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# The Intersection of Racial and Sexual Minority Identities for Black Sexual Minority Mothers

LeShaunda Rockett-Dixon  
*Walden University*

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# Walden University

College of Social and Behavioral Health

This is to certify that the doctoral dissertation by

LeShaunda Rockett-Dixon

has been found to be complete and satisfactory in all respects,  
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the review committee have been made.

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Walden University  
2023

Abstract

The Intersection of Racial and Sexual Minority Identities for Black Sexual Minority

Mothers

by

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MA, University of Missouri-Kansas City, 2007

BS, University of Missouri-Kansas City, 2003

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Clinical Social Work

Walden University

November 2023

## Abstract

Black female sexual minority parents hold intersecting minority identities from which they may experience discrimination due to heterosexist and racist social norms. The general problem is the Black lesbian, gay, bisexual, population is invisibly embedded in American society and are tied to sociocultural identities experienced in ways that marginalize and oppress their psychosocial well-being. The purpose of this basic qualitative research study was to improve understanding of Black female sexual minority racial and sexual identity in terms of parenting and social support within the Midwest-Southern areas of the United States. To address this gap, the concept of intersectionality explains how societal dynamics of racial and sexual identities influence parenting social support. Data were gathered through in depth semistructured interviews from 14 Black sexual minority mothers. Themes that emerged through thematic analysis of the data were (a) social acceptance of racial and sexual diversity, b) positive socialization of racial identity vs. sexual identity, and c) support of shared racial and sexual identities. Results indicated participants held positive perceptions of their sexual and racial identities that influenced parenting strategies such as identity management, teaching diversity and advocacy of minority identities. Participants perceived family, community, and religion lacked social support and understanding of their sexual identities. They also perceived support from the Black community as essential, the support of their mothers as salient and the support of their same-sex partners as beneficial to parenting roles and identity development. Understanding the perceptions of underrepresented populations such as Black female sexual minority parents may be necessary to create social change.

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## Dedication

I dedicate this doctoral study to my daughter Amani, my son MJ, and my husband Marcus. To my daughter, Amani, thank you for sharing your life with me, you are the blessing that gave me the strength to always fight the big fight, and never accept anything less. Please continue to be your best self, and pursue your dreams despite any fears, as courage is often not without fear. Love yourself in all the forms God has given you and share it with the world.

To my son, MJ, always be a blessing to yourself and others. Lead the way with love and help others along the way. You are the present that I never thought I could have, my second chance at loving a child, and another person as an image of me. Hold on to your dreams and remember success is in the eye of the beholder.

To my husband, Marcus, every time I felt discouraged thinking of you gave me the strength to keep going. You are the epitome of Corinthians 1:13 “Love is patient, love is kind. It does not envy, it does not boast, it is not proud. It does not dishonor others, it is not self-seeking, it is not easily angered, and it keeps no record of wrongs.”

You all are truly the wind beneath my wings.

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## Chapter 1: Introduction to the Study

Black sexual minority mothers hold intersecting minority identities from which they may experience discrimination due to heterosexist and racist social norms. Often these social norms intersect to create a unique environment specific to this population. Scholars have written about intersectionality (Heard Harvey & Ricard, 2018; Moradi & Grzanka, 2017) and multiple minority identities (Cyrus, 2017; McNair, 2017; Nair et al., 2019); however, few studies examined Black sexual minority parents who reside in Midwest-Southern regions of the United States. I conducted a study on Black sexual minority mothers' perceptions of how racial and sexual identities influenced their parenting and social support.

### **Background of the Study**

There is an underrepresentation of Black sexual minority women in research. Most research on the female sexual minority population is predominantly White middle-class women encompassing the idealistic view of more egalitarian roles in lesbian relationships (Majied, 2013; Moore, 2008, 2011b; Pastrana, 2016). Although the Black culture relies on extended family support (Stack, 1974), there are few studies on the Black sexual minority community, their family interaction, and fewer on the dynamics of Black sexual minority women who are parents (Biblarz & Savci, 2010; Cyrus, 2017; Glymph, 2015; Nadal, 2019; Pastrana, 2016; Radis & Sands, 2020). Studies are needed on sexual minority women of color in roles such as parenting in blended families, adoptive mothers, bio-mothers, and motherhood through the same-sex dynamic, which are essential roles for sexual minority women, their families, and community (Moore,

2011a). To fill this gap, I explored Black sexual minority women's perception of navigating multiple minority identities and how it influenced their parenting.

Awareness of the circumstances involved in family formation and sexual reproductive health disparities of Black sexual minority women may strengthen treatment approaches and social service outcomes. Frequently when Black sexual minority women seek treatment services, they find that practitioners are not competent with challenges related to compounding identities (Rosenthal & Lobel, 2016). Without taking a holistic identity approach, social practitioners may find themselves misunderstanding the types of treatment necessary to adequately serve this population and time is consumed with ineffective resources (Crenshaw, 1991; Velez et al., 2019). For example, Black women as a racial group disproportionately experience high rates of adverse sexual and reproductive health (Rosenthal & Lobel, 2016). This health disparity may be due to high rates of discriminatory stress and other societal microaggressions. Furthermore, Black sexual minorities face adversities in family formation with lower rates of same-sex marriage, which may impact their socioeconomic well-being (Gates, 2015; Lee, 2018).

In addition to these health disparities, for Black sexual minority women, having accessible formal social services that understand the dynamics of racial and sexual identities is scarce. This scarcity often results in racial-ethnic sexual minority women's dependence on family and community social support systems (Brennan-Ing et al., 2014; Glass & Few-Demo, 2013). However, dependency on family and community may be daunting due to Black homophobia manifested through familial internalized racism, religion, and sexism (Bowleg, 2008; Hill, 2013). Family support is critical for developing

a healthy same-sex orientation in a heteronormative society (Ryan, 2010). Future research on Black lesbians is needed to examine the viability of including family members in clinical treatment, engaging family members' acceptance of Black lesbian sexual orientation, integrating multiple identities, and implementing evidence-based interventions (Follins et al., 2014). Family support and acceptance may be vital for Black sexual minority parents, particularly when navigating multiple minority identities.

Exploring the growing number of Black sexual minority parents is valuable to understanding the strengths and challenges unique to racial-ethnic sexual minority parents. These challenges cannot be understood solely through examining White-middle class sexual minorities or heteronormative parenting experiences. For example, Black female sexual minorities, compared to White female sexual minorities, are less likely to get tested for HIV, have significant discomfort with medical institutions, and experience lower acceptance of open same-sex behaviors within their community (Institute of Medicine, 2011). Furthermore, research suggests Black single mothers are vulnerable to clinical depression (Atkins, 2017). But it is unknown if this research extends to Black female sexual minority parents residing in Midwest-Southern regions of the United States who may endure intersecting racial and heteronormative parenting expectations. Further sociocultural ties regarding both their racial and sexual identities must be considered when providing treatment services, providing advocacy, and making sociopolitical decisions regarding this population. Marginalization of this racial and sexual minority population by society, their families, or communities may interfere with their psychological well-being, inhibiting their ability to parent their children effectively.

Understanding Black sexual minority women's racial and sexual identities is imperative in establishing competent social support inclusive of parenting and other family dynamics.

### **Problem Statement**

Evidence suggests within one decade from 1990–2000; Black lesbian parenting increased 300% more than any other ethnicity and sexual minority population (Williams Institute, 2011). This growth indicated the need to examine Black sexual minority parenting experiences to develop supportive interventions and treatment services relevant to this population (Mezey, 2012; Pastrana, 2016; Svab, 2007). Black female sexual minorities who generally experience discrimination and other forms of oppression need competent treatment options, particularly when rejected by their natural support groups.

Previous research on Black female sexual minority parenting may not transfer to parenting experiences in unique sociocultural environments. There is a lack of research on LGBTQ+ populations residing in Midwest-Southern regions of the United States and even fewer on Black sexual minorities (Park et al., 2020; Walsh, 2016). The Midwest-Southern areas of the United States tend to be more politically, socially, and religiously conservative, with fewer resources for sexual minority populations (Park et al., 2020; Sivadon et al., 2014; Wu et al., 2017). Socially conservative environmental stressors may also place Black sexual minorities in this region at an even higher risk of developing negative coping skills than other LGBTQ+ subpopulations (Whitfield et al., 2014).

The general problem is the Black lesbian, gay, bisexual, and transgender population is invisibly embedded in American society and are tied to sociocultural



identities experienced in ways that marginalize and oppress their psychosocial well-being (Cyrus, 2017; Fedewa et al., 2015; Svab & Kuhar, 2014; Wilson, 2009). Studies show that minority psychosocial stress increases the risk of mental disorders such as substance abuse, mood disorders, and maladaptive behaviors (Cochran et al., 2003; Cyrus, 2017; English et al., 2018; Gilman et al., 2001). Specifically, Black sexual minority women have reported higher psychiatric distress and substance abuse symptoms (Calabrese et al., 2015). When social practitioners lack understanding of oppression in populations with multiple minority identities, their treatment needs may go unmet, perpetuating adverse psychological conditions (Crenshaw, 1991; Velez et al., 2019).

Trends in mental health disparities indicate the need for social practitioners to understand how Black female sexual minority parents perceive their multiple minority identities. Understanding the risk and resilience factors of intersecting minority identities may reduce the marginalization of this population, enhance their treatment services, and reduce ethnic division to promote social justice. Furthermore, information regarding this population may be beneficial to other racial-ethnic sexual minorities seeking competent social services.

### **Purpose of the Study**

The purpose of this basic qualitative research study was to improve understanding of Black female sexual minority racial and sexual identity in terms of parenting within the Midwest-Southern areas of the United States. To address this gap, I explored Black sexual minority women's perceptions of how their racial and sexual identities influence their parenting and support systems. This study promotes sociocultural awareness of

Black sexual minority women's parenting experiences and racial-ethnic diversity within scholarly literature.

### **Research Questions**

Research question (RQ) 1: How do Black sexual minority mothers in the Midwest-Southern regions of the United States perceive racial and sexual identity as influencing their parenting?

RQ 2: How do Black sexual minority mothers in the Midwest-Southern regions of the United States perceive their social support system?

### **Conceptual Framework**

This study's conceptual framework guided the exploration of Black female sexual minority parents' perceptions of support of their racial and sexual minority identities. The concept of intersectionality (Crenshaw, 1995) explains Black sexual minority women's navigation of Black racial identity development (Helms, 1995), lesbian identity formation (McCarn & Fassinger, 1996), and social support (Antonucci & Akiyanna, 1995; Kahn & Antonucci, 1980). These seminal theories advocate for exploring racial and sexual identities as a social minority status influential to family and community support of Black female sexual minority's psychological well-being.

Historically physical characteristics and race are systemically utilized to wage power and control over individual expression (Collins, 1998; Crenshaw, 1989, 1995). Helms (1990, 1995) sought to change this by identifying four psychological phases a Black person goes through to develop a healthy racial identity. The phases are pre-encounter, encounter, immersion/emersion, and internalization (Helms, 1990). The

emersion phase is most influential; through Black racial socialization in a supportive environment, the individuals' negative perception of their race transforms into self-confidence and an overall positive racial identity (Helms, 1990).

McCarn and Fassinger's (1996) lesbian identity formation model is a two-step process involving sexual identity and group membership development. Sexual identity indicates how the individual perceives their sexual identity absent of outside influences, and group membership is how the individual perceives being considered a social minority (McCarn & Fassinger, 1996). This model illustrates that having a nonheteronormative sexual identity is perceived as subordinate and a minority status. Black sexual minority women experience identity challenges that are separate but equally valuable; however, these challenges' additive impact may fracture their well-being.

In this study convoy model of social relations was also used as a guide for Black sexual minority parents' description and structure based on the importance of social support from their family and community. The convoy model emphasizes the importance of in-depth examinations of an individual's satisfaction with their social support relationships, their perceived adequacy of support, and their support network's structural characteristics (Antonucci & Akiyanna, 1995; Kahn & Antonucci, 1980). Kahn and Antonucci (1980) advocated that social support is essential to individual well-being for its direct contribution and ability to moderate the effects of stress.

The concept of intersectionality Crenshaw (1989) was also applied to understand how these developmental processes and support models interconnect within the Black sexual minority parenting experience. Racial and sexual identity development are integral

to a person's psychological well-being. These concepts explain the challenges of Black sexual minority women who may find themselves redefining their racial and sexual identity to engage in parenting resources.

### **Nature of the Study**

In this study, the basic qualitative approach was used to answer the RQs (Caelli et al., 2003; Merriam & Tisdell, 2015; Sandelowski, 2000). Unlike the quantitative approach, this basic qualitative approach captured the essence of the participants' perceptions to answer the RQs fully. This study's basic qualitative design applied to the constructivist tradition, which focuses on understanding or interpreting the participants' perceptions (Merriam & Tisdell, 2015). This study's key concept was understanding how Black sexual minority women perceive their parenting support through the intersection of their Black racial identity and nonheteronormative sexual identity. The basic qualitative research design supported this study's goal to understand Black sexual minority women's perceptions of how racial and sexual identity influence their parenting experiences.

Using this design, open-ended questions were administered during the semistructured interviews. Convenience purposeful and snowball sampling methods were used to recruit Black sexual minority women from social media and LGBTQ+ organizations. Snowball sampling was utilized to reach other Black sexual minority women through individuals they are familiar with. This recruitment method was vital in this study, mainly because Black sexual minority women are a hard-to-reach population. Semistructured interviews were completed on a sample of 10–15 Black female sexual minority parents located in the Midwest-Southern regions of the United States. Open-

ended questions allowed participants time to respond to the questions and provide in-depth perceptions. This interviewing method promoted in-depth responses to allow self-expression and ideas to emerge from the participants. I managed the data using a qualitative data management/analysis software called Dedoose, and I transcribed the data using rev.com and manually reviewed the transcripts by comparing them to the audio record (Ravitch & Carl, 2020).

### **Definitions**

The following operational definitions were used throughout the study.

*Black:* This term refers to anyone who is categorized as having a Black racial identity, stereotypical Black racial physical characteristics, those who currently identify as African Americans, and other people of color (Sigelman et al., 2005).

*Cisgender:* A term for individuals whose gender matches the sex they were assigned at birth (Broussard et al., 2018).

*Heteronormative:* Heteronormativity refers to the normative environment of heterosexuality (Warner, 1991), the process by which life events constantly reinforce a heterosexual ideology, that is, dichotomous, male-female coupling, with other hegemonic attributes, such as being White, cisgender, able-bodied, affluent, or married (Johnson & Quaye, 2017).

*Heterosexism:* A social system that “denies, denigrates, and stigmatizes any non-heterosexual form of behavior, identity, relationships, or community” (Herek, 1995, p. 321), and, as such, cross-sex couples are privileged over same sex couples (Walsh, 2016).

*Intersectionality:* This concept refers to interconnections between multiple

systems of oppression (Crenshaw, 1991, 1995; Lee, 2018). In this study, I examined how race and sexuality interact to shape multiple dimensions of Black sexual minority women parenting experiences (Crenshaw, 1991). Black sexual minority women at the intersection of race, gender, and sexuality experience of heterosexism and, racism that is qualitatively different than that of other women who do not have multiple minority identities (Crenshaw, 1991). These experiences impact the level of support Black sexual minority women may require from practitioners, their family and community.

*Lesbian:* This is a previously acceptable term to describe female sexual minorities. This term is used in this study when scholars utilized it within their research.

*LGBTQ+ population:* This population includes lesbian, gay, bisexual, transgender (Including genderqueer, gender non-conforming), and queer (Harvard T.H. Chan School of Public Health, 2017).

*Midwest:* In this study Midwest refers to the 12 Midwestern states are the traditional Census Midwest (East North Central and the West North Central states), which includes Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin (U.S. Census Bureau, 2016).

*Parent:* In this study parents refer to an individual raising a child under the age of 18 (Gates, 2013).

*Racial identity:* Racial identity is the part of an individual's self-concept or sense of self related to group membership status and perceptions of that membership.

*Racism:* Racism has created insidious, pervasive, and institutional barriers that

impede the life chances and circumstances of Black people (Hill, 2013). Slavery set the tone for Black people to be treated as inferior. Skin color was and continues to be a badge of difference.

*Sexual minority*: Refers to sexual orientation, sexual minority women refer to cisgender females who hold a minority sexual orientation.

*Social support*: Social support refers to the various forms of help offered to an individual by members of their social circle when experiencing stress (Thoits, 1986).

*Southern*: In this study southern refers to the states Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia, West Virginia, and Delaware. The East South-Central region is composed of Alabama, Kentucky, Mississippi, and Tennessee. The West South-Central region includes Arkansas, Louisiana, Oklahoma, and Texas (U.S. Census Bureau, 2016).

### **Assumptions**

Several assumptions were made in this research study. First, I assumed I would reach saturation level with 10–15 participants and that each participant fully cooperated and provided truthful information about their experiences. I collected data from Black sexual minority women who were members of Facebook groups, LGBTQ+ organizations, and members of Walden student body. Second, I assumed that all the participants were truthful in their identification as Black sexual minority cisgender women who parented children 18 years or younger. Third, I assumed the Black sexual minority women I recruited have experienced racism and/or heterosexism. Fourth, I assumed the participants' race and sexual orientation would impact their parenting

experiences. Fifth, I assumed participants in the Midwestern and Southern regions of the United States have unique experiences versus other areas of the country. Lastly, I assumed Black sexual minority women experienced challenges navigating their nonheteronormative sexual identity within their family and community.

### **Scope and Delimitations**

This study includes Black female sexual minority parents who may have experienced oppression in their race and sexuality. Scholars advocated that Black women experience oppression, unlike any other population (Crenshaw, 1991, 1995). Because of the strength needed to overcome intersecting oppressions, their experiences should be acknowledged and used to advance social equity. There is an underrepresentation of Black sexual minority women in social narratives and scholarly research (Lott, 2017). The overall problem examined in this study is the lack of understanding of Black female sexual minority parents' perception of their racial and sexual minority identities.

This study sample population is sexual minority, cisgender women, who identify as Black or African American, who are parents of children under the age of 18 and reside in Midwestern or Southern areas of the United States. Although they can provide valuable information regarding racial and sexual identities, Black sexual minority women who are not parents are not in this sample. Further, the sample was recruited through social media, creating a potential bias to individuals who do not have access to a computer or use social media.

In most cases, qualitative studies' transferability to other contexts is questionable (Miles et al., 2013). However, this basic qualitative study describes experiences and not



generalized to the broader sexual minority population (Ravitch & Carl, 2020). In some cases, this sample population's experiences may apply to other Black sexual minority women. The exclusionary criteria in this study are Black sexual minorities who identify as transgender. This population was excluded because transgender women may experience their sexual orientation differently due to gender identity and other physical variables. By excluding transgender sexual minorities, sexual minority diversity and the studies transferability to broader sexual minority experiences are limited.

### **Limitations**

One limitation of this study is the sampling method. The purposeful sampling procedure is used to recruit enough participants for saturation due to Black sexual minorities being a hard-to-reach population (Moore, 2011a). However, participants may not represent the broader Black sexual minority population with this sampling procedure. Furthermore, purposeful sampling decreases generalizability of findings. The purposeful sampling methods may also increase researcher bias due to the researcher ultimately selecting the participants for this study.

Another limitation may be researcher transparency. I fully disclosed my race, sex, sexual orientation, and professional attributes to participants. My heterosexuality may have interfered with my ability to build rapport and understand participants. I addressed my biased positionality through prolonged exposure to Black sexual minorities by joining social media groups. In contrast, participants have may found comfort in my identity as a Black woman. I also utilized member-checking and reflexivity to ensure I interpreted participants accurately.

### **Significance of the Study**

The population chosen for this study is significant because Black sexual minority women hold multiple marginalized identities that may experience crises and challenges different from that of White women, Black men, and other populations (Crenshaw, 1991; Hill, 2013). This study generated knowledge about Black sexual minority women's parenting experiences. This knowledge may assist social practitioners to understand potential barriers or challenges this population encounters.

Focusing the study sample on the Midwest-Southern geographical area provides additional insight into the experiences of sexual minority mothers. The U.S. Census shows Black sexual minority women who are parenting tend to live in areas where there is a higher proportion of individuals who identify as Black, such as the South (Gates, 2013a, 2013b; Gates & Cooke, 2011; Kastanis & Gates, 2013). Although Black sexual minority women who are parenting has increased dramatically (Williams Institute, 2011), most studies on Black sexual minorities are conducted on the East and West coast (Walsh, 2016). Because most studies do not represent sexual minorities in socially conservative areas, the results of this study will produce further knowledge of sexual minorities. This knowledge may enhance LGBTQ+ resources in these areas.

As a social worker, I have a responsibility to create positive social change. Through dissemination in presentations or articles, the knowledge gained from this study can enhance the understanding of experiences of Black sexual minority mothers. I utilized this study's findings to make recommendations for resources and supportive services for sexual minority women.

## Summary

The experiences of Black sexual minority women parenting in the Midwest-Southern United States are unique. The experiences with their minority identities may influence their parenting perceptions and social support. In this study, fostering awareness begins with understanding intersections of racial and sexual minority identities and how these identities are systemically associated with forms of oppression (Crenshaw, 1988) as well as how they are presently experienced by Black female sexual minority parents who historically depend on family for support (Moore, 2008; Pastrana, 2016).

This chapter reviewed the background knowledge related to Black sexual minority women, identified the problem, and why it is essential to explore their experiences with intersecting minority identities. This study aimed to improve understanding of Black female sexual minority racial and sexual identity in terms of parenting. The RQs were presented, followed by a review of the conceptual framework Black racial identity, lesbian sexual formation, and convoy support model. Ambiguous terms were defined, and the assumptions, scope, and limitations were discussed. Finally, the significance of population and their geographical location is provided. In the next chapter, the relevant literature is reviewed to provide a foundation for this study.

## Chapter 2: Literature Review

The current literature indicated that among the LGBTQ+ population, Black female sexual minority parenting is rapidly growing (Gates, 2011, 2013a, 2013b). However, few scholars specifically explore Black sexual minority female parents as a population of interest in family formation, family structures, support, and motherhood through same-sex dynamics (Bowleg, 2008; Greene, 2000; Mezey, 2012; Moore, 2011a, 2011b). Black women also hold multiple minority identities that are traditionally regarded singularly without accounting for how they intersect to shape their perception (Johnson & Quaye, 2017; Lemberger-Truelove, 2018; Nadal et al., 2017). Understanding how these identities are navigated is integral in developing strategies to overcome racism and heterosexism (Breshears & Lubbe-De Beer, 2016; Cyrus, 2017; Nadal et al., 2017). I addressed this gap in research by exploring Black sexual minority women's perceptions of how their racial and sexual identities influence their parenting and social support systems. The purpose of this qualitative study was to improve the understanding of Black sexual minority parenting in terms of their racial identity, sexual identity, and the social contexts in which their family and community are supportive of these identities. Understanding how Black female sexual minority perceive their parenting experiences related to racial and sexual identity can improve sociocultural awareness of racial-ethnic individuals with multiple minority identities.

In this chapter, I present literature regarding racial and sexual identities, parenting, and this study's conceptual framework, which includes Black racial identity development, lesbian identity formation, and the convoy social support model. The

concept of intersectionality is utilized to illustrate how social support network and racial and sexual identities intersect to impact Black female sexual minority parenting experiences. The literature review begins with a historical foundation of how racism shaped Black women's racial and sexual identities, then a shift in how minority experiences are analyzed, followed by statistics regarding racial-ethnic sexual minority populations. The following sections address the salience of sexual and racial identity, group membership, community, and family support, identity management, attitudes toward heterosexual and sexual minority parent practices, and finally, Black sexual minority parenting experiences. This literature review will provide the foundational information needed to understand the dynamics of Black female sexual minority parents' racial and sexual identities.

### **Literature Search Strategy**

The search strategy focused on scholarly research related to sexual minority parenting, family support, sexual and racial identities. For each topic, I conducted a multi-database search through Walden University's EBSCOhost research databases. Databases included Academic Search Complete, LGBT Life with Full Text, SocINDEX with Full Text, PsycARTICLES, Psych INFO, and Social Work Abstracts. These databases are comprised of journals containing peer-reviewed articles based on social, behavioral, and psychological studies. I conducted searches based on my consultation with the librarian using three different sets of keywords to include *Black*, *African*, *people of color*, *Black-women*, *ethnic-minority*, *Blacks*, and *women of color*. These terms were consistent in each database search applied in conjunction with the following keywords:

*parenting, same-sex parenting, Black-mothers, parent\* OR parent & child OR parent attitudes, social support, the convoy model, family support, community support, support systems, social networks, support networks, lesbian, LGBT, sexual minority identity, gender identity, heterosexism, homophobia, same-sex, homosexual, intersectionality, minority lesbians, sexual minorities, gay, and sex roles.*

### **Conceptual Framework**

This study's conceptual framework is a lens for understanding Black female sexual minority parents' identity development and the contexts in which their family and community provide support. Black racial identity development (Helms, 1995) and lesbian identity formation (McCarn & Fassinger, 1996) are presented to interpret the identity developmental processes a Black sexual minority woman can encounter. The convoy social support theory (Kahn & Antonucci, 1980) is used to interpret the Black female sexual minority perception of social support provided by her family and community. The concept of intersectionality (Crenshaw, 1988, 1989, 1991) connects these theories to illustrate how multiple stigmatized identities intersect to impact Black sexual minority women's parenting experiences and their perceived need for support.

