SD = 0.49$ ), demonstrating that relational self-esteem positively relates to personal self-esteem (Du et al., 2012).

### ***Demographic Information Questionnaire***

The demographic information, parental role, age range, race/ethnicity, household income, geographical location, education, parents’ sexual orientation, child’s sexual orientation, number of children, and length of time since disclosure contributed to post

hoc tests and data analysis. The parental role categories were mother and father. The age ranges were 18-24, 25-34, 35-44, 45-54, 55-64, and 65 and above. Race/ethnicity categories were American Indian or Alaska Native, Asian, Black or African American, Hispanic/Latino, Native Hawaiian or Other Pacific Islander, White, and other. Household income categories were less than \$20,000, \$20,000 to \$34,999, \$35,000 to \$49,999, \$50,000 to \$74,999, \$75,000 to \$99,999, \$100,000 to \$149,999, and \$150,000 or more. The geographical location categories were New England (Maine, New Hampshire, Vermont, Massachusetts), Middle Atlantic (New York, New Jersey, Pennsylvania), East North Central (Ohio, Indiana, Illinois, Michigan, Wisconsin), West North Central (Minnesota, Iowa, Missouri, North Dakota, South Dakota, Nebraska, Kansas), South Atlantic (Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida), East South Central (Kentucky, Tennessee, Alabama, Mississippi), West South Central (Arkansas, Louisiana, Oklahoma, Texas), Mountain (Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada), and Pacific (Washington, Oregon, California, Alaska, Hawaii).

The educational levels included: completed some high school, high school graduate, completed some college, associate degree, bachelor's degree, completed some postgraduate, master's degree, vocational training, specialist degree – for example, Ph.D., law or medical degree, and other advanced degrees beyond a master's degree. Parents disclosed their sexual orientation (lesbian, gay, bisexual, transgender, queer, or questioning), their children's sexual orientation (lesbian, gay, bisexual, transgender, queer, or questioning), and length of time since the coming out process, rounded to the

nearest half-year (1 year, 1.5 years, 2 years, 2.5 years, 3 years, 3.5 years, 4 years, 4.5 years, and 5 years).

### **Data Analysis Plan**

The research participants entered their responses into SurveyMonkey, which were downloaded into Excel and imported into SPSS, version 27. Data cleaning methods included dismissing empty results and duplicate responses. Screening measures included a review of demographic information to ensure the participants meet the inclusion criteria. Participants' responses entered on the SurveyMonkey platform, a HIPPA compliant platform were collected and stored (SurveyMonkey, 2020). A copy of the data stored on a password encrypted external hard drive that was password encrypted was securely stored when not in use. The data will be deleted after 5 years.

To assess whether statistically significant relationships exist between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses, a simultaneous multiple regression analysis with variables assigned at ratio levels was performed. To determine if parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes individually or collectively predict parental emotional responses, a regression analysis, assuming the data had statistically significant relationships between the variables and there was normality, linearity, homoscedasticity, and homogeneity of the variables and independence of residuals, was conducted (Warner, 2013).

The predictor variables, captured at interval levels, included homophobic attitudes, relational self-esteem, and sex-role stereotypes. The criterion variable, parental

emotional responses, was dichotomous positive and negative. To ensure accuracy and reliability in the study, a 90% confidence level with a 10% margin of error were used.

### **Threats to Validity**

Mathematical computation errors create threats to validity (Frankfort-Nachmias & Leon-Guerrero, 2018). Ensuring the accuracy of the data-entry information decreased the opportunity for error. Another way to reduce bias in quantitative research was to check the assumptions associated with tests performed (Frankfort-Nachmias & Leon-Guerrero, 2018). For example, there must be a statistically significant relationship between the variables before beginning the analysis when conducting multiple regression analyses (Warner, 2013). Assumptions, including normality assumptions, the independence of residuals, linearity, homoscedasticity, and homogeneity of the variables were checked (Warner, 2013). For the multiple logistic regression model, checks ensuring binary outcomes, linear relationships, absence of extreme outliers, and multicollinearity among the independent variables were conducted (Kassambara, 2018). If a violation of one or more of the assumptions was present, the violations were addressed through further testing and sharing the associated implications of the violations in the results section.

Spence et al. (1973) developed the Attitudes Toward Women Scale (AWS), a 25-item inventory of sex-role stereotypes. The scale developers tested the scale using statements about women's rights and roles about various topics, including employment, education, intellectual activities, dating behaviors, sexual behaviors, and marriage (Spence et al., 1973). An initial overview of the scale may appear outdated, with its 1973 date of development; however, the AWS is a commonly used instrument to measure

attitudes toward women, as indicated by its popularity and continued use throughout the years (Byrne et al., 2011; Peterson & Zurbriggen, 2010).

### **Ethical Procedures**

Researchers respect ethical principles of research procedures and evaluate the participants' risk of harm (Gutpa, 2017). Through an informed consent process, researchers articulate measures to protect the participants' privacy and confidentiality (Bradburn et al., 2004). The informed consent notified participants about their rights to their: (a) behaviors, (b) attitudes, (c) opinions, and (d) beliefs (Bradburn et al., 2004; Groves et al., 2009). A recruitment email notified participants about the study, including information about the study, anonymity, potential risks, confidentiality, the ability to exit the study before the survey ends, and my contact information. Participants had information about obtaining the research results (Bradburn et al., 2004; Groves et al., 2009).

To ensure the integrity of the study, I gained the publishers' permission to use the instruments in the study. The study had the approval of the dissertation committee and the Internal Review Board (IRB) at Walden University before beginning the data collection process. The approvals ensured the protection of research participants and merit of the study.

The research study did not collect personally identifiable information, allowing participants' responses to remain anonymous. The study did not recruit persons from vulnerable populations; however, should participants from vulnerable populations participate, their contributions, as parents of sexual minorities, were justified. There were

minimal risks of harm to individuals in the survey questionnaire. For example, research participants may have experienced emotional discomfort associated with their child's coming out, as they revisited their memories and associated feelings. Following the survey, participants had an opportunity to debrief with me, if desired (Colvin & Lanigan, 2005).

Protection of the privacy for all research participants was prioritized. All data collected from survey responses was stored in an encrypted, password-protected account at SurveyMonkey.com. Survey Monkey did not collect identifying information, including names, email addresses, computer information, or IP addresses. A copy of the data was maintained in a password-protected external hard drive and was securely stored when not in use. All data was downloaded and stored in a password-protected hard drive when the survey ended to reduce the potential for data contamination, manipulation, or compromise. The research study was a voluntary, anonymous survey research project. I experienced no conflicts of interest in conducting the study. Data will be kept for at least 5 years, as required by the university

### **Summary**

Throughout this chapter, the research approach to examining parental patterns of acceptance of their sexual minority children was described. The study explored the relationships, if any, between parents' emotional responses at the time of the child's nonheterosexual disclosure and whether levels of homophobia, relational self-esteem, and sex-role attitudes predicted parental emotional responses. Through purposive and snowballing sampling methods, parents of LGBTQ youth whose disclosure occurred

within 5 years to participate were identified and invited to participate in the study.

Through survey research methods, participants were asked to complete a set of questionnaires geared toward understanding parental responses when their child was a sexual minority. Using the multiple regression model, responses from parents with sexual minority children were analyzed.

Participants were recruited through their participation with an LGBTQ support group and social media announcements. Before data collection, approvals from Walden University IRB and committee members were obtained. The research methodology plan addressed ethical considerations, with attention to protecting the participants' rights.

Throughout Chapter Three, the hypothesis, population sample, methodology, instrumentation, data analysis plan, ethical considerations, and limitations were outlined. In chapter four, a summary and description of the results of the data analysis was provided.

## Chapter 4: Results

The purpose of this quantitative study was to examine parental emotional responses at the time of their sexual minority children's disclosure by exploring the relationships between the dependent variable, parents' emotional responses, and the independent variables, negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes. The research questions were designed to determine (a) whether statistically significant relationships between parental levels of homophobic attitudes, relational self-esteem, sex-role attitudes, and parental emotional responses when learning about their children's LGBTQ orientation exist and (b) whether parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes individually or collectively predict parental emotional responses. The hypotheses were that (a) there are no statistically significant relationships between parents' emotional responses, negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes and (b) that parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes do not individually or collectively predict parental emotional responses. The alternate hypotheses were (a) there are statistically significant relationships between parents' emotional responses, negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes, and (b) parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes can individually or collectively predict parental emotional responses. The data analysis demonstrated that a statistically significant relationship between negative parental emotional state and relational self-esteem existed.

The following paragraphs discuss the research instruments, time frame for data collection, recruitment procedures, and response rates. In addition, the discrepancies in the data collection, report of the descriptive and demographic characteristics of the sample, and description of the population of interest are presented. Lastly, I present the results of the correlation and regression analyses and the inclusions of the covariates, homophobic attitudes, relational self-esteem, and sex-role stereotypes.

## **Data Collection**

### **Data Collection and Recruitment Methods**

After obtaining an approval number, 03-02-21-0545295, from the dissertation committee members and Walden University Institutional Review Board (IRB), the web-based survey using SurveyMonkey, an Internet survey platform used by researchers for data collection, was designed. A sample for the study was recruited using purposive sampling and snowball sampling methods, which are nonprobability sampling techniques where participants recruit future participants to participate in the study. The recruitment invitation was advertised in emails to personally known individuals and on social media sites, including Facebook, Reddit, and LinkedIn, with attention to protecting the participants' rights and anonymity. No identifiable information and no IP addresses were collected in the current study. There was no way to determine how many people had access to the survey. The survey dates began on March 3, 2021. The survey was closed on April 26, 2021, with 104 responses; however, due to incomplete entries and respondents not meeting eligibility criteria, the survey was reopened on May 5, 2021. The

survey closed on June 1, 2021, after collecting 96 completed surveys. The study did not provide an incentive for participation.

The data collection deviated from the original proposal in three ways. The first deviation from the data collection plan included the inadvertent use of the Positive and Negative Affect Schedule – Expanded Form (PANAS-X) versus the Positive and Negative Affect Schedule (PANAS). The PANAS-X, a 60-item questionnaire, provided additional data about parental emotional experiences when learning their child disclosed their identification as LGBTQ. The 20-item PANAS was included in the PANAS-X as a subset scale that measures general dimension affective states (Watson & Clark, 1994). The use of the 60-item PANAS-X posed no adverse effects on the participants. The second deviation from the original data collection was omitting PFLAG resources, as many online websites had protocols that prevented open postings from the public. Lastly, the original data collection plan detailed the use of SPSS 25; however, the updated version of SPSS 27 was employed.

The length of time for data collection exceeded the anticipated 6 weeks, and the survey had to reopen to ensure enough surveys were completed. The data collection lasted approximately 12 weeks. The invitation to participate in the study was emailed to individuals personally known, with a request to forward the email to others following the snowball sampling methods. The invitation was also posted on social media sites to include Facebook, Reddit, Nextdoor, and LinkedIn weekly at different times of the day to increase the visibility of the survey.

### **Instrumentation Deviation**

The data collection plan presented in Chapter 3 included using information from a 10-item demographic questionnaire, the Positive and Negative Affect Schedule (PANAS) (Watson et al., 1988), the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), the Attitudes Toward Women Scale (Spence et al., 1973), and the Relational Self-Esteem Scale (Du et al., 2015) to collect data about parents' beliefs and attitudes about sexual minorities, gender-role stereotypes, their perceived value within the family and social systems, and their emotional experience of their children's LGBTQ disclosure; however, in error, I used an enhanced version of the Positive and Negative Affect Schedule – Expanded Version (PANAS-X) to design the web-based questionnaire. The 20-items on the original instrument, the PANAS, are included in the PANAS-X as higher-order scales indicate the respondents' general affective states. The scale developer, dissertation committee, and Institutional Review Board were contacted for retroactive permissions to utilize the expanded version of the instrument and proceed with data analysis. The collected data demonstrated whether parents' homophobic attitudes, relational self-esteem, and sex-role attitudes individually or collectively predict parental emotional responses at the time of their children's nonheterosexual identity disclosure and provide detailed information about the basic emotional mood conditions contributing to the statistically significant parental emotional responses.

I created the SurveyMonkey questionnaire using the Positive and Negative Affect Scale – Expanded Form (PANAS-X) (1994), the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), the Attitudes Toward Women Scale (Spence et al., 1973), and

the Relational Self-Esteem Scale (Du et al., 2015). The necessary retroactive approval and permissions were granted. There were no known adverse effects on the participants.

### **The Positive and Negative Affect Schedule-Expanded Version**

I intended to use the Positive and Negative Affect Schedule (PANAS); however, during the creation of the online Survey Monkey survey, I unintentionally created the questionnaire using the Positive and Negative Affect Schedule – Expanded Form (PANAS-X) (Watson & Clark, 1994; Watson et al., 1988). The PANAS-X measures positive and negative affect and mood using a 60-item, self-reported questionnaire, and most participants can complete the assessment within ten minutes (Watson & Clark, 1994). The PANAS-X elaborates on the positive and negative states identified in the PANAS, which are the prominent aspects of emotional experiences (Watson & Clark, 1994). The eleven lower-level scales measure basic emotions that contribute to the general dimensions of positive and negative states. See Table 1.

**Table 1***Categories of the PANAS-X Scales*

Scale types	What they measure
General Dimension Scales	
Positive Affect	active, alert, attentive, determined, enthusiastic, excited, inspired, interested, proud, strong
Negative Affect	afraid, scared, nervous, jittery, irritable, hostile, guilty, ashamed, upset, distressed
Basic Positive Emotions Scales	
Joviality	happy, joyful, delighted, cheerful, excited, enthusiastic, lively, energetic
Self-Assurance	proud, strong, competent, bold, daring, fearless
Attentiveness	alert, attentive, concentrating, determined
Basic Negative Emotions Scales	
Fear	afraid, scared, frightened, nervous, jittery, shaky
Hostility	angry, hostile, irritable, scornful, disgusted, loathing
Guilt	guilty, ashamed, blameworthy, angry at self, disgusted with self, dissatisfied with self
Sadness	sad, blue, downhearted, alone, lonely
Other Affective States	
Shyness	shy, bashful, sheepish, timid
Fatigue	sleepy, tired, sluggish, drowsy
Serenity	calm, relaxed, at ease
Surprise	amazed, surprised, astonished

*Note.* Adapted from (Watson & Clark, 1994).

