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Parent Reactions to Sexual and Gender Identity Disclosure Events in the Deep South

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ABSTRACT
Parental reactions to sexual and gender identity disclosures are known to be related to queer children and adolescents’ mental health and psychosocial adjustment. An improved understanding of how and why parents react how they do, in conjunction with their perceptions of how the coming out process unfolded can inform our understanding of how a young person's coming out is experienced by parents in the broader context of the family. A clearer understanding is especially important for families located in historically sociopolitically conservative geographic areas because these parents might be at highest risk for a maladaptive reactions to coming out, subjected to homophobic legislation and cultural pressures, and because families from these areas are less represented in the literature. In the current qualitative study, semi-structured interviews were conducted with parents of queer children and adolescents living in the Deep South. Results illuminate a highly heterogeneous experience and provide an initial roadmap, via the articulation of a conceptual model, to guide further research with families in this context.

Disclosure of sexual identity has been colloquially described as “coming out” or “coming out of the closet” and is a central part of the process of self-identification for lesbian, gay, bisexual, transgender, and other gender and sexual minority (LGBTQIA+) youth (Denes & Afifi, 2014). Understanding decisions to come out to family members, particularly parents, is critically important as family relationships are a primary context for adolescent development (Needham & Austin, 2010; Ryan et al., 2010).

Impact of parental reactions of disclosure

The confidant’s post-disclosure reaction is a key influencer of the individual’s adjustment to their queer identity (Chaudoir & Fisher, 2010). Reactions are typically categorized as positive, neutral, negative, or mixed. In general, positive reactions are affirming and accepting, negative reactions are disapproving and rejecting, neutral reactions entail neither supporting nor rejecting, and mixed reactions are two or more of the previously mentioned reactions in alternation or co-occurring.

Negative reactions can include actions like rejection, bullying, and harassment and can even escalate to violence (Ali & Barden, 2015). Rejection of LGBTQIA+ individuals during adolescence by their parents has been linked to illegal drug use, attempted suicide, depression, and sexual health risk in adulthood (Ryan et al., 2009). Negative responses do not need to be explicit to influence LGBTQIA+ youth; for example, perceived rejection can lead to substance use (Rosario...
et al., 2009). As such, negative reactions, explicit or perceived, are linked to negative outcomes for queer individuals.

Positive reactions, however, have been linked to positive outcomes for LGBTQIA+ youth. Support about sexual and/or gender identity is one of the most common positive reactions. Parental and peer support after sexual or gender disclosure are consistently linked to positive mental health, self-acceptance, and well-being (Russell & Fish, 2016; Sheets & Mohr, 2009). Parental support of sexuality and gender has been found to be linked to higher self-esteem, lower depression, and fewer suicide attempts (Ryan et al., 2010). Thus, support from parents can act as a buffer from minority related stress (Russell & Fish, 2016).

In an important study examining family reactions to a child's LGBTQIA+ identity, Perrin et al. (2004) found that positive and negative reactions are different constructs and can be experienced simultaneously as parents try to grasp the reality of a disclosure of sexual identity. Disclosure marks a line between two halves of the parenting experience, pre and post disclosure, and the reactions immediately post disclosure influence what outcomes their child will have (Chaudoir & Fisher, 2010).

Evidence suggests that parental reactions are related to levels of internalized homophobia, depression, and anxiety in queer adolescents’ post-disclosure (Puckett et al., 2015). Although there is descriptive research on parental reactions to sexual identity disclosures, the mechanisms behind what drives these reactions to be positive or negative in the first place has received little attention. Further, understanding the interconnectedness of how parents react and why children choose to disclose is integral to gaining a full picture of the family dynamics during the time surrounding disclosure.

**Gaps**

The literature on parental reactions to queer youth disclosing either gender or sexual identity, tends to focus on the health outcomes of the children after the reactions have occurred. However, there is a lack of literature examining *predictors* of parental reactions to their children's disclosure events. Research on parental reactions to disclosure events almost exclusively center around the perception and recounts of the child, thus omitting the perception and experience of the parent and effectively not considering half of the interaction. A full understanding of a parent’s perception of an identity disclosure event has yet to be defined. Understanding parents’ perception of the coming out process as well as what factors influence their reactions is vital to understanding