### **Black Racial Identity Development**

The Black racial identity development model was applied in this study to understand the interpersonal relationship between Black sexual minority women parents and their racial-ethnic minority identity. Black racial identity theory explains the implications of racial minority-group membership and individuals' psychological perception of this group membership (Helms, 1990). Black racial identity theory was

developed to interpret racial identity in the context of behavioral psychology (Cross, 1971; Helms, 1990), not limiting racial identity to physical characteristics but expanding it to individuals' psychological experiences within that racial group (Cross et al., 1991; Helms, 1990, 1995). For example, research on racial-ethnic minorities focused on sociopolitical issues such as education accessibility, racial segregation, and voting laws, not placing merit on the mental, emotional, and physical well-being of racial-ethnic minorities (Helms, 1990). As a result, social practitioners often disregarded the possibility that racial-ethnic minorities' behaviors can be socially influenced by racism (Helms, 1995). Black women as racial-ethnic sexual minorities experience many challenges related to heterosexism. However, these challenges may be overwhelming when it interferes with their family and community support.

Helms (1986) modified Cross's (1971, 1978) original five-stage Black racial identity development model into four stages pre-encounter, encounter, immersion/emersion, and internalization. Helms advised that each stage is bimodal to include individual personal identity and the reference group. Each stage defines characteristics indicative of positive or negative coping skills affecting the individuals overall inter and intrapersonal well-being. Comparatively, the pre-encounter stage is the most maladaptive and unhealthy, followed by encounter, immersion/emersion, and the internalization stage illustrating the most adaptive and healthy racial identity development (Cross, 1971; Cross et al., 1991; Helms, 1984, 1986, 1989, 1990). Helms (1990) advised that Black female sexual minority parents within the internalization stage have the healthiest self-identity, which may provide emotional stability when they are

conflicted with their sexual minority identity.

The pre-encounter stage has an active and passive mode. Black individuals in the active mode are characterized by an absence of an internal self-view or ascribed racial identity and open rejection of Black culture (Helms, 1990). They disregard any physical evidence pointing to association with the Black race and separates their personal self-identity from racial characteristics such as skin color and hair texture (Helms, 1990). The individual has a poor self-concept, low self-esteem, high anxiety, and depression (Parham & Helms, 1985). This person may have significant cognitive dissonance or stress due to constant conflict between the interpretation of their personal identity and the denial of a racial identity. Black individuals in the passive mode typically have a healthier identity than Black individuals in the active mode. They are characterized by being highly motivated to be accepted by White culture and believe only their personal individual efforts are needed (Helms, 1990). They lead their lives in ways thought to be accepted by the White culture; they accept negative Black stereotypes and embrace positive White stereotypes (Helms, 1990). This individual is consciously unaware of these beliefs and is in active denial (Helms, 1990). Their goal is to maintain a healthy perception and embrace fictional racial equality despite any evidence that proves otherwise.

The encounter stage is the next phase of Black identity development. Helms (1990) advised this phase begins with one or a series of racially motivated crises that permeate the individuals' psyche and forces the individual to confront irrational beliefs of White grandiosity. The individual is overwhelmed by the reality that Whites may never accept the individual into their culture (Helms, 1990). The individual now perceives



themselves as an inferior Black person (Cross, 1971; Helms, 1990). Although the individual may fluctuate between the pre-encounter and encounter stage, they are aware that their previous White world view is not viable and contemplates the rigorous task of developing an ascribed racial identity (Carter & Helms, 1987; Helms, 1990). Their mental and emotional perceptions range from uncertainty, confusion, hopelessness and anxiety, depression, and anger (Helms, 1990). These negative perceptions transform into positive ones due to a newfound ability to relate to other Black individuals and develop their identity (Parham & Helms, 1985). The individual is cognitively aware that their own racial identity exists, makes the conscious decision to develop it, and is highly motivated to do so (Cross, 1971, 1978; Helms, 1990).

The next stage, immersion/emersion, is characterized by the individuals' psychological and physical attachment to the Black minority group (Helms, 1990). Immersion is symbolized by the individuals' obsession with developing their ascribed identity (Helms, 1990). The behaviors are stereotypical because the person has a preconceived notion of how Black people think, feel, and behave (Helms, 1990). Hostility develops from an internalized awareness of derogatory beliefs about their self-worth (Cross et al., 1991). The individual believes that White people are the root of these negative perceptions and blames them for racial oppression (Helms, 1990). Next, emersion is symbolized by transformation into a positive perception of Black racial identity. Through racial socialization, the person withdraws from the cognitive dissonance they acquired in the pre-encounter stage and finds balance in their positive racial identity (Helms, 1990). Within the supportive environment of other people of

color, racial attributes not limited to having melanated skin, a strong sense of racial community, Black pride, and Black girl magic are instilled and held at a high standard. The individual then evolves and emerges confident in their Black racial identity (Franklin & Jackson, 1990; Helms, 1990). The individual can critically think about Black experiences separately from other races and objectively examine the Black race, its group members, and other races.

The final stage of Black racial identity is internalization. Individuals in this phase are characterized by the cognitive development of a positive ethnological ipseity or a positive outlook when comparing themselves to other individuals' personal characteristics (Cross, 1971; Helms, 1990, 1995). Aspects of these positive developments are (a) the individual accepts the Black racial identity as a part of themselves and coordinates it with other personal identities, (b) the individual recognizes similarities and what makes them unique within their culture, (c) the individual has renegotiated their view of the White racial group, can establish relationships with them, and respects their strengths and weaknesses, (d) and the individual has reached maturation where all individuals are accepted without preconceived racial discrimination and oppression (Cross, 1971; Helms, 1990, 1995). Unlike previous stages, the individual has an internalized commitment to their racial identity and possesses the ability to think subjectively and objectively about racial issues (Helms, 1990, 1995). Thus, the individual realizes that discrimination against other marginalized groups will only perpetuate racism, a form of prejudice the Black culture has so diligently advocated against.

Similar to the lesbian identity model, the Black racial identity model emphasizes

that socialization with other group members is integral in valuing shared cultural characteristics and acquiring a positive minority identity (Helms, 1990; McCarn & Fassinger, 1996). Research suggests that family and community not only promote healthy racial identity but may be significant sources of strength and resilience for Black sexual minority identity (Bowleg et al., 2004; Brown, 2008; Follins et al., 2014; Fukuyama & Ferguson, 2000; Pastrana, 2016). Although it is ambiguous to what degree racial identity development correlates with sexual identity development, the literature suggests socialization regarding racial issues may prepare Black sexual minority parents to overcome marginalization associated with their sexual identity (Bowleg et al., 2003; Follins, 2011; Follins, et al., 2014; Greene, 2000; Parks et al., 2004). For Black sexual minority women, their support system may compensate for not encountering positive socialization from other sexual minorities.

### **Lesbian Identity Formation**

Within the LGBTQ+ population, Black sexual minorities are unique because they develop an additional minority status based on their same-sex orientation. McCarn and Fassingers' (1996) lesbian identity formation model emphasizes that two psychological developmental processes occur within the individual: individual sexual identity and group membership identity. The individual sexual identity is the process that sexual minority women encounter as they formulate their lesbian sexual identity and group membership identity is the process of recognizing their minority status (McCarn & Fassinger, 1996). This model illustrates how sexual identity is internalized separately from the minority identity; however, the experiences related to these identities may be perceived in

connection to each other. Thus, Black sexual minority women cannot take away their sexual identity to only experience its socially constructed minority status. Knowledge of each identity developmental process is vital to understanding the context of multiple minority identities Black sexual minority women hold. McCarn and Fassinger advised although research is scarce regarding racial-ethnic lesbians and gay individuals, they face unique challenges of invisibility and discrimination within the LGBTQ+ communities.

The lesbian identity formation builds from two seminal identity models, racial identity development (Cross, 1971,1978) and homosexual identity formation (Cass, 1979). Racial identity formation is one of the first models to formulate identity development progression on a continuum from devaluation to affirmation, followed by homosexual identity formation. The lesbian identity formation model illustrates a similar progression; however, it differentiates in that the developmental phases are fluid and may be revisited within every new social context. In addition, the lesbian identity formation model does not articulate disclosure of sexual orientation with healthy development or advancement but as the individual's choice in the context of their environment (McCarn & Fassinger, 1996).

This models' individual sexual identity developmental process is based on the homosexual identity formation model (Cass, 1979). It illustrates four phases of development: (a) awareness, (b) exploration, (c) deepening/commitment, and (d) internalization/synthesis (McCarn & Fassinger, 1996). Beginning with the awareness phase, the individual recognizes a same-sex orientation is present and acknowledges their attitudes and preferences are different than heteronormative expectations (McCarn &

Fassinger, 1996). In the exploration phase, their emotional, physical, and mental attraction to other women is scrutinized and interpreted (McCarn & Fassinger, 1996). In the awareness and exploration phases, the individual focuses on their internal attitudes associated with same-sex orientation; however, their perception of the lesbian minority status is not addressed.

The deepening/commitment phase implies that human sexual orientation is fluid and can exist on a spectrum. McCarn and Fassinger (1996) argued that although individuals in this phase are attracted to women, they may see the attraction to women as one choice among others and choose to identify with bisexual or decide to favor men as sexual partners. Within this decision process, the individual develops a commitment to the desire for other women, a commitment to self-fulfillment, and a deeper self-actualization (McCarn & Fassinger, 1996). Once the individual's physical attraction to women and personal identity are integrated, their commitment to the lesbian sexual identity is self-actualized (McCarn & Fassinger, 1996). Their commitment to the lesbian identity may intersect with heteronormative socialization practices and heterosexism within their social environment (McCarn & Fassinger, 1996). At this intersection, the individual may present with anger and sadness due to the conflict between commitment to self-fulfillment and heteronormative expectations (McCarn & Fassinger, 1996). In this phase, heteronormative expectations of friends, family, community, and other social circles may provoke a sense of self-differentiation, causing the individual to address their lesbian minority group membership identity.

The internalization/synthesis is the final phase in individual sexual identity

development. The individual has now resolved many issues related to the lesbian identity and has acquired an unwavering acceptance of their lesbian identity (McCarn & Fassinger, 1996). This acceptance may help sexual minority women manage their sexual identity in terms of who and to what extent they disclose their same-sex orientation. Although this is the final phase, the lesbian identity formation model entails a second psychological process. McCarn and Fassinger (1996) advised that group membership identity is necessary for the individuals' conceptualization of their social status as a lesbian minority. This identity assists in addressing homophobia and the social contexts in which heterosexism is socialized. Black women holding an additional minority identity may provoke challenges that are unique to any internalized racism within their families and communities.

### **Lesbian Group Membership Identity**

The group membership identity development model is derived from racial-ethnic identity models (Cross, 1971; Helms, 1990). It focuses on the context in which lesbians perceive their minority status (McCarn & Fassinger, 1996). This model exemplifies four phases, awareness, exploration, deepening/commitment, and internalization/synthesis. The awareness phase involves the individuals' understanding that other sexual orientations and sexual preferences exist outside of their heteronormative socialization (McCarn & Fassinger, 1996). They acknowledge psychosocial stimuli such as religion and family may have influenced them to normalize heterosexual roles and to believe that homogendered sexual preferences and family structures are abnormal. In the exploration phase, the individual actively pursues knowledge of the lesbian identity and their new

lesbian group membership (McCarn & Fassinger, 1996). Similar to the encounter stage in Black racial identity development (Helms, 1990), in this phase, the individual's response to discrimination is anger and guilt. This negative effect is due to being socially manipulated to hold heteronormative assumptions (McCarn & Fassinger, 1996). The exploration phase can be daunting, particularly for sexual minority women with strong heterosexists beliefs and external influences such as family who reinforce homophobia.

In the deepening/commitment phase, the individual develops an internal awareness that the LGBTQ+ population represents freedom of sexuality and challenges social norms. Like the immersion/emersion stage (Helms, 1990), the individual transforms by creating a personal connection to the lesbian minority group. Within this process of connecting, the individual rejects heterosexual membership and accepts the social challenges of having the lesbian identity (Cross, 1971; Helms, 1990; McCarn & Fassinger, 1996). Similar to the interpersonal benefits of racial socialization, positive socialization with other sexual minorities will rectify the individuals' uncertainties and negative emotions regarding their sexual minority identity.

Internalization/synthesis is the final phase. The individual has gained an intrinsic sense of self and manages their sexual minority identity across contexts. In addition, the person has triumphed through a series of self-reflections to develop an awareness of the social disparities that accompany their individual sexual identity and group membership identity (McCarn & Fassinger, 1996). McCarn and Fassinger advised, "she will have traversed the path from rage, anxiety, insecurity, and rhetoric into directed anger, dedication, and self-love as a lesbian woman" (p. 525). The internalization/synthesis

phase calls for racial-ethnic minorities to integrate a sexual minority identity into their self-concept, which may exacerbate previous forms of prejudice and develop unfamiliar forms of oppression. Navigating the experiences related to prejudice and oppression may be cumbersome, particularly for Black women who do not have the social support of their family and community.

### **Kahn and Antonucci's Convoy Social Support Model**

Social Support is an integral part of a healthy identity, particularly for racial-ethnic sexual minorities subjected to stigma related to their racial and sexual identities (Frost et al., 2016). In my study, Kahn and Antonucci's (1980) convoy model of social relations is applied to explore Black sexual minority women parenting support from family and community during various stages of their racial and sexual identity development. Support networks are defined as a social convoy that is related to circumstances in various stages during a person's life (Kahn & Antonucci, 1980), family and friends in networks of support (Lawton & Moss, 1987), a social network of relations (Schulz & Rau, 1985), and instrumental and informational social support (Dorsey et al., 1999). The convoy model has been applied in research on attachment, community, older LGBTQ+ individuals, parenting, family caregiving, mental health, social support in cultures and women support networks (e.g., Antonucci et al., 2004; Berges et al., 2006; Hough et al., 2005; Kimmel, 2015; McAuley, 2001; Sims-Gould & Martin-Matthews, 2007; Walker & Pratt, 1991). The persons' perception of social support received is contingent upon their specific needs and relationship contexts not limited to parent-child, siblings, or shared cultural spaces during a phase in their life.



Kahn and Antonucci (1980) define the convoy model of social relations as social support structures, including family, friends, and others in which interpersonal transactions of affect, affirmation, and aid are given and received throughout the lifespan. Thus, understanding significant changes throughout an individual's life is essential in determining the necessary level, extent, and nature of social support required (Kahn & Antonucci, 1980). Families are significant because they provide emotional support, assistance, advice, friendship, caregiving and greatly influence an individual's wellbeing throughout their life (Antonucci & Akiyama, 1987). Although the family is important, membership in the convoy transcends primary relationship connections and is contingent on people who are important to the individual in terms of support. A function of social support is to act as a sanctuary for life's external stressors (Kahn & Antonucci, 1980), and is best observed in challenging situations such as disclosing one's same-sex orientation, discrimination, and parenthood.

The convoy model displays supportive relationships within an individuals' social network as concentric circles (Kahn & Antonucci, 1980). Relationships within the circle are arranged according to the level of attachment and importance to the individual. The first concentric circle may consist of mother, father, spouse, close friends, and family; their roles are the foundation of support, their relationships remain stable over time, and they have the highest level of attachment to the individual (Antonucci & Akiyama, 1987; Kahn & Antonucci, 1980). The second concentric circle may consist of extended family, friends, or a person's neighborhood: their roles go beyond the minimum requirements, and their roles have a moderate level of attachment to the individual (Kahn & Antonucci,

1980). The third circle consists of group affiliation, and the support is contingent upon the individual's connection to that specific group or organization (Antonucci & Akiyama, 1987). Oftentimes, family and extended family members are in the first and second concentric circles, meaning they are the most important, and directly influence the level of support the individual anticipates (Antonucci & Akiyama, 1987).

With respect to the convoy model, the benefits of family and community support may be similar to the benefits of group socialization within the Black racial identity (Helms, 1990) and lesbian identity formation (McCarn & Fassinger, 1996) models. Scholars have agreed that a family and community that supports minority identities may foster individualism, positive self-efficacy and promotes psychological wellbeing (Akerlund & Cheung, 2000; Coard et al., 2001; Goldberg & Smith, 2008; Kavanaugh et al., 2019; Pastrana, 2016; Swendener & Woodell, 2017). Collectively, theories in this conceptual framework emphasize the benefits that positive interactions between individuals with shared social experiences have on identity development and personal wellbeing (McKimmie et al., 2019). These benefits include but are not limited to positive self-identity, decreased stress, life satisfaction, higher development levels, and increased mortality (Helms, 1990; Kahn & Antonucci, 1980; McCarn & Fassinger, 1996). Thus, support from family and community may directly influence how racial-ethnic sexual minorities perceive parenting their children in terms of heterosexism and racism.

### **Intersectionality**

Finally, the conceptual framework draws on the concept of intersectionality (Crenshaw, 1989, 1991) to identify how dual minority identities impact Black sexual

minority women. This concept suggests it is contraindicative to explore minority experiences as separate, solitary, or additive entities (Cho et al., 2013; Crenshaw, 1989, 1991) while bringing meaning to complex realities that may otherwise never be explored. Thus, a Black sexual minority cannot experience racial identity separate from their sexual identity; separating them may further oppress the person by not providing a holistic view.

Furthermore, Greenwood (2008) advised that one of the necessary tenets of the intersectional approach is for the research to have a historical basis because it illustrates broader systemic power structures. For this reason, a historical overview of Black women's stereotypes and identities is reviewed in this literature review. Beale (1971) "Double Jeopardy" and Collins (1990) "Black Feminist Thought" are two seminal scholars who emphasized that intersections of race, gender, and sexuality are significant in the social structures of dominance and control of racial-ethnic minority women. Beale passionately describes the socio-psychological process of being Black and a woman within America. Suggesting that demoralization of the Black woman's racial and gender identity has perpetuated the degradation of Black minority identities for years to come (Beale, 1971, 2008). Black sexual minority women who parent cannot disregard their racial identity to only experience their sexual identity; these experiences are intertwined to shape their reality, who they are, and the support needed to survive the world around them.

The focus of this study is to explore the perceptions of Black sexual minority women racial and sexual identities and its influence on their parenting. Racial identity models (Cross, 1971; Helms, 1990), homosexual identity formation (Cass, 1979), and the

lesbian identity formation model (McCarn & Fassinger, 1996) all acknowledge the psychological process of developing a minority identity. These models infer that developing a healthy minority identity requires positive socialization with other members who share that identity (Cass, 1979; Cross, 1971; Helms, 1990; McCarn & Fassinger, 1996).

Similarly, the social identity theory predicts, for Black minorities, closer identification with their racial group correlates with positive group perception (Jill & Hughes, 2017). Additionally, because Black individuals hold numerous minority identities, they gain a greater sense of connection and quality of life for positively identifying with other group members (Jill & Hughes, 2017). Black cisgender women embracing their sexual minority identity can prove to be a daunting task, particularly in the absence of social support networks that value the expression of their sexual identity.

## **Literature Review**

### **Historical Context of Black Women's Racial and Sexual Identities**

Black women hold identities that historically have been dehumanized and viewed as subordinate. The Statistical Abstract of the United States (2012) reported that Black females now make up 42,513,000 of America's African diasporic population. They share a common Black racial and cultural experience; however, they also have a wide variety of customary beliefs and characteristic traditions that should not be generalized into one identity (Greene, 2000; Hill, 2013). During enslavement, Black women were stripped of their unique tribal and linguistic differences as well as any historical or textual means to self-identify (Greene, 2000; Hill, 2013; Schocker & Woyshner, 2013). Historians and

educators who extensively researched Black women's identity and customs prior to African enslavement suggest they once held identities of great power and influence however, these identities are not communicated in most social and educational narratives (Glymph, 2015; Hill, 2013; Law, 2018; O'Keefe et al., 2015; Schocker & Woysner, 2013). Like heterosexist narratives and agendas, the dehumanization of Black women was used to assert power, control, and White patriarchal hegemony in the United States.

Through derogatory narratives of Europeans and enslavement, Black women were stripped of holding identities based on affluent women of power, activism, and intelligence. Instead, social perceptions of Black women's identities are based on distorted negative stereotypes resulting in the psychosocial deterioration of their personal self-worth (Beale, 2008; Collins, 1986, 1990, 1996; Rollins, 1991). Stereotypes are defined as "beliefs regarding characteristics, attributes, and behaviors of members of certain groups" (Hilton & VonHippel, 1996, p. 240), which are integral in developing group identities. Oftentimes, stereotypes of Black women are derived from the sexual exploitation and victimization of African female slaves (Gines, 2015; Greene, 2000). Centuries of demoralizing indoctrination through media and educational institutions exacerbated racialized representations of Black women. For example, when Black women expressed their sexuality, they were often viewed as promiscuous sex objects that were blameworthy of sexual violence (Bowleg et al., 2015; Mackenzie & Brooks, 2018; Watson et al., 2019). Through stereotypes, positive identities for the Black woman have been systematically negated, making it challenging to create and maintain spaces conducive to their psychological advancement.

Furthermore, women's overall devaluation as participants in American society added a different dynamic to being Black and a woman (Greene, 2000; Hill, 2013). For example, even in specific gender roles such as wives, mothers, and teacher's Black womanhood were devalued and placed subordinate to other women in American society (Bowleg, 2008; Collins, 1986, 2000a; Gines, 2015; Greene, 2000; Watson et al., 2019). Truths' (1851) women convention speech titled "Ain't I A Woman?" recaptures Black women's subordinate treatment compared to other women in America:

That man over there says that women need to be helped into carriages, and lifted over ditches, and to have the best place everywhere. Nobody ever helps me into carriages, or over mud-puddles, or gives me any best place! And ain't I a woman.  
(Truth, 1851)

The degradation of Black women's racial and sexual identities may provoke their self-perception. Through women of colors underrepresentation in feminist and civil rights movements of the '60s, preexisting stereotypes such as jezebel, the mammy, and Black lady were further perpetuated (Alinia, 2015; Collins, 2004; Gines, 2015; Lott, 2017). Advocacy of their personal racial and sexual identities was subordinate and solely dependent on the advancement of Black males who dominated the civil rights movements and White middle-class individuals who dominated LGBTQ+ feminist movements (Beale, 2008; Crenshaw, 1991; Lott, 2017; Moore, 2011a, 2011b). This discourse in activism perpetuated narratives where aspects of Black racial identity focused on Black men and lesbian sexual identity focused on White women (Adams & Lott, 2019, 2021), and Black women viewed as agents of change were systemically reduced. This

invisibility may have exacerbated the social oppression of Black women who endure compounding disparities rooted in institutions of gendered-racism, heterosexism, and homonegativity. Thus, Black sexual minority women are forced to depend on their self-ascribed value, positive micro-racial and sexual socialization, and social support networks for healthy racial and sexual identity development.

### **A Shift in Literature on Black Women**

In the 1980s, when scholars (Collins, 1986; Lorde, 1984) began to provide literary platforms for Black women's self-expression, a shift in how researchers conceptualized social implications inherent to racial-ethnic minority women identities were formed (Bowleg, 2008, 2012; Collins, 1994; Crenshaw, 1988, 1989). This shift provoked the transformation of narratives involving marginalized groups of people from a sociopathological perspective to a strengths-based perspective, valuing their authentic expression (Cross, 1971; Helms, 1990; Parham & Helms, 1985). Research on Black women, the salience of their racial, sexual, and gendered identities is becoming more prominent (Jones & Day, 2018). This social change is vital in the advocacy of research to be inclusive of racial-ethnic sexual minority populations. Next, I review racial-ethnic parenting statistics to validate the rationale for studying this invisible population.

### **Racial-Ethnic Sexual Minority Parenting Statistics**

Racial-ethnic sexual minority population trends suggest social work practitioners need to be knowledgeable of nonwhite nonheteronormative parenting experiences. Data compiled from the American Community Survey shows that parenting amongst racial-ethnic sexual minorities is prevalent within the LGBT population (Gates, 2011, 2013b).

As evidenced by racial-ethnic same-sex couples raising biological, step, or adopted child, at thirty-three percent compared to eighteen percent of White same-sex couples (Gates, 2013b, p. 4; Gates, 2017). Amongst racial-ethnic minorities, Black sexual minorities are parenting at twelve percent compared to eight percent of Black heterosexuals, and Latino/a sexual minorities are parenting at fifteen percent compared to nineteen percent of Latino/a heterosexuals (Gates, 2015, p. 6). Although Latina heterosexuals are parenting at a high rate, Black individuals are the majority amongst sexual minority parents. These statistics emphasize the misnomer in primarily examining White parenting structures as a means to advance social practitioners' competency in working with families of color (Karpman et al., 2018; Mezey, 2012; Pastrana, 2016; Svab, 2007). Thus, exploration of Black sexual minority parenting experiences contributes to the existing body of knowledge on nonheteronormative family dynamics.