The scale developers collected the data from employees, undergraduate students enrolled in various psychology courses at a private southwestern university, adults with no university affiliation, and psychiatric patient samples (Watson & Clark, 1994). Using a 5-point scale where 1 = *this concept applies very little or not at all* to 5 = *this concept extremely applies*, participants rate the extent to which they agree with the listed affect state (Watson & Clark, 1994). The PANAS-X internal consistency reliabilities, measured by Cronbach's coefficient alpha, range from .83 to .90 for positive affect and .85 to .90 for negative affect when administered to various samples of university, non-university, clinical, and non-clinical samples (Watson & Clark, 1994). According to Watson and Clark (1994), the correlation between the negative and positive affect scores ranging

from -.05 to -.35. Reliability for both positive and negative affect remained consistent across time descriptions, ranging from “in this moment,” “today,” “the past few days,” “the past few weeks,” “the past year,” to “in general” (Watson & Clark, 1994). The PANAS-X identifies both positive and negative affect states and the specific influences of the correlated, distinguishable affect content that contribute to the overarching emotional experience (Watson & Clark, 1994).

The positive basic mood states scale demonstrated high intercorrelation, indicating that positive emotional mood states may be less differentiable for self-reporting research participants (Watson & Clark, 1994). However, the constructs for joviality, self-assurance, and adventures demonstrated internal alpha reliabilities between .83 to .88 (Watson & Clark, 1994). The basic negative emotional states demonstrated high internal alpha reliability for fear, sadness, guilty, and hostility between the ranges of .85 to .88 (Watson & Clark, 1994). The other affective states, serenity, surprise, shyness, and fatigue demonstrated internal alpha reliabilities between the ranges of .76 to .88 (Watson & Clark, 1994).

To maximize the use of the information collected, I used the data from the PANAS-X to describe statistically significant basic emotion scales influencing parental emotional experiences when learning of their child’s nonheterosexual identity. I also included statistical data that contributes to their overall affect state collected from the lower-level affect scales. Finally, I provided a brief review of the outcomes from the data of the Other Affective States (shyness, fatigue, serenity, and surprise) from the emotional valence and content scales (Watson & Clark, 1994).

## Instrumentation

### PANAS-X

Data about participants' emotional states were collected using the Positive and Negative Affect Scale – Expanded Form (PANAS-X; Watson & Clark, 1994). The PANAS-X was scored using a value assignment of 1-5 for items in the survey. To create a numerical value for positive and negative affect, the 96 response scores for each survey question were summed to create a composite score. The range of scores for each question measuring positive and negative affect was between 10-50. The composite scores, the summed totals for each survey question, were imported into SPSS 27 and used for regression analysis. Cronbach's alpha indicated a high internal consistency for general positive affect state (10 items,  $\alpha = .932$ ), general negative affect state (10 items,  $\alpha = .936$ ) and 10 other affective states (14 items,  $\alpha = .735$ ). The current study's findings are consistent with the instrument's internal reliability reports, ranging from .83 to .90 for positive affect, .85 to .90 for negative affect, and .76 to .88 for other affective states (Watson & Clark, 1994).

Data about participants' emotional states were collected using the Positive and Negative Affect Scale – Expanded Form (PANAS-X) using a 5-point Likert scale (Watson & Clark, 1994). The PANAS-X was scored using a value assignment of 1-5 for items in the survey, where 1 = 1, 2 = 2, 3 = 3, 4 = 4, and 5 = 5 with no reverse scoring. The scores for the 10-items indicating positive affect state and the 10-items indicating negative affect state were then summed for the 96 responses to provide an overall composite score for each affect state. The scores ranged between 10-50, measuring each

participant's positive, negative, and other affective states. The composite scores were imported into SPSS 27 and used for regression analysis. Higher scores indicate increased endorsement of the affective state. After summing and analyzing parental response scores, three categories of parental responses were identified.

### **Attitudes Toward Sexual Minorities Scale**

Negative attitudes towards sexual minorities were measured by collecting responses from the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016). The 6-item scale was scored using values between 1 and 5. The scoring range for the scale range between 5 and 30. Three items were scored a point value 1-5, where 1 = 1, 2 = 2, 3 = 3, 4 = 4, and 5 = 5 for and three items were scored using the reverse scoring of 5-1, where 1 = 5, 2 = 4, 3 = 3, 4 = 2, and 5 = 1. To create a numerical value for negative attitudes towards sexual minorities, the 96 response scores for each survey question were summed to create a composite score. The composite scores were imported into SPSS 27 and used in the regression analysis. Cronbach's alpha indicated a high internal consistency (25 items,  $\alpha = .778$ ) for the current study, which is similar to the internal reliability of the Attitudes Toward Sexual Minorities Scale at .78 (Jaffee et al., 2016). The response scores were compiled and imported into SPSS 27 and used in the regression analysis. Higher scores reflect more affirming attitudes towards sexual minorities (Jaffee et al., 2016).

### **Attitudes Toward Women Scale - Short Version**

Sex-role attitudes were assessed through the Attitudes Toward Women Scale - Short Version using a 4-point Likert scale (Spence et al., 1973). The Attitudes towards

Women Scale has a possible scoring range of 0-75. The items were scored by assigning a value of 0-3, where 0 = 0, 1 = 1, 2 = 2, and 3 = 3, to the survey items. For items the author identified, the scoring is reversed and given decreasing values of 3-0, where 0 = 3, 1 = 2, 2 = 1, and 3 = 0. To create a numerical value for attitudes towards women, the 96 response scores for each survey question were summed to create a composite score. The composite scores were imported into SPSS 27 and used in the regression analysis. Higher scores indicated more pro-feminist, egalitarian attitudes, while lower scores represented more traditional, conservative attitudes (Spence et al., 1973). Cronbach's alpha showed high internal consistency (25 items,  $\alpha = .869$ ), similar to reliability scores of .956 and .963 on the Attitudes Toward Women Scale in a sample of mothers and fathers (Spence et al., 1973).

### **Relational Self-Esteem Scale**

Relational self-esteem data were collected using the Relational Self-Esteem Scale (Du et al., 2012). The responses were summed for the items, using a scoring range of 1-4, with a range of 8-32. Higher scores indicated higher levels of relational self-esteem. To create a numerical value for relational self-esteem, the 96 response scores for each survey question were summed to create a composite score. The scored responses were imported into SPSS 27 and used in the regression analysis. Cronbach's alpha indicated a high internal consistency (8 items,  $\alpha = .915$ ), similar to the internal reliability for the Relational Self-Esteem Scale, which had internal reliability of 0.86 (Du et al., 2012).

Relational self-esteem data were collected by using the Relational Self-Esteem Scale using a 4-point Likert scale (Du et al., 2012). The responses were summed for the

items, using a scoring range of 1-4, where 1 = 1, 2 = 2, 3 = 3, and 4 = 4, with a range of 8-32. The Relational Self-Esteem Scale does not use reverse scoring. Higher scores indicated higher levels of relational self-esteem. The scored responses were compiled and imported into SPSS 27 and used in the regression analysis.

### **Response Rates**

A total of 120 people responded to the online survey, and 24 of the surveys were omitted from the study due to unmet eligibility criteria and incomplete entries. Specifically, two respondents did not meet the eligibility criteria, and the remaining respondents did not record responses to one or more of the survey questions. As part of the data collection plan, incomplete responses would be discarded from the study. The data were determined to be unusable for the study when any question contained missing responses, or the eligibility criteria were not met. For this reason, the incomplete entries and entries from respondents who did not meet the eligibility criteria were extracted before entering the data into SPSS 27.

### **Descriptive and Demographic Characteristics of the Sample**

The final data set yielded 96 participants. The study consisted of 96 participants. The demographic information demonstrated fewer differing characteristics; however, the characteristics of the participants in this research study were mostly heterosexual (88.5%), White (80.2%), mothers (82.3%), and between the ages of 35 and 44 (41.7%). Family income for the past 12 months was bimodal with income ranges \$100,000 and \$149,999 and those earning more than \$150,000, both of which represented 22.9% of the sample. The majority (50%) of respondents lived in the Mountain states (Montana, Idaho,

Wyoming, Colorado, New Mexico, Arizona, Utah, and Nevada. The most frequently reported orientation of the participants' children were identified as lesbian (24%), and parents most frequently knew about their child's LGBTQ orientation for 1 year (29.2%).

The baseline characteristics of the sample resulted from chance rather than bias.

Descriptive demographic data are shown in Table 2.

**Table 2***Demographic Information*

Variable*	Number	%
Parental Role		
Father	14	14.6
Mother	79	82.3
I prefer not to answer	3	3.1
Parents' Orientation		
Heterosexual or straight	85	88.5
Gay	1	1
Lesbian	0	0
Bisexual	6	6.3
Pansexual	2	2.1
Queer/Questioning	0	0
Demisexual	1	1
Transgender	0	0
Questioning	0	0
Asexual	0	0
Other	0	0
I prefer not to answer	1	1
Parents' Age Range		
18-24	0	0
25-34	6	6.3
35-44	40	41.7
45-54	36	37.5
55-64	13	13.5
65+	1	1
Ethnicity/race		
American Indian/Alaska Native	1	1
Asian	2	2.1
Black or African American	2	2.1
Hispanic	4	4.2
Native Hawaiian or Other Pacific Islander	2	2.1
White	77	80.2
Bi/Multi racial, Other Origin	6	6.3
I prefer not to answer	2	2.1
Parents' Income last 12 Months		
Less than \$25,000	8	8.3
\$25,000-\$34,999	7	7.3
\$35,000-\$49,999	5	5.2
\$50,000-\$74,999	14	14.6
\$75,000-\$99,999	16	16.7
\$100,000-\$149,999	22	22.9
\$150,000 or more	22	22.9
I prefer not to answer	2	2.1
Geographical Location		
New England	0	0
Middle Atlantic	7	7.3
East North Central	9	9.4
West North Central	6	6.3
South Atlantic	11	11.5
East South Central	3	3.1
West South Central	8	8.3
Mountain	48	50

Variable*	Number	%
Pacific	0	0
I prefer not to answer	4	4.2
Parents' Education Level		
Completed some high school	1	1
High school graduate	6	6.3
Completed some college	23	24
Associate degree	7	7.3
Bachelor's degree	26	27.1
Completed some postgraduate	5	5.2
Master's degree	20	20.8
Vocational training	0	0
Specialist degree	7	7.3
I prefer not to answer	1	1
Children in the family		
One child	14	14.6
Two children	27	28.1
Three children	26	27.1
Four children	17	17.7
Five or more children	10	10.4
I prefer not to answer	2	2.1
Child's sexual identification		
Gay	19	19.8
Lesbian	23	24
Bisexual	16	16.7
Queer/Questioning	8	8.3
Transgender	19	19.8
Other	9	9.4
I prefer not to answer	2	2.1
Years Known		
1 year	28	29.2
1.5 years	6	6.3
2 years	9	9.4
2.5 years	5	5.2
3 years	7	7.3
3.5 years	3	3.1
4 years	8	8.3
4.5 years	5	5.2
5 years	22	22.9
I prefer not to answer	3	3.1

*Note.* \*All variables  $N = 96$

### **Representation of the Sample**

The data were collected from parents with LGBTQ children. Gonzalez et al. (2013) used a sample of 142 parents with LGBTQ children who acknowledged that adopting new perspectives, enhancing positive feelings for their child, participating in activism, developing social connections, and having closer familial bonds after children disclose their nonheterosexual identity helped create positive outcomes for themselves

and their children. Gonzalez et al. (2013) had a sample of 142 parents of LGBTQ children, of which the sample was primarily from the United States (97.20%), European American/White (89.4%), female (83.8%), and ranging in age from 34 to 81 ( $M = 59.58$ ,  $SD = 9.81$ ) (Gonzalez et al., 2013). The sample used in Gonzalez et al.'s study (2013) was similar to the sample used in the current study. The current study's sample identified most of the participants as heterosexual (88.5%), White (80.2%), mothers (82.3%), and between the ages of 35 and 44 (41.7%).

Gonzalez et al. (2013) also provided descriptive data for the educational levels. For example, the sample had high school diploma (2%), some college or technical school (22%), Bachelor's degree (30%), Master's degree (24%), Doctorate or Professional Degree (21%), and prefer not to answer (1%) in the study conducted by Gonzalez et al. (2013). The sample used for the current study was similar in educational levels, with the current sample consisting of participants with a high school diploma (6.3%), some college (24%), Bachelor's degree (27.1%), Master's degree (20.8%), advanced degree (7.3%), and prefer not to answer (1%). Additionally, participants in the Gonzalez et al. (2013) sample identified their child as a gay man (47.2%), lesbian (28.2%), bisexual (5.6%), queer (3.5%), transgender (9.1%), and other (10.5%). The sample in the current study differs in composition of the nonheterosexual child, evidenced by participant responses describing their child as gay (19.8%), lesbian (24%), bisexual (16.7%), queer (8.3%), transgender (19.8%), other (9.4%), and prefer not to answer (2.4%).

Families vary in organization, membership, and composition, and for the research study, the term *parent* was defined as any adult performing in a parental role (Holtzman,

2006). The data collected represent those parents willing to participate, who had Internet access, and engaged on social media platforms. Two geographical regions of the United States were not represented in the data; thus, parents living in the Pacific and New England states were not represented in the study. Although the sample is representative of today's families, it may not represent the population of parents with LGBTQ children in its entirety.

### **Descriptive Statistics Mean**

Although 120 participants began the study, 96 participants contributed usable data from the fully completed instruments that provided scale and global scores. *Usable data* were defined as complete surveys with no missing data from participants who met the eligibility criteria. Positive and negative affective states were measured using the PANAS-X (Watson & Clark, 1994); sex-role attitudes were measured using the Attitudes Toward Women Scale – Short Version (Spence et al., 1973), relational self-esteem was measured using the Relational Self-Esteem Scale (Du et al., 2012), and attitudes towards sexual minorities were measured using the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016). The descriptive data from the results depicted a negatively skewed relationship for the variables positive emotional state, sex-role attitudes, relational self-esteem, and attitudes towards sexual minorities and a positively skewed relationship for negative emotional state. Attempts to transform the data for normality were made, yet the data remained skewed. The skew statistic exceeded -1 to 1, indicating the distribution exceeded normal distribution parameters (see Table 3).

Bootstrapping methods, using 1,000 samples, were used to counter the possible impact of the violations of assumptions (R. Taylor, personal communication, July 28, 2021). The bootstrap method is often used when violations of normality are challenged (Harding & Cousineau, 2016). The Bootstrap method generates a larger sample size by replicating sub-samples of the sample (Harding & Cousineau, 2016). The sub-samples in the Bootstrapping technique provide descriptive statistics that include confidence intervals, which are determined by the user, thus eliminating the need for the data to follow a normal distribution (Harding & Cousineau, 2016).

**Table 3***Bootstrap Statistics for Coefficients<sup>1</sup>*

Variable	Min Score	Max Score	Mode	Median	Mean	SD	Skewness	Kurtosis	Bootstrap <sup>b</sup> BCa 90% CI		$\alpha^*$
									Lower	Upper	
(DV) Positive State	10	49	36**	32	31.19	9.224	-.467	-.437	29.62	32.95	.932
Bootstrap <sup>b</sup>											
Bias				.46	.00	-.047	.010	.003			
Std Error				1.44	.95	.589	.246	.488			
(DV) Negative State	10	33	10	13	16.22	8.226	1.696	2.239	14.82	17.61	.936
Bootstrap <sup>b</sup>											
Bias				-.21	.00	-.072	-.007	.079			
Std Error				.80	.82	.831	.246	.488			
(IV) Sex-Role Attitudes	33	75	72	68	65.56	8.992	-1.587	2.507	64.04	67.09	.869
Bootstrap <sup>b</sup>											
Bias				.14	.00	-.079	.050	-.149			
Std Error				.95	.90	.949	.246	.488			
(IV) Neg Attitudes toward Sexual Minorities	13	30	30	25	24.85	4.024	-.378	-.677	24.17	25.54	.778
Bootstrap <sup>b</sup>											
Bias				.15	.01	-.026	.024	-.057			
Std Error				.72	.40	.234	.246	.488			
(IV) Relational Self-Esteem	8	32	32	29	27.91	4.145	-1.645	4.807	27.20	28.61	.915
Bootstrap <sup>b</sup>											
Bias				-.09	.00	-.040	.192	-1.249			
Std Error				.81	.42	.530	.246	.488			

Note. 1 = All variables  $N = 96$ .

IV = independent variable, DV = dependent variable.

\* $\alpha$  = Cronbach's coefficient

\*\*Multiple modes exist. The smallest value is represented

b. Unless otherwise noted, bootstrap results are based on 1000 bootstrap samples

## Results of the Study

The purpose of this quantitative study was to examine parental emotional responses at the time of their sexual minority children's disclosure by exploring the relationships between the dependent variable, parents' emotional responses, and the independent variables, negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes. In 2019, the lesbian, gay, bisexual, and transgender population was estimated to be approximately 4.5% of the U. S. population (*The Williams Institute*, n.d.). To create a representative sample, the number of research participants is 95 (Sample Size Calculator, n.d.). The 95 research surveys highlight the potential relationships between parental emotional responses, levels of homophobia, relational self-esteem, and sex-role stereotypes with a 90% confidence level and a 10% margin of error (Sample Size Calculator, n.d.). Additionally, checks for normality assumptions, the independence of residuals, linearity, homoscedasticity, and homogeneity of the variables were conducted (Warner, 2013). Using the multiple logistic regression model, I checked for binary outcomes, that linear relationships existed, there was an absence of extreme outliers and multicollinearity among the independent variables (Kassambara, 2018). Because of violations of assumptions, I used Bootstrapping methods to reduce their influences on data analysis.

Before analysis, I screened the data to determine statistical assumptions. Logistical regression was an inappropriate fit for the study. After reviewing the collected data, the dependent variable was not binary, as responses indicated positive, negative, and equally reported emotional responses (tied). Additionally, the assumptions for no outliers

and a large sample size were not met. Correlation and regression analysis were appropriate statistical methods used to assess the relationships and predictive nature of the independent variables.

Correlation and linear regression analysis were used to determine whether homophobic attitudes, relational self-esteem, and sex-role stereotypes could predict parental emotional responses when learning of the child's nonheterosexual identity existed. Before running the analysis, testing of the model and assumptions were conducted. The assumptions of multicollinearity, independence of residuals, normality, homoscedasticity, linearity, and outliers were assessed. Bootstrapping methods with 1000 sub-samples were employed before running the correlation and regression analysis.

Bootstrapping methods resample the data into sub-sets to make statistical inferences and probability statements about the population (Lavrakas, 2008). Bootstrapping is a generalized approach to estimating the sampling distribution and uses confidence intervals to support the inferences made to the population (Lavrakas, 2008). The bootstrapping approach checks the robustness of statistical tests when violations of assumptions exist by drawing sub-samples from the known distribution of the samples when N is known (Lavrakas, 2008).

According to Harding and Cousineau (2016), 1000 replications of data is a minimum expectation, and fewer than 1000 sub-samples would require additional justification. Increasing the number of resamples does not significantly change the bootstrap distribution, and the data maintains its approximate shape and spread (Hesterberg, 2015). Using Bootstrapping techniques in SPSS with 1,000 samples

countered influences from the violations of assumptions. In the following paragraphs, the assumptions from the data, provided figures displaying results of the assumptions, and discussed the findings were discussed.

### **Answering the Research Questions**

#### **RQ1 Outcomes**

Are there statistically significant relationships between parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem Scale (Du et al., 2015), sex-role attitudes as measured by the Attitudes Toward Women Scale (Spence et al., 1973), and parental emotional responses as measured by the PANAS-X (Watson & Clark, 1994) when learning about their children's LGBTQ orientation?

*H<sub>01</sub>*—There are no statistically significant relationships between parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem Scale (Du et al., 2015), sex-role attitudes as measured by the Attitudes Toward Women Scale (Spence et al., 1973), and parental emotional responses as measured by the PANAS-X (Watson & Clark, 1994) when learning about their children's LGBTQ orientation.

*H<sub>a1</sub>*—There are statistically significant relationships between parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem

Scale (Du et al., 2015), sex-role attitudes as measured by the Attitudes Toward Women Scale (Spence et al., 1973), and parental emotional responses as measured by the PANAS-X (Watson & Clark, 1994) when learning about their children's LGBTQ orientation.

Emotional responses were divided into two groups, positive affect and negative affect, for the study. A correlation analysis was conducted to determine whether relationships existed between the emotional responses, homophobic attitudes, relational self-esteem, and sex-role stereotypes. Analysis found a statistically significant relationship between parental negative affect and relational self-esteem (Pearson's  $r = -.380, p < .01$ ) with a medium effect size ( $f^2 = .20$ ). The hypothesis of a statistically significant relationship between parental emotional responses and homophobic attitudes, relational self-esteem, and sex-role stereotypes was accepted, and the alternate hypothesis was rejected. Results are presented in Table 4.

**Table 4***Variable\* Correlations*

		Pos Affect <sup>1</sup>	Neg Affect <sup>1</sup>	RSE Score <sup>1</sup>	AWS Score <sup>1</sup>	ASM Score <sup>1</sup>		
Pos Affect	Pearson Correlation	1	-.145	.159	-.059	-.116		
	Sig. (2-tailed)		.159	.122	.569	.262		
	Bootstrap <sup>a</sup>	Bias		.009	.007	-.001	-.001	
		Std. Error		.106	.109	.122	.101	
		BCa 90% CI						
		Lower		-.313	-.022	-.248	-.247	
			Upper		.056	.363	.131	.045
Neg Affect	Pearson Correlation	-.145	1	-.380**	-.159	.059		
	Sig. (2-tailed)	.159		.000	.122	.567		
	Bootstrap <sup>a</sup>	Bias		.009	-.001	.001	-.005	
		Std. Error		.106	.099	.115	.105	
		BCa 90% CI						
		Lower		-.313	-.525	-.366	-.118	
			Upper		.056	-.222	.034	.216
RSE Score	Pearson Correlation	.159	-.380**	1	-.061	-.066		
	Sig. (2-tailed)	.122	.000		.553	.524		
	Bootstrap <sup>a</sup>	Bias		.007	-.001	.007	.008	
		Std. Error		.109	.099	.093	.095	
		BCa 90% CI						
		Lower		-.022	-.525	-.203	-.214	
			Upper		.363	-.222	.120	.115
AWS Score	Pearson Correlation	-.059	-.159	-.061	1	.552**		
	Sig. (2-tailed)	.569	.122	.553		.000		
	Bootstrap <sup>a</sup>	Bias		-.001	.001	.007	.005	
		Std. Error		.122	.115	.093	.086	
		BCa 90% CI						
		Lower		-.248	-.366	-.203	.363	
			Upper		.131	.034	.120	.707
ASM Score	Pearson Correlation	-.116	.059	-.066	.552**	1		
	Sig. (2-tailed)	.262	.567	.524	.000			
	Bootstrap <sup>a</sup>	Bias		-.001	-.005	.008	.005	
		Std. Error		.101	.105	.095	.086	
		BCa 90% CI						
		Lower		-.274	-.118	-.214	.363	
			Upper		.045	.216	.115	.707

Note. \*All variables  $N = 96$ .

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

<sup>1</sup> = RSE Score = Relational Self-Esteem Composite score, AWS Score = Attitudes Toward Women – Short Version, ASM Score = Attitudes Toward Sexual Minorities Scale.

a = Unless otherwise noted, bootstrap results are based on 1000 bootstrap samples.

### *Assumptions*

**Dependent variable.** The dependent variables, positive and negative affect states, are measured by an ordinal scale; however, the composite scores are used as continuous variables.

**Independent variable.** The independent variables, levels of homophobia, sex-role attitudes, and attitudes toward sexual minorities were measured by an ordinal scale yet are continuous variables.

**Linearity.** Linearity was evaluated by examining the Normal Probability Plot (P-P) of the Regression Standardized Residual (see Appendix A: Figures A1 and A2) and the scatterplot of the standardized residuals (see Appendix A: Figures A3 and A4). The assumption of linearity was met, evidenced by the Shapiro Wilk, and a linear regression model was used for the data analysis.

**Outliers.** The assumption of no outliers was evaluated by examining the Normal Probability Plot (P-P) of the Regression Standardized Residual (see Appendix A: Figures A1 and A2) and the scatterplot of the standardized residuals (see Appendix A: Figures A3 and A4). There were outliers in the data; however, bootstrapping techniques using 1,000 samples were used to counteract the influence of the assumption, and a 90% confidence interval based on the bootstrapped samples was reported.

### **RQ2 Outcomes**

Do parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem Scale (Du et al., 2015), sex-role attitudes as measured by the

Attitudes Toward Women Scale (Spence et al., 1973), and parental emotional responses as measured by the PANAS-X (Watson & Clark, 1994) individually predict parental emotional responses? Data relating to sex-role attitudes and attitudes toward sexual minorities were removed from the regression analysis as correlation analysis demonstrated the lack of a statistically significant relationship between sex-role attitudes and parental emotional responses.

*H<sub>02</sub>*— Parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem Scale (Du et al., 2015), sex-role attitudes as measured by the Attitudes Toward Women Scale (Spence et al., 1973) do not individually predict parental emotional responses and parental emotional responses as measured by the PANAS-X (Watson & Clark, 1994).

*H<sub>a2</sub>*— Parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem Scale (Du et al., 2015), sex-role attitudes as measured by the Attitudes Toward Women Scale (Spence et al., 1973) individually predict parental emotional responses as measured by the PANAS-X (Watson & Clark, 1994).

To investigate whether parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem Scale (Du et al., 2015), and parental emotional responses as measured by the PANAS-X (Watson & Clark, 1994) individually predicted parental emotional responses, simple linear regressions were conducted. The

predictor variable, levels of homophobia, did not predict positive parental emotional responses ( $p = .262$ ).

The predictor variable, relational self-esteem, was a significant predictor of negative parental emotional responses ( $F(1, 94) = 926.980, p < .001$ ) with an  $R^2$  of .135 (See Table 5). The variance explained approximately 13% of the variance in negative parental responses. For every unit of increased negative parental response, relational self-esteem will decrease by  $-.754$ . The null hypothesis that parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes do not individually predict parental emotional responses was rejected, and the alternate hypothesis was retained. See Tables 6, 7, 8, and 9.

**Table 5**

*Model Summary<sup>b</sup> for Regression*

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin Watson
1	.380 <sup>a</sup>	.144	.135	7.650	1.687

*Note.* a. Predictors: (Constant), RSEComp

b. Dependent Variable NegState

**Table 6**

*Bootstrap for Model Summary*

Model	Durbin Watson	Bias	Std. Error	Bootstrap <sup>a</sup> 90% Confidence Interval	
				Lower	Upper
1	1.687	-.561	.207	.812	1.503

*Note.* a. Unless otherwise noted, bootstrap results are based on 1000 bootstrap samples.

**Table 7***ANOVA<sup>a</sup>*

Model		Sum of Squares	<i>df</i>	Mean Square	<i>F</i>	<i>Sig.</i>
1	Regression	926.980	1	926.980	15.839	.000 <sup>b</sup>
	Residual	5501.426	94	58.526		
	Total	6428.406	95			

*Note.* a. Dependent Variable: NegState

b. Predictors: (Constant), RSEComp

**Table 8***Bootstrap for Model Summary*

Model		Coefficients <sup>a</sup>		Standarized Coefficients Beta	<i>t</i>	<i>Sig.</i>
		Unstandardized <i>B</i>	Coefficients Std. Error			
1	(Constant)	37.250	5.342		6.973	.000
	RSEComp	-.754	.189	-.380	-3.980	.000

*Note.* a. Unless otherwise noted, bootstrap results are based on 1000 bootstrap samples.

**Table 9***Bootstrap for Coefficients*

Model	<i>B</i>	Bias	Std. error	Sig. (2-tailed)	Bootstrap <sup>a</sup>	
					Lower	Upper
1 (Constant)	37.250	-.079	6.727	.001	26.751	48.524
RSEComp	-.753	.003	.226	.003	-1.136	-.400

*Note.* a. Unless otherwise noted, bootstrap results are based on 1000 bootstrap samples.

**Assumptions**

**Multicollinearity.** Multicollinearity was assessed to determine whether similarities between the independent variables exist. VIF scores in SPSS exceeding values of less than ten or more than 10 indicate the presence of multicollinearity. The assumption for multicollinearity was met, indicated by the VIF statistics falling below 10.