Black female sexual minority women in parenting roles are growing and redefining perceptions of parenting family structures. This study will examine Black female sexual minority parents who have a biological, adopted, or stepchild in Midwestern and Southern geographical areas. These areas were chosen due to most studies examining Black sexual minorities who reside on the East or West Coast of the United States (see, Bowleg, 2008; Bowleg et al., 2003; Brooks, 2017; Moore, 2011a, 2011b; Nadal et al., 2017). However, statistics show that same-sex couples raising children are more likely to be in the Midwest, South, and Mountain West regions of United States (Gates, 2013b), and racial-ethnic female sexual minority parents are more likely to live in socially conservative regions such as Mississippi (Gates, 2013b; Moore &



Brainer, 2013). Additionally, they are more likely to be socioeconomically stressed (Gates, 2013b), which may significantly impact their need for family and community support. Geographical areas that lack LGBTQ+ resources and have more conservative views on open expressions of same-sex relationships may greatly influence the salience of their minority identities and the social context in which they acquire support.

### **Salience of Sexual Identity**

Some lesbians perceive their sexual identity as more salient than their racial identity. Oswald et al. (2005) defined sexual identity as an individual's perception of their sexuality, attraction, or desire for another being, including their sexual roles and behaviors across the lifespan. A Black sexual minority woman in Walsh's (2015) study appeared to reach a level of internalization where she perceived her lesbian sexual identity as encompassing all racial identities; therefore, sexual identity transcends racial differences. However, in individuals where this level of integration is absent, an internal conflict between their racial and sexual identity may occur, resulting in psychological distress (Santos & VanDaalen, 2016). In relation, studies show that minority psychosocial stress increases the risk of mental disorders such as substance abuse, mood disorders, and maladaptive behaviors (Cochran et al., 2003; Cyrus, 2017; Gilman et al., 2001). Thus, it is imperative to aid Black sexual minorities in navigating stressors related to intersections of homophobia and racism.

Although social acceptance of nonheteronormative sexual identities has increased in recent decades, many Black sexual minority women and sexual minority men report experiences of homophobic victimization and discrimination (Nadal et al., 2017).

Generally, homophobia is defined as an irrational fear, hostility, or hatred toward those who love and sexually desire a person of the same-sex (Hill, 2013). LGBTQ+ groups have reported discriminatory experiences resulting in loss of family, employment, religion, and other vital supports critical to their emotional and mental wellbeing (Cochran et al., 2003; Walsh, 2015; Woody, 2014). Heterosexism is maintained and fueled by homophobia (Hill, 2013). Examples of heterosexism are lack of laws that protect LGB individuals from discriminatory practices in the judicial system, the workforce, housing, medical and social services; and often the overlooked verbal and behavioral microaggressions towards nonheteronormative relationships and family structures (Kazyak & Woodell, 2016; Nadal et al., 2017; Wall, 2011).

Homophobia is problematic within Black sexual minority womens' families and communities. In addition, to the participant mentioned above, in Walsh's (2015) study on race and sexuality, twelve women who identified as Black lesbian parents described their sexual identity as more salient due to experiences of homophobia within their family and the Black community. For example, participants perceived discussion of their lesbian identity as taboo and a source of conflict, even more so than sexual behaviors (Walsh, 2015). They further expressed that being invisible as a Black lesbian is just as oppressive as racism (Walsh, 2015). Bowleg et al. (2003) noted that Black lesbians practiced silencing any open verbal communication of their sexual orientation or "don't ask, don't tell" as well as abstaining from open same-sex behaviors in the company of their family or community. Family rejection and silencing may significantly impact internalized homophobia, impacting a person's psychological wellbeing (Ingham et al., 2017), notably

when family support is directly correlated to outness among Black sexual minorities (Pastrana, 2016). Other studies identified “don’t ask, don’t tell” as a double-edged sword; while oppressive, remaining silent may assist Black lesbian parents in maintaining supportive relationships (Hill, 2013; Moore, 2011a). Thus, for Black sexual minority women who parent and depend on their community and family for racial socialization, invisibility also can be a means to gain support.

Racism may go unnoticed when homophobia is prevalent, making sexual identities appear more salient (Steinbugler, 2005). For racial minorities, the effects of racism may go unnoticed, particularly within a homogenous family and community. Meaning, because racism has been a part of Black culture for so long, internalized, systemic, and institutional racism may go unnoticed. Steinbugler (2012) later noted that racism is so systemically embedded in everyday lives that it is often taken for granted and minimized. Thus, generalizing one identity to be more salient than the other is a misnomer, particularly for Black women whose oppressive experiences often intersect, making it difficult to identify whether their racial or sexual identity is to blame.

Although scholarly literature on sexual identity is growing, there remains little exploration on the experiences of Black racial-ethnic sexual minorities (Moore, 2011a, 2011b; Oakley et al., 2017). It appeared for Black sexual minority women’ expression of their sexuality is highly correlated with the level of homophobia experienced in their family and community (Follins et al., 2014; Martinez & Sullivan, 1998; Walsh, 2015). Suggesting that for Black sexual minority women acknowledging their same-sex identity may provoke internal stigma, particularly in a society where nonconforming roles are not

fully embraced, often resulting in social ostracization.

While Black lesbians reported sexuality as more salient, their narratives described homophobic experiences through a racial lens (Walsh, 2015). For example, they expressed sexual discrimination from their Black community further oppressed their racial identity, phrasing discrimination of sexual identity as the new racism (Collins, 2004; Walsh, 2015). These characteristics may invoke a sense of insecurity regarding their relevance within the Black community. Scholars have noted, for people of color in the LGBTQ+ community, where heteronormativity is absent, racial identity is prevalent, and within the Black community, in the absence of racial-heterogeneity, sexual identity is prevailing (Brooks, 2016). Where race and sexuality intersect, there appears to be no happy medium, particularly for an already marginalized group of people.

The importance of an individual's sexual identity may change after becoming aware of their same-sex minority status and the severity of discrimination they experience. Consistent with identity development models (Helms, 1990; McCarn & Fassinger, 1996), the pertinence of racial and sexual identity development is fluid and changes based on individual maturity level and circumstances. Also, as respective obligations and commitments change and identities emerge throughout the course of one's life, social support in the form of affect affirmation and aid may vary (Kahn & Antonucci, 1980). Thus, it appears for racial-ethnic sexual minorities the prevalence of discrimination and other forms of oppression may determine how they manage, assess, and obtain social support networks throughout childhood, adolescence, and adult life.

### **Black Sexual Minority Women and Group Membership**

Research suggests for Black sexual minority women obtaining a sense of belonging or group membership to other minorities may positively impact their psychological wellbeing and life satisfaction (Cacioppo & Patrick, 2008; Swendener & Woodell, 2017; Yap et al., 2011). Jill and Hughes' (2017) quantitative study on 1,090 Black and 5,463 White people measured three dimensions of racial identity, ingroup closeness, ingroup evaluation, and ingroup bias and their association with happiness, positive affect about life, and generalized trust for Black and White people. Based on social identity theory, racial group identification was positively correlated with subjective quality of life based on happiness, positive affect about life, and trust in people (Jill & Hughes, 2017). Black and White individuals differed on racial group identity in that Black individuals more strongly identified with their racial group than Whites (Jill & Hughes, 2017). However, unlike White individuals, Black individuals required a high ingroup racial identification to acquire positive meaning to their identity (Jill & Hughes, 2017). It appears for Black individuals, identification with others who share common traits, culture, and tradition is imperative for happiness and life satisfaction.

Black sexual minority women's connection to individuals with similar interpersonal identities may validate perceptions of their racial and sexual identity. Scholars agree that Black women's social connections to marginalized groups promote an internal resiliency to overcome the social inequalities of gendered racism (Bowleg et al., 2003; Collins, 1994; Cutrona et al., 2000; Lemberger-Truelove, 2018; Moore, 2011b; Rosenthal & Lobel, 2016). Racism and sexism are so systemically entrenched in Black

women's lives that they often experience issues related to parenting, family structures, and formation that cannot be recognized or confirmed by people who do not share similar identities. The convoy model of social support interpreted social networks as safe-havens that buffer life stressors through interpersonal validation (Kahn & Antonucci, 1980).

Thus, Black women are more perceptive to support from individuals with shared racial-gendered identities, which correlates with more desirable outcomes (Davis, 2019; Davis & High, 2017).

Black women create groups or safe havens to voice personal triumphs and failures. Group resources can provide guidelines for managing social interactions associated with gender, sexual orientation, and race (Yap et al., 2011). In Lemberger-Truelove's (2018) phenomenological study on Black women's experiences with belonging and striving for significance. Lemberger-Truelove concluded that Black women identified mentoring other Black women as a resiliency factor in that it provides safe spaces to connect, exchange emotional support, and social skills to develop positive self-identity. Lemberger-Truelove further asserts that Black women often come together as a group for commonality, a deeper connection with others, and support in asserting personal power over their lives. Alternative group affiliation can increase emotional resiliency, racial-esteem, and aid in locating interpersonal connections that support Black sexual minority women's sexual expression.

Alternative sources of support can be amongst relationships in the third concentric circle, with other same-sex couples, female sexual minorities, and mothers, and groups where support is solely based on the individual's ability to affiliate with that specific

group (Kahn & Antonucci, 1980). Although group support is beneficial and may buffer for internalized homophobia; however, the level of support is limited and changes over time (DeMino et al., 2007; Kahn & Antonucci, 1980; Manley et al., 2018). The level of support in the third circle varies and is contingent on the individual's ability to identify and maintain a connection with other sexual minorities, racial minorities, women, and parents. These relationships may be severed in circumstances where the Black female sexual minority parent deviates from certain routines, characteristics, mentalities, mannerisms, and demeanors. The sexual minority parent is obliged to search for alternative places to fulfill their support needs. Black female sexual minority parents may not find sanctuary apart from the private spaces they create and depend more on the foundations of support associated with family within the first concentric circle (Kahn & Antonucci, 1980; Lemberger-Truelove, 2018; Sumontha et al., 2016).

Membership and support within the institution of marriage may be perceived differently by Black sexual minority women. Although in 2015, a federal court ruled the legalization of same-sex marriage in all 50 states (Riskind & Tornello, 2017), Black sexual minorities continue to have lower rates of legalized same-sex marriages (Gates, 2015; Lee, 2018). The disparity in marriage amongst Black sexual minorities may be due to few examples of marriage within the Black community. Lack of marriage within the Black community may be due to the institution of enslavement, which condemned family formation and welfare policies that demote the value of family formation through male cohabitation (Brooks, 2017; Nadasen, 2007). Some Black women in poverty have reported that they choose to not marry to be eligible socioeconomic support from social

services agencies that deny adequate food, cash, and housing benefits on the count of having two parented households (Brooks, 2017). Thus, to Black sexual minority women within the Black community, the institution of marriage may not be socialized as beneficial.

In contrast, the institution of marriage, for other Black sexual minorities, may be a means to connect to their racial community. Scholars argued that Black sexual minorities perceive same-sex marriage as a means to achieve respected partnerships, normalize sexual expression and family formation within their racial community (Brooks, 2017; Lee, 2018). Through marriage, Black sexual minority women can obtain positive regard within their families and communities (Brooks, 2017; Lee, 2018). Marriage may promote acceptable family norms and decrease perceived feelings of discrimination amongst Black sexual minority women (Brooks, 2017). For Black sexual minority women, marriage may not be a means of financial gain but a sense of connectedness and social support from their religious and racial community.

### **Community Support of Racial and Sexual Identity**

Healthy racial identity is promoted through racial socialization within the Black community. Positive racial socialization is most prominent through social support networks of family and community, which increases the prospect of healthy racial identity development (Follins, 2011; Fukuyama & Ferguson, 2000; Helms, 1990; Hill, 2013; Pastrana, 2016; Walsh, 2016). Antonucci and Akiyama (1987) suggested family relationships held within the first circle are more supportive, interactional, and influential to the individual. Although, the Black community has historically supported issues



regarding race and racial identity. Their support of racial identity may not be equivalent to the support of Black women's sexual identities.

Acquiring positive sexual minority socialization through the Black community may prove to be a challenge. This is due to a history of negative perceptions of Black sexual expression, Black women's sexuality, a dominance of racial issues, and homophobia. This lack of positive sexual socialization was communicated in a study conducted in North-Central Florida among Black female sexual minority parents (Walsh, 2015). They voiced appreciation for their children's racial socialization from the Black community; however, their nonheteronormative parenting roles were constantly challenged by members within the Black community (Walsh, 2015). Furthermore, unlike racial identity, many Black people mitigate challenges regarding their sexual minority identity later in life, once they become aware of their sexual minority identity. McCarn and Fassinger (1996) advised that awareness of sexual orientation is the first step in developing a sexual minority identity.

Full awareness of sexual minority identity may not appear until later in life as individuals become aware of their sexual orientation. In Follins (2011) study on identity development, Black lesbian adolescents indicated their awareness of Black racial identity began at ages 2–7 and sexual minority identity at ages 10–17. The awareness of their racial identity started almost a decade earlier than their sexual identity. While few Black sexual minority women develop their same-sex identity during early childhood concurrently with their racial identity, others cannot conceptualize the feelings and social implications that accompany their sexual minority identity until later in life during

adolescent years (Follins, 2011). Once the individual becomes cognitive of their sexual minority identity, they can begin to understand the personal and social implications of having a minority group membership, and the level of support needed can be assessed (McCarn & Fassinger, 1996). Historically, responses from the Black community regarding minority sexual orientation and identity have been negative and taboo. However, some Black sexual minority women reported positive feelings of being connected to their community due to racial and cultural likeness, which they believe rises above homophobic feedback (Walsh, 2016).

In the Black racial community, Black sexual minority women are challenged with choosing between their sexual identity and racial identity. In a study on multiple minority stress and resilience, 16 % of Black sexual minority women participants indicated psychosocial and sociocultural challenges regarding commitment to their sexual minority identity over their racial identity (Bowleg et al., 2003). Participants expressed that because homophobic discrimination is prominent within the Black community, freely expressing their sexual minority identity was perceived as disrespecting their racial identity (Bowleg et al., 2003; Hill, 2013; Walsh, 2016).

Black sexual minority women endure homophobia within the intersections of their racial and sexual identities. Studies on Black sexual minority populations agree prevalence of homophobic discrimination within the Black community is due to the Black culture's strong ties with faith, spirituality, religiosity, and the church (Battle & Lemelle, 2002; Walsh, 2016). For Black individuals, the religious community is a significant source of self-affirmation, wellbeing, and a strategy in overcoming all forms

of adversity; however, sexual diversity is often stigmatized and shunned upon, causing a dual experience of rejection and alienation for Black sexual minority women (Battle & Bennett, 1997; Bennett & Battle, 2001; Bowleg et al., 2003; Follins et al., 2014; Walsh, 2016). Faced with pressure from their Black religious community to reject their sexual identity, many Black sexual minority women reported ambiguity in negotiating their commitment to their lesbian identity over their Black racial identity (Follins, 2011; Morgan, 2017; Patton & Simmons, 2008; Sarno et al., 2015).

In Walsh's (2016) study on the impact of church and community, a Black female sexual minority parent indicated in the early phase of her lesbian identity formation (when sexual identity is most challenged), she endured more prejudice from within her religious family than from the outside community. Further indicating that her family demeaned her parenting by attributing any negative situation involving her children as a punishment from God for being a sexual minority (Walsh, 2016).

Black sexual minority women often navigate community conflicts within the intersections of generalized racial stigma and homophobia. Research on Black community attitudes towards homosexuality suggested many believe when Black minorities hold the LGBTQ+ identity, it exacerbates the demoralization of Black racial identity (Griffin, 2006; Hill, 2013). Oftentimes Black sexual minority women were uncertain whether their stress originated from being Black, a woman, or a sexual minority (Walsh, 2015). A common theme amongst Black sexual minority women subjected to homophobia and heterosexism from their family and community is their inability to experience heterosexism and homophobia in the absence of their racial identity (Velez et

al., 2019). Because more research is needed in this area, one should not assume that the Black community is more homophobic than any other community.

Racism may influence how Black sexual minority women perceive and respond to homophobia within their family and community. Black sexual minority women described their reactions to homophobia within their community as feelings of betrayal and damaging to their Black racial identity (Bowleg, 2008; Bowleg et al., 2003, Miller, 2011). Pastrana (2016) advised that when Black sexual minority women's attachment to and support from their family and community is diminished due to holding a sexual minority identity, an overwhelming sense of isolation may develop (Pastrana, 2016). Furthermore, Black sexual minority women's estrangement from support within the Black community may exacerbate feelings of racism. As a result, the Black woman may perceive the open expression of their sexual minority identity as a sacrifice of valued sociocultural support from their family and racial community.

### **Family Support of Racial and Sexual Identities**

Family support is a significant factor providing human connection, psychological and physical wellbeing. When homophobia presents in the form of a family's unwillingness to accept sexual minority identity, a tumultuous loss of resources occurs (Mays et al., 1998; Pastrana, 2016; Swendener & Woodell, 2017). For example, the paradox of the Black woman losing the family's practical resources is the Black family losing the support and connection to the sexual minority family member (Pastrana, 2016; Swendener & Woodell, 2017). This disconnect can be debilitating because Black women are usually responsible for the household's general manager in terms of caregiving,

teaching, income, and social support (Collins, 2000b). Black women are also usually responsible for connecting social support networks between immediate and extended families. This rejection also results in a loss of pooled resources, loss of supportive advice for gripes, and elderly care. Finally, Black families often have a culture of shared parenting where those who identify as lesbians are needed to provide parenting and childcare to younger siblings, nephews, extended family members, and fictional kinships (Collins, 2000b; Sarkisian & Gerstel, 2004; Stack, 1974; Swendener & Woodell, 2017).

Social support networks are often obtained outside the family of origin, particularly when the individual has not disclosed their same-sex orientation (Bowleg et al., 2003; Follins, 2011; Potoczniak et al., 2009). Bowleg et al. (2003) and Follins (2011) specifically evaluated Black sexual minority women who expressed uncertainty regarding family support of their sexual minority identity. Consistent with other studies, they communicated honor and loyalty to their supportive relationships within their family; however, this support did not encompass their identities as Black sexual minority women and was limited to not openly expressing or discussing their sexual identity (Bowleg et al., 2003; Follins, 2011). For many Black sexual minority women gaining interpersonal support from family to navigate issues related to sexual identity are nonexistent, particularly in families where homophobia is prevalent and lesbian sexual expression is taboo.

Black families are often uncomfortable with supporting sexual expression as compared to racial expression. Scholars agreed that Black sexual minority women families of origin rarely provide the support necessary for complicated social constructs

such as gender identity and sexual orientation (Follins, 2011; Glass & Few-Demo, 2013). Many procured tangible support groups from outside their family of origin in the form of friends, intimate partners, organizations for LGB people of color, internet resources, and Black sexual minority women literature (Bowleg et al., 2003; Follins, 2011). Black sexual minority women expressed the need for greater acceptance and support of their lesbian identity from their family (Bowleg et al., 2003). Resilience is built as Black sexual minority women are often without family support in navigating their sexual minority identity.

Family social networks are integral in the positive socialization of racial identity. Black sexual minority women's families of origin help socialize positive racial esteem to offspring (Pastrana, 2016). Black families also provide practical support with activities such as transportation, household work, and childcare (Pastrana, 2016; Sarkisian & Gerstel, 2004). Thus, when a Black sexual minority endures family rejection, it may significantly impact familial parental and socioeconomic aid, as well as familial sociocultural resources. Positive racial socialization can be obtained through fictional kin relationships. However, these relationships may not sufficiently replace support from the family of origin due to knowledge associated with shared heredity, shared family histories, and ancestral relationships. Thus, the extent estrangement and rejection from the family of origin has on Black female sexual minority parents and their children's sociocultural development cannot be measured.

Seelman et al. (2017) used focus groups to evaluate experiences related to community, human connection, support, and health of one hundred Black sexual minority

women aged forty years and older. A 72-year-old Black sexual minority woman noted:

we need to help.... people to know that who they are is alright because we've been so oppressed.....we're afraid to believe in God, and we're told we don't have a right to, and we're told by our families we don't have the right to be in our families, that there's something wrong with us. (Seelman et al., 2017, p. 533)

This passage reflects many challenges Black sexual minority women face with their family, and its impact on their self-concept. Similarly, another participant reported feeling isolated and ostracized from family due to her lesbian identity (Seelman et al., 2017). Parallels of sexual discrimination from society and within the family may exacerbate psychological distress and oppression by prohibiting nonconforming sexual expression (Bowleg, 2008; Cochran & Mays, 2000; Collins, 1998;). The intersection of homophobia generalized stigma, and family rejection may lead Black sexual minority women into further social isolation while deteriorating their physical, mental, and emotional wellbeing.

In terms of generalized stigma, Black sexual minority women may need to be mindful of disclosing their sexual identity to their families. Due to a history of discrimination and internalized racism among racial ethnic-minorities, the stigma associated with same-sex identities may be exacerbated, causing further psychological distress (Velez et al., 2019). Oftentimes, Black families who are riddled with internalized racism provoke a sense of generalized stigma. This stigma may lead to involuntary discrimination of sexual minority identities that result in the rejection of their family members (Pastrana, 2016). In contrast, negative experiences related to discrimination and

stigma may increase the family's ability to understand and adapt to the challenges associated with same-sexual identities (Reeves et al., 2010). Social practitioners who emphasize educating families on racial and sexual diversity and help formulate responses to sexual minority discrimination can help families negotiate encounters related to their racial and sexual identities. It can also aid sexual minority parents in managing their sexual identity and positive socialization of their sexual minority identity to their children.

### **Identity Management**

Black women overcome social perceptions injurious to their roles as women, people of color, mothers, wives, and sexual minorities. Cyrus (2017) and Nadal et al. (2017) noted research on LGBTQ+ racial-ethnic populations and social dynamics specific occupying multiple minority identities (e.g., gender, sexual orientation, and race) are limited. Breshears and Lubbe-De Beer's (2016) study on same-sex parented families expressed the importance of researching how minority social identities are navigated, particularly in the LGBTQ+ family population. Lemberger-Truelove (2018) advised Black women's minority experiences can help other minority populations develop coping mechanisms. Thus, exploring Black racial-ethnic sexual minority parenting experiences can be a source of information for all minority populations.

Black female sexual minority parents' ability to manage their sexual minority identity can provide a sense of power. Due to the fear of stigma, many Black sexual minority women learn to manage expressions of their sexual identity (Miller, 2011). While some identity development models attributed healthy sexual identity to disclosure



without inhibitions (Troiden, 1989), other models emphasized a healthy sexual minority identity can be maintained through managing the level of disclosure based on situational contexts (Cass, 1979). Selective identity disclosure is necessary for development as well as the awareness that the sexual minority identity is a part of the person but does not define the entire person (Cass, 1979). Oswald (2000) emphasized that disclosure of lesbian identity should be understood in the context of relationships and environmental situations. Whitman et al. (2000) maintained that informing others of one's sexual minority identity was not a requirement for development but a characteristic of managing their sexual identity. McCarn and Fassinger (1996) did not emphasize same-sex disclosure as a requirement for healthy identity formation; however, same-sex disclosure supported embracing the sexual minority identity as a part of oneself. The model further illustrated the concept of identity integration in terms of choices made of where and how to disclose but not the degree or content of disclosures (McCarn & Fassinger, 1996). The freedom to choose who to disclose to, the degree to which one discloses can be empowering, particularly for Black female sexual minority parents.

Black women having the power to manage their minority identities have been nonexistent. Most identities are erroneously assigned and socially managed by others who cannot relate to their experiences (Collins, 1990). Unlike sexual minority identities, the physical characteristics of some Black racial minority identities cannot be easily concealed. Discrimination associated with Black women's skin tone has caused them to be ambivalent, insecure, question their worth as women and Black racial minorities (Duvall et al., 2013; Landor & Smith, 2019). For Black sexual minority women, a sense

of empowerment is provoked by the freedom not to disclose their sexual identities and the personal choice not to be impacted by stigma, a tangible privilege their minority identities cannot provide. For example, Black sexual minority women described as “femme” expressing a feminine gender identity or cisgender can easily choose not to disclose their sexual minority identity.

In contrast, Black sexual minority women who are non-gender conforming, transgender, or expressing a masculine gender identity may not have an option to disclose their sexual minority status (Brooks, 2016; Reed et al., 2011; Walsh, 2015; Wilson, 2009). For many non-gender conforming women, the ability to conceal their sexual minority identity is not seen as a disadvantage. However, for Black female sexual minority parents, the ability to manage disclosure and conceal their identity may be seen as advantageous, particularly when protecting their children from discrimination associated with disclosure.

Other studies related the ability to manage sexual minority identity to a protective code of silence. Sexual minority identity management in the protective code of silence is often used to maintain supportive networks and other relationships (Miller, 2011). This silence is not limited to family and community; it is also practiced in educational and work environments and other social settings. This silence is also implemented contextually with individuals and social situations where the lesbian decides their sexual identity is not relevant (Bowring & Brewis, 2009; Miller, 2011). This silence is a source of empowerment for sexual minority parents who experience discrimination not limited to rejection from family and church groups, loss of employment, harassment by police,

and denial of financial resources (Mays & Cochran, 1988; Oakley et al., 2017).

For example, in Millers' (2011) lesbian identity management, she conducted a case study on two Black female sexual minority college students. Illustrating how they navigated disclosing their sexual minority identity in terms of resources and support (Miller, 2011). One participant decided not to reveal her sexual attraction to other women in a sorority due to witnessing the rejection of another student who identified as a Black sexual minority woman. In another context, she signed a disclosure to attest to not having a same-sex orientation to obtain employment and financial resources (Miller, 2011). The other participant chose to withhold her sexual orientation during a class discussion on diversity (Miller, 2011). Expressing in that context, discussing that discrimination in terms of her racial and socioeconomic status was more relevant than disclosing her sexual minority identity (Miller, 2011). A similar form of identity management is described as "racework" a term coined by (Steinbugler, 2005, 2012), referring to "one's management of public visibility or invisibility, the negotiation of the different racial backgrounds of oneself and one's partner, to reliance on colorblind or race-conscious descriptions of oneself" (Nemoto, 2013, p. 582).