**Independence of residuals.** Independence of residuals was evaluated by examining the Normal Probability Plot (P-P) of the Regression Standardized Residual (see Appendix A: Figures A1 and A2) and the scatterplot of the standardized residuals (see Appendix A: Figures A3 and A4). There were no autocorrelations, evidenced by the Durbin Watson statistic falling between 1.5 and 2.5.

**Normality.** Normality was evaluated by examining the Normal Probability Plot (P-P) of the Regression Standardized Residual (see Appendix A: Figures A1 and A2) and the scatterplot of the standardized residuals (see Appendix A: Figures A3 and A4). The variable positive emotional state was negatively skewed, indicated by the Shapiro Wilk significance  $p > .018$ ; however, negative emotional state, homophobic attitudes, relational self-esteem, and sex-role stereotypes were all negatively skewed.

Assumptions of normality are met when skewness and kurtosis statistics fall below the value of 2. When the skewness or kurtosis statistic is above 2, the violation of normality and continuous distribution is violated. Based on these findings, a transformation was applied; however, the data remained skewed. The skewness statistics for the dependent and independent variables were met; however, the kurtosis statistics for the negative state, sex-role attitudes, and relational self-esteem were above 2, indicating a violation of the assumption of normal distribution (see Appendix A: Figure A3). Based on these findings, a transformation was applied; however, the data remained skewed. Bootstrapping methods with 1,000 samples were applied to account for the violations.

**Homoscedasticity.** Homoscedasticity was evaluated by examining the Normal Probability Plot (P-P) of the Regression Standardized Residual and the scatterplot of the

standardized residuals (see Appendix A: Figures A1 and A2). The assumption of homoscedasticity was met for positive emotional responses and not met for negative emotional responses, indicated by the scatter plots; however, bootstrapping techniques with 1,000 samples were used to counteract the influence of the assumption and a 90% confidence interval based on the bootstrapped samples.

**Linearity.** Linearity was evaluated by examining the Normal Probability Plot (P-P) of the Regression Standardized Residual (see Appendix A: Figures A1 and A2) and the scatterplot of the standardized residuals (see Appendix A: Figures A3 and A4). The assumption of linearity was met, evidenced by the Shapiro Wilk, and a linear regression model was used for the data analysis.

**Outliers.** The assumption of no outliers was evaluated by examining the Normal Probability Plot (P-P) of the Regression Standardized Residual (see Appendix A: Figures A1 and A2) and the scatterplot of the standardized residuals (see Appendix A: Figures A3 and A4). There were outliers in the data; however, bootstrapping techniques using 1,000 samples were used to counteract the influence of the assumption, and a 90% confidence interval based on the bootstrapped samples are reported.

### **RQ3 Outcomes**

Do parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem Scale (Du et al., 2015), sex-role attitudes as measured by the Attitudes Toward Women Scale (Spence et al., 1973), and parental emotional responses

as measured by the PANAS-X (Watson & Clark, 1994) collectively predict parental emotional responses?

*H<sub>03</sub>*— Parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem Scale (Du et al., 2015), sex-role attitudes as measured by the Attitudes Toward Women Scale (Spence et al., 1973) do not collectively predict parental emotional responses as measured by the PANAS-X (Watson & Clark, 1994)

*H<sub>a3</sub>*— Parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem Scale (Du et al., 2015), sex-role attitudes as measured by the Attitudes Toward Women Scale (Spence et al., 1973) collectively predict parental emotional responses as measured by the PANAS-X (Watson & Clark, 1994)

To approach whether parental levels of homophobic attitudes as measured by the Attitudes Toward Sexual Minorities Scale (Jaffee et al., 2016), relational self-esteem as measured by the Relational Self-Esteem Scale (Du et al., 2015), sex-role attitudes as measured by the Attitudes Toward Women Scale (Spence et al., 1973), and parental emotional responses as measured by the PANAS-X (Watson & Clark, 1994) collectively predicted parental emotional responses, a correlation analysis was conducted to evaluate the relationships between parental emotional responses, homophobic attitudes, relational self-esteem, and sex-role stereotypes. Collectively, parental levels of homophobic attitudes, relational self-esteem, sex-role stereotypes, and parental emotional responses were not correlated (see Table 4). As such, no regression analysis was performed.

Therefore, the null hypothesis that parental levels of homophobic attitudes, relational self-esteem, and sex-role attitudes do not collectively predict parental emotional responses was accepted, and the alternate hypothesis was rejected.

### **General Dimension Affective States Post Hoc Analysis**

#### **General Dimension Negative Affective State**

A post hoc analysis was conducted to determine which emotional mood conditions (content) contribute to the affective emotional states (valence). A correlation analysis was conducted to determine the influencing emotions on the negative affective states. According to Watson and Clark (1994), emotions that create a basic negative mood are fear, hostility, guilt, and sadness (See Table 1). The emotions that contribute to the fear category include afraid, scared, frightened, nervous, jittery, and shaky. The emotions that create the basic negative mood of hostility include angry, hostile, irritable, scornful, disgusted, and loathing. The emotions that contribute to the basic emotional mood of guilt include guilty, ashamed, blameworthy, angry at self, disgusted with self, dissatisfied with self. The emotions that create the basic emotional mood of sadness include sad, blue, downhearted, alone, and lonely. Parental summary responses of statistically significant relationships are shown in Tables 10 and 11.

**Table 10***Participant Response Counts for Significant Negative Responses*

Variable*	Very Slightly or Not At All	A Little	Moderately	Quite a Bit	Extremely
Sad	45	33	11	4	3
Guilt	59	21	12	3	1
Disgusted	74	8	12	2	0
Downhearted	51	24	9	6	6
Lonely	50	22	8	10	6
Shaky	67	21	6	2	0
Blameworthy	66	10	15	3	2
Frightened	71	14	5	3	3
Scornful	75	11	8	1	1
Alone	54	20	9	6	7
Loathing	77	9	8	0	2
Angry	66	17	7	4	2
Blue	60	20	5	8	3
Disgusted with Self	70	14	8	3	1
Dissatisfied with Self	61	16	13	4	2

*Note.* \*All variables  $N = 96$ .

A correlation analysis was conducted to determine the influencing emotions on the negative affective states. Statistically significant emotional responses are shown in Table 11.

**Table 11***Variable Correlations with Negative Affect and Negative Mood States*

Variable <sup>1</sup>	Pearson's Correlation	Sig. (2-tailed)	Basic Negative Emotion Mood
Sad	.742**	.000	Sadness
Blue	.837**	.000	Sadness
Downhearted	.710**	.000	Sadness
Lonely	.746**	.000	Sadness
Alone	.744**	.000	Sadness
Disgusted with Self	.761**	.000	Guilt
Blameworthy	.814**	.000	Guilt
Dissatisfied with Self	.785**	.000	Guilt
Angry at Self	.762**	.000	Guilt
Disgusted	.563**	.000	Hostility
Scornful	.569**	.000	Hostility
Loathing	.751**	.000	Hostility
Angry	.765**	.000	Hostility
Frightened	.880**	.000	Fear
Shaky	.687**	.000	Fear

Note. <sup>1</sup>All variables  $N = 96$

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

### General Dimension Positive Affective State

A correlation analysis was conducted to determine the influencing emotions on the positive affective states. According to Watson and Clark (1994), emotions that create a basic positive mood are categorized as joviality, self-assurance, and attentiveness (See Table 1). The emotions that contribute to the joviality category include happy, joyful, delighted, cheerful, excited, enthusiastic, nightly, and energetic. The emotions that create the basic positive mood of self-assurance include proud, strong, competent, bold, daring, fearless. The emotions that form the basic positive mood of attentiveness include alert, attentive, concentrating, and determined.

Positive emotional responses have a positively skewed relationship with the overall general dimension of positive affective state. Independent variables with  $p < .01$

are included in the analysis. Emotions previously analyzed for the general dimension positive and negative affective states were removed from this data analysis. There were statistically significant relationships between positive parental emotions in the mood categories of joviality, self-assurance, and attentiveness (see Table 12).

**Table 12**

*Variable Correlations with Positive Mood States*

Variable <sup>1</sup>	Pearson's Correlation	Sig. (2-tailed)	Basic Positive Emotion Mood
Cheerful	-.430**	.000	Joviality
Joyful	-.310**	.002	Joviality
Happy	-.448**	.000	Joviality
Confident	-.299**	.003	Self-Assurance

*Note.* <sup>1</sup>All variables  $N = 96$

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

**General Dimension Other Affective States**

The PANAS-X offers an additional categorization of mood states, called Other Affective States (Watson & Clark, 1994). The emotions that contribute to the shyness category include shy, bashful, sheepish, and timid (see Table 1). The emotions that contribute to the fatigue category include sleepy, tired, sluggish, and drowsy. The emotions that contribute to the surprise category include amazed, surprised, and astonished. There are statistically significant relationships between the general negative affective state and the emotions of surprise, fatigue, and shyness.

A multiple linear regression model is used for the data analysis to determine which mood states have significant relationships with the general affective states. There were statistically significant relationships between negative state and the following mood

variables: shy, bashful, sheepish, tired, sluggish, drowsy, surprised, astonished, and timid ( $F(9, 86) = 17.476, p = .000$  with an  $R^2$  of .610). See Tables 13, 14, 15. Approximately 61% of the variance in other parental responses was explained by emotional experiences of feeling shy, bashful, sheepish, tired, sluggish, drowsy, surprised, astonished, and timid. The results reflected that the emotional experiences of feeling shy, bashful, sheepish, tired, sluggish, drowsy, surprised, astonished, and timid were significant predictors of negative parental emotional responses. (See Table 13).

**Table 13**

*Variable Correlations with Other Affective States*

Variable <sup>1</sup>	Pearson's Correlation	Sig. (2-tailed)	Other Affective Mood States
Surprised	.305**	.003	Surprise
Astonished	.335**	.001	Surprise
Sluggish	.492**	.000	Fatigue
Tired	.405**	.000	Fatigue
Drowsy	.358**	.000	Fatigue
Timid	.544**	.000	Shyness
Sheepish	.711**	.000	Shyness
Shy	.400**	.000	Shyness
Bashful	.447**	.000	Shyness

Note. <sup>1</sup>All variables  $N = 96$

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

**Table 14***Model Summary for Regression*

Model	R	Model Summary <sup>b</sup>		Std. Error of the Estimate	Durbin Watson
		R Square	Adjusted R Square		
1	.804 <sup>a</sup>	.647	.610	5.140	2.134

*Note.* a. Predictors: (Constant), Astonished, Tired, Timid, Shy, Surprised, Bashful, Sluggish, Sheepish, Drowsy.

b. Dependent Variable NegState

**Table 15***Bootstrap for Model Summary*

Model	Durbin Watson	Bias	Std. Error	Bootstrap <sup>a</sup> 95% Confidence Interval	
				Lower	Upper
1	2.134	-.708	.215	1.027	1.860

*Note.* a. Unless otherwise noted, bootstrap results are based on 1000 bootstrap samples.

**Table 16***ANOVA*

Model <sup>a</sup>		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	4155.987	9	461.776	17.476	.000 <sup>b</sup>
	Residual	2272.419	86	26.423		
	Total	6428.406	95			

*Note.* Dependent Variable: NegState.

Predictors: (Constant), Astonished, Tired, Timid, Shy, Surprised, Bashful, Sluggish, Sheepish, Drowsy.

**Summary**

The purpose of this quantitative study was to examine parental emotional responses at the time of their sexual minority children's disclosure by exploring the

relationships between the dependent variable, parents' emotional responses, and the independent variables, negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes. Relational self-esteem was found to have a negatively skewed relationship with negative parental emotional responses. Collectively, negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes predicted negative parental emotional responses. By evaluating the additional information gathered through using the alternate instrument, the PANAS-X, it was determined that parents experiencing negative emotions at the time of their child's sexual minority disclosure, the following emotions would most likely be present: shy, bashful, sheepish, tired, sluggish, drowsy, surprised, astonished, and timid. Clinician's working with parents of sexual minority children may explore possible emotional conditions if a parent reports negative responses to their child's disclosure or to normalize negative responses, as 61% of the variance in the emotional responses reported by this sample was explained by feelings of shyness, bashfulness, sheepishness, fatigue, sluggishness, drowsiness, surprise, astonishment, and timidness.

Throughout Chapter 4, the use of the alternate instrument, the time frame for data collection, recruitment procedures, and response rates were discussed. The discrepancies in the data collection, descriptive and demographic characteristics of the sample, and description of the sample were presented. The results of the analyses that justified the inclusion of the covariates, homophobic attitudes, relational self-esteem, and sex-role stereotypes were described. In Chapter 5, the implications of the findings are discussed.

## Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this quantitative study was to examine parental emotional responses at the time of their sexual minority children's disclosure. The study examined the relationships between parents' emotional responses, negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes through survey research, and participants rated their responses based on their recall of the disclosure. Outcomes from the study indicated that while parents' attitudes towards sexual minorities and women were not influential on emotional responses when learning their children identified as LGBTQ, lower levels of relational self-esteem predicted negative emotional responses at the time of the child's disclosure. The study's results may inform clinicians' practices when working with parents with sexual minority children. The findings contribute to social change at the individual, community, and societal levels as mental health professionals gain insight into attitudinal changes toward sexual minorities over the past several decades.

### **Interpretations of the Findings**

The population of interest was parents with sexual minority children, and the variables were parental emotional responses, negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes. Examining the influence of negative attitudes toward sexual minorities, relational self-esteem, and sex-role attitudes on parental emotional responses provided insight into parents' experiences when learning their child is LGBTQ. For example, participants in the current study aligned with the

implications from Flores' (2014) summation that societal views of sexual minorities are becoming more accepting and approving for LGBTQ individuals.

Das (2018) and Savin-Williams and Dubé (1998) stated that parental responses to learning their child does not identify as heterosexual are often less than ideal. For example, according to Das (2018), the disclosure of one's nonheterosexuality increases the chances for emotional volatility within the family, and Savin-Williams and Dubé (1998) stated that parents undergo an adjustment process that includes processing a range of emotions, including shock, denial and isolation, anger, bargaining, and depression until reaching a state of acceptance. The current study revealed that while parents experienced emotions such as sadness, guilt, hostility, and fear, parents also reported feeling cheerful, joyful, happy, and confident when learning of their child's LGBTQ identity.