Beliefs of generalized stigma support identity management in terms of invisibility, silence, or acceptance. Asserting when LGB individuals are stigmatized, so are the people closest to them, including their children, family, close friends, and community (Oswald, 2000; Ray & Gregory, 2001). For example, a Black female sexual minority mother advised her not to verbally disclose or express her sexuality to other family members (Miller, 2011). The Black sexual minority woman equated this to her

mother not being compelled to defend her if she ever received derogatory messages, was rejected, or berated by family members (Miller, 2011). Although this participant wanted to disclose, her mother's fear of negative perceptions and stigma from her family influenced her to remain silent. This further supports identity development models in terms of disclosure choice based on specific relationships and contexts (McCarn & Fassinger, 1996). This example also contributes to the idea that family support networks within the first circle influence how individuals respond to challenges regarding same-sex identity disclosure. It also appears that supportive families protect and aid LGBTQ+ identified loved ones in managing their same-sex identity in terms of who and to what extent their sexual minority identity is disclosed.

Brooks (2016) noted Black sexual minority women voiced empowerment in choosing not to disclose their lesbian identity, allowing them to practice diverse strategies such as advocating for their Black community while still maintaining their LGBTQ+ pride and support. Although many reported going outside their community to locate LGBTQ+ resources, procuring outside resources allowed them to choose the context to disclose their sexual minority identity (Brooks, 2016). This reduced anxiety related to the conflict in choosing their racial minority identity over their sexual minority identity (Brooks, 2016). Identity management skills are beneficial for Black female sexual minority parents who have not reached developmental maturation within their Black racial identity, lesbian identity formation, and group membership development.

In other studies, LGBTQ+ individuals chose not to disclose their sexual minority identity in their work environment due to fear of financial loss, status, belonging, and

respect (Bowring & Brewis, 2009). Particularly for female sexual minorities, they feared that the stigma attached to sexual minority identity would exacerbate women's preexisting issues in the workforce (Bowring & Brewis, 2009). Collins (2000b) noted Black sexual minority women embody unique angles within the intersections of family, community, and the workforce. In the context of identity management, social practitioners can communicate disclosure as a tool to empower Black female sexual minority parents within heterosexual parenting circles. Identity management may be useless for Black female sexual minority parents, who have a history of stigma and negative stereotypes.

### **Attitudes Toward Heterosexual and Sexual Minority Parents**

Black female sexual minority parents' invisibility is further perpetuated when their differences amongst other sexual minorities are not acknowledged. Nadal et al. (2016) advised scholars to be cautious of grouping sexual minorities under the LGBTQ+ title as if their individual differences and variations in experiences do not impact personal and social perceptions of their sexual minority identity. In a quantitative study, Costa et al. (2019a) analyzed predictors and attitudes towards sexual minority parenting. Amongst a heterosexual sample, an online questionnaire concluded that gender, age, education level, and religiosity were all predictors of sexual prejudice towards sexual minority parents (Costa et al., 2019a). Older individuals, those with lower education levels and those with high religiosity, held significantly elevated levels of negative views and low perceptions in the benefits of sexual minority parenting (Costa et al., 2019a).

Many Black female sexual minority parents are negatively perceived regardless of

disclosure of their sexual minority identity. This is evidenced by Rosenthal and Lobel's (2016) study, which surveyed 435 undergraduate students on how Black women are viewed as mothers. The study concluded that regardless of pregnancy status, Black females were regarded as having had sex with more people in the past month (Rosenthal & Lobel, 2016). In terms of education and socioeconomic status, Black females were more likely to receive some form of public assistance, to have lower education, and to earn less income per year than White females (Rosenthal & Lobel, 2016). Furthermore, participants viewed Black pregnant women more negatively than non-pregnant Black women (Rosenthal & Lobel, 2016). Compared to White pregnant women, Black pregnant women were perceived as less likely to have the father of the child involved and more likely to need public assistance (Rosenthal & Lobel, 2016). Attitudes towards Black female sexual minority parents may differ considerably from other sexual minorities due to a history of negative perceptions regarding people of color.

Studies on sexual minority parenting suggest that couples may adopt variations of gender identities (Cao et al., 2016). These variations may improve their perception of parenting by implementing strategies to cope with stressors heteronormative parenting expectations (Cao et al., 2016). Cao et al. (2016) identified three strategies for addressing heteronormative parenting stressors, a) incorporating male role models to compensate for the absence of male interaction, b) integrating masculine behavioral practices into parenting, and c) managing familial parenting perceptions in the context of their sexual identities. For example, female sexual minorities concerned with lack of male influence find other male figures in their uncles, brothers, male friends; gay men who are parenting

practice similar strategies (Chabot & Ames, 2004). Other female sexual minorities incorporate masculine parenting behaviors with less emotion and expression, more disciplinary and action-based approaches (Biblarz & Stacey, 2010). To overcome family formation issues, parental invalidation, and other forms of social stigma, many non-birth mothers seek legalized parental rights (Costa et al., 2019b; Hequembourg & Farrell, 1999). Although there are some variations, sexual minority and heterosexual parents practice identity management skills to lessen the stigma associated with their sexual identity.

In some cases, the children of sexual minorities, through heterosexual socialization, are forced to manage their nonheteronormative family structures. In addition, heterosexual culture socializes them to navigate disclosure of their parent's sexual minority identity. Furthermore, heterocentric and homophobic culture socializes children to protect themselves and their parents from the stigma associated with having nonheteronormative family structures (Oakley et al., 2017). To date, there are few qualitative studies on the experiences of children with sexual minority parents. However, several quantitative studies investigated children's overall wellbeing and compared them to children with heterosexual parents.

Calzo et al. (2019) researched how parents' sexual orientation impacted their children's wellbeing. The results indicated mental health and emotional difficulties of the children of female and male sexual minorities did not differentiate from children with heterosexual parents. Crouch et al. (2014) reported when compared with heterosexual children, the children of same-sex parents scored high on psychosocial health and

wellbeing. Peter et al. (2016) reported in the school environment, the children of LGBT parents are likely to navigate sexual minority discrimination in the form of bullying and harassment, which made them more likely to skip school. Although these studies do not provide in-depth experiences of microaggressions towards children with sexual minority parents, they agree that children often navigate discrimination of their sexual minority parents.

Farr et al. (2016) investigated the experiences of 49, 6–11 year-old children with same-sex parents. Farr et al. (2016) draw from Herek et al. (2009, p.33), “sexual stigma” referring to the contempt society feels for anyone associated with nonheteronormative identities, behaviors, relationships, and communities. Farr et al. (2016) studied children’s use of silence and invisibility to protect themselves from discrimination; one child does not tell strangers and chooses not to due to fear, another child reported she only tells people if they promise not to tease her, another child reported only revealing his parent’s sexual orientation to people he trusts. In another example, a child reports feeling bad on “Father’s Day” because she has two mothers (Farr et al., 2016). This example shows how covert and overt messages in culture can socialize children to feel inferior or abnormal about their parent’s sexual minority identity. Children’s ability to discern and navigate social implications of their parent’s lesbian identity is also a form of survival and resiliency.

Racial-ethnic sexual minority parents practice protective strategies for their children. Debunking perceptions that same-sex parents are any less capable of successfully parenting than different sex-parents (Costa et al., 2019a; Biblarz & Stacey,



2010; Stacey & Biblarz, 2001). Oakley et al. (2017) suggest racial-cultural values may be relevant to sexual minorities in supporting healthy identities and assisting in managing unfamiliar circumstances surrounding same-sex identity. Oakley et al. utilized quantitative data to analyze a longitudinal study on Gay and Lesbian parenting practices based on a cultural socialization framework (e.g., Hughes & Chen, 1997; Hughes & Johnson, 2001). This study indicated like racial-ethnic minority parents, sexual minority parents socialize their children to prepare for bias, hold intrinsic self-worth, and hold pride in their minority identity over maintaining a victimized frame of reference (Oakley et al., 2017). Oakley et al. (2017) posited socialization around sexual identity may have important implications for the psychosocial development of children with same-sex parents. Thus, further research inclusive of diverse families is needed to understand specific protective strategies of racial-ethnic sexual minority parents (Oakley et al., 2017).

Parents who identify as a racial or sexual minority voiced concerns with discrimination toward their children. Lesbian mothers, in general, expressed fear that their lesbian identity would negatively impact their children (Wall, 2011). In a study on school experiences of LGBT children, parents reported their children had feelings of isolation for being different, being teased, bullied, and reported discrimination by the teacher (Ray & Gregory, 2001). Black heterosexual parents reported having to be in constant vigilance due to overt racism while in public with their children, the systemic devaluing of Black males, and the threat of their children being physically victimized by White police officers (Threlfall, 2018). Black parents also reported fear associated with

their children's death and deterioration of their psychological wellbeing due to the vicarious trauma of witnessing Black youth as victims of racial discrimination (Threlfall, 2018). Thus, Black female sexual minority and Black heterosexual parents share a common connection in their children's wellbeing in relation to racism, sexism, and social injustices.

The previous studies illustrate Black female sexual minority and heterosexual parents practice protective socialization strategies to help their children manage racial and sexual discrimination (Collins, 1990, 2004; Oakley et al., 2017; Ray & Gregory, 2001; Threlfall, 2018). Black racial-ethnic sexual minority parents often confront the intersection of sexual minority and racial discrimination. At this intersection, Black female sexual minority parents must become accustomed to developing strategies to help their children respond to racism and the complexities of heterosexist expectations. Socializing children to protect themselves from discrimination may provide a sense of empowerment and wellbeing for both the child and parents.

### **Black Female Sexual Minority Parenting Experience**

Black female sexual minority parenting experiences are limited in research. Literature traditionally focused on heteronormative parenting structures consisting of a mother, a father, and children raised within the same household (Cahill et al., 2003; Fukuyama & Ferguson, 2000; Glass & Few-Demo, 2013; Greene, 2000; Majied, 2013). Black female sexual minority families usually consist of same-sex parents, multi-generational, extended, and kinship family structures that provide vital child support (Cochran et al., 2003; Mezey, 2012; Moore, 2011a, 2011b). As previously mentioned,

scholars advised future research to be inclusive of Black female sexual minority parenting, family structures, family formation, and motherhood through their marginalized identities (Mezey, 2012; Moore, 2011b; Oakley et al., 2017; Swendener & Woodell, 2017). Because Black female sexual minority families have little visibility, less is understood about the extent to which racial and sexual identity impacts their parental wellbeing. This lack of understanding increases their risk of being systemically revictimized by gendered racism and decreases social advocacy beneficial to their roles as parents.

Black sexual minority women have unique parenting experiences. To date, Moore's (2011a) "Invisible Families" is one of the most thorough examinations of Black sexual minority women's sexual identities, their roles as mothers, and women of color. The data collection consisted of one hundred surveys, four focus groups, fifty-eight in-depth interviews, and ethnological fieldwork (Moore, 2011a). Results revealed that openly gay Black women navigated motherhood through the context of Black respectability and resolved stereotypes within their families, extended families, and communities while defining their sexual minority identities (Moore, 2011a). Furthermore, despite derogatory messages received from Black religious institutions, Black female sexual minority parents perceived their social ties with the Black church as essential to their interpersonal identity with other Black women and their racial community (Moore, 2011a). The social connection to their racial community was so important that participants sacrificed open expression of their sexual identity to maintain a sense of support and belonging (Davis & High, 2017; Moore, 2011a; Walsh, 2016).

Although Moores' (2011a) results are dated, more current research on connectedness (Karpman et al., 2018), social ties with racial communities (Velez et al., 2019), belongingness (Lemberger-Truelove, 2018), and group membership (Jill & Hughes, 2017) agreed that Black women have strong allegiances to their racial community. They asserted that within the racial community, Black women receive validation of their self-worth. Because the participants in this study were middle to upper-class individuals located in densely populated sexual minority communities in New York City, the results cannot be generalized to Black female sexual minority parents who are socioeconomically disadvantaged and sparsely located in the socially conservative Midwest, South, and Mountain West regions of the United States (Gates, 2013b). Also, the participants' demographics were not indicative of Black female sexual minority parents who are socioeconomically disadvantaged, have limited LGBTQ+ community resources, and an imperious need for family and community support.

Black sexual minority women often navigate conflicts related to parenting within the context of their sexual identity. Although Black sexual minority women are more likely to conceive and parent children from previous heterosexual relationships (Moore, 2011a, 2011b), they also reported concerns with same-sex conception and acquiring legal parental rights. For example, they reported fear of homophobia when disclosing their sexual orientation to adoption agencies, medical providers, and judges (Cao et al., 2016; McKelvey, 2013; Moore & Brainer, 2013; Wall, 2011). They also feared being denied custody or visitation and accessibility to competent medical services due to their sexual orientation (Cao et al., 2016; McKelvey, 2013; Moore & Brainer, 2013; Wall, 2011).

This fear may be exacerbated in Black individuals who have a general mistrust of institutions representing authority, such as law enforcement and child protective services.

In addition, alternative conception methods may foster conflict between socialized perceptions of motherhood and same-sex parenting roles (e.g., the normalization of a child being conceived only by a man and woman) (Álvarez-Bernardo & García-Berbén, 2018; Hequembourg & Farrell, 1999; McKelvey, 2013). With these issues in mind, Black female sexual minority parents often question their reproductive abilities, family legitimacy, and competence as parents (Biblarz & Stacey, 2010; Costa et al., 2019b; Goldberg, 2010; Moore, 2011a; Wall, 2011). Currently, Black sexual minority women's parenting options consist of birth through prior heterosexual relationships, donor insemination, adoption, foster care, surrogacy, or co-parenting (Karpman et al., 2018; Moore & Brainer, 2013). These motherhood dynamics play an essential role in how Black female sexual minority parents perceive parenting and formulate families.

Black female sexual minority parents seek to conserve their racial identity in the context of parenting. Karpman et al. (2018) qualitatively investigated 13 lesbian, bisexual, and queer (LBQ) women of color on family formation and the process of selecting donors. Karpman et al. (2018) noted to limit negative racial assumptions, Black female sexual minority parents selected donors who ensured they and their children would have similar racial features. For example, a Black woman in an interracial relationship with a White woman voiced concerns about being perceived as a childcare worker while parenting alone with their White child (Karpman et al., 2018). This Black female sexual minority parent voiced concerns related to historical racial stereotypes that

viewed Black women as nannies and caregivers to White children.

In the same study, Black female sexual minority parents expressed conflict in parenting children of a different racial identity. Other Black female sexual minority parents who selected White male donors due to the unavailability of Black male donors expressed issues with conceptualizing their children's mixed-racial identities (Karpman et al., 2018). Thus, Black female sexual minority parents preferred donors with similar racial features for shared cultural connectedness and positive socialization of their racial identities. This illustrates the conflict that may arise at the intersection of sexual minority parenting options and racial identity. Although these results cannot be generalized to all LBQ women of color, the participants were recruited from Facebooks' nationwide LBQ groups, which may have included more diverse locations within the United States.

For sexual minority parents of color, racial-socioeconomic disparities intersect with their sexual identity during family formation. Due to socioeconomic disadvantages, Black female sexual minority family formation choices within the context of their sexual minority identity are limited (Chabot & Ames, 2004; DeMino et al., 2007). Motherhood via in-vitro fertilization, donor insemination, and other medical reproductive advancements are often financially taxing (Cao et al., 2016) and rarely covered by health insurance policies (Institute of Medicine, 2011). Thus, Black female sexual minority parenting options are often limited to adoption/fostering or heterosexual relationships (Cahill et al., 2003; Cao et al., 2016). Furthermore, because Black female sexual minority couples are least likely to be married (Lee, 2018; Reed et al., 2011), additional income or social security and tax benefits associated with the institution of marriage may not be

accessible to them. Compared to other sexual minorities, Black female sexual minority parents with socioeconomic vulnerabilities may depend more on their family to provide childcare and other financial resources.

In comparison to other female sexual minority parents, Black sexual minority women face significant health disparities related to reproduction and childbirth. Although, information on Black sexual minority women's reproduction is scant (Agenor et al., 2016). Increasing evidence suggested that discrimination, stigma, and harmful stereotypes correlate with Black women's sexual and reproductive health outcomes (e.g., Duvall et al., 2013; Rosenthal et al., 2013; Giscombe & Lobel, 2005; Prather et al., 2018; Rosenthal & Lobel, 2016). Frameworks such as minority stress theory (Meyer, 2003, 2010), internalized heterosexism (Puckett et al., 2018), adverse effects experienced in the deepening/commitment phase of lesbian identity formation (McCarn & Fassinger, 1996), and the preencounter phase of Black identity development (Helms, 1990) indicate stressors related to racial and sexual identity impact a person's physical and psychological wellbeing. As a result, Black sexual minority women, with minority stressors may experience higher infant mortality rates than those experienced by White sexual minority women (Prather et al., 2018); this is confirmed by racial disparities in low birth weight and preterm delivery (Hamilton et al., 2012; Prather et al., 2018).

Black female sexual minority parents who openly express their sexual minority identity risk loss of family resources. The unwillingness to accept Black female sexual parents can result in the loss of supportive resources for the family of origin, the parents, and the children. In a qualitative study, a Black sexual minority woman participant noted,

family acceptance and support, mainly while parenting, is as vital as “breathing air” (Wall, 2011, p. 104). This metaphor indicated that resources such as family validation, attachment, and support might be instrumental to Black female sexual minority parents’ survival. Black female sexual minority parents who do not have their family as a resource expressed feelings of estrangement from personal ties, financial hardships, loss of connectedness to ethnic/family traditions, loss of caregivers, and social support within family networks (Costa et al., 2019b; Mays et al., 1998; Pastrana, 2016). As a result, sexual minority women may choose not to parent children due to fear of family ostracization (Chabot & Ames, 2004; Mezey, 2008; Riskind & Tornello, 2017; Wall, 2011).

For other Black female sexual minority parents who choose to conceal their sexual identity, support from the same-sex co-parent may be limited to environmental settings. Thus, the extent of parental guidance the child receives is limited to the visibility of the same-sex parenting relationship. Restricted visibility may result in strained parenting relationships, feelings of estrangement, and isolation for all involved, particularly during birthdays, holidays, and other familial events.

Black female sexual minority parents face several disparities related to a lifetime of racial and sexual discrimination, including socioeconomic disadvantages and inadequate access to health care and other social services (Seelman et al., 2017; Woody, 2014). These variables place significance on Black female sexual minority parents’ ability to obtain social support networks to navigate, develop, and maintain strong minority identities. Researchers have yet to thoroughly investigate how Black female



sexual minority parents perceive experiences related to their racial and sexual identity. Particularly for Black sexual minority parents who reside in the socially conservative, socioeconomically disadvantaged regions of the United States. As a society, remaining ignorant of any population facing significant social disparities will only stagnate social change and perpetuate the oppression that advocates for social equality are so desperately trying to eradicate.

### **Summary and Conclusions**

Collectively, literature revealed a limited amount of research on racial-ethnic sexual minority family dynamics and less specifically on Black female sexual minority parenting and family dynamics (Moore, 2011a; Pastrana, 2016; Sarkisian & Gerstel, 2004). The literature also revealed the importance of positive socialization and social support, whether provided by the family, community, or alternative means. Studies tend to examine racial identity in terms of Black male experiences, lesbian identity in terms of White female experiences, and Black sexual minorities under the title of LGBTQ+ neglecting to reflect on their individual differences (Costa et al., 2019a, 2019b; Follins et al., 2014; Nadal et al., 2016). Notably, for Black sexual minority women who hold multiple identities, minimizing or excluding one social minority identity may marginalize and devalue their experiences (Collins, 1986). Generalizing gay, male, and White majority experiences to other groups who do not share similar psychosocial dynamics, family structures, and cultural likeness creates an inaccurate analysis. In this study, Black female sexual minority parents are agents of social change by voicing their perception of their racial and sexual identities' influence on parenting and support.

### Chapter 3: Research Method

Although Black sexual minority women who are parenting has more than doubled over the last decade, there is a lack of research regarding this population (Gates, 2013; Moore, 2011a; Nadal et al., 2017). However, Black sexual minority women are challenged with health and socioeconomic disparities because of the marginalization of their race, gender, and sexual orientation. The purpose of this qualitative study was to understand how Black sexual minority cisgender women in the Midwest-Southern regions of the United States perceive their racial and sexual identity as influencing their parenting. Furthermore, this study seeks to understand the contexts in which family and community are supportive of these identities. Social change may be influenced in the awareness of being Black, a woman, and a sexual minority intersect with other societal influences, creating a unique experience unlike other minority populations (Crenshaw, 1991). Understanding perceptions of how Black sexual minority women in the Midwest-Southern United States parent in terms of their racial and sexual identity can improve social service providers' ability to act as liaisons for parents with multiple minority identities.

In Chapter 3, I describe the research design and data collection methods of this study. I then present the basic qualitative research design and rationale, the researcher's role, methodological approach (including participant selection, the interview approach, and data analysis plan), issues of trustworthiness, and ethics. In this chapter, I describe how the basic qualitative design was used to explore the perceptions of Black sexual minority parents' multidimensional identities, being a nonheterosexual woman, Black,

and having a nonconforming family structure (see Gabb, 2001). Collectively I provide methods to answer this study's RQs in a trustworthy, valid, and ethical manner.

### **Research Design and Rationale**

The research design, a basic qualitative inquiry with an interview approach, was used to understand the perceptions of Black sexual minority parents with multi-minority identities. Historically, Black sexual minority women are a hard-to-reach population; thus, a design that provides flexibility in research methodology and data collection procedures is preferred (Kahlke, 2014; Ravitch & Carl, 2020). Flexibility can help address any unseen challenges with the sampling or data collection method (Merriam & Tisdell, 2015). Having the flexibility to incorporate various qualitative research methods may be necessary to acquire more participants and rich data. This design also provided a platform for Black sexual minority parents to voice their perceptions of heterosexism and racism within their sociocultural environment and the social support needed to maintain personal well-being among various forms of racial and sexual microaggressions. Black sexual minority women hold several identities that are structurally, contextually, and interpersonally stigmatized. Social beliefs regarding these identities have been insufficiently represented in terms of Black men and White lesbian women, causing an underrepresentation of this population. In the basic qualitative inquiry, truth is judged how it is experienced or used in contexts (Patton, 2015). Thus, in this study, Black sexual minority women's perceptions, daily realities, and truths are held in high regard. By applying the basic qualitative design, the participants' perceptions are valued within their own right, not altered through the researcher's lens, meanings, or other worldviews. The

perceptions gathered in this study will help to understand the Black sexual minority parenting population.

The basic qualitative design was best suited to answer my RQs because it follows a constructivist paradigm. Constructivism as a social science paradigm aims to understand what human participants achieve from their experiences in terms of developing new values, identities, and practices (Coghlan & Brydon-Miller, 2014). This paradigm aligns with the RQs, which aim to understand Black sexual minority women's perceptions of how their racial and sexual identity influence their parenting experiences without requiring an external objective reality (Coghlan & Brydon-Miller, 2014): "How do Black sexual minority mothers in the Midwest-Southern regions of the United States perceive racial and sexual identity as influencing their parenting?" and "How do Black sexual minority mothers in the Midwest-Southern regions of the United States perceive their social support system?" Through gathering the constructed perceptions of Black sexual minority women within their own subjective and intersubjective realities and in contextually specific ways, I attempted to understand their reality (Coghlan & Brydon-Miller, 2014).

### **Role of the Researcher**

As a researcher, I was the primary instrument. My role as an instrument significantly influenced this study, and certain precautions were put in place to ensure the research was conducted in a trustworthy, ethical, transparent, and valid manner. My role as a researcher was to identify potential participants, ensure their safety, and respectfully engage with them. To respectfully engage, I was aware of the insider-outsider identities I

held or how the participants perceived me as being unconnected or connected to them (Ravitch & Carl, 2020). I identify as a Black woman, a parent, and a married heterosexual person. Being a heterosexual or outsider promoted an objective view of the participants' experience; however, I acknowledged that my perceptions are limited because I do not identify as a sexual minority. But as a Black woman, the participants and I shared similar challenges from broader political systems of racial and gendered discrimination within my insider identity. By sharing similar challenges, the power dynamic that commonly exists between researchers and participants may be diminished. As a researcher, I immersed myself in gaining knowledge of the population and their way of being to make informed observations, ask relevant questions and not distort information (Miles et al., 2013).

Both insider and outsider roles required balance and self-reflection. I avoided bias language, assumptions, and kept an open mind about participant experiences. My knowledge regarding sexual orientation, racial, and sexual identities has developed through involvement with LGBT organizations, personal socialization, academic literature, and formal and informal social interactions. Because I held pre-existing knowledge, I maintained a nonbiased understanding of the context being researched and its ways of functioning. During this process, I was open to understanding and suspended any presumptions regarding the topics under discussion (Miles et al., 2013). Any personal bias was managed with research tools such as reflexivity and member-checking. Reflexivity allows the qualitative researcher to recognize and reflect on personal narratives, recognize emerging personal issues, and decipher any conceptual, ethical, or

problematic assumptions during the study (Fletcher et al., 2019; Karagiozies, 2018). My description of participant experiences was occasionally clarified with participants and reviewed to ensure accuracy (Miles et al., 2013).

I also ensured there were no personal or professional ties with participants that would interfere with boundaries. Although, participants' past feelings and experiences regarding racial or sexual identity may have transferred to this study. This transference may have provided a richer response from participants. All participants had access to information for peer support and counseling services.

### **Methodology**

In this section, I present the methodology for this study, including the participant selection process, the data collection instrument or interview protocol, and the process for recruitment, participation, and data collection. Furthermore, the step-by-step process for data collection is presented.

#### **Participant Selection Logic**

I aimed to understand the perceptions of racial-ethnic sexual minority parents in socially conservative regions of the United States. Often, LGBTQ+ research is conducted in the Eastern and Western coastal regions where sexual minorities are densely populated with accessibility to a wide variety of LGBTQ+ community resources. Furthermore, Black sexual minorities typically have lower socioeconomic status than other sexual minorities, which may provide a unique perception of their racial and sexual identities (Badgett et al., 2017; Gates, 2013). Thus, this study may include participants who are economically, socially, and politically disadvantaged.

A purposeful sampling strategy was used for recruitment through Black sexual minority social media groups and LGBTQ+ organizations. In purposeful sampling, participants are selected because of their affiliation, knowledge of the research population, and their ability to sufficiently relate to the RQs being asked (Maxwell, 2012; Ravitch & Carl, 2020). When studying invisible populations, where researchers have limited access to participants, purposeful selection is preferred (Light et al., 1990). Selection criteria for this study included (a) cisgender women, (b) living in Midwest-Southern U.S. regional areas, (c) self-identification as Black or African American, (d) identification as a sexual minority, and (e) currently parenting children under the age of 18 years old. These geographical areas were chosen due to the lack of information and accessibility to LGBTQ+ populations in the Midwest and Southern regions.

Using this sampling strategy, the researcher located participants residing in Midwest and Southern regions through their affiliation with other Black sexual minority women, Facebook groups, and LGBTQ+ organizations. Specifically, I contacted Black sexual minority group administrators on Facebook and LGBTQ+ organizations regarding the research and requested to disseminate the research announcements to group members. The Facebook social media groups contacted were not limited to Black Lesbian, Kansas City Lesbians, Melanin Lesbian Empire, Black Lesbians Upper Echelon, and Black LGBTQ+Moms. The organizations contacted are not limited to the Zami Nobla, Kansas Equality Coalition, Simply Equal, PFLAG, Equality Mississippi, PROMO, Forum for Equality, Louisiana Electorate of Gays and Lesbians.

Prior to the interviews, all communication between researcher and participants

occurred via university email and a Facebook account created specifically for this research. Individuals contacted me directly if interested in participating in the study. Each participant was emailed full disclosure of the study included within the consent form. The disclosure included the risks and benefits of this research and national contact information for counseling services. The consent form details the interview process, in which the participants completed two interviews. The interview process consisted of the initial interview protocol (see Appendix) and a follow-up interview.

Snowball sampling was also used to refer other interested sexual minority parents who may not be affiliated with the Facebook groups or LGBTQ+ organizations. This sampling method was utilized to locate possible volunteers through their affiliation with previously recruited participants. Participants were asked to refer anyone they know who may be interested in participating in this study. Due to Black sexual minority women historically being a hard-to-reach population, participants are typically obtained through personal contacts (Moore, 2011a). I would then contact the referred participants, send the research announcement, and, if interested, the consent form. The snowball method may have helped obtain enough participants to reach saturation.

Recruitment was satisfied at the point of saturation, or when new participants have presented no new information, and the collected data sufficiently answered the RQs. The sample size for this basic qualitative inquiry was estimated at 10–15 participants. Sample size depends on what the researcher wants to know, the purpose of the study, what will have credibility, and what can be done within the available time and resources (Patton, 2002). In qualitative inquiry, there are no set rules to the number of participants



involved. Qualitative inquiries that explored specific experiences of Black lesbian women successfully acquired rich data from samples of six to fifteen participants (e.g., Brooks, 2017; Burkhard, 2019; Walsh, 2016). Purposeful sampling in qualitative research is not meant to be generalized (Ravitch & Carl, 2020). However, the results intend to share the perceptions of underrepresented sexual minority women.

Regarding practical concerns of access and participant selection, social media was the most practical means of accessing participants and collecting data for this study. However, the use of technology may create a barrier for participants who do not have internet access, which may result in a potentially biased sample. Further, due to fear of discrimination, many sexual minorities may be selective of the context in which to disclose or discuss their sexual orientation. Apart from information reviewed by my chair or committee, their information was kept confidential. Other practices in place to avoid discrimination and exploitation are (a) the participants were provided clear details of the study, (b) gave voluntary consent, (c) their information was protected from harm, and (d) they were treated as autonomous agents (Office for Human Research Protection, 1979). Other avenues taken to minimize harm are presented later in this chapter.

### **Instrumentation**

A semi-structured in-depth interview was the instrumentation used in this study. The interview protocol used in this study was researcher produced based on a thorough examination of research literature related to Black women, sexual minorities, intersectionality, race, gender, and sexuality (Fletcher et al., 2019; Moore, 2011a; Windsong, 2018). The interview questions are relevant to my literature review on sexual

minorities and worded in an unbiased, easy-to-understand language. Proper wording of the interview questions was integral in completing thorough interviews..

This study's interview protocol consisted of thirteen questions designed to align with the theory of intersectionality. In the first two questions, race and sexual identity are separated to capture the participants' meaning of each social construct. Each of the following questions is constructed to explore their experiences with race and sexual identity together. Windsong (2018) advised researchers who study intersectionality to construct interview questions to allow participants to describe experiences with their socially constructed identities together and not separately. Thus, interview questions are designed to inquire about race and sexual identity together as synchronized lived experiences. Prompts and probes such as provide specific examples, please explain, or describe were used to obtain a more detailed response.

Semi-structured in-depth interviews have less structure that elicits participant perceptions the researcher may not have anticipated. This type of interview is appropriate for the concept of intersectionality because it promotes detailed holistic descriptions and the integration of multiple perspectives and contexts (Weiss, 1995). The in-depth interview allows participants to reflect on a broader understanding of race and sexual identity in a manner that makes the most sense to them (Cuadraz & Uttal, 1999; Kleinman et al., 1994; Weiss, 1995; Windsong, 2018). I aimed to understand their perceptions of parenting in the context of their racial and sexual identity.

### **Procedures for Recruitment, Participation, and Data Collection**

For my initial analysis, the priori recruitment sample size was 10–15 participants.

Vasileiou et al. (2018) advised that saturation occurs when no new information or themes emerge from the interviews. Because my sample population was homogeneous there is a possibility that saturation occurred before 10–15 participants were recruited. The recruitment process continued until my chair, and I agreed saturation occurred. In qualitative research the sample size needs to be large enough for a new understanding of the phenomenon to emerge and small enough for a deeper meaning (Sandelowski, 1995).

Participants were recruited from Facebook Black sexual minority groups, Black lesbian groups, and LGBTQ+ organizations and contacted me using the information in the research announcement. The snowball sampling method was applied via requesting the participants to refer other potential participants to me. Potential participants recruited using snowball sampling were contacted by me. I reviewed the inclusion/exclusion criteria with each potential participant, which was to identify as a cisgender sexual minority woman, who is Black or African American, a parent, and located in the Midwestern and Southern regions of the United States. After they met the criteria, I then reviewed the consent form and emailed it to them, which disclosed the goals, purpose, and details of this study.

### ***Participation***

Each consenting participant submitted an email to me stating “I consent.” After consent was given, the first audio-recorded interview was scheduled, and data collection began. As a part of the interview participants were asked a demographic questionnaire, that gathered data on the participants, age, race/ethnicity, gender identity, sexuality, partnership status, length of the partnership, how many children they parent, income,

education, and which geographical area they reside.

The VoIP, audio-recorded interviews lasted on average 60–90–minutes. An audio-recorded phone interview was a backup in the instance VoIP was not available. The interview schedule was flexible; however, the goal was to complete three to four participants interviews per week, with an estimated data collection completion within one to three months. All interview times and locations were based on what is convenient for the participants.

### ***Data Collection***

To ensure participants understood the interview questions, I emailed the participants the interview questions a couple hours prior to the interview. Before each interview, I tested the VoIP recording software to ensure it was working correctly. At the beginning of each interview, I asked each participant for consent to be audio recorded, if consent was given the audio-recording began. Next, I reviewed the consent form to address any questions or concerns. Then, I began asking questions from the interview protocol. Once the participant responded, I verbally reviewed my interpretation of their response to ensure understanding. After the first interview was completed, I transcribed the interview, and scheduled a 20–30–minute follow-up interview within a month.

Proceeding each interview, I journaled the interview process and personal self-reflections. This data was collected to manage researcher bias and provide further insight into the interview process. The follow-up interview consisted of the member-checking process which was audio recorded and transcribed as well. In this process, the participants confirmed whether my interpretation of the data was accurate. I also asked

participants any questions that emerged during the transcription process. This helped enhance the credibility of the study (Frey, 2018). Utilizing member checking may provide the opportunity for richer data.

At the end of the interview process each participant was asked if they have any questions and given information to the national LGBT hotline at 888-843-4564 for peer support, resources, and the option to be referred to a local counseling service. This ensured counseling services are available to participants who self-identify as needing counseling or other resources.

A part of my data collection was documentation of the research process or audit trail. This documentation included research decisions, sampling strategies, significant barriers, findings, and data management. This information was documented at the end of the day to include all the research steps and processes that took place. Audit trail is also reviewed in the dependability section of this chapter. All audio recorded interviews, transcripts, journals, and documentation are kept on my password protected computer in a password protected file.

### **Data Analysis Plan**

Transcripts of the initial and follow-up interviews were used as the primary data source and were analyzed for themes. According to Ravitch and Carl (2020), general or basic qualitative data analysis approaches typically employ thematic analysis. The RQs called for participants to be descriptive in their interview responses. A widely used computer-aided qualitative data analysis software (CAQDAS) called Dedoose was utilized to organize and code (Huynh, 2021), the participants' perception of their social

support system and how their racial and sexual identities influence their parenting experiences.

In qualitative research, the goal of coding is to “fracture” the data and rearrange them into categories that facilitate comparison between data in the same category and aid in developing theoretical concepts (Strauss, 1987). This study used *in vivo* qualitative coding method, which uses the participants’ words as codes (Miles et al., 2013). This coding method is important in this study because the authenticity of Black sexual minority parents’ voice, choice of words, language, and personal descriptions of their reality will provide richer data.

The transcripts were coded in the order that the interviews occurred. The coding method used is analytic induction meaning the data is first analyzed deductively, then inductively (Patton, 2015). The interviews were reviewed line by-line. The first transcripts were coded, then the subsequent transcripts were coded, and the codes were compared to the previously coded transcripts for similarities, and any new codes were created. This process was repeated until all the transcripts were coded. The codes were then organized into categories, then into overarching themes, and sub-categories as supporting themes. This analysis process described the participants’ perceptions to answer this study’s RQs.

Data collection and analysis is actively occurring throughout this study. The process of data condensation was used to analyze this data. This included the process of condensing all the empirical data such as conceptual frameworks, audio-recordings, interview transcripts, journals, documentation and other data into results and conclusions

(Miles et al., 2013). First, all audio-recordings and interview transcripts were reviewed with (CAQDAS) then manually reviewed by this researcher for accuracy. Then triangulation method was used to compare the initial interview transcripts, the follow-up interview transcripts, journaling, and audit trail documentation. Any discrepancies were noted for awareness and later analysis.

### **Issues of Trustworthiness**

A study's trustworthiness is improved when the findings are clear, coherent, and systematically related or unified (Charmaz, 2006). Triangulation, member checking, and reflexivity were used to maintain credibility, transferability, dependability, and confirmability in this basic qualitative research design. Together these methods provided a foundation for a great study and are further explained below.

#### **Credibility**

Credibility refers to whether the data makes sense, is possible and convincing (Miles et al., 2013). In this study, credibility was first established by the participants who represent and share their reality. Credibility was ensured in this study by collecting data from audio-recordings, the interview transcripts, and journals to link conclusions systemically. This data was compared to each other for similarities and discrepancies. This process is referred to as the triangulation method when several data forms are compared to verify the research and ensure it is linked together (Maxwell, 2012). Member checking also aided in clarifying interpretations of participant responses to the interview questions. Triangulation and member checking may strengthen data because the audio-recording, researcher's self-reflection, and participant interviews may vary

from each other (Korstjens & Moser, 2018). Any variation was documented within the results.

### **Transferability**

Transferability refers to this study's ability to be replicated or transferred to similar settings (Miles et al., 2013). In this study, transferability was enhanced by using thick description of the participants, their responses, and the context of their perceptions (Korstjens & Moser, 2018). For example, a thick description is a participant identifies as a Black woman, is married to a White woman, and shares three children, one adopted, one child from each parent's previous heterosexual relationship. Transferability is promoted in Chapter 4, with thorough descriptions of the participants interview setting, their environmental contexts, and personal demographics. Additionally, this study transferability was enhanced by clearly identifying the sample population's characteristics through the demographic questionnaire as a part of the interview protocol.

Although some aspects help transferability, there are some limitations.

Transferability was limited in this study because the sample population was selected from individuals who have internet access, which creates a selection bias. Also, transferability was limited in this study because the environmental settings could not be controlled during the interviews. Although the goal of this study is not for the results to be generalized to the larger Black sexual minority population, the participants' experiences may be representative of some sexual minorities with similar characteristics.

### **Dependability**

Dependability refers to the process of the study that is consistent, reasonably



stable over time and across researchers and methods (Miles et al., 2013). I referred to this as the alignment or consistent information across study contexts and processes such as the conceptual framework, research purpose, goals, and data analysis. To ensure dependability, I completed member checking, and documented the steps in the research process. This documentation is also known as an audit trail which consisted of documenting information on research decisions, discussions with the chair and committee member, my personal self-reflections, sampling strategies, research materials applied, findings, and how the data is managed (Korstjens & Moser, 2018). This documentation was reviewed for inaccuracies in the research process that may have been overlooked.

### **Confirmability**

Confirmability refers to the level to which the researcher can be objective and present transparent information (Miles et al., 2013). To enhance confirmability, I used reflexivity to document observations of my emotions, thought processes, bias, and decisions throughout the data collection. Gabb and Allen (2020) supported reflexivity, advising researchers to include how their personal values, biases, and decisions directly or indirectly influenced the research process. Confirmability also refers to the results not being subjective but grounded in the data provided by the literature, the researcher, research methods, and participant interviews (Korstjens & Moser, 2018). Confirmability required transparency, reflexivity and results developed from data collected with objectivity.

### **Ethical Procedures**

Ethical procedures were established early in this study and were driven by the

context of social challenges the population being studied was experiencing. It was essential to understand that Black lesbians are oppressed by socioeconomic disparities, invisibility, racism, and sexism (Fletcher et al., 2019). This oppression may increase their vulnerability; thus, I considered their experiences during recruitment, building rapport, and data collection processes. To further protect participants, they chose a pseudonym to maintain privacy and confidentiality.

The participants' experiences were analyzed in an ethical manner. Qualitative research has roots in human sciences which supports the voice and perceptions of the participants (Buchanan, 2000). I had a critical outlook when listening to participants, interpreting their words, and making conscious efforts to understand the participants social world through their voices (Aluwihare-Samaranayake, 2012; Buchanan, 2000). When analyzing data, I captured the voices of the participants to represent them and their experiences in as true form as possible (Mauthner & Birch, 2002). Through these steps I aimed to produce data that was ethical, respectful to participants and promoted research integrity.

Ethical procedures in this study promoted richer data. To enhance ethics, all recruitment materials and interview protocols used unbiased language, were simple to understand, and clearly described the research purpose and procedures. Recruitment materials were reviewed with the chair and committee to ensure ethical standards were followed. Following these ethical guidelines in this study reinforced the participants' comfortability with sharing their stories.

Understanding the research is intended to enhance recruitment efforts. In the

initial contract and consent page, I was open and transparent with the participants regarding the data's purpose and how it was collected, shared, analyzed, maintained, and appropriated. Participants' contact information was filed separately from their pseudo names and the data collected. All data were stored and maintained on the researcher's password-protected computer server for a maximum of five years. This researcher, Walden University and committee members have access to this data. Participants were informed of this researcher's intent to reuse the data collected for future studies. This information was available on the informed consent page. Participants had the option to withdraw from the study at any time.

### **Summary**

In Chapter 3, I reviewed the basic qualitative research design and rationale to investigate Black sexual minority parents' racial and sexual identities. The qualitative method was the preferred method to emphasize that Black sexual minorities have a voice and bring awareness to their perceptions of racial and sexual identities. Interviews were used as instruments to enhance their voice further. Invivo coding or using their exact words to analyze data further enhanced the authenticity of their perceptions. For transparency, this study provided clear and understandable information regarding the purpose of the study, role of the researcher, issues of trustworthiness, ethics, dependability, and validity. In the instance an ethical issue arised, I planned to document and address them using the Belmont principles. In the next chapter, the results of the study are presented.

## Chapter 4: Results

The purpose of this basic qualitative study was to understand how Black sexual minority cisgender women in the Midwest-Southern regions of the United States perceive their racial and sexual identity as influencing their parenting. Furthermore, I sought to understand how they perceive their social support system. The RQs related to how the participants perceived their identities as influencing their parenting and how they perceive their social support system. Understanding perceptions of how Black sexual minority women in the Midwest-Southern regions of United States' parent in terms of their racial and sexual identity can improve social service providers' ability to act as liaisons for parents with multiple minority identities.

In this chapter, I provide the results collected from 14 participants. First, I described the research setting, demographics, types of data collected relevant to the conceptual framework of this study. Later in this chapter, I presented an analysis of this data and what methods were implemented to ensure evidence of trustworthiness.

### **Research Setting**

In-depth semistructured interviews were conducted using the Zoom meeting application. All 14 participants were able and willing to use Zoom to conduct the interviews (see Archibald et al, 2019). There was no cost for any of the participants to access Zoom. Each participant was given a link and phone number to use for the interview.

During each interview, I was stationed in a private room. I was able to ensure that no interruptions were made on my end. All 14 participants were in private settings;

however, on three occasions either their intimate partner or child briefly interrupted the interview, and on one occasion a participant's wife was present in the room. This did not interfere with the interview process. On two occasions the audio quality was compromised due to connection issues. I used reflexivity and member checking helped to clarify any unclear communication. I used reflexivity by stating what I heard the participant say, if the participant agreed that statement was correct, I continued with the interview. In the follow-up interview member checking was completed, which consisted of me asking the participants questions based on the reviewed transcriptions. This ensured my understanding of the transcript was consistent with their perceptions.

### **Demographics**

Nine participants resided in the Southern states of Alabama, Georgia, South Carolina, Tennessee, and Texas, and five participants resided in the Midwestern states of Kansas, Michigan, Missouri, and Oklahoma. I interviewed 14 cisgender women of color. The racial-ethnic identities they identified as were African Americans ( $n = 6$ ), Blacks ( $n = 4$ ), and mixed-racial ethnicities ( $n = 4$ ). The sexual identities they identified as were bisexual, lesbian, queer, and polysexual. The gender identities they identified as were feminine-presenting, masculine-presenting female, and queer-presenting. Participant age ranged from 30–51 years old, with average age is 39 years old. Table 1 includes the participants pseudonym, age, racial and sexual identity.

**Table 1**

*Participant Age, Racial and Sexual Identity*

Name	Age	Racial Identity	Sexual Identity
Ria	35	African American	Lesbian

Leslie	43	African American	Lesbian
Gideon	34	African American	Lesbian
Tre	40	African American	Lesbian
Mary	40	African American	Queer
Kady	42	African American	Lesbian
Alley	43	Black American	Queer
Mia	41	Black American	Lesbian
Ezra	30	African American	Bisexual
Patricia	51	African/Seminole American	Lesbian
Iyesha	45	African/Panamanian American	Bisexual
Bianca	36	Black American	Polysexual
Kyla	36	Black/Canadian American	Bisexual
Anne	35	Black/Nigerian American	Queer

Table 2 includes the partnership status, legally married or single, annual household income, and number of children. Of the 14 participants, most ( $n = 9$ ) were currently married to their same-sex partners. Seven participants parented children conceived within a previous heterosexual relationship, four parented children conceived through their partners previous heterosexual relationship, and three participants parented children conceived through artificial insemination. Participant education levels ranged from some college credit to graduate degrees. Their annual household income ranged from 25,000–150,000. These demographics collectively represent characteristics of the participants I recruited for this study.

**Table 2**

*Partnership Status, Number of Children, and Range of Annual Household Income*

Name	Partnership Status	Annual Income	Number of Children
Ria	Married	120–125	3
Leslie	Married	50–55	2
Gideon	Married	95–100	1
Tre	Married	40–45	6
Mary	Single	25–30	2
Kady	Married	120–125	2
Alley	Single	40–45	1
Mia	Married	65–70	2
Ezra	Married	450–455	1

Patricia	Single	55–60	2
Iyesha	Married	150–155	4
Bianca	Single	145–150	1
Kyla	Single	75–80	1
Anne	Married	70–75	1

### Data Collection

I collected data from a total of 16 individuals; however, two participants were excluded from data analysis because they did not fit the participant inclusion criteria. Initially my study included 20 states, after researching and defining the geographical location of Midwestern-Southern regions of the United States. I then submitted a request to the institutional review board to recruit from a total of eight more Midwestern-Southern states based on the U.S. Census Bureau (2016). This increased the geographical recruitment area as well as the probability of reaching my goal to recruit 10–15 participants. Due to this change, a total of two more participants volunteered to participate in this study.

All data were collected, via audio recorded Zoom, using in-depth semistructured interviews and follow-up interviews. Data were collected between August 2021 to January 2023, a period of 1 year and 5 months. A total of 28 initial and follow-up interviews were completed. Fourteen initial interviews, which ranged from 30 to 90 minutes, averaged about 35 minutes of time. Fourteen follow-up interviews ranged from 30 to 60 minutes and averaged about 20 minutes of time. The interviews were transcribed using rev.com, which totaled to 533 pages of transcribed words. I manually reviewed each transcript with the audio recording for accuracy. All audio recordings and transcripts were saved on my password-protected computer and then uploaded in Dedoose, a

password-protected data analysis software.

### **Data Analysis**

I used Dedoose data analysis software. Initially I planned to only use the open or inductive coding process where no pre-existing codes, themes, or conceptual framework are applied. However, I added the deductive coding process as the first step to identify the participants' minority identity developmental phases and their perception of family and community social support structures according to convoy model of social relations (see Kahn & Antonucci, 1980). This qualitative analysis is analytic induction, meaning the data are analyzed first deductively, then inductively (Patton, 2015). Thus, I reviewed the transcripts using deductive coding to analyze data based on their identity phases and social support. I then reviewed transcripts using inductive coding to analyze data for patterns and/or emergent understanding to produce themes. I applied the *invivo* qualitative coding method to both analytical processes. This coding method uses the participants' words as codes (Miles et al., 2013). This coding method is important in this study because the authenticity of Black sexual minority parents' voice, choice of words, language, and personal descriptions of their reality provide richer data.

For the deductive coding process, I created categories in Dedoose based on this study's conceptual framework. This study's conceptual framework entails the concept of intersectionality to explain how the participants racial and sexual minority identities interconnect to shape their parenting experiences and their perception of social support. I created three categories. The first major category was Black and lesbian identity, with one subcategory of identity development. Identity development had eight subcategories



referencing McCarn and Fassinger's lesbian identity formation and Helms Black racial identity development phases. These subcategories aided in identifying the developmental phase participants encountered during their identity and parental experiences. The second and third categories were Black lesbian parenting experiences and parenting support. All categories included subcategories. The subcategories individual, family, and community were applied to all categories to identify social contexts in which social support was perceived based on Kahn and Antonucci's convoy model of social relations.

After this process of coding, I transcribed the interview, read through the transcripts, and compared them to the audio recording for accuracy. I then summarized the transcripts to prepare for the follow-up or member checking interview. The summary and transcripts were emailed to my chair for accuracy. I then reviewed the transcripts applying the participants exact words as codes or *invivo* coding into the categories. For example, for Black and lesbian identity I identified words participants used to describe their racial ethnicity such as African American, Canadian, Nigerian, Black, people, person of color identity, origin, ancestors, and nationality. I typed these words into Dedoose as codes in the category Black and lesbian identity, under the subcategory individual. Then I reviewed transcripts for words, and/or descriptions relating to their individual perception of their racial identity. The participants' words identified were "I'm a warrior," "race is the first thing I've known," and "it means freedom." These words were also typed as codes in Dedoose into the corresponding category. When the participants described individual experiences that correlated to characteristics within an identity phase I placed the participants words as a code under the corresponding minority

identity phase. All the deductive categories referencing the conceptual framework were completed in the same way.

Next, using the inductive coding process, first I reviewed the transcripts to identify words associated with their racial and sexual minority identities and the contexts in which the participants described them. For example, I identified and *in vivo* coded the participants' exact words such as, "immerse myself in Black culture," "never heard a thing like good or bad hair," "it means beautiful." Then interpreted codes were developed from overall patterns and social contexts the participants described. I identified the interpreted code positive perceptions of racial identity and sexual identity as a pattern amongst the participants. The remaining interpretive codes were identified and formed through the same inductive coding process. I used reflexivity through ensuring both the inductive codes and interpretive codes coincided with the participants exact words and contexts within the transcripts.