The social identity theory posits that people seek to maintain positive self-concepts through their social relationships with people holding similar attitudes, beliefs, and behaviors (Tajfel, 1982). The social identity theory can explain, in part, how individuals develop negative beliefs about sexual minorities and gender-role attitudes, how those views threaten sense of self, and challenging group norms threatens social relationships. For example, according to the social identity theory, Tajfel and Turner (1979) stated that people undergo changes to their sense of self when their personal beliefs and group values are challenged. The personal challenges when learning about their child's nonheterosexual identity present two options for parents, which are (a) parents will seek to validate their sense of self by either rejecting the child or (b)

accepting the child and assuming a response that elevates the social value of their family (Rodriguez, 2019).

The current study's findings indicated that parents held weak sex-role attitudes and attitudes toward sexual minorities, which is congruent with Flores' (2014) findings that cultural and societal shifts trend toward acceptance and inclusion of sexual minorities. The study also suggested that most parents surveyed held positive emotions related to their children's disclosure. For example, 82 experienced the disclosure positively, 12 experienced the disclosure negatively, and 2 experienced positive and negative emotions equally.

Group membership is a common theme among stereotyping, prejudice, and discrimination (Mackie & Smith, 2015). While most of the study's participants were White, heterosexual mothers between the ages of 35 – 44, sex-role attitudes and negative attitudes towards sexual minorities were low. The Attitudes Toward Sexual Minorities Scale (Jaffe et al., 2016) suggested that most parents hold more affirming attitudes towards sexual minorities, evidenced by the mean score of 24.85 of the 30 total scores available for levels of homophobia. Additionally, most parents also held more feminist, egalitarian attitudes, indicated by the mean score of 65.56 of the 75 total available points related to sex-role attitudes (Spence et al., 1973). The current study's findings indicate that today's parents may be more accepting of people who do not identify as heterosexual and hold less firm traditional stereotypes related to gender-roles and heteronormative values.

Heteronormativity informs expectations for sex and gender roles in the family and society (Kowalski & Scheitle, 2020; Spence & Helmreich, 1979). Beliefs about gender and sexuality are salient characteristics for parents when they learn about their children's sexual minority identities (Kowalski & Scheitle, 2020). The current study's findings showed that attitudes toward sex minorities were not significant in their emotional responses when learning their child was a sexual minority in the sample used. Attitudes toward sexual minorities and sex-role stereotypes did not predict positive or negative parental reactions; however, relational self-esteem was influential in negative parental responses.

American families express collectivistic views in their attention to in-group and social behaviors and emphasize the value of maintaining harmonious relationships with significant others (Oyserman et al., 2002). According to Du et al. (2012), people with high levels of relational self-esteem experience enhanced senses of well-being (Du et al., 2012). In the current study, relational self-esteem predicted negative parental emotional experiences, in which parents who reported negative emotional reactions, such as sadness, guilt, hostility, and fear, also experienced decreased relational self-esteem.

In the current study, the most commonly identified lower-level emotions that contributed to negative emotional experience when learning their child was nonheterosexual were sadness, guilt, hostility, and fear. Although negative parental emotional experiences were underscored with these emotions, it is noteworthy that very few parents self-rated their emotional experiences as "*extremely*" when describing their emotions (see Table 5). For example, of the 96 responses, seven respondents reported

feeling “*extremely*” alone, and 6 reported feeling both “*extremely*” downhearted and lonely. These findings align with previous studies that report parents often feel alone, isolated, and socially unsupported after their children disclosed their nonheterosexual identities (Saltzburg, 2009). Most of the parents indicated they experienced the emotions “*very slightly or none at all*” and “*a little*” (see Table 5).

According to D’Augelli et al. (2010) and Savin-Williams & Dubé (1998), more than one-half to two-thirds of parents reported disbelief, silence, guilt, grief-like symptoms, and shame; some parents respond with physical assault, hysteria, intolerance, and rejection. However, the current study identified positive parental emotional experiences when their child disclosed their nonheterosexual identity. For example, 82 of the 96 participants indicated a general positive affective state, while 12 reported general negative affective states. Correlation analysis demonstrated a significant relationship between the general positive affective state and the lower-level mood emotions, cheerfulness, joy, happy, and confidence (see Table 7). Similarly, according to the PANAS-X, parents described feelings of surprise, fatigue, and shyness, affective states describing moods that are neither positive nor negative affect states (see Table 8).

The findings contribute to research literature, as previous literature maintains that parents respond poorly to their children’s nonheterosexual identities. Participants in this sample indicated primarily positive emotional responses to their child’s disclosure. Additionally, the findings support Flores (2014) study that highlights changes in societal values of acceptance over the past decades, as parents seem to have more acceptance for

nonheterosexuality and non-gender-conforming behaviors when addressed at the time of their child's nonheterosexual identity disclosure.

### **Limitations of the Study**

A limitation of the current study may include a biased segment of parents, as the sample included parents on social media who were associated with LGBTQ support groups. For example, the recruitment methods identified support groups for parents with LGBTQ children; thus, parents with strong rejecting behaviors may not have participated in the study. Parents overwhelmingly reported experiencing positive emotions when learning their child was a sexual minority; however, the recruitment methods limit the generalizability of the results. Additionally, the data was collected via self-reported instruments, potentially introducing respondent bias, and impacting external validity in the current study. For example, although the PANAS-X indicated reliability for the time periods, there is no way to determine whether parental responses were impacted from the initial disclosure and participation in the research study.

Other limitations include lack of representation within all regions of the United States. For example, parents from the New England states and Pacific states did not participate in the study. According to Comstock (2013), bias in research skews results and obscures the findings' truthfulness. The study used survey research, a common source of bias as participants may seek to present socially desirable answers (Comstock, 2013). Additionally, the lack of representation of fathers, ethnic and racial diversity and sexual minorities limits the generalizability of the results as most respondents self-

identified as heterosexual (88.5%), White (80.2%), mothers (82.3%), and between the ages of 35 and 44 (41.7%).

By identifying potential participants through their affiliation with parental support groups on social media and snowballing methods, parents who rejected or banished their children from the family home were likely not represented in the study, which could skew research findings. Furthermore, the snowball method, in which participants refer other parents to participate in the study, could limit the representation of those parents who may hold extreme reactions to learning their child is LGBTQ. For example, according to the results from the PANAS-X, parents who reported negative emotions overwhelmingly categorized the intensity of their feelings as “*very slightly or not at all*” (see Table 5).

The exploratory nature of the research study could have unknowingly created limitations in the study. For example, although the research study explored parental emotional responses, sex-role attitudes, emotions, attitudes toward sexual minorities, and relational self-esteem, the results cannot provide conclusive answers to the research problems. While the study provided insights about parental responses, it does not directly explain variations in recorded responses when learning their child is a sexual minority. There are no known threats to the validity and reliability of the research instruments that arose from the execution of the study.

### **Recommendations**

Previous understandings of parental adjustment point to negative responses, as evidenced by the social, cognitive, and emotional isolation reported by Cass (1979) and

Patterson (1994). Additionally, Shpigel et al. (2015) stated that approximately 50% of parents respond negatively with an adjustment process lasting as long as 5 years (Muller, 1987). Additionally, Flores (2014) reported changes in American society, as evidenced by more accepting attitudes towards nonheterosexuality.

The current exploratory study supports previous findings that the current society and families are changing. The findings indicated that sex-role stereotypes and negative attitudes toward sexual minorities are decreasing. Further studies examining decreased stereotypes could provide additional information about how families normalize nonheterosexuality and acceptance. Additionally, relational self-esteem has been studied in the context of collectivist cultures (Du et al., 2012). Except for the family unit, Americans tend to be more individualistic in their relationships (Anastasiu, 2012; Du et al., 2012). Future studies about relational self-esteem and its impact on American families would provide further insights into changes in family and social systems. Additional research about parents' positive experiences is warranted in future studies. For example, parental views about their relationship with their children before and after the coming out process will create more insight into the positive experiences and emotions parents report about their child's disclosure. Lastly, gaining information and insights about parents who reject their children may provide more context when mental health professionals work with families with sexual minority children.

### **Implications**

The American Counseling Association *Code of Ethics* (2014) dictates that counselors enhance human development across the life span, honor diversity individually

and within their social constructs, promote social justice, and engage in competent and ethical practice (ACA, 2014). The results of the current study present evidence that parents experience positive emotional when learning about their child's nonheterosexuality. The results demonstrated fewer gender role expectations and an increased acceptance of nonheterosexual individuals. The information may help inform clinicians' work when working with parents with sexual minority children, such as choosing therapeutic strategies that directly assess for and address any negative attitudes toward nonheterosexual individuals, resolve gender role stereotypes, and promote parental wellness. Understanding the ways societal changes impact families may benefit clinicians as their work with families experiencing challenges relating to learning their child is LGBTQ (Astramovich et al., 2017; Flores, 2014).

Parents with sexual minority children are essential to the well-being of both parent and child. Parental rejection creates risk factors for the parent and the child (Shpigel et al., 2015). For example, parental rejection increases the child's risks for emotional dysregulation, maladaptive coping behaviors, and victimization for sexual minority youth when disclosing their sexual minority identities to their families (LaSala, 2000; Russell & Fish, 2016; Taylor, 2019). Additionally, parental mental health wellness is compromised when learning their child is nonheterosexual. D'amico et al. (2015) stated that parents might internalize the child's disclosure as a failure in their parental duties. Some parents may also isolate and withdraw from social supports as they process the experience of becoming a parent of an LGBTQ child (Saltzburg, 2009). The current study's findings suggest that parents who have difficulty accepting their nonheterosexual

child may also experience low relational self-esteem. Mental health practitioners can design interventions and strategies to help parents improve their self-image and esteem. Additionally, improved self-esteem can simultaneously improve the quality of familial relationships, thus increasing life satisfaction.

The study's findings can be used in a therapeutic setting, particularly if the clients debate disclosing their nonheterosexual identity to their parents. For example, sexual minority children's disclosure of their sexual orientation is an integral aspect of their identity development, yet they risk social, cognitive, and emotional isolation when disclosing their sexual minority identities to parents and families (Cass, 1979; Patterson, 1994). The study intimates that parents experience a range of emotions, many of which are pleasant, positive, and supportive, which may inform clinical practice about how parents respond, assign meaning, and adjust to having an LGBTQ child. The study's results suggest that some parents may be more accepting and welcoming of their children's nonheterosexuality. Clinicians can employ interventions promoting relational self-esteem, healthy parental adjustment, and family functioning, thus reducing the risks of emotional distress, anxiety, depression, hopelessness, self-harm, substance abuse, and suicidal behaviors among sexual minority youth. Furthermore, although earlier studies posited that parental responses remain overwhelmingly negative in today's society, the study's results imply that as societal views about nonheterosexuality are shifting, parental behaviors toward acceptance and inclusion may be simultaneously shifting (Fields, 2001; Flores, 2014; Herek, 1988; Little, 2001).

El Ghaziri & Darwiche (2018) stated that parents with high relational self-esteem also experience more intimate relationships with their children. Similarly, Du et al. (2017) stated that people with higher self-esteem also experience more positivity, life satisfaction, and happiness. Professionals working with families during the adjustment process may explore clients' personal relationships and social systems to assist clients in overcoming existing deficits as parents adjust to changes in their families, parental identities, and social groups following the coming out process. Given the findings of the current study, mental health clinicians can work with clients to design interventions that limit isolation and social withdrawal after learning of their child's nonheterosexuality.

The current study has the potential for social change by recognizing that acceptance of nonheterosexual individuals is becoming more common in society. The findings may also contribute to social change at the individual, community, and societal levels as the study may confirm that attitudinal changes toward sexual minorities have occurred over the past several decades, which positively influence and impact parental responses. Changes in social structures and attitudes also reflect in family systems. For some, the findings may indicate the importance of the familial relationship, which can guide for mental health professionals when working with families with sexual minority youth.

The social identity theory was used as a theoretical framework for the current study. The use of a different theoretical lens may have created an alternate understanding of the collected data. For example, Scherrer (2016) studied families with LGBTQ children and their disclosure to their grandparents. The use the family systems theory,

which focuses on boundaries, roles, and subsystems, provided the framework of understanding how families adapt and understand family relationships (Scherrer, 2016). The use of a different theory could offer additional implications of the research findings.

### **Conclusion**

The current study examined whether attitudes towards sexual minorities, relational self-esteem, and sex-role stereotypes could predict parental emotional responses when learning their child is nonheterosexual. Relational self-esteem was a predictor of negative emotional responses, as relational self-esteem decreased with elevated levels of parents' negative emotional responses. Negative emotional parental responses were underscored with feelings of sadness, guilt, hostility, and fear (see Table 6). However, parents also reported positive emotional experiences when learning their child was nonheterosexual. Correlation analysis indicated that parents also felt cheerful, joyful, happy, and confident when learning their child was LGBTQ. The nuances of parental experiences are relevant in understanding individual and familial dynamics when working with clients.