Themes emerged from the deductive, inductive, and interpretive codes identifying participants summative experiences with parenting and social support within their racial and sexual identities. Collectively I created 380 codes, that were applied 1,529 times. These results are presented in the format of three major themes, their subthemes, and supporting quotes. The three major themes were (a) social acceptance of sexual and racial diversity, (b) need for positive sexual identity socialization versus racial identity, and (c) support of shared racial and sexual identities.

### **Evidence of Trustworthiness**

In this basic qualitative research design, I used triangulation to maintain this

study's trustworthiness. Triangulation consists of using several data collection methods to comprehensively check the accuracy of participant perceptions (Patton, 2015). These methods consisted of reflective listening, member checking, audio recording and transcription for accuracy. Collectively these methods promoted validation and trustworthiness in this study.

### **Credibility**

Issues of credibility were addressed by making sure the authenticity of the participants' perceptions were preserved through *invivo* coding. For this study it was important to use culturally competent and consistent language during correspondence, interviews, and data analysis. This was particularly important when identifying the participants' varying parenting roles, that in many instances are different than the traditional heterosexual parenting nomenclature. For example, one participant identified as a noncarrying parent while describing her experience with family formation. The participants' exact words "noncarrying parent" were coded and then I developed the interpreted code "family formation experience."

I also addressed credibility through reflective listening skills during interviews. This entailed paying attention to the participants' expression, content and meaning. This was verified by restating my understanding of their responses, during the initial interview and member checking. The transcripts were reviewed and compared to the audio recording for accuracy. I then provided a summary of the transcripts to my chair that included potential questions for the follow-up interview. My chair provided feedback that assisted me with staying focused on the RQs, and pertinent information that may have

been overlooked during the interview process.

The member checking process was utilized to understand and maintain accuracy of information transferred between the participant and the researcher. This ensured my interpretation of the data was accurately based on participants' perceptions. This also ensured the participant experiences were not overlooked, withheld, or mistakenly omitted.

### **Transferability**

Transferability refers to the data's ability to represent experiences of broader population of Black sexual minority mothers in the Midwestern-Southern United States. I enhanced the transferability in this study through providing thick descriptions of the 14 participants within the context of their perceptions which are presented later in the result section of this chapter. The demographic profiles of all participants included ethical and culturally competent descriptions of the participants' racial and sexual identities, family structures, education, and socioeconomic status.

Although the goal of this basic qualitative study was not to generalize to the broader Black sexual minority population their experiences may be similar in certain aspects. However, the data from this study may not be representative of Black sexual minority mothers who are living in poverty, considered poor, have a lower socioeconomic status, and/or those with no college education. Results from this study also have limited transferability to Black sexual minority mothers younger than 30, or older than 55, and transgender individuals.

## **Dependability**

Dependability was addressed through triangulation of audit trails, committee feedback, and member checking. I used an audit trail to document steps taken and changes that occurred during data collection. This documentation provided a consistent overview of recruitment strategies, data, research design and methodology, pertinent discussions with chair, personal reflections, and processes taken to ensure evidence of trustworthiness.

Triangulation was used to compare information, gain more understanding, and reduce bias in the following steps. During the semistructured interview, I observed the participants body language and tone to ascertain the context of their perceptions, these were noted in my journal after each interview. I then compared these observations to the Zoom audio recorded interviews and transcribed interviews to ensure the context was accurate across data collection methods. I made corrections in transcripts where needed then the transcripts and follow-up summaries were then sent to my chair.

If my chair provided feedback regarding any discrepancies between the transcripts and follow-up summaries, the transcripts and audio were reviewed again and corrected as needed. These discrepancies were not limited to questions or responses being out of scope of RQ and purpose as well as clarity needed to ensure my perception of participants responses were accurate. Discrepancies were cross checked with my previous observations, audio recordings and transcripts again to ensure accuracy. I also created an audit trail, to document any changes, personal bias and reflections that came during the data collection process.

I conducted follow-up interviews with member checking on average a month after the initial interview and transcripts had been analyzed. Data collected from participants at different points in time helped to ensure dependability of data over time.

### **Confirmability**

Confirmability was addressed in this study by maintaining objectivity, presenting transparent data, and ensuring the results of this study were formulated from evidence-based literature, and research methods. I used reflexivity to ensure that my personal biases did not interfere or misinterpret the participants responses, or the data collected. I also acknowledged my outsider status as a heterosexual woman. This assisted in maintaining an objective view during the data collection process.

Prolonged engagement was applied to learn more about Black sexual minority culture and nomenclature. I joined Black LGBT social media groups as a friend or ally of the LGBT culture. I also participated in social work trainings such as Ethics: Applying an Intersectional Lens to Trauma in the Black LGTQI+ Community which was presented by LGBT Affirming Therapist Guild via Zoom. This assisted in reducing my personal bias, enhanced my understanding of the culture and researcher/participant trust and validity during the data analysis process. In the results section I also used thick description to support my interpretation and context of each quote for confirmability in trustworthiness.

### **Results**

In this study, I presented findings on Black sexual minority mothers' racial and sexual identity, parenting experiences, and perceived social support. The RQs were: 1)

How do Black sexual minority mothers in the Midwest-Southern regions of the United States perceive racial and sexual identity as influencing their parenting? and 2) How do Black sexual minority mothers in the Midwest-Southern regions of the United States perceive their social support system?

I identified three themes and five subthemes during data analysis. Theme 1) Social acceptance of racial and sexual diversity. This theme answers RQ number one through explaining how Black sexual minority mothers' experience of parenting is influenced by how they believe their family, community, and society perceives their identity. This theme had one subtheme, religion a barrier to supporting Black LGB which answers RQs one and two. This explains how Black sexual minority mothers parenting and perception of support are influenced by acceptance from the religious community.

Theme 2) Positive socialization of racial identity vs. sexual identity. This theme answers RQ number one through explaining how participants perceived positive racial socialization as more accessible to their families than positive sexual socialization. This theme had two subthemes which answer RQs one and two; the first subtheme is Lack of community support; this theme explains how Black sexual minority mothers perceived parenting and identity support within their communities. The second subtheme is Forming families and parenting within their sexual identity; This subtheme explains how Black sexual minority mothers experienced and perceived socialization of their sexual minority parenting identity during family formation.

Theme 3) Support of shared racial and sexual identities answers research questions one and two through explaining how Black sexual minority mothers perceived

identity and parenting support from individuals with shared racial and sexual characteristics as more salient than support received from individuals who do not share racial or sexual characteristics. Sexual and racial characteristics refer to sexual orientation, gender and being a person of color. This theme has two subthemes: the first subtheme Black grandmothers, an obstacle, then strongest support answers RQ number two through explaining how Black sexual minority mothers perceived support from their mothers, and the second subtheme identity and parenting support of same-sex partner answers RQs one and two through explaining how they perceived support from their partners who shared their racial and sexual identities as well as their influence in their parenting roles and decisions.

Being able to identify and share sociopolitical adversity with other individuals in terms of race and sex is essential to perceived feelings of support. The participants' support system can influence their perception of their identity and parenting experience. Their experience surrounding these identities often influences their daily lives in terms of how Black sexual minority mothers form families, implement various parenting decisions and styles.

### **Theme 1: Social Acceptance of Racial and Sexual Diversity**

Social acceptance of racial and sexual diversity refers to the extent participants' family structures, parenting styles, and decisions are interconnected with historical and current acceptance of racial and sexual diversity. Some parents used parental advocacy to overcome and compensate for low acceptance of racial and sexual adversity. While others parented in ways that limited their family's accessibility and interactions with



perceived adversity.

All the participants had positive perceptions of their individual racial and sexual identities. In some respects, the participants' racial and sexual identity were separate from their parenting, in other ways those identities overlapped to shape their parenting experience. For Black sexual minority mothers' experience of parenting is influenced by how they believe their community will perceive their identity. Thus, social acceptance of their minority identities influenced their parenting style and decisions. Kady, identified as a female, masculine presenting stepparent of two children. She perceived she overcame social acceptance obstacles related to her minority identities. This perception influenced the personal values she instilled in her children. Kady stated:

we went through struggles to be who we are, just to be able to love each other.

And we did that for you guys, to be able to be who you are, be free to be whoever you want to be.

Iyesha a married mother of four children, stated, "the most influential aspect of being Black and queer is that it allows me to be more open with my children, and to teach them what it means to just appreciate humanity." Mia a married parent of two children stated, "I liberated myself early enough to know who I am as a parent. Even with this weird, blended family situation, nothing has negatively impacted them."

Social acceptance of sexual diversity influenced ways participants managed their sexual identity in terms of who and to what extent they disclose their same-sex orientation. Mia and Mary appeared to be in the exploration phase of their lesbian group membership identity development. They reframed from public exposure of their

individual sexual identity to avoid heterosexism and homophobia towards their family and children. For example, Mia stated, “I don’t do a lot of things with people outside of my house. I have no interest in intermingling with the outside world.”

Mary, a single parent of two elementary aged boys, who chose not to live openly and express her queer sexuality in her town stated:

I think my biggest challenge as a parent is just the outside society because they judge my family, not us. You know, they look at us and they pass their comments, I have to talk to my son, and explain why they said, looked, or did what they did. That’s the biggest challenge, other people, and their small minds.

Alley, a single, mother of a fourteen-year-old son, described a personal acceptance of her individual lesbian identity, however unlike all the other participants she chose not to disclose her sexual identity to her son. She stated:

It has been one that is parent first and queer is out of sight. My son has no idea that I... I can just cry right now. He just doesn’t know because I don’t want him to know. I don’t want to put that upon him. I don’t want to engage him in that lifestyle. I just don’t want to. Some people, it works out and some people it just don’t.

Alley described concerns of societal challenges her and her son may face living openly as Black queer family. She further stated:

I had this strong conviction that he’s mine and that my gayness will not interfere in it. Now, as he’s gotten older, I’m glad I didn’t tell him. I’m glad I didn’t have to juggle my lesbianism with parenting or that he had to be involved in it.

Bringing same sex into a child's world, or their school, it's not cool. My child can be teased about that. You're putting a lot of pressure on this kid to stand up for his mom.

Kyla and Tre, both described situations where their sons were teased, bullied or outcasted due to their lesbian identity. Tre and her wife began their relationship eighteen years ago when same-sex relationships were less accepted. Tre stated, "in elementary school, mainly our son, he received a lot of backlash with us being gay, our daughters really didn't have a big effect." After that incident, she stated, "we made sure we didn't push our beliefs on our kids, nor show public affection, in public people wouldn't know that me and her was in a marriage or we were together." Kyla who identified as a lesbian single parent of a teenage son stated, "several moms said their kids weren't allowed to play with my son once they found out I dated women." Kyla acknowledged she started to date men and stated it was a "disaster."

Black sexual minority mothers are accustomed and socialized to navigate issues related to their racial identity. However, navigating issues related to their same-sex orientation is often a new dynamic. With public visibility, comes more scrutiny and challenges. Although presenting as a single Black heterosexual female parent, comes with its negative stereotypes and stigmas, the participants perceived this to be a viable option to protect their children.

Ezra, Kady, and Kyla believed their children's minorities identities were marginalized and oppressed within American society. Thus, they parented in ways they believed prepared their children to overcome these disparities. Kyla stated, "I already felt

that I had already given him a stigma because I was a Black, single mother and that's already a stigma in itself, but to add that..., I just felt so guilty.” Ezra a married mother of one infant daughter stated:

I feel like my parenting style has to be two steps ahead. I've always got to think about what she can face, how to give her best chance out here because she already has strikes against her. And that's how I think about parenting like. I've got to give her the best chance and I've got to make the best decisions for her.

Kady compared parenting within minorities identities to the three-strike rule, she stated:

three strike rule, it's like seeing all sides of the struggle as an African American, a female, then you are LGBTQ, and you are lesbian, and you see your kids and you have to prepare them for what could possibly happen.

***Subtheme: Religion a Barrier to Supporting Black LGB***

Eleven participants perceived the Black religious community was not open to sexual diversity. Participants' experiences with the Black religious community were that they were not supportive of sexual diversity. These influenced participants' parenting support and their participation in the church or religious community. Parents perceived when they attended church it is not because the religious community accepted their lesbian sexual identity, but because they needed to be changed.

Gideon a masculine presenting lesbian whose daughter attended a Christian school, she and her wife decided not to disclose their same-sex relationship to the school or even acknowledge Gideon as her parent. Gideon stated, “I haven't been able to be a

visible parent at our daughter's Christian school, because there is such a strong disdain against homosexuality." When she attends events at the school she attends as a family or a friend, or an older sibling. Similarly, Kyla said:

My mom's like, "You're supposed to teach him the Bible." then I thought, it's not his fault. He didn't ask to be here. So let me give him this life. Then I would always try to take him to church and bible study.

Furthermore, during Kyla's participation in church she went back and forth between dating men and women due to religion, she was trying to understand where she was, what she actually believed, what she really wanted, and who she was trying to please. She experienced mental anguish due to the conflict between her religion and sexual identity. What these participants have in common is that religion provoked them to suppress their sexual and parenting identity, which often causes cognitive dissonance between valuing their sexual identity and religious identity.

Other participants described being disowned by family and friends due to the intersection of their lesbian and religious identity. Iyesha who grew up very religious stated, "some of my closest friends were also very religious, once I started expressing it and fully allowing myself to be absorbed in that identity, I lost some of those friendships." These friends were also very supportive of her children and when she started being open about her sexuality, they disowned her and her children.

Anne a married queer presenting parent of one son was very closely connected to her faith and church family stated, "when I was outed, it was very much a struggle, I thought I had this community that really cared for me and everything. But once I was

outed, I legit lost a whole community of church folks.”

As a result, these participants’ families are not attached to any faith-based institution by choice. Anne stated, “I’ve not come to find a queer inclusive church that doesn’t just continually teach against how homosexuality, same gender attractions, and how we’re just all going to hell and all that.” Similarly, Mia stated:

It’s always interesting in Black spaces when I say, “My wife.” Because the mothers of the church kind of think, “What?” You know, so it was so bad that I just stopped going to church altogether because I can’t deal with homophobia and Jesus.

## **Theme 2: Positive Socialization of Racial Identity Versus Sexual Identity**

This theme refers to Black sexual minority mothers in Midwestern-Southern U. S. perceiving an increased need for accessibility to positive sexual identity socialization versus racial identity. Most participants stated they experienced positive racial socialization, from their families and larger Black community, and all the participants expressed the need for positive Black LGB socialization. The benefits of positive racial socialization did not transcend to heterosexism and homophobia to aid in overcoming oppressions experienced by racial-ethnic individuals with nonconforming sexual identities. Thus, the need for positive sexual identity socialization is needed to help buffer for disparities related to sexual minority identities.

Participants attributed their perception of racial identity to socialization with women of color, their families, their communities, their ancestors, and the Black culture. For example, Mary identified as an African American stated:

My parents never made us feel like we had to be less than, made us feel like we were just as good, we just had to go out there and show them. My participants were a great example in my community, so it gave us a name. It meant something wonderful to me. And now I need to also teach my kids how wonderful it is to be Black.

Similarly, Alley who identified as a Black American described community support of her racial-ethnic identity. She stated:

My community, I didn't go to school with white students. I went to Black Catholic schools and Black public schools. I walked to school. I grew up in the '90s, your teacher was like your mentor, so I had a really good education. I didn't have to struggle with accreditation, teacher shortage, or my school lacking academically. I didn't have those problems. I just learned. I was around people that looked like me. I never went to suburban school. I didn't have a need to. We went to church in my community and lived in the community. I had activities that developed a love of my Blackness because the people around me loved their Blackness.

Alley further stated because of this positive racial socialization, "I wanted to really impress upon my kid I'm Black and I love being Black. And I want you to love being Black too."

This positive socialization did not extend to the participants lesbian sexual identity. Thirteen participants experienced microaggressions related to their sexual identity from within their Black family, community, and culture. They expressed feeling

estranged, disowned, unacknowledged or undermined within their lesbian identity. These feelings were imposed by the social support system they depended on for interpersonal validation. Mary stated, her family believed the lesbian sexual orientation “is like... it’s a sin. That’s not the way you are supposed to live your life. And when I came out of college, my family disowned me.” In this example Mary’s lesbian sexual identity lacked support of her family, however as aforementioned her racial identity was nurtured with support, advocacy, and affirmation.

***Subtheme: Lack of Community Support***

Black women’s local communities played an integral role in how they navigate their minority identities in terms of parenting. Six participants described experiences related to the lack of Black sexual minority parenting support within their geographical areas. Mary, Mia, and Iyesha, lived in majority White, religious, conservative semi-rural communities with limited Black lesbian parenting resources. Mary described her choice not to openly show her sexual orientation in her town. She stated, “in this small town, nobody really knows who I really am. They don’t understand my worries, my struggles, or how I’m trying to raise my kids with an open mind in this small, minded town.”

Mia wanted to have a connection with the Black community however she perceived they were homophobic. Mia stated, “the White LGBTQ community here is great, they’re so amazing, and they’re wonderful people to be around. However, they’re not my people. I want to have that type of relationship with my people, but my people are homophobic.”

Iyesha felt her parenting was unsupported in terms of childcare within her



community. Iyesha stated:

We've found a host of White childcare providers that are very open. I grew up around everybody Black and I would love for my children to have that experience because I believe our community and our culture is powerful and there's so much beauty in it and I want our children to experience that. But finding somebody who's Black and who's, like I said, a queer ally or queer themselves that's in the childcare space has been difficult for us.

Ezra, Alley, Anne, all resided in predominantly Black communities, however they also described limited access to Black sexual minorities and resources to support their queer parenting identities. Ezra stated "I think in Tennessee we're the buckle of the Bible belt. There's a lot of Black people in Memphis, but not necessarily a lot of gay people."

Alley, also said:

I do think because of the small community of Black lesbian women here in Kansas City, we don't have too much to look up to. We're navigating this in our own ways. If we were, say in Atlanta, New York, or New Jersey where there was a Black lesbian population, a community, a family, then you would pattern yourself off of what you see.

Anne further stated:

my white, hetero, cisgender friends, are very supportive. The White queer community is supportive. It's just different when it comes to Black queer parenting. I've only met one other Black family, a non-carrying, and carrying mom, with a kid, except they had a daughter. It was like meeting a unicorn

because it's rare here in Dallas, Texas.

Participants described a lack of understanding regarding nonheteronormative families within their Black community. Alley stated, "in the Black community, Black women cannot be bisexual, the dude will think your freaky and, but the girl thinks you might leave her because you still like guys." Similarly, Patricia expressed lesbianism is hypersexualized, their relationships values are not viewed in various forms of intimacy, lifestyles, or love languages. Mary stated, "the Black community is very homophobic, you're not acknowledged as a person in social settings, and lesbian is taboo in the Black community "don't ask, don't tell"." Ria, stated, "I do feel like I've gotten more pushback or questions, confusion, not understanding, those kind of things from other Black people, but the majority of my encounters have been positive."

Despite the lack of understanding within the Black community. The four participants who resided in predominantly White, and religious conservative areas felt a disconnect with Black culture. This disconnect hindered their socialization within their racial identity development and their sexual identities. Advising they plan to move their families closer to their family of origin, a more racially diverse, and LGBTQ friendly areas. Mary stated, "I'm moving to where one of my best friends' live. The one that's Black, gay, and married. The life I want." Mary appeared to yearn to live openly within her sexual identity and not in fear of discrimination towards her family or children.

Oftentimes, Black mothers are their children's first experience of social support, acceptance, love, and positive socialization to navigate minority identities. These results show that Black sexual minorities mothers perceived more viable support of their racial

identities than their sexual identities. Furthermore, results support that Black sexual minority mothers in the Midwestern-Southern United States perceived the need for more positive sexual identity socialization. This need was not limited to the participants marital, age, or socio-economic status, or the racial community in which they resided in.

***Subtheme: Forming Families and Parenting Within their Sexual Identity***

Black sexual minority women's parenting identities are often disconnected, estranged, and unsupported during and after family formation. This subtheme explains how Black sexual minority mothers experienced and perceived socialization of their sexual minority parenting identity during family formation. As well as their accessibility to positive socialization within their sexual minority parenting identities. Eleven participants' children were conceived within the context of a hetero relationship due to the lack of positive socialization and support of Black lesbians forming families.

Mia, Leslie, Alley, Mary, Kyla, and Patricia ages 36–51 years old, identified as biomothers who conceived their children through previous heterosexual relationships. Kady, Tre, and Gideon ages 34–42 are stepparents whose wives' conceived children through previous heterosexual relationships. Iyesha age 45, identified as the mother of four children, she adopted while in a previous heterosexual relationship. Bianca age 36 identified as a co-parent of a daughter who was conceived by her ex-partner within a previous heterosexual relationship. All the participants in this study who conceived within the context of heterosexual relationships, professed a closer connection to the female energy during the conception of their children. For example, Mary stated, “clearly I like men too, but I just love women more. I'd rather be with them. They make me happy

in every way.” But because her family was not supportive of her sexual identity she suppressed her connection with women.

Mary, Anne, Iyesha, Kyla, and Patricia described suppressing their lesbian individual and group membership to maintain their familial support system during family formation. Participants in the awareness phase were aware of their connection to women however psychosocial stimuli such as family may influence them to normalize heterosexual roles. These participants described this experience. Anne who previously married a man stated, “I just got married to please my parents and please people.” Mary whose parents disowned her stated, “I realized I’ve been trying to please everybody else by living openly as a straight person.” Mary inevitably married a man and conceived two beautiful sons. Similarly, Patricia also a mother of two boys stated:

My family was very concerned about the optics of me being pregnant and not being married, and I just wanted everybody to shut up and leave me alone and let me go through my pregnancy. I married a man who knew I was lesbian, to have children. I liked him enough.

Due to their family of origins concern with how the outside world perceived their individual affinity to women and affiliation with the lesbian group. They felt compelled to suppress these feelings and pursue hetero relationships, while yearning to freely express their intimate connection with women.

Furthermore, during these participants’ awareness phase they experienced a lack of positive Black lesbian socialization. Iyesha, stated, “it’s still a tough topic to broach within the Black community, and at the time there was nobody else in my family who

was openly gay.” Patricia expressed her lack of exposure to Black lesbians forming families. Describing that her boys were conceived within a previous hetero marriage in part due to her mother not supporting her lesbian identity, and in part because she was not exposed to other Black women in the lesbian community who wanted children. She stated, “I wish I had done it differently, I wish I had met a woman that wanted kids, none of the women that I was in community with, wanted kids, as I was in my early thirties.”

In contrast, Anne, Ezra, and Ria, ages 30–35 were in the internalization/synthesis phase of their sexual identity when they formed families within their same-sex relationships. In this phase many issues related to their lesbian identity had been resolved and those experiences aided in navigating social contexts in which their sexual identity is challenged. Within the last decade Anne, Ezra, Ria, and their wives conceived children through artificial insemination. Ezra and Ria identified as the carrying bio-mothers of their children. Although Ezra conceived via a sperm bank and Ria conceived with the sperm of a known donor, they both underwent the invitro fertilization (IVF) process. Ezra, commented during her IVF process, “it was hard for me to find people that looked like me that I could talk to.” She expressed, while her socioeconomic status provided access to family formation resources, she felt further isolated from a community of Black queer moms. She yearned for tangible positive socialization with other women of color who also conceived through the IVF process. Ezra and Anne both identified social media outlets as their only connections to other Black queer parents, particularly women who underwent IVF.

All fourteen participants described experiences in which they perceived their

parenting identity was undermined due to their sexual identity. These experiences took place within their family and community. As well as in medical, educational, and judicial settings that are traditionally known for supporting healthy parenting and family structures.

Anne and Ria both chose to conceive via a known sperm donor, Annes wife via in-home insemination and Ria at the doctor's office. Anne described experience in donor choice, "there's not a lot of Black men who donate their sperm, and so we went through a known donor, and yes, he's Black because we are intentional about having a Black kid, because we are Black." Anne further expressed the prenatal and birthing experience was very tumultuous due to microaggressions in the hospital setting. She stated, "in the hospital, my spouse's last name is the same as mine, but for some reason they kept using their maiden name. And it was just microaggressions that added up, our birthing experiencing was just really traumatic." In this instance their sexual, marriage, and parenting identities were all invalidated by a common disregard for language, and its impact when addressing nonheteronormative parents.

Anne and Ria both expressed the challenges of navigating through hospital birth certificates that don't fully represent all family structures. Anne stated, "In the county where our son was born, they we're supposed to have gender neutral birth certificates, we asked for it, and they didn't have it. I had to cross out everywhere that it said father and put mother." Ria, currently pregnant with she and her wife's third child, described a similar conflict in understanding her wife's parenting rights on birth certificates.

With our girls, we weren't married then, we filled out the birth certificate in the

hospital, they'll put her name, but it will be under father, not mother. We still are not 100% sure that gives her "rights". Since this baby will be born in this marriage, I still don't know if that secures her rights. God forbid, if we got divorced, but does she have rights, does she not? I don't know."