## References

- Adams, J., & Light, R. (2015). Scientific consensus, the law, and same sex parenting outcomes. *Social Science Research, 53*, 300-310.
- Allen, S. H., & Golojuch, L. A. (2019). “She still doesn’t want me to tell my next-door neighbor:” The familial experiences of modern orthodox Jewish gay men. *Journal of GLBT Family Studies, 15*(4), 373–394.
- American Counseling Association (ACA). (2014). *2014 ACA code of ethics*.  
<https://www.counseling.org/docs/default-source/default-document-library/2014-code-of-ethics-finaladdress.pdf>
- Anastasiu, I. (2012). The social functions of the family. *Euromentor, 3*(2), 36–42.
- Astramovich, R. L., Chan, C. D., & Marasco, V. M. (2017). Advocacy evaluation for counselors serving LGBTQ populations. *Journal of LGBT Issues in Counseling, 11*(4), 319–329.
- Baiocco, R., Fontanesi, L., Santamaria, F., Ioverno, S., Marasco, B., Baumgartner, E., Willoughby, B., & Laghi, F. (2015). Negative parental responses to coming out and family functioning in a sample of lesbian and gay young adults. *Journal of Child & Family Studies, 24*(5), 1490-1500. <https://doi.org/10.1007/s10826-014-9954-z>
- Baumeister, R. F., Campbell, J. D., Krueger, J. I., & Vohs, K. D. (2003). Does high self-esteem cause better performance, interpersonal success, happiness, or healthier lifestyles? *Psychological Science in the Public Interest, 4*(1), 1–44.  
<https://doi.org/10.1111/1529-1006.01431>

- Ben-Ari, A. (1995). The discovery that an offspring is gay: Parents', gay men's, and lesbians' perspectives. *Journal of Homosexuality*, 30, 89–112.  
[https://doi.org/10.1300/J082v30n01\\_05](https://doi.org/10.1300/J082v30n01_05)
- Blair, K. L., & Holmberg, D. (2019). What would you know about it? Managing ingroup vs. outgroup perceived support of same-sex vs. mixed-sex romantic relationships. *Journal of GLBT Family Studies*, 15(5), 429–441.
- Bos, H. M., Knox, J. R., van Rijn-van Gelderen, L., & Gartrell, N. K. (2016). Same-sex and different-sex parent households and child health outcomes: Findings from the national survey of children's health. *Journal of Developmental and Behavioral Pediatrics: JDBP*, 37(3), 179–187.
- Bradburn, N., Sudman, S., & Wansink, B. (2004). Asking questions: The definitive guide to questionnaire design—For market research, political polls, and social and health questionnaires (Rev. ed.). Jossey-Bass.
- Bregman, H. R., Malik, N. M., Page, M. L., Makynen, E., & Lindahl, K. M. (2013). Identity profiles in lesbian, gay, and bisexual youth: The role of family influences. *Journal of Youth and Adolescence*, (3), 417. [https://doi: 10.1007/s10964-012-9798-z](https://doi.org/10.1007/s10964-012-9798-z)
- Breshears, D., & Beer, C. L.-D. (2016). Same-sex parented families' negotiation of minority social identity in South Africa. *Journal of GLBT Family Studies*, 12(4), 346–364. <https://doi.org/10.1080/1550428X.2015.1080134>

- Brewer, M. B., & Chen, Y.-R. (2007). Where (who) are collectives in collectivism? Toward conceptual clarification of individualism and collectivism. *Psychological Review*, *114*(1), 133–151.
- Burkholder, G. J., Cox, K. A., & Crawford, L. M. (2016). *The scholar-practitioner's guide to research design*. Laureate Publishing.
- Byrne, Z. S., Felker, S., Vacha-Haase, T., & Rickard, K. M. (2011). A comparison of responses on the attitudes toward women scale and attitudes toward feminism scale: Is there a difference between college-age and later-life adults with the original norms? *Measurement & Evaluation in Counseling & Development*, *44*(4), 248–264.
- Cass, V. (1979). Homosexual identity formation: A theoretical model. *The Journal of Homosexuality*, *4*, 219–235. [https://doi.org/10.1300/J082v04n03\\_01](https://doi.org/10.1300/J082v04n03_01)
- Chrisler, A. J. (2017). Understanding parent reactions to coming out as lesbian, gay, or bisexual: A theoretical framework. *Journal of Family Theory & Review*, *9*(2), 165–181.
- Claes, M., Lacourse, É., Pagé, M., Paquin, S., Lannegrand-Willems, L., Sabatier, C., Perchee, C., Palos, P. A., Vieno, A., & Ramirez Garcia, J. I. (2018). Parental control and conflicts in adolescence: A cross-national comparison of the United States, Canada, Mexico, France, and Italy. *Journal of Family Issues*, *39*(16), 3857–3879. <https://doi.org/10.1177/0192513X18800123>
- Cohen, J. (1992). A power primer. *Psychological Bulletin*, *112*(1), 155–159. <https://doi.org/10.1037/0033-2909.112.1.155>

- Cohen, S. (2004). Social relationships and health. *American Psychologist*, 59(8), 676–684. <https://doi.org/10.1037/0003-066X.59.8.676>
- Cohen, H. L., Padilla, Y. C., & Aravena, V. C. (2006). Chapter 7: Psychosocial support for families of gay, lesbian, bisexual, and transgender people. In D. F. Morrow & L. Messinger (Eds.), *Sexual orientation & gender expression in social work practice* (p. 151). Columbia University.
- Colvin, J., & Lanigan, J. (2005). Ethical issues and best practice considerations for internet research. *Journal of Family & Consumer Sciences*, 97(3), 34-39.
- Comstock, G. (2013). *Research ethics. A philosophical guide to the responsible conduct of research*. Cambridge University Press.
- Conley, C. (2011). Learning about a child's gay or lesbian sexual orientation: Parental concerns about societal rejection, loss of loved ones, and child well being. *Journal of Homosexuality*, 58, 1022–1040.  
<http://doi.org/10.1080/00918369.2011.598409>
- Creswell, J. W., Creswell, J. D. (2018). *Research design: Qualitative, quantitative, and mixed methods* (5th ed.). Sage. ISBN: 978-1-5063-8670-6.
- D'amico, E., Julien, D., Tremblay, N., & Chartrand, E. (2015). Gay, lesbian, and bisexual youths coming out to their parents: Parental reactions and youths' outcomes. *Journal of GLBT Family Studies*, 11(5), 411-437.
- Das, B. S. (2018). Disclosure of sexual orientation: Case series depicting parental response. *Open Journal of Psychiatry & Allied Sciences*, 9(2), 166–169.  
<https://doi.org/10.5958/2394-2061.2018.00026.5>

- D'Augelli, A. R., Grossman, A. H., Starks, M. T., & Sinclair, K. O. (2010). Factors associated with parents' knowledge of gay, lesbian, and bisexual youths' sexual orientation. *Journal of GLBT Family Studies*, *6*, 178 – 198.  
<https://doi.org/10.1080/15504281003705410>
- Doyle, C. J. (2018). A new family systems therapeutic approach for parents and families of sexual minority youth. *Issues in Law & Medicine*, *33*(2), 223–234.
- Du, H., Bernardo, A. B. I., & Yeung, S. S. (2015). Locus-of-hope and life satisfaction: The mediating roles of personal self-esteem and relational self-esteem. *Personality and Individual Differences*, *83*, 228–233.
- Du, H., King, R. B., & Chi, P. (2012). Relational Self-Esteem Scale. *PsycTESTS*.  
<https://doi.org/10.1037/t36497-000>
- Du, H., King, R. B., & Chi, P. (2017). Self-esteem and subjective well-being revisited: The roles of personal, relational, and collective self-esteem. *PLoS ONE*, *12*(8), 1–17. <https://doi.org/10.1371/journal.pone.0183958>
- Dunbar, J., Brown, M., & Amoroso, D. M. (1973). Some correlates of attitudes toward homosexuality. *Journal of Social Psychology*, *89*(2), 271–279.  
<https://doi.org/10.1080/00224545.1973.9922600>
- El Ghaziri, N., & Darwiche, J. (2018). Adult self-esteem and family relationships: A literature review. *Swiss Journal of Psychology*, *77*(3), 99–115.  
<https://doi.org/10.1024/1421-0185/a000212>

- Endendijk, J. J., Derks, B., & Mesman, J. (2018). Does parenthood change implicit gender-role stereotypes and behaviors? *Journal of Marriage and Family*, 80(1), 61–79.
- Ferguson, C. J. (2016). An effect size primer: A guide for clinicians and researchers. In A. E. Kazdin (Ed.), *Methodological issues and strategies in clinical research.*, 4th ed. (pp. 301–310). American Psychological Association.  
<https://doi.org/10.1037/14805-020>
- Fields, J. (2001). Normal queers: Straight parents respond to their children’s “coming out.” *Symbolic Interaction*, 24(2), 165–187.  
<https://doi.org/10.1525/si.2001.24.2.165>
- Flores, A. R. (2014). National trends in public opinion on LGBT rights in the United States. The Williams Institute.
- Foundations of Social Work Research*. (2020). Open Textbook Library.
- Frankfort-Nachmias, C., & Leon-Guerrero, A. (2018). *Social statistics for a diverse society* (8th ed.). Sage.
- García, J. D. (2018). Heteronormativity. *Salem press encyclopedia*.
- Goldstein, J. L. "Voices from the parents of lesbian, gay or bisexual children: how do parents adjust to their child's lesbian, gay or bisexuality?" (2009). Masters Thesis, Smith College, Northampton, MA.  
<https://scholarworks.smith.edu/theses/1201>
- Gonzalez, K. A., Rostosky, S. S., Odom, R. D., & Riggle, E. D. B. (2013). The positive aspects of being the parent of an LGBTQ child. *Family Process*, 52(2), 325–337.

- Goodrich, K. (2009). Mom and dad come out: The process of identifying as a heterosexual parent with a lesbian, gay, or bisexual child. *Journal of LGBT Issues in Counseling, 3*(1), 37-61.
- Goodrich, K. M., & Gilbride, D. D. (2010). The refinement and validation of a model of family functioning after child's disclosure as lesbian, gay, or bisexual. *Journal of LGBT Issues in Counseling, 4*(2), 92–124.  
<https://doi.org/10.1080/15538605.2010.483575>
- Grafsky, E. (2014). Becoming the parent of a GLB son or daughter. *Journal of GLBT Family Studies, 10*(1/2), 36–57. <https://doi.org/10.1080/1550428X.2014.857240>
- Groves, R. M., Fowler, F. J. Jr., Couper, M. P., Lepkowski, J. M., Singer, E., & Tourangeau, R. (2009). *Survey methodology* (2nd ed.). John Wiley & Sons.
- Gupta, S. (2017). Ethical issues in designing internet-based research: Recommendations for good practice. *Journal of Research Practice, 13*(2).
- Habarth, J. M. (2008). *Thinking “straight”: Heteronormativity and associated outcomes across sexual orientation* (Order No. 3328835). Available from ProQuest Dissertations & Theses Global. (304571687).
- Harding, B., & Cousineau, D. (2016). GSD: An SPSS extension command for subsampling and bootstrapping datasets. *Tutorials in Quantitative Methods for Psychology, 12*(2), 138–146. <https://doi.org/10.20982/tqmp.12.2.p138>
- Haslam, S. A., Oakes, P. J., Reynolds, K. J., & Turner, J. C. (1999). Social identity salience and the emergence of stereotype consensus. *Personality and Social*

*Psychology Bulletin*, 25(7), 809–818.

<https://doi.org/10.1177/0146167299025007004>

Heiden-Rootes, K., Wiegand, A., & Bono, D. (2019). Sexual minority adults: A national survey on depression, religious fundamentalism, parent relationship quality & acceptance. *Journal of Marital and Family Therapy*, 45(1), 106–119.

Herek, G. M. (1988). Heterosexuals' attitudes toward lesbians and gay men: Correlates and gender differences. *Journal of Sex Research*, 25(4), 451–477.

<https://doi.org/10.1080/00224498809551476>

Hesterberg, T. C. (2015). What Teachers Should Know About the Bootstrap: Resampling in the Undergraduate Statistics Curriculum. *The American statistician*, 69(4), 371–386. <https://doi.org/10.1080/00031305.2015.1089789>

Holtzen, D. W., & Agresti, A. A. (1990). Parental responses to gay and lesbian children: Differences in homophobia, self-esteem, and sex-role stereotyping. *Journal of Social and Clinical Psychology*, 9(3), 390–399.

<https://doi.org/10.1521/jscp.1990.9.3.390>

Holtzman, M. (2006). Definitions of the family as an impetus for legal change in custody decision making: Suggestions from an empirical case study. *Law & Social Inquiry*, 31(1), 1–37. <https://doi.org/10.1111/j.1747-4469.2006.00001.x>

Houston, D. M., & Andreopoulou, A. (2003). Tests of both corollaries of social identity theory's self-esteem hypothesis in real group settings. *British Journal of Social Psychology*, 42(3), 357–370. <https://doi.org/10.1348/014466603322438206>

- Hussong, A., Jones, D. J., & Jensen, M. (2018). Synthesizing a special issue on parenting adolescents in an increasingly diverse world. *Journal of Research on Adolescence (Wiley-Blackwell)*, 28(3), 665.
- Jaffee, K. D., Dessel, A. B., & Woodford, M. R. (2016). Attitudes Toward Sexual Minorities Scale. *PsycTESTS*. <https://doi.org/10.1037/t60182-000>
- Jans, L., Koudenburg, N., Dillmann, J., Wichgers, L., Postmes, T., & den Hartigh, R. J. R. (2019). Dynamic reactions to opinion deviance: The role of social identity formation. *Journal of Experimental Social Psychology*, 84.
- Jetten J., Branscombe, N. R., Haslam, S. A., Haslam, C., Cruwys, T., Jones, J. M., et al. (2015) Having a lot of a good thing: Multiple important group memberships as a source of self-esteem. *PLoS ONE* 10(5): e0124 609.  
<https://doi.org/10.1371/journal.pone.0124609>
- Kassambara, A. (2018, March 11). *Logistic Regression Assumptions and Diagnostics in R*. STHDA. <http://www.sthda.com/english/articles/36-classification-methods-essentials/148-logistic-regression-assumptions-and-diagnostics-in-r/>
- Keene, B. M. (2018). Belongingness (sense of belonging). *Salem Press Encyclopedia*.
- Kowalski, B. M., & Scheitle, C. P. (2020). Sexual identity and attitudes about gender roles. *Sexuality & Culture*, 24(3), 671–691. <https://doi.org/10.1007/s12119-019-09655-x>
- LaSala, M. C. (2000). Lesbians, gay men, and their parents: Family therapy for the coming-out crisis. *Family Process*, 39(1), 67–81.