Ria and her wife ultimately ended up going through the legal process of adopting to ensure her wife's parental rights. During the family formation process Anne questioned her parenting identity. She stated, "even when doing paperwork, I got to remind myself, you are Marcus's parent, you can take care of Marcus, you provide for Marcus, you're there for him, you support him."

In other social settings, lesbian mothers often struggle with the need to prove their parenting identities. Kyla expressed her sons' mother had to prove her loyalty as a parent. She stated "no one believed that our relationship was legitimately about our child. We never messed around again, No one ever believed it." Similarly, Ria described her mother's initial disregard for her children's mother:

I was three months pregnant, we separated, and my mom was like, "Oh, well she isn't their mother," I said, but if she was a man, and she had gotten me pregnant, and had walked away, she would still be the father, right, so what's the difference?

Her wife's legitimacy as a mother was disregarded at the same time their relationship ended.

Kady described a situation where her parenting identity was questioned. She stated "if you think my lifestyle is a phase, my parenting is a phase. They say things like,

she doesn't want to be a parent, she's a lesbian. What does she know? She never gave birth to kids." Similarly, Bianca stated, "No, I did not carry her. I wasn't there the whole time, always trying to convince people that I'm a mom, even though I did not carry, it's kind of like that stepparent." Anne stated a similar conflict in her parenting identity:

People give more stock to the parent who carries the child. We have words like bio-mom, and we have to realize how language can affect people. Being a non-carrying mom, being a non-bio-mom, it doesn't take away from the fact that I am Marcus's parent. Yeah, there's biology and all that. But, what about adoption and stepparents? People see these as valid. But two same gender, or queer moms, or two gay dads, it's a whole different dynamic.

Sexual minorities' identities are often challenged within the legal justice system in ways that do not support them as parents. Patricia and Mia described child custody issues where they felt their parenting was undermined due to their lesbian identity.

Patricia said:

I am recently divorced from a man; we were together for 20 years. He knew I was a lesbian when I got married, interestingly enough he tried to use lesbian against me in the divorce for custody of my children.

She expressed her need for the support of her mother; however, her mother disagrees with her sexual orientation. Patricia stated, "She doesn't know, he tried to use me being a lesbian against me in court, things I went through in my divorce, I couldn't share with her, I don't trust that she would have been on my side."

These Black mothers faced challenges regarding their sexuality from within their



families and communities. These challenges seemed to have been exacerbated when professionals in institutional settings were not culturally competent within the services provided to them. Next I provide participants' perceptions of support.

### **Theme 3: Support of Shared Racial and Sexual Identities**

Black women oftentimes have a stronger connection and are more perceptive to support from individuals with shared racial-sexual identities. Due to having similar racial-sexual identities they often share a history of overcoming racism, sexism, and poverty. Thus, participants perceived this support as more important due to its relevance in parenting their children regarding their minority identities.

In this study Black sexual minority mothers perceived identity and parenting support from individuals with shared identities as more salient than support from individuals with different racial and sexual identities. Eleven participants credited women of color as influencing development of their minority identities and supporting their parenting styles. Although, these women are presented in various roles, their mothers were particularly identified as an important source of strength and support of their racial identities. Anne showed concern as she perceived her mother's support of her racial and sexual identity as intangible. Thus, she relied on other sources to support advocacy of her minority identities. For support of her minority identities, she stated, "having a community of phenomenal Black women who just let me be me, and didn't feel like they had to push me, guide, or mold me into being something that confined to the dominant society." Anne displayed this same intent for her parenting style. She stated:

we as parents are very intentional about raising this Black kid over here, that's

why we do the work that we do to deconstruct this racist, queer phobic, oppressive society so that homie can just be a kid to enjoy and create the world he wants to live in.

Similarly, Gideon stated:

strong Black women showed me how to be a superhero, be proud of who I am, how to communicate, how to have a voice, how to be there for other people, how to encourage and motivate, how to listen, how to just be me and be proud of who I am.

Gideon referring to her daughter further stated, “because our daughter is Black and a woman, she is able to ask questions about her own sexuality, and because we are who we are as parents we have the opportunity to share our stories with her.” Due to shared identities Gideons’ daughter may inherently be able to identify with and overcome the same challenges as her parents.

***Subtheme: Black Grandmothers, an Obstacle, and Strongest Support***

The majority of Black sexual minority mothers in this study described an intrinsic concern for their relationships with their mothers particularly while they were in the awareness and exploration phases of their lesbian identity development. This concern was present whether their mother’s conflict regarding their sexual identity was explicit or implicit. In these phases, individuals focused on their internal attitudes associated with their same-sex orientation; however, their perception of their lesbian minority group status is not yet addressed.

As aforementioned, eleven participants in this study acknowledged the

importance of their relationships with their mothers in the context of their sexual identity. Ultimately, eight of 14 participants identified their bio-mothers as supportive of their lesbian sexual identity. However, their mothers' support did not come without challenges. These participants perceived their mothers as one of their first obstacles in the awareness and exploration phases of their individual lesbian identity development.

Gideon described the dichotomy of conflict and relief when she came out to her mother. She said, her mother stated, "I will never agree with what you decide, but I love you, nonetheless. It's not going to change anything." Gideon expressed that after her disclosure to her mother she felt more confident in her sexual identity, she stated "I wasn't losing my mother, I wasn't being shunned, and I wasn't being kicked out." She described witnessing other mothers disowning their daughters due to their same-sex orientation. Similarly, Ria described the value of her mother's relationship:

It didn't matter to me who else had an issue with it, it was always the fact that my mother had an issue with it. Just not wanting to disappoint her, and the relationship her and I have always had is just, I wouldn't have wanted to have any reason for us to not communicate.

Iyesha suppressed her identity to maintain validation of her mother. She stated: I felt like actually putting those words to it and speaking those words would hurt my mother in some way, so it probably was a subconscious choice to not identify because I felt like I might've been protecting her in some way.

Other participants identified their mothers as their first bully within their lesbian sexual identity. Bianca, who identified as polysexual stated, "she was my first bully, it

took a while for my mother to come around, like five or six years.” She further stated, “You know, your mom is kind of like your first best friend. I was able to talk to her about relationships, she was my biggest advocate.” Kady, also exclaimed “She was my biggest supporter because she was one of my biggest haters at first.” When they initially disclosed their nonheteronormative sexual orientations, their mothers did not fully accept their sexual identity. Despite their mother’s partial acceptance and contradicting heteronormative beliefs, they continued the valued life connection often established between mothers and daughters.

Furthermore, once these Black women decided to form families within their lesbian identity, their mothers became one of their biggest parenting resources. These participants detailed their mothers’ support of their parenting. Kady stated, “Before my mother passed away, she would say, you’re always good with children, children just love you.” Anne stated, “my mom, she loves Marcus, she tries to do what she can.” Bianca stated, “my mom she’s happy, she has a grandchild, they go shopping, to the pool, they’re like inseparable.” Gideon stated, “If there’s an emergency or a daily on anything that that we may need for our daughter, she’s always one of the first to see how it is that she can help.” It appeared as if their motherly instinct to support their daughters and their grandchildren super ceded the odds of heteronormative beliefs.

These participants perceived the support of women in terms of racial and gender identities as important. When they spoke of connections with other Black women the support of their Black racial identity and womanism oftentimes was naturally implied. However, because their same sex identity was outside of heteronormative and religious

views, they questioned the support and status of their relationships with their mothers.

In contrast Anne, Kyla, and Patricia perceived they never fully received the support of their mothers within their minority identities or parenting. Patricia stated, “my mother made my life hell.” Kyla expressed that till this day her mother’s religious views severed their relationship. Kyla described this disconnection caused her mental strife. She stated:

I’ve been trying to release the anger going to therapy helped me develop some form of relationship, and I’ve just accepted that she’s just not the grandma that I would’ve hoped she would’ve been. I just have accepted it because you can’t change nobody.

Patricia and Kyla compensated for their mother’s absence through forming relationships with other women through kinship families. Kyla stated, “their parenting support....her family was a huge blessing for me, honestly, she was always at school functions, because if he had a play, all of her people were showing up.” Patricia stated:

I have a wonderful support system, I’m fortunate, my very dear friends we’ve been friends for 30 years. My friend Darnell, who is my child’s godfather, who is actually a transgender woman, she refers to himself as intersex, but she’s supportive of me and loves me unconditionally. A host of other friends that are just my people. They check in on me and I check in on them. Cheree, I’ve known her for 30 years. I had some good people in my life, they have definitely been in my family, where my family has not. My kids refer to them as aunt and uncle, or Tim.

While Patricia's mother helped her build confidence as a woman, she expressed her mother rejected her African and lesbian minority identities. Similarly, Anne expressed her mother's support and understanding of her minority identities were limited and intangible. While disclosing her sexual identity Anne stated, "When I was finally like, "I'm gay, I'm queer, my mom was like, "well, they would have to prove that in court because you can't have nobody accusing you of that." Anne further expressed that her mother doesn't know how to support her lesbian and racial identity.

While in the emersion/immersion phase of their racial identity development and in the deepening/commitment phases of their sexual identity development. Patricia, and Anne described creating personal connections to the Black and lesbian minority group. Their positive racial and lesbian socialization was obtained through learning and admiring the narratives of women of color.

They credited Black women in literature, such as Audre Lorde, Angela Davis, Patricia Hill Collins, Pauli Murray, Barbara Smith, June Jordan, and Zora Neal Hurston, as support of their racial and sexual identities. Patricia, stated "I immersed myself in books, I read lesbian writers, and I immersed myself in the culture, and I surrounded myself with people who we're proud to be who they were, they became my family and spiritual parents." Reading the narratives of Black women in literature, aided in navigating their minority identities. This was evident through their careers as educators, and their parenting ideologies. Anne stated:

I can't say I'm going to be a Black parent today or I'm going to be a queer parent today. They all meet and intersect to inform the decisions I make as a parent. And

they're usually from a space of liberation and making sure that Marcus, and every other Black kid, has what they need.

***Subtheme: Identity and Parenting Support of Same-Sex Partner***

In this study twelve of 14 participants perceived identity and parenting support in having a connection with a lifetime partner or wife. Of these twelve participants, nine participants identified as married and three as single. The remaining two participants identified as single and showed no interest in marriage or having a lifetime partner. The partner of sexual minorities oftentimes shares racial and/or sexual identities presenting a symbiotic relationship which supports each other's navigation of life's challenges. This theme explains ways in which participants perceived support of their partners in providing positive identity and parenting support. Anne expressed how her wife's perception of identity was significant in her developing a positive sexual and parenting identity. She stated:

When I met my spouse, they were very much themselves. They knew who they were, they were confident in their queerness, and they didn't allow anyone to dictate that. And seeing that example, that they were like, regardless of what society family, or people says, I'm just going to be me.

Anne described how her wife's perception assisted her sexual minority parenting identity, which influenced her support of her son's minority identity. She expressed that they as parents were very intentional about their sons' surroundings and what he is exposed to. Gideon stated, "my support definitely comes from my wife for sure on a daily basis." The validation and support of a spouse may help formulate a positive sexual

minority parenting identity which promotes positive well-being. Kady and Leslie described shared parenting values with their wives. Kady stated:

my wife is a big supporter; we have some of the same values when it comes to parenting and upbringing. Where children are supposed to listen to elders, be respectful, and manner able. You know, it's just like we kind of have like the basic values in that and not being spoiled. So parenting, she's my biggest supporter.

Leslie, who was married to a man when she conceived her children made the comparison between her ex-husbands' and her wife's parenting styles. She stated:

I have more understanding being with my wife than I did being with my husband. I felt like I was forced to play a mother role, because it wasn't just my kids, it was his. I was forced to be a mother, a stepmother, and all-around nanny. I was miserable, versus me being married to my wife, it's like these are our kids, we share these roles, she takes time with the children, it's more nurturing, it's more loving that makes it kind of better for me.

In contrast, three participants Patricia, Mary and Alley all voiced a desire to be married within the context of their sexual identity to someone who would be just as involved in their children's lives as them. Alley voiced that she didn't want to involve her son in her lifestyle until she could stand on her identity and meet someone she was sure about. Alley described how she would introduce her partner to her son:

I don't want to even tell him until I meet someone. Then I would take him to a dinner with that person and explain it to him, because I just want him to know



that... We're still a family. I just thought about that, I've never lived with a girl. I never did those things with him. I just shut it off because it was a sexual thing. I still find women attractive, but I just don't want to go down that road unless I'm sure about it and then involve him.

Patricia also stated:

I imagine what my life would have been like had I met some fabulous lesbian, that wanted kids and we got married, and I got married because I really wanted to get married, because I felt loved by her, and we built a life together that was meaningful. I didn't have that option.

Mary, who is closed to her local community, also voiced her desire to be married while discussing her long-distance friend. She stated:

Yeah, because my best friend, she's married, and they have a daughter. And so, I know they have similar experiences living out in the world openly gay together. So, I ask them for advice or what's their experience or how to best go through this situation. So they're very much helpful because they're in a situation I would love to be in. I want to be married and have my little family.

Patricia and Alley reported a disconnect in parenting support in terms of their sexual identity which appeared to be due to not having a wife or coparent who shared racial and/or sexual identities. Alley voiced that no one supported her parenting in terms of her identity because she chose not to openly live and disclose her sexual identity to her son. When asked who supports her sexual identity in terms of parenting. She stated:

No one, No one. Because I set aside the intimacy of lesbianism and the process of

dating and courting and all that kind of stuff, because I set that aside when I had to be this parent, it's gone from me. It's as if you have to learn how to date again.

Patricia also voiced a disconnect in tangible parenting support in terms of her sexual identity. When was asked who supports her parenting. She stated:

No one. Not in the sense of... I mean, they're supportive of me, emotionally more than anything else, they're the ones that I call when I'm going through something whether it's through the divorce, I've reached out to them, and they've been there.

Every now and again my friends will call and have a conversation with my boys.

Patricia and Mary explained that they really have no parenting support in terms of daily childcare, spending time, and being physically available to communicate with their boys regarding their day and/or social adversities. They expressed that they are the primary parents and mentors of their boys through social diversity and in instances of adversity in terms of their sexual identity.

Kyla, and Bianca, also identified as single lesbian mothers. However, they showed no interest in marriage. Kyla stated, "I haven't been married once, but it is because I don't want to be." Bianca never reported an interest in marriage however she desired to parent more children. Kyla and Bianca also had the assistance of racial-ethnic sexual minorities coparents who offered daily childcare, communication, financial, mental, and emotional support to their children in the instance of social adversity. Both married and single participants described the significance of individuals with shared racial-ethnicities, gender, and sexual orientations providing support in various social contexts. Their involvement shaped the participants' perception of their minority

identities, lifestyles, and parenting support.

Black sexual minority mothers in the Midwest-Southern regions of the United States perceived a need for positive sexual identity socialization within their communities. This need was not limited to their marital or socio-economic status, age, or the racial community in which they resided in. Black sexual minority mothers value the support and positive sexual identity socialization from individuals with shared racial and sexual characteristics. Ultimately, they described an intrinsic need to navigate situations related to childbirth, parenting, personal identities, and social challenges with other Black women and sexual minority mothers.

### **Summary**

In this chapter, I presented an analysis of data collected from 14 participants, who identified as Black sexual minority mothers who resided in Midwest-Southern U. S. From in-depth interviews and an analysis of its transcriptions three major themes emerged to support this study's research purpose and questions. For RQ number one, participants' racial and sexual identities influenced them to proactively parent their children through identity management, teaching the appreciation of humanity, and advocacy of their minority identities. For RQ number two participants perceived their community, family, religion lacked social support and understanding of their sexual identities. They also perceived support from the Black community as necessity, the support of their mothers as salient, and the support of their same-sex partners as beneficial to their parenting roles and identity development.

In chapter 5, I discuss the results of this study in terms of current literature and

future research. I also explain the social implications of the aforementioned results in terms of recommended social changes. This study's results provide a foundation for further research of this population.

## Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this basic qualitative study was to understand how Black sexual minority cisgender women in the Midwest-Southern regions of the United States perceive their racial and sexual identity as influencing their parenting. Furthermore, I sought to understand the contexts in which family and community are supportive of these identities. This study's conceptual framework guided the exploration of Black female sexual minority parents' perceptions of support of their racial and sexual minority identities. The concept of intersectionality (Crenshaw, 1989, 1991, 1995) explains Black sexual minority women's navigation of Black racial identity development (Helms, 1990, 1995), lesbian identity formation (McCarn & Fassinger, 1996), and social support (Antonucci & Akiyanna, 1995; Kahn & Antonucci 1980). These theories advocate for exploring racial and sexual identities as a social minority status influential to family and community support of Black female sexual minority's psychological well-being.

Understanding perceptions of how Black sexual minority women in the Midwest-Southern regions of United States' parent in terms of their racial and sexual identity can improve treatment practitioners' cultural competence to act as liaisons for parents with multiple minority identities. This study's key findings include Black sexual minority mothers in Midwest-Southern regions of the United States choosing parenting styles and decisions they perceived would support and protect their children from oppressions related to their minority identities. Their parenting styles encompassed teaching their children values related to their minority identities through open parent-child communication, generational advocacy, and positive socialization. Parents managed

social exposure of their lesbian identity and sexual expression to protect their children from perceived microaggressions this limited their affiliation with non-inclusive faith-based institutions. Black sexual minority mothers in the Midwest-Southern regions of the United States perceived a need for positive sexual identity socialization within their communities particularly from individuals with shared racial and sexual identity characteristics. The themes are further discussed in the following sections.

### **Interpretation of Findings**

The basic qualitative approach allowed me to explore the experiences of 14 Black sexual minority mothers in the Midwestern-Southern regions of the United States. The concept of intersectionality will be used to interpret the findings at the intersection of participants' racial, and sexual minority identities and their perceived social support (Crenshaw,1989,1991). A total of three themes and five subthemes emerged. In the following sections I provide my interpretation of themes, their relationship to the conceptual framework, the literature, and social implications of these findings.

#### **Theme 1: Social Acceptance of Racial and Sexual Diversity**

The theme social acceptance of racial and sexual diversity emerged as participants described experiences related to managing their minority identities. This theme exemplifies parenting styles and decisions Black sexual minority mothers applied to manage family, community, and societal responses to their racial and sexual identities. These parenting strategies were developed over a course of heterosexist and homophobic experiences participants had within educational, medical, legal, and other environmental spaces.

Black lesbian, gay, and bisexual parents of color in this study voiced concern for their family and children's well-being. Family members may internalize societal prejudice, discrimination, and bias experienced by sexual minorities (Dworkin & Pop, 2014; Hunter & Hickerson, 2003). Children in same-sex parent families often experience homophobic and racist victimization (Haines et al., 2018; Titlestad & Pooley, 2014; Wycisk, 2015). Children of Black LGBTQ+ parents often experience overt or subtle microaggressions based on race or a parent's sexual orientation as a stress encounter such as bullying or teasing (Bos & Van Balen, 2008; Gartrell et al., 2005). Microaggressions are best described as "everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership" (Sue, 2010, p. 1).

At the intersections of parenting, within their racial and sexual identities, these mothers used preventative strategies to reduce perceived risks to their family and children's well-being. Similar to other studies, the Black sexual minority mothers in this study demonstrated intentionality in discussing LGBTQ+ issues and discrimination with their families and children to build resilience (Gall et al., 2019; Radis & Sands, 2020, 2021). Twelve of 14 parents demonstrated open communication with their children regarding discrimination through teaching appreciation of humanity and encouraging them embrace their minority identities. This parenting strategy was often as a result of social adversities experienced by the participants or their children.

Other strategies used were refraining from public displays of affection, not

disclosing, and/or openly expressing their sexual orientation to their children, extended families, and local communities. The parents often taught their children other techniques to avoid outing them to reduce fear and occurrence of their children being bullied. In contrast, one participant who identified as gender expansive valued the importance of being herself than pretending to be someone else to protect her son (Radis & Nadan, 2021). Identity disclosure strategies manifested from historical gender and racial oppression. Sexual silence has been employed by many Black women as a strategy to shield themselves from an objective gaze rooted in racist beliefs and systems (Cerezo et al., 2020). Thus, the skill of minimizing their affiliation with both their individual lesbian identity and group membership is a means of protection. Participants in this study perceived nondisclosure of their lesbian sexual identity in social settings provided their family and children sanctuary from heterosexism. However, minimization of their lesbian identity does not equate to having an unhealthy perception of their minority identities. Management of minorities identities is a skill that sexual and gender diverse persons of color in internalization phase exhibit, which is considered the healthiest developmental phase (Cass, 1979; Helms, 1990; McCarn & Fassinger, 1996). At this intersection, individuals embrace minority identities as a part of themselves and utilize their power of choice to critically examine situations in the extent to disclose, advocate, or overtly demonstrate that part of their identity (Cass, 1979; Cerezo et al., 2020; Helms, 1990; McCarn & Fassinger, 1996; Oswald, 2000; Whitman et al., 2000).

***Subtheme: Religion a Barrier to Supporting Black LGB***

Religion within Black culture is prominent. African Americans are more likely to



have a connection to faith-based tradition and institutions (Barnes, 2014). Faith-based institutions have been anchors in the Black communities providing vital support to people of color in terms of the sociopolitical culture. The findings in this study complement previous research, where Black sexual minority mothers perceived some form of homonegativity while accessing organized faith-based resources such as fellowship, childcare, and spiritual guidance (Lefevor et al., 2021, 2020; Walsh, 2016).

Similar to other studies on lesbian and gay people of color, participants in this study voiced that their families were not affiliated with any faith-based institution or religious community by choice (Lassiter et al., 2017; Lefevor et al., 2020). Thus, the vital support networks and resources that naturally accompanied that connection were not accessible to Black sexual minority mothers and their families. Family and church community are often perceived as a significant source of support and resources for racial-ethnic minorities, particularly for Black women of color. According to Kahn and Antonucci's (1980) convoy model of social relations the family and church community are placed in the first concentric circle. However, 77% of the U.S. general population reported a religious affiliation as compared to 59% of sexual minorities (Pew Research Center, 2015). Furthermore, their children may never experience the same level of faith-based support as their parents once did. These Black lesbian mothers described their families losing religious and spiritual support systems the Black culture depended on for generations. Thus, as Black sexual minorities children and parenting increase they may not experience the same level of positive Black religious socialization as their parents once did. But the parents in the study developed alternative ways to pass their religious

values to their children.

Although past studies show individuals with high religious views have negative views and low perceptions of sexual minority parenting (Costa et al., 2019a; Shaw & McDaniel, 2007), most of the participants in this study maintained close relationships with devout family members. Lesbian and gay parents of color are less out to faith communities and have higher identity confusion but feel a lower need for privacy and tend to rely on their religious community for support (Lassiter et al., 2017). As a result, Black sexual minority women and their families are willing to live and worship in communities with limited acceptance and tolerance of them so that they can remain within their preferred community and maintain social ties (Lefevor et al., 2020; Moore, 2011a). Their family members may be able to expose their children to faith-based institutions despite their same-sex parents' separation from it. Participants who were estranged from devout family and friends often lacked parental aid and support in terms of play dates, childcare, childrearing, and spiritual guidance.

In my interpretation of the theme social acceptance of racial and sexual diversity, I acknowledge that Black sexual minority mothers are made up of demographic characteristics that make up their personal identities age, race, ethnicity, gender, and sexual orientation. According to research on identity development, navigating minority identities in healthy ways is seen as a skill that naturally develops within experiences of exclusion, marginalization, and positive socialization (Cass, 1979; Helms, 1990; Porter, 2013; Williams, 2012). However, due to discrimination of such identities being so embedded in society related challenges may go unnoticed. Thus, awareness of how these

identities intersect and develop may provoke insight into navigation of adversities in healthy ways that promote a positive self-concept.

My results indicated that sexual gender diverse mothers of color use sexual identity management strategies to combat societal oppressions. However, it is important to acknowledge the constant management of interpersonal racial and sexual identities based on social acceptance can lead to hypervigilance, anxiety, posttraumatic stress disorder and other mental health issues (Shorter-Gooden, 2004; Szymanski & Stewart, 2010; West et al., 2016). This places emphasis on social workers need to understand how these strategies are used for it may influence better treatment outcomes for these mothers, and their family's well-being.

## **Theme 2: Positive Socialization of Racial Identity Versus Sexual Identity**

Historically the sexual and gender diversity sociopolitical climate was viewed as a majority White or Caucasian experience, leaving sexual minority people of color questioning their ability to effectively advocate for their sexual expression without being further marginalized. Approximately 1 in 4 Black women in the United States identify as lesbian, bisexual, or queer (Bridges & Moore, 2019). The number of Black women who are part of the sexual-minority community is two times higher than other racial groups in the United States (Bridges & Moore, 2019). With the of prevalence of Black women within the sexual minority community, it is important to create accessibility and opportunities for positive sexual identity socialization.

### ***Subtheme: Lack of Community Support***

Black sexual minority mothers in this study voiced the lack of understanding

regarding Black sexual minority mothers within their local community. A constant perception among them was a lack of positive Black lesbian socialization, parenting support, and other resources. Thus, Black sexual minority mothers perceived the American tradition of having socially competent and viable support for their families as scarce as compared to heterosexual families who resided within the same communities. Furthermore, African American lesbian parented families are faced with increased stressors due to the lack of societal support and frequent exposure to racism, homophobia, and sexism often present in their own and other communities (Greene, 2000; Haines et al., 2018; Hicks-Lettman, 2014; Hunter & Hickerson, 2003; van Dam, 2004). The intersection of racial and sexual identity Black sexual minority mothers and their children face social support deficits that are unheard of for the average heteronormative nuclear family.