- LaSala, M., & Frierson, D. (2012). African American gay youth and their families: Redefining masculinity, coping with racism and homophobia. *Journal of GLBT Family Studies*, 8(5), 428–445. <https://doi.org/10.1080/1550428X.2012.729948>
- Lavrakas, P. J. (2008). *Encyclopedia of survey research methods* (Vols. 1-0). Thousand Oaks, CA: Sage Publications, Inc.
- Lefkowitz, E., Shearer, C., Gillen, M., & Espinosa-Hernandez, G. (2014). How gendered attitudes relate to women's and men's sexual behaviors and beliefs. *Sexuality & Culture*, 18(4), 833–846. <https://doi.org/10.1007/s12119-014-9225-6>
- Li, D.-J., Chang, Y.-P., Chen, Y.-L., & Yen, C.-F. (2020). The impact of emotional symptoms and family support on the association between homophobic bullying and sedative/hypnotic use among gay and bisexual men in Taiwan: A moderated mediation model. *International Journal of Environmental Research and Public Health*, 17(11). <https://doi.org/10.3390/ijerph17113870>
- Li, J., Liu, M., Peng, M., Jiang, K., Chen, H., & Yang, J. (2019). Positive representation of relational self-esteem versus personal self-esteem in Chinese with interdependent self-construal. *Neuropsychologia*, 134.
- Linville, D. (2018). When words inflict harm: Documenting sexuality and gender identity microaggressions in schools for LGBTQ youth. *Multicultural Learning and Teaching*, 13(2) <http://doi.org/10.1515/mlt-2017-0009>
- Little, J. N. (2001). Embracing gay, lesbian, bisexual, and transgendered youth in school-based settings. *Child & Youth Care Forum*, 30(2), 99–110. <https://doi.org/10.1023/A:1011681218718>

- Long, J. K., Bonomo, J., Andrews, B. V., & Brown, J. M. (2006). Systemic Therapeutic Approaches with Sexual Minorities and Their Families. *Journal of GLBT Family Studies*, 2(3/4), 7–37. [https://doi.org/10.1300/J461v02n03\\_02](https://doi.org/10.1300/J461v02n03_02)
- Mackie, D. M., & Smith, E. R. (2015). Intergroup emotions. In M. Mikulincer, P. R. Shaver, J. F. Dovidio, & J. A. Simpson (Eds.), *APA handbook of personality and social psychology, Volume 2: Group processes*. (pp. 263–293). American Psychological Association. <https://doi.org/10.1037/14342-010>
- Mayrhofer, W., Meyer, M., Schiffinger, M., & Schmidt, A. (2008). The influence of family responsibilities, career fields and gender on career success: An empirical study. *Journal of Managerial Psychology*, 23(3), 292-323. <https://doi.org/10.1108/02683940810861392>
- Multiple Logistic Regression Analysis*. (2013). [https://sphweb.bumc.bu.edu/otlt/MPH-Modules/BS/BS704\\_Multivariable/BS704\\_Multivariable8.html](https://sphweb.bumc.bu.edu/otlt/MPH-Modules/BS/BS704_Multivariable/BS704_Multivariable8.html).
- Muller, A. (1987). *Parents matter: Parents' relationships with lesbian daughters and gay sons*. Tallahassee, FL: Naiad Press.
- Mustanski, B., Andrews, R., & Puckett, J. A. (2016). The effects of cumulative victimization on mental health among lesbian, gay, bisexual, and transgender adolescents and young adults. *The American Journal of Public Health*, 3, 527. <https://doi.org/10.2105/AJPH.2015.302976>
- Netzer, L., Halperin, E., & Tamir, M. (2020). Be afraid, be very afraid! Motivated intergroup emotion regulation. *Personality & Social Psychology Bulletin*, 146167220910833. <https://doi.org/10.1177/0146167220910833>

- Newman, B. S., & Muzzonigro, P. G. (1993). The effects of traditional family values on the coming out process of gay male adolescents. *Adolescence, 109*, 213.
- Oyserman, D., Coon, H. M., & Kemmelmeier, M. (2002). Rethinking individualism and collectivism: Evaluation of theoretical assumptions and meta-analyses. *Psychological Bulletin, 1, 3*. <https://doi.org/10.1037/0033-2909.128.1.3>
- Parker, C. M., Hirsch, J. S., Philbin, M. M., & Parker, R. G. (2018). The urgent need for research and interventions to address family-based stigma and discrimination against lesbian, gay, bisexual, transgender, and queer youth. *Journal of Adolescent Health, 63*(4), 383–393.
- Patterson, C. J. (1994). Lesbian and gay families. *Current Directions in Psychological Science, 3*(2), 62-64. <https://doi.org/10.1111/1467-8721.ep10769976>
- Peterson, B. E., & Zurbriggen, E. L. (2010). Gender, Sexuality, and the Authoritarian Personality Peterson & Zurbriggen Authoritarianism and Gender. *Journal of Personality, 78*(6), 1801–1826.
- Phillips, M. J., & Ancis, J. R. (2008). The process of identity development as the parent of a lesbian or gay male. *Journal of LGBT Issues in Counseling, 2*(2), 126–158. <https://doi.org/10.1080/15538600802125605>
- Pornprasit, N., & Boonyasiriwat, W. (2018). The effects of perspective-taking on prejudice reduction among Thais: The moderating role of relational self-esteem. *Kasetsart Journal of Social Sciences*.

- Powell, B., Blozendahl, C., Geist, C., & Steelman, L. C. (2010). *Counted out: Same-sex relations and Americans' definitions of family*. ProQuest Ebook Central. <https://ebookcentral.proquest.com>
- Richter, B., Lindahl, K., & Malik, N. (2017). Examining ethnic differences in parental rejection of LGB youth sexual identity. *Journal of Family Psychology, 31*(2), 244–249. <https://doi.org/10.1037/fam0000235>
- Rodriguez, J. (2019). Social identity theory. *Salem Press Encyclopedia of Health*.
- Russell, S. T., & Fish, J. N. (2016). Mental health in lesbian, gay, bisexual, and transgender (LGBT) youth. *Annual Review of Clinical Psychology, 12*(12), 465–487.
- Saltzburg, S. (2004). Learning that an adolescent child is gay or lesbian: The parent experience. *Social Work, 49*(1), 109-118. <https://doi.org/10.1093/sw/49.1.109>
- Saltzburg, S. (2009). Parents' experience of feeling socially supported as adolescents come out as lesbian and gay: A phenomenological study. *Journal of Family Social Work, 12*(4), 340–358. <https://doi.org/10.1080/10522150903261932>
- Sample size calculator. (n.d.). <https://www.checkmarket.com/sample-size-calculator/>
- Savin-Williams, R. C. (2001). Mom, dad, I'm gay: How families negotiate coming out. American Psychological Association. <https://doi.org/10.1037/10437-000>
- Savin-Williams, R. C. (1998). The disclosure to families of same-sex attractions by lesbian, gay, and bisexual youths. *Journal of Research on Adolescence (Lawrence Erlbaum), 8* (1), 49-68.

- Savin-Williams, R. C., & Dubé, E. M. (1998). Parental reactions to their child's disclosure of a gay/ lesbian identity. *Family Relations*, 47(1), 7–13.  
<https://doi.org/10.2307/584845>
- Savin-Williams, R. C., & Ream, G. L. (2003). Sex variations in the disclosure to parents of same-sex attractions. *Journal of Family Psychology*, 17(3), 429–438.  
<https://doi.org/10.1037/0893-3200.17.3.429>
- Scherrer, K. S. (2016). Gay, lesbian, bisexual, and queer grandchildren's disclosure process with grandparents. *Journal of Family Issues*, 37(6), 739–764.  
<https://doi.org/10.1177/0192513X14526874>
- Schumm, W., & Crawford, D. (2019). Scientific consensus on whether LGBTQ parents are more likely (or not) to have LGBTQ children: An analysis of 72 social science reviews of the literature published between 2001 and 2017. *Journal of International Women's Studies*, 20(7), 1–12.  
<https://vc.bridgew.edu/jiws/vol20/iss7/1>
- Schwager, S., Wick, K., Glaeser, A., Schoenherr, D., Strauss, B., & Berger, U. (2020). Self-esteem as a potential mediator of the association between social integration, mental well-being, and physical well-being. *Psychological Reports*, 123(4), 1160–1175. <https://doi.org/10.1177/0033294119849015>
- Shpigel, M. S., Belsky, Y., & Diamond, G. M. (2015). Clinical work with non-accepting parents of sexual minority children: Addressing causal and controllability attributions. *Professional Psychology, Research and Practice*, 1(46).  
<https://doi.org/10.1037/a0031824>

- Singelis, T. M., Cross, S. E., Bacon, P. L., & Morris, M. L. (2000). Self-Construal Scale. *Journal of Personality and Social Psychology, 78*(4), 791–808.
- Singh, K. (2007). *Quantitative Social Research Methods*. Sage.  
<https://doi.org/10.4135/9789351507741>
- Smith, M. C., Bibi, U., & Sheard, D. E. (2003). Evidence for the differential impact of time and emotion on personal and event memories for September 11, 2001. *Applied Cognitive Psychology, 17*(9), 1047–1055.
- Snell, J. C. (2020). Multiple regression: Evolution and analysis. *Education, 140*(4), 187–193. <https://doi.org/10.1155/2020/9842803>
- Snell, J. C., & Marsh, M. (2012). Multiple regression and its discontents. *Education, 132*(3), 517–522.
- Spence, J. T., & Helmreich, R. L. (1979). On assessing androgyny. *Sex Roles, 5*, 721-738.  
<https://doi.org/10.1007/BF00287935>
- Spence, J. T., Helmreich, R., & Stapp, J. (1973). Attitudes Toward Women Scale--Short Version. *PsycTESTS*. <https://doi.org/10.1037/t16385-000>
- Striepe, M. I., & Tolman, D. L. (2003). Mom, dad, I'm straight: The coming out of gender ideologies in adolescent sexual-identity development. *Journal of Clinical Child and Adolescent Psychology, 32*(4), 523–530.  
[https://doi.org/10.1207/S15374424JCCP3204\\_4](https://doi.org/10.1207/S15374424JCCP3204_4)
- Sue, D. W., Capodilupo, C. M., Torino, G. C., Bucceri, J. M., Holder, A. M. B., Nadal, K. L., & Esquilin, M. (2007). Racial microaggressions in everyday life:

Implications for clinical practice. *American Psychologist*, 62(4), 271–286.

<https://doi.org/10.1037/0003-066X.62.4.271>

Sutherland, M. A., Amar, A. F. & Laughon, K. (2013). Who sends the email? Using electronic surveys in violence research. *Western Journal of Emergency Medicine*, 14(4), 363–369. <https://doi.org/10.5811/westjem.2013.2.15676>

Tajfel, H. (1982). Social psychology of intergroup relations. *Annual Review of Psychology*, 33(1), 1.

Tajfel, H., & Turner, J. C. (1979). An integrative theory of intergroup conflict. *The Social Psychology of Intergroup Relations*, 33, 47.

Tate, C. C., Bettergarcia, J. N., & Brent, L. M. (2015). Re-assessing the role of gender-related cognitions for self-esteem: The importance of gender typicality for cisgender adults. *Sex Roles*, 72(5–6), 221–236. <https://doi.org/10.1007/s11199-015-0458-0>

Taylor, J. (2019). Mental health in LGBTQ youth: Review of research and outcomes. *Communique*, 48(3), 4–6.

Taylor, S. E., & Stanton, A. L. (2007). Coping resources, coping processes, and mental health. *Annual Review of Clinical Psychology*, 3, 377–401.

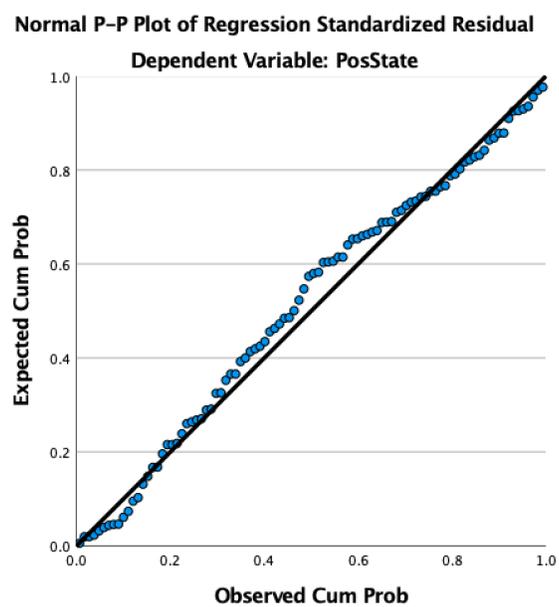
*The Williams Institute*. (n.d.). Williams Institute Law. UCLA.

<https://williamsinstitute.law.ucla.edu/visualization/lgbt-stats/?topic=LGBT&sortBy=percentage&sortDirection=descending#ranking>

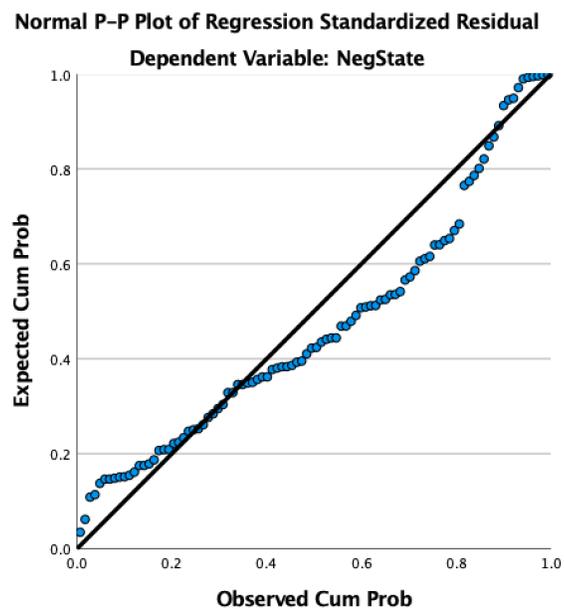
- Thompson Jr., E. H., Grisanti, C., & Pleck, J. H. (1985). Attitudes Toward the Male Role and Their Correlates. *Sex Roles, 13*(7–8), 413–427.  
<https://doi.org/10.1007/BF00287952>
- Tresemmer, D., & Pleck, J. (1974). Sex-role boundaries and resistance to sex-role change. *Women's Studies, 2*(1), 61.  
<https://doi.org/10.1080/00497878.1974.9978336>
- Trussell, D. E. (2017). Parents' leisure, LGB young people and “when we were coming out.” *Leisure Sciences, 39*(1), 42–58.
- Ungvarsky, J. (2017). Snowball sampling. *Salem Press Encyclopedia*.
- Walch, S. E., Bernal, D. R., Gibson, L., Murray, L., Thien, S., & Steinnecker, K. (2020). Systematic review of the content and methods of empirical psychological research on LGBTQ and SGM populations in the new millennium. *Psychology of Sexual Orientation and Gender Diversity*. <https://doi.org/10.1037/sgd0000364.supp>
- Warner, R. M. (2013). *Applied statistics: From bivariate through multivariate techniques* (2nd ed.). SAGE.
- Watson, D., & Clark, L. A. (1994). Positive and negative affect schedule--Expanded version. *PsycTESTS*. <https://doi.org/10.1037/t04754-000>
- Watson, D., Clark, L. A., & Tellegen, A. (1988). Development and validation of brief measures of positive and negative affect: the PANAS scales. *Journal of Personality and Social Psychology, 54*(6), 1063. <https://doi.org/10.1037/0022-3514.54.6.1063>