Parallel to this study, research on Black sexual minority mothers agreed the connection with their families and communities are salient despite painful heterosexist microaggressions they encountered (Cerezo et al., 2019; Miller & Parker, 2009; Walsh, 2016). Black sexual minority mothers in my study also perceived microaggressions from family and community as salient compared to microaggressions inflicted through other social groups. Although their family and community challenged their sexual orientation, many preferred to reside in these neighborhoods and maintain close connection with family members (Moore, 2011a; Walsh, 2015). For Black sexual minority mothers their connection to family and community is perceived as vital to experiencing positive racial-ethnic socialization such as personal affirmation, validation, financial aid, and childcare

(Frost et al., 2016; Meyer, 1995). According to Kahn and Antonucci's (1980) convoy model of social support, an individual's attachment to their family and communities is based on perceived level of support received. Due to having a history of gender and racial motivated oppression, people of colors families and communities are viewed as a safe haven. However, as indicated in this study's results their perception of safety and positive socialization does not always transfer over to their sexual identity. This endurance may have delayed or interfered with Black sexual minority mothers' ability to develop a healthy sexual identity (Cerezo et al., 2020).

Due to the absence of positive Black sexual minority socialization within the Black community and lack of racial identity support, acknowledgment from the White lesbian community often leaves Black sexual minority mothers feeling estranged and with no happy medium. The absence of positive Black sexual minority women socialization within the Black community appears to be prevalent across geographical locations, age, and socioeconomic status (Page et al., 2022). Similar to Black women trying to maintain the connections to their religious communities (see Walsh 2015, 2016), many Black sexual minority women report positive feelings of connectedness to their community, which supersede their communities' homophobic perceptions (Lefevor et al., 2020; Moore, 2011a; Walsh, 2016). Living in predominantly Black neighborhoods creates a protective barrier against the racism experienced by African American lesbians or gays living in predominantly White gay neighborhoods (Bowleg et al., 2003). This dilemma creates the need for Black sexual minority mothers to navigate the integration and balancing of these support networks and communities.

***Subtheme: Forming Families and Parenting***

Many Black sexual minority mothers conceive children through previous heterosexual relationships, or from adoption and/or foster care (Moore, 2011a; Smith, 2022). The majority of participants in this study conceived children through previous heterosexual relationships. However, the four remaining participants who formed families at the intersection of their parenting and sexual identities, perceived theirs and their partners legitimacy as parents, and were invalidated and undermined by health care professional whose roles are to be supportive of parenting and family formation. This invalidation was displayed in their incompetence using sexual and gender diverse communication skills, and subpar assistance with completing medical forms such as birth certificates.

Ria and Anne expressed, after their labor and delivery process, leaving the medical institution confused, regarding the birth certificate/parental rights application, and uncertain of whether the noncarrying parent had parental rights. This experience was despite the June 26, 2017, supreme court reversal, of an Arkansas Supreme Court Ruling, which ordered all fifty states to treat same-sex couples equal to opposite-sex couples in the issuance of birth certificates (Pavan v. Smith, 2017). Inherently this supreme court order does not come without challenges due to the jurisdictional nature of vital statistics and birthing rights registration (Zhang et al., 2022). To uphold this order there will need to be systemic changes between local and national jurisdictions that overcome barriers in achieving a comprehensive birthing and parental rights registration process. Even this process may prove to be challenging considering the vast majority of health centers in the

U.S. still do not provide sexual gender diverse language in documents during clinical treatment and birthing registration processes (Cahill et al., 2016; Stokes & Lecuyer, 2023; Zhang et al., 2022).

On the interpersonal level, there are heteronormative assumptions that for a given birth, the birthing person is a cisgender woman who provided ova and is the intended mother, and the nonbirthing person is a cisgender man who provided sperm and is the intended father (Mayer et al., 2022; Zhang et al., 2022). These assumptions can be remedied with sexual and gender diverse minority competence training regarding birth certificates and parental rights for birth attendants, hospital treatment providers, social workers, and/or family advocates available at most Labor and Delivery Departments across the United States (Zhang et al., 2022). This socio-political disparity can be changed starting at the root starting with treatment that provides an informed and holistic birthing process for racial-ethnic sexual minority mothers and families.

The Model of Multiple Dimensions of Identity asserts that internal identity which is a person's true self, can be influenced by external identities or social constructs based on their salience to the individual and the context they are in (Jones & Abes, 2013). Participants in this study who identified as noncarrying parents held parenting identities that were questioned and unaffirmed within their families and community. Within the spaces of their family, friends, and community biomothers and/or carrying parents reported having to advocate for their partners noncarrying parenting identity within the context of their sexual and gender diverse partnership. Consistently, providing parental advocacy for their partners combined with navigating stressors related to their individual

sexual identities in social contexts with family and friends can lead to stress and deterioration of their psychological wellbeing (Shorter-Gooden, 2004; Szymanski & Stewart, 2010; West et al., 2016). These social adversities are presented as a source of relationship stress and a barrier to acquiring a positive parental identity. This often resulted in cognitive dissonance of their self-concepts and the intersection of their sexual and parenting identities.

Although many African American lesbian-headed households do not form their families through artificial insemination, as many White middle-class lesbian families do (Goldberg, 2022; Hunter & Hickerson, 2003). Lesbian women of color reproduce gendered familial structures at a much faster rate than that of their White counterparts (Smith, 2022). Two participants in this study, Ria and Ezra conceived their children through the invitro fertilization (IVF) process they both expressed a lack of support via socialization with other Black women who underwent IVF process. Ezra noted feeling estranged and only place she received close to the needed support and/or guidance from other Black women undergoing IVF was through social media groups. Oftentimes these Black women were not of the sexual and gender diverse community.

Families with lesbian parents are more likely to face exclusion and discrimination from community institutions (particularly housing and employment-based discrimination), teachers, ministers, doctors, and extended family (Allen, 2013; Haines et al., 2018; Hunter & Hickerson, 2003; Meyer et al., 2019; Nadal, 2019; Sullins, 2015; Titlestad & Pooley, 2014). In terms of language and in person communication, Anne a participant in my study and a participant in (Radis & Nadan, 2021) explained medical



professionals were insensitive and unwelcoming to their family dynamic by asking irrelevant questions regarding who the birth mother is.

The underuse of culturally competence communication exacerbates an historically strained relationship between medical professionals and racial-ethnic sexually and gender diverse minorities (Jackson, 2023). Particularly for Black women who are more likely to experience healthcare-related discrimination (U.S. Department of Health & Human Services Office of Minority Health, 2018). Furthermore, in absence of the nonheteronormative microaggressions Black women and their families often face medical disparities related to childbirth, high infant mortality, and abortion rates (Davis, 2020; Goodrow, 2019; Smith, 2022; U.S. Department of Health & Human Services Office of Minority Health, 2018). The lack of support and systemic oppression of Black sexual minority women forming families through marriage and childbirth creates barriers in being recognized as legitimate parents, guardians, and caretakers of their children.

Acosta (2017) advised that the institution of marriage alone does little to protect the rights of same-sex couples, leaving parent-child relationships legally vulnerable. Of all fourteen participants in my study Mia and Patricia voiced losing custody of their children as a concern. Historically lesbian mothers have feared loss of custody during legal custody and child welfare proceedings (Tasker, 2013; Tasker & Lavenert-Stott, 2020). They expressed their parenting and sexual identities were undermined during the dissolution of their previous marriages. In Mia's case it was with her previous same-sex marriage. Mia explained her lawyer's incompetency and misunderstanding of same-sex marriages made her child custody process more strained. This was due to either having to

teach or explain aspects of their parenting roles in terms of same-sex family formation and parenting to her attorney.

In Patricia's case it was during the dissolution of her previous heterosexual marriage. Patricia voiced although her ex-husband knew she was lesbian he attempted to use her sexual orientation as a means to gain visitation and custody of their children. Harp and Oser (2016) conducted a study with over six hundred Black mothers in the U.S., 21% of whom identified as lesbian/bisexual. They found that lesbian/bisexual mothers were more than four times as likely to have lost custody of their children to the child welfare system than heterosexual mothers. When sexual orientation cannot be the sole factor in child custody, LGBTQ parents' sexual activity is often scrutinized in court which influences legal decision making (Haney-Caron & Heilbrun, 2014; Tasker & Rensten, 2019). Black women's sexuality has historically lacked positive socialization and understanding, the scrutinization of same-sex intimacy in child custody further perpetuates the dehumanization of their sexual expression in terms of intimacy, body image, feminism, and sexuality in motherhood (Bowleg et al., 2015; Mackenzie & Brooks, 2018; Watson et al., 2019).

In terms of overcoming scrutinization in child custody, Walter (2003), a third-year law student at Hofstra University School of Law, suggested mediation as an alternative. He advised mediation maybe more suitable for lesbian parents due to it being bound to resolution solely on legal precedents which allows opportunity to work out resolutions that will consider personal values. Sexual minorities can access mediation through community-based mediation programs or private mediators. Mediation may

provide a medium for Black sexual minority women whose identities lack positive socialization and are systemically undervalued in American society.

### **Theme 3: Support of Shared Racial and Sexual Identities**

Black women are more perceptive to support from individuals with shared racial-gendered identities, which correlates with more desirable outcomes (Davis, 2019; Davis & High, 2017; Ghavami et al., 2011; Mckimmie et al., 2019). Black women have a shared history of overcoming racism, sexism, and poverty. Thus, women of color oftentimes have a stronger connection and are more perceptive to support from individuals with shared racial-gendered cultural identities. Participants in my study credited women of color as positively influencing their sexual and racial identities and supporting their parenting. These women chaperoned and mentored from various roles, within the participants family, community, and the broader society in the form of literary works and narratives. Oftentimes women of color face socioeconomic disparities that place significance on relationships and support from other women.

#### ***Subtheme: Black Grandmothers, an Obstacle, and Strongest Support***

In this study, I explored Black sexual minorities mothers' perceptions of social support from their family and community. I found women of color strongly influenced Black sexual minority mothers' sense of support in terms of parenting within their lesbian identity. Eleven participants were particularly concerned with their relationship with their mothers, and how they would respond to their lesbian sexual identity. Although initially their mothers resisted and challenged their lesbian sexual orientation. Once eight participants formed families through marriage and began parenting children their

mothers' level of resistance changed to resemble support in the form of parenting, childcare, relationship advice, and sexually diverse identity support.

In contrast, Kyla and Patricia never received support from their mothers and perceived themselves and their children were estranged from their mothers due to their sexual orientation. Patricia, a lesbian mother of two sons perceived that her life would have been different if her mother would have accepted her lesbian sexual orientation while in the awareness and exploration phases of lesbian identity development (McCarn & Fassinger, 1996). She advised that she would not have married a man and felt pressured to live life as a heterosexual. Adams and Lott (2019) advocated that asking, "Black women to choose between their identities is damaging and creates conflicts in identity and a false dichotomy, allowing issues between these intersectional identities to be silenced or deemed trivial" (p. 247). Within the family system, this also describes how Black lesbians' access to social capital via relationships with other Black women particularly their mothers are essential to their identity formation (Cerezo et al., 2020; Miller & Parker, 2009). It is through relationships with other Black mothers in which Black lesbian parents learn how to navigate the United States as Black, as women, as parents.

Kahn and Antonucci (1980) and Antonucci and Akiyama (1987) believed people within the closet concentric circle (representing the strongest level of attachment and highest level of perceived support) are relatively stable throughout the individual course of life. As represented in this study and other research on Black women supporting each other participants perceived interference with the bond they shared with their mothers as

a threat to their ability to exchange empathy, emotional support, and validation with one another around the complexities of identifying as Black, female, sexual minority, and a mother (Davis, 2019; Lemberger-Truelove, 2018; Walker & Pratt, 1991). An estranged connection between racial-ethnic mothers and daughters oftentimes interferes with their ability to navigate challenges with their parenting, racial and sexual identities. This may assert that maintaining that connection for positive racial-ethnic socialization is even more essential within communities in Midwestern-Southern religious conservative areas.

***Subtheme: Identity and Parenting Support of Same-Sex Partner***

Due to historical racial-gendered discrimination society holds distorted negative stereotypical roles of Black women that limits their potential to child caretakers, nannies, and housekeepers (Law, 2018; Adams & Lott, 2019). Nine of 14 participants who identified as married perceived their wives as their strongest support in terms of their sexual gender diverse identity. Leslie, a participant in my study advocated that unlike in her previous heterosexual relationship, within the context of her same-sex marriage, she no longer perceived a misogynistic power dynamic in her roles as a wife or woman. She and the other participants expressed, within the context of their sexual minority relationship, feeling validated and supported in sharing parenting roles, managing household chores, spending time with, and providing emotional support to their children. These caretaking roles are typically associated with the being a wife, a woman and/or showing feminine energy within a traditional heterosexual coparenting relationship (Kowalski & Scheitle's, 2020). These stereotypes often negate Black women's having identities of power and influence, minimizes their sense of self-worth, which perpetuates

the male superiority syndrome in America (Glymph, 2015; Hill, 2013; Law, 2018; O'Keefe et al., 2015; Schocker & Woysner, 2013).

Values of gender roles are entrenched in our society usually stemming from traditional sociopolitical and religious views (Kowalski & Scheitle's, 2020). In Kowalski and Scheitle's (2020) research on sexual identity and gender roles when it comes to household and family roles, both gay men and lesbian women are more likely than their heterosexual peers to reject traditional gender roles. In many ways the very ideal of Black sexual minority same-sex marriage challenges the male/female, man/woman heterosexual dyadic. Thus, marriage within their sexual minority identity, may afford a sense of relief to Black sexual minority cisgender mothers who perceive this historical household power dynamic as oppressive.

The remaining participants who identified as single, Patricia, Alley, Bianca, Kyla, and Mary, expressed the desire to be married, coparenting, and openly living within the context of their sexual identity. With the exception of Kyla and Bianca, who coparented with women who shared their sexual identities, all these single participants reported a disconnect in perceiving tangible parenting support in terms of their sexual identity. This disconnect forced these Black sexual minority mothers to find alternative support networks for parenting.

The awareness and exploration phases of these mothers' lesbian identity development (McCarn & Fassinger, 1996) are typically associated with their initial come out and/or disclosure of their sexual orientation. During these phases they described an intrinsic concern for their relationships with their mothers in terms of supporting their

sexual identity. Furthermore, when single and married Black sexual minority mothers faced adversity or perceived a concern for their children's wellbeing, they expressed a desire for parenting support from their mothers, Black women, and other Black sexual minority women forming families. Alvarez-Bernado and Berben (2018) supported these findings and named three social contexts in same-sex individuals life cycles in which support is perceived to be critical "coming out" (Lynch, 2004), resisting rejection and invisibility of their sexual identities (Kosciw & Diaz, 2008), and during concerns of the welfare and psychological development of their children (Morgan, 2002; Wardle, 2004).

Alvarez-Bernado & Berben (2018) asserts "when faced with a hostile climate, many same-sex families build supportive social networks with other similar families, with the aim of ending or overcoming the discrimination they are exposed to, as well as to foster a sense of belonging and a consciousness of pride toward their family model" (p. 544). Black lesbian mothers created kinship relationships to survive, this behavior can be considered an act of resistance to racial and sexual identity oppression (Glass & Few-Demo, 2013). Black sexual minority mothers who perceived a lack of support created connections with other individuals who shared racial and/or sexual identities through kinship families, social media, and literature.

While the Black sexual minority mothers in this study perceived marriage as beneficial, other Black sexual minority mothers with lower socioeconomic status's, perceived marriage as a barrier to resources. Radis and Nadan (2021) found the legalization of sexual minority marriage offered more disadvantages to low-income women of color than middle to upper class women of color. Women of color living in

poverty, or held lower socioeconomic status reported the loss of housing, childcare subsidies whilst middle to upper class women of color who married named security, legitimacy, financial incentives, and employment benefits (Radis & Nadan, 2021). When Black sexual minority mothers have an increased risk for heterosexism, racial inequality in relation to incarceration, unemployment, and financial hardships (Jones et al., 2018), there appears to be no happy medium. These social adversities force this population to navigate through intersections that cannot be solely represented through studying the White traditional heteronormative family dynamic.

### **Limitations of the Study**

Movement Advancement Project (2019) and Williams Institute (2018) highlight disparities in income, education, and employment among African American lesbian individuals and couples. The majority of the participants in this study were located through a private social media group geared towards Black Lesbian Entrepreneurs and had an average annual household income estimated at \$107,000. Thus, this sample, may not be representative of Black sexual minority women who hold lower socioeconomic statuses, are without accessibility to the internet, are very private and/or closeted, or those who do not wish to disclose their sexuality. Thus, this study's findings did not give context to the experiences of Black sexual minority mothers who are more likely to be socioeconomically disadvantaged than other sexual minorities (Badgett et al., 2017; Gates, 2013).

The next limitation identified in this study was this sample population consists of Black sexual minority cisgender women who identified as lesbian, gay, or bisexual. This



study excluded Black transgender population. According to Few-Demo and Allen (2020) studying intersectionality within transgender populations would consist of understanding the dynamics of gender as one of many systems of inequality, oppression, and privilege that interact with other systems such as race, class, sexual orientation, gender identity, nationality, and the like. Based on this recommendation it would better serve this population to have a study that focuses solely on Black transgender parents' experiences to formulate findings based on an empirical foundation.

### **Recommendations**

This researcher recommends future studies on Black lesbian, gay, bisexual, and cisgender women who are parents focus on sample populations who are considered socioeconomically disadvantaged, comparing the differences between individuals who are forty years and below to forty years and older, and how those who are separated from their original faith-based organizations find alternative ways to positively socialize their religious values to their children. These recommendations are further explained below.

Studying Black sexual minority women who are considered to be socioeconomically disadvantaged may prove to be beneficial because their experiences in terms of forming families and parenting may differ from Black sexual minority women with six figures or more in annual household income. The dichotomy of financial statuses within any family structure illustrates a great divide in education and medical accessibility regardless of age, race, gender, or sexual orientation. Smith (2022) asserts that “racialized, masculinized, low-income, and disabled bodies are often exoticized or left out of popular queer reproductive and artificial reproduction technologies (ART)” ( p.

72). This study illustrates Black sexual minority families with an annual income of six figure's or less chose to form families either through adoption, fostering, heterosexual intercourse and/or in home insemination and those with six figures or more opted to utilized artificial reproductive technologies. Thus, social workers awareness of how financial status influence Black sexual minority women family formation in terms of marriage and parenting may offer insight to their strengths in navigating these experiences.

The other recommendation for future research is comparing the parenting perceptions of Black sexual minority mothers forty and older to those who are forty and younger. I believe there may be differences between these two age groups in terms of their experience in their sexual identity formation, forming families and parenting strategies. For example, in this study Black sexual minority mothers who were 40 and above appeared to have very different experiences in terms of parenting options prior to the legalization of marriage, birth certificate equalization, and the post COVID-19 social media surge of positive Black lesbian socialization.

In the 1990s and early 2000s decades, Black sexual minority women often felt forced to conceive children through unwanted marriages and heterosexual relationship dynamics. Added to those limiting experiences Black sexual minority mothers who want to form families in their late 30s or 40s years of age have the risk of pregnancy complications making forming families within the context of their same-sex relationship even more controversial in terms of finances, social support, and same-sex parenting identities.

Black sexual minority women under 40 perceptions of family formation appeared to be less constrained and limited by traditional family narratives. Most looked forward to their options and possibility of conceiving children within the context of their same-sex relationships through known donor intercourse, home insemination and/or ART. “Part of this is due to medical developments in the most cutting-edge ART, preimplantation, embryo selection technologies, enables parents to choose social sex, physical characteristics, and genetic predispositions through advanced science, while subtly encouraging the attenuation of disability, neurodivergence, and difference” (Goodrow, 2019, p.148). This information may offer therapists or social workers insight to providing variation in services between these two age groups.

In this study the Black sexual minority mothers and their families separated from their families of origins traditional religious institutions and chose not to be affiliated with any faith-based organizations due to homonegativity (Means & Jaeger, 2016). With this separation this family’s accessibility to social networks of Black women in terms of personal validation, childcare, and spiritual guidance were also sacrificed (Means, 2017; Walsh, 2016). I recommend a quantitative study examining the percentage of Black sexual minority mothers who are still affiliated with faith-based institutions. As well as how Black sexual minority mothers are compensating for their traditional religious social support network and in what ways do they provide religious and spiritual guidance to themselves and their newly formed families.

### **Implications**

This research provided understanding regarding experiences of Black sexual

minority mothers in terms of parenting and social support within their family of origin, formulated families, and communities. This research provided fourteen participants with an avenue to share their experiences. These results offered increased awareness and insight into the lives of racial-ethnic sexual minority mothers whose perceptions of their socially constructed minorities identities shape their parenting experiences.

A significant finding of this study is that Black sexual minority mothers parenting is influenced by the extent to which their social environment accepts their racial and sexual identities. With this knowledge agents of social change who influence social laws, and institutional policies should consider Black sexual minority mothers' children and families when constructing laws and policies that negatively impact this populations accessibility to resources that support their racial, sexual, and parental wellbeing. Policies that address systemic issues in LGBTQ+ parental rights, labor and delivery processes, and using gender neutral language to collect demographic information from sexual gender diverse populations during treatment at hospitals and clinics are warranted.

This study's results also offer insight into Black sexual minorities perceived need for positive sexual identity socialization within their communities. Thus, I recommend that the Black religious faith-based institutions create safe spaces for Black sexual minority women and their families to worship, fellowship, and receive spiritual guidance. Oftentimes for Black women affiliation with faith-based institutions are their only means, of sociopolitical and psychological wellbeing and continued connection with a higher power. Black women and their children's support network is severed when they are forced to separate from their traditional faith-based institutions, this could have

unprecedented effects on generations of Black families for years to come.

For social work practice, these findings inform those who work with Black sexual minority mothers of strategies in which they use to navigate racial and sexual adversity as parents. The strategies identified are selective disclosure of their sexual identity, open parent-child communication, and advocacy for racial and sexual diversity. Social workers can review these strategies for impact on stress and emotional well-being and help parents formulate strategies that may be more suitable to their psychosocial wellbeing. Black sexual minority mothers also perceived a lack of understanding within their family of origins and communities regarding their sexual identity in terms of parenting. This advises social worker to provide holistic treatment to include Black sexual minority mothers and their families of origin, when providing psychoeducation regarding Black women's sexual expression, their racial and sexual identities, and its impact on the Black family.

### **Conclusions**

This study extended the scholarly literature on Black sexual minority parents' perceptions during their racial and sexual identity development and parenting support. Three themes and five subthemes emerged from the participant interviews and data analysis. Whilst the growing population of Black sexual minority mothers are underrepresented in literature, civil rights, and positive socialization. Racist and sexist microaggressions experienced by this population in terms of their family and community often go unnoticed because they represent beliefs that are historically and systemically entrenched into American society. However, these experiences also bring light to the

resilience Black sexual minority women mothers display daily in providing protection, guidance, parenting to their families and children. Through applying this study's findings, social work practitioners, policy makers, and religious leaders can become agents of change in terms of Black LGBTQ+ families parental rights, healthcare, positive socialization, and their psychosocial wellbeing.

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## Appendix: Interview Protocol

Please fill in the blank or place a checkmark next to the correct choice.

1. What town and state are you from? \_\_\_\_\_
2. What is your Gender Identity? \_\_\_\_\_
3. What is your Sexual Identity? \_\_\_\_\_
4. What is your Race/Ethnic Identity? \_\_\_\_\_
5. What is your partnership status? \_\_\_\_\_
6. How long have you had this Partnership? \_\_\_\_\_
7. What is your parenting status? \_\_\_\_\_
8. How many children are you parenting? \_\_\_\_\_
9. What is your age? \_\_\_\_\_
10. What is your level of education?

Less than HS diploma  High school  Some college  Bachelor's degree  
 Graduate degree

11. What is your range of household income?

\$0 - \$24,999  \$25,000 - \$49,999  \$50,000 - \$74,999  \$75,  
 000 - \$99,999  \$100,000 - \$149,999  \$150,000 or more

## Research Questions:

How do Black sexual minority mothers in the Midwest-Southern regions of the United States perceive racial and sexual identity as influencing their parenting?

How do Black sexual minority mothers in the Midwest-Southern regions of the United States perceive their social support system?

To start with, we will discuss your meaning of racial and sexual identity.

1. What race do you identify with?
  - a. What does being [race] mean to you?
  - b. How did you develop this identity?
2. What sexual orientation do you identify with?
  - a. What does being [sexual identity] mean to you?
  - b. How did you develop this identity?

Next, will discuss your experiences with racial and sexual identity.

3. Tell me about your experiences as a [race and sexual identity] parent.
  - a. How has being [race and sexual identity] influenced your parenting?
  - b. What challenges have you experienced as a [race and sexual identity] parent?
4. Who supports you as a [race and sexual identity] parent?
  - a. How do they support you? Provide specific examples.
  - b. Are there ways in which you do not feel supported? Please explain?
  - c. How has your social support system changed since parenting in a same-sex relationship?
  - d. Is there anything you would change about your current social support system?  
Please explain?

5. Is there anything else I should know in order to understand your experience as a [race and sexual identity] parent?