- Whitley Jr., B. E. (1987). The relationship of sex-role orientation to heterosexuals' attitudes toward homosexuals. *Sex Roles, 17*(1–2), 103–113.  
<https://doi.org/10.1007/BF00287903>
- Williams, K. A., & Chapman, M. V. (2012). Unmet health and mental health need among adolescents: The roles of sexual minority status and child-parent connectedness. *American Journal of Orthopsychiatry, 82*(4), 473–481.  
<https://doi.org/10.1111/j.1939-0025.2012.01182.x>
- Willoughby, B. B., Doty, N. D., & Malik, N. M. (2008). Parental reactions to their child's sexual orientation disclosure: A family stress perspective. *Parenting: Science & Practice, 8*(1), 70-91. <http://doi.org/10.1080/15295190701830680>

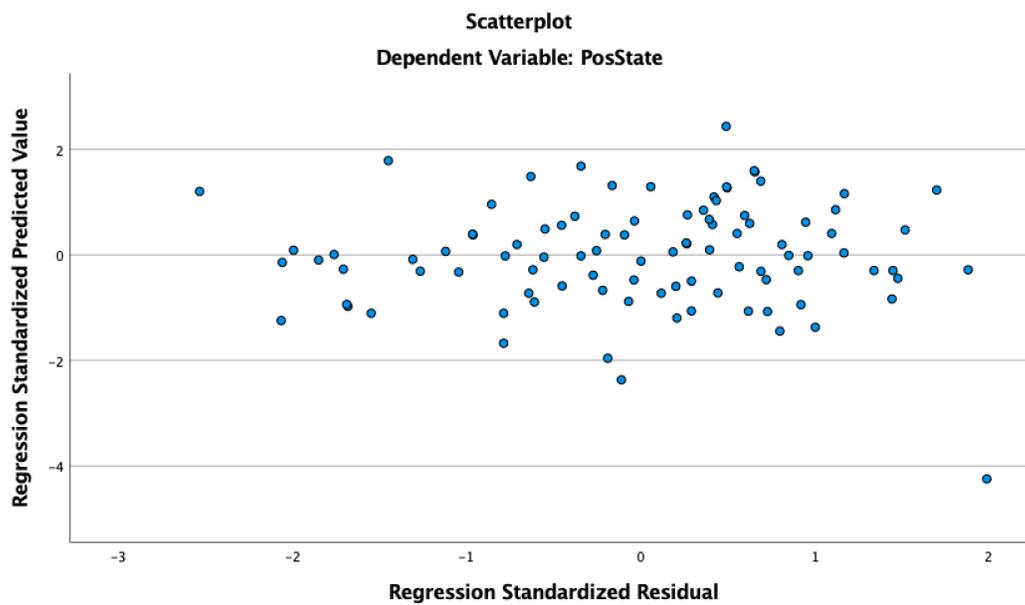
## Appendix A: Data Analysis Figures and Tables

**Figure A1***P-plot for Positive Emotional State*

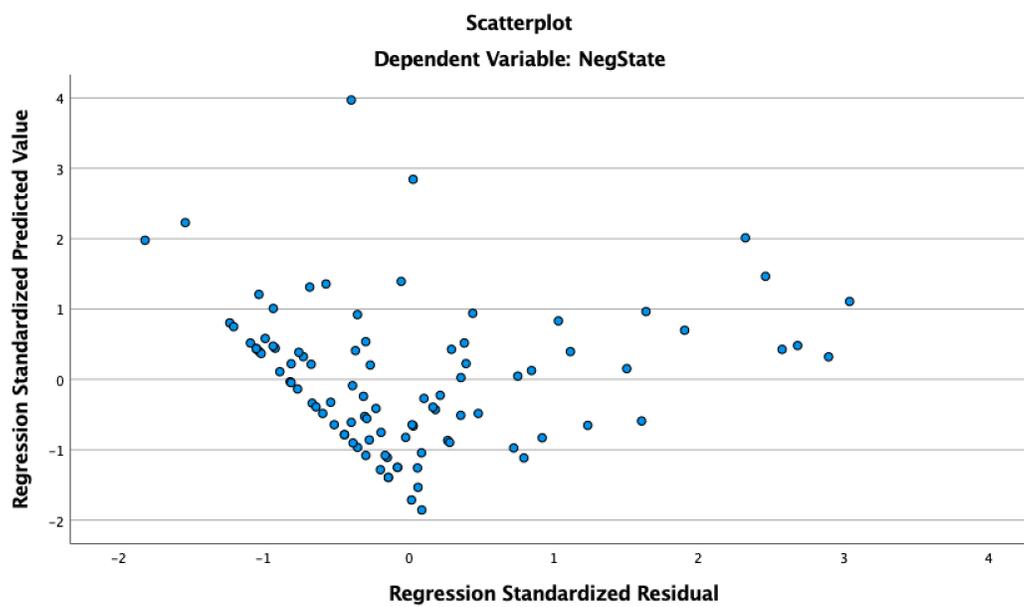
IVs = negative attitudes toward sexual minorities, relational self-esteem, and sex-role stereotypes

**Figure A2***P-plot for Positive Emotional State*

IVs = negative attitudes toward sexual minorities, relational self-esteem, sex-role stereotypes

**Figure A3***Scatterplot for Positive Emotional State*

IVs = negative attitudes toward sexual minorities, relational self-esteem, sex-role stereotypes

**Figure A4***Scatterplot for Negative Emotional State*

IVs = negative attitudes toward sexual minorities, relational self-esteem, and sex-role stereotypes

## Appendix B: Demographic Questionnaire

## Demographic Information Questionnaire.

1. What is your parental role?
  - Mother
  - Father
  - I prefer not to answer.
  
2. What is your sexual orientation?
  - Heterosexual or straight
  - Gay
  - Lesbian
  - Bisexual
  - Pansexual
  - Queer
  - Demisexual
  - Transgender
  - Questioning
  - Asexual
  - Other: please specify
  - I prefer not to answer.
  
3. What is your age range?
  - 18-24
  - 25-34
  - 35-44
  - 45-54
  - 55-64
  - 65 and above
  - I prefer not to answer.
  
4. What is your ethnicity and race? Select all that apply to you:
  - American Indian or Alaska Native – For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Nome Eskimo Community
  - Asian – For example, Chinese, Filipino, Asian Indian, Vietnamese, Korean, Japanese
  - Black or African American – For example, Jamaican, Haitian, Nigerian, Ethiopian, Somalian
  - Hispanic/Latino – For example, Mexican, Mexican American, Puerto Rican, Cuban, Salvadoran, Dominican, Columbian
  - Native Hawaiian or Other Pacific Islander – For example, Native Hawaiian, Samoan, Chamorro, Fijian, Tongan, Marshallese
  - White – For example, German, Irish, English, Italian, Polish, French
  - Bi / Multi racial, other ethnicity, or origin: please specify

I prefer not to answer.

5. What was your total household income before taxes during the past 12 months?
  - Less than \$25,000
  - \$25,000 to \$34,999
  - \$35,000 to \$49,999
  - \$50,000 to \$74,999
  - \$75,000 to \$99,999
  - \$100,000 to \$149,999
  - \$150,000 or more
  - I prefer not to answer.
  
6. What is your geographical location?
  - New England (Maine, New Hampshire, Vermont, Massachusetts)
  - Middle Atlantic (New York, New Jersey, Pennsylvania)
  - East North Central (Ohio, Indiana, Illinois, Michigan, Wisconsin)
  - West North Central (Minnesota, Iowa, Missouri, North Dakota, South Dakota, Nebraska, Kansas)
  - South Atlantic (Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida)
  - East South Central (Kentucky, Tennessee, Alabama, Mississippi)
  - West South Central (Arkansas, Louisiana, Oklahoma, Texas)
  - Mountain (Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada)
  - Pacific (Washington, Oregon, California, Alaska, Hawaii)
  
7. What is your education level?
  - Completed some high school
  - High school graduate
  - Completed some college
  - Associate degree
  - Bachelor's degree
  - Completed some postgraduate
  - Master's degree
  - Vocational Training
  - Specialist Degree – For example, Ph.D., law or medical degree
  - Other advanced degree beyond a Master's degree
  - I prefer not to answer.
  
8. Do you have biological, adopted, foster or step children?
  - Yes, one child
  - Yes, two children
  - Yes, three children
  - Yes, four children
  - Yes, five or more children

I prefer not to answer.

9. What is the sexual orientation of your nonheterosexual child?

Gay

Lesbian

Bisexual

Transgender

Questioning

Other: please specify

I prefer not to answer.

10. How many years, rounded to the nearest half-year, since your child's disclosure?

1 year

1.5 years

2 years

2.5 years

3 years

3.5 years

4 years

4.5 years

5 years

I prefer not to answer.

## Appendix C: Survey Instrument Permissions

### Permission to Use the PANAS-X

**From:** David Watson [REDACTED]  
**Sent:** Sunday, June 6, 2021 11:19 AM  
**To:** Donnell Butler <donnell.butler@waldenu.edu>; Lee Anna Clark [REDACTED]  
**Subject:** Re: Permissions Request

Dear Donnell,

I appreciate your interest in the Extended Form of the Positive and Negative Affect Schedule (PANAS-X). We are pleased to grant you permission to use the PANAS-X in your dissertation research. We make the measure available without charge for non-commercial research purposes. We do require that all printed versions of the PANAS-X (including online protocols and mobile apps) include the copyright information indicated in the PANAS-X Manual, which I have attached. Please note that the PANAS-X Manual contains a sample copy of the instrument (see Table 1), along with scoring instructions (see Table 2), and extensive reliability and validity data.

Please note that this permission to use the PANAS-X does not extend beyond you and your immediate group. That is, others who wish to use the instrument must request permission for themselves.

Thanks again for your interest in the PANAS-X. Good luck with your project.

Regards,

David Watson

David Watson, Ph.D.  
Andrew J. McKenna Family Professor of Psychology  
Co-Director, Center for Advanced Measurement of Personality & Psychopathology  
University of Notre Dame  
(574) 631-1403 (office)

### Permission to Use the PANAS

Hi,

I appreciate your interest in the Positive and Negative Affect Schedule (PANAS), and I am pleased to grant you permission to use the PANAS in your dissertation research. Please note that to use the PANAS, you need both our permission and the permission of the American Psychological Association (APA), which is the official copyright holder of the instrument. Because I am copying this email to APA, however, you do not have to request permission separately from APA; this single e-mail constitutes official approval from both parties.

We make the PANAS available without charge for non-commercial research purposes. We do require that all printed versions of the PANAS include a full citation and copyright information. Thus, any printed copies should state:

"From "Development and validation of brief measures of positive and negative affect: The PANAS scales," by D. Watson, L. A. Clark, and A. Tellegen, 1988, *Journal of Personality and Social Psychology*, 54, 1063-1070. Copyright © 1988 by the American Psychological Association. Reproduced with permission."

Please note that this permission does not include administering the PANAS online. If you are conducting a Web-based study, you should contact Karen Thomas at [kthomas@apa.org](mailto:kthomas@apa.org).

Finally, Dr. Clark and I have relocated to the University of Notre Dame. Please direct any future correspondence to our new email addresses there ([la.clark@nd.edu](mailto:la.clark@nd.edu); [db.watson@nd.edu](mailto:db.watson@nd.edu)).

Good luck with your research.

Cordially,

David Watson

---

David Watson, Ph.D.  
Andrew J. McKenna Family Professor  
Department of Psychology  
118 Haggard Hall  
University of Notre Dame  
Notre Dame IN 46556

**Permission to Use the Relational Self-Esteem Scale**

**Re: Permissions Request**

Hongfei Du [REDACTED]

Wed 9/23/2020 4:40 AM

To: Donnell Butler <donnell.butler@valdenu.edu>

 1 attachments (46 KB)

Relational Self-Esteem Scale.doc;

Dear Donnell,

Sure, go ahead. Attached is the RSE scale. Good luck with your research!

Best,  
Hongfei

## Permission to Use the Attitudes toward Women Scale

1/30/2021

Mail - Donnell Butler - Outlook

Thank you for your order with RightsLink / Springer Nature

no-reply@copyright.com <no-reply@copyright.com>

Wed 10/21/2020 6:21 AM

To: Donnell Butler <donnell.butler@waldenu.edu>

 Header

### Thank you for your order!

Dear Donnell Butler,

Thank you for placing your order through Copyright Clearance Center's RightsLink® service.

### Order Summary

Licensee: Walden University  
Order Date: Oct 21, 2020  
Order Number: 4933650214251  
Publication: Bulletin of the Psychonomic Society  
Title: A short version of the Attitudes toward Women Scale (AWS)  
Type of Use: Thesis/Dissertation  
Order Total: 0.00 USD

View or print complete [details](#) of your order and the publisher's terms and conditions.

Sincerely,

Copyright Clearance Center

Tel: +1-855-239-3415 / +1-978-646-2777  
[customercare@copyright.com](mailto:customercare@copyright.com)  
<https://myaccount.copyright.com>



This message (including attachments) is confidential, unless marked otherwise. It is intended for the addressee(s) only. If you are not an intended recipient, please delete it without further distribution and reply to the sender that you have received the message in error.

## Permission to Use The Attitudes Toward Sexual Minorities



RightsLink®

 Home

 Help

 Email Support

 Donnell Butler ▾



### The nature of incoming graduate social work students' attitudes toward sexual minorities

Author: Kim D. Jaffee, , Adrienne B. Dessel, et al

Publication: Journal Of Gay & Lesbian Social Services

Publisher: Taylor & Francis

Date: Oct 1, 2016

*Rights managed by Taylor & Francis*

#### Thesis/Dissertation Reuse Request

Taylor & Francis is pleased to offer reuses of its content for a thesis or dissertation free of charge contingent on resubmission of permission request if work is published.

[BACK](#)

[CLOSE](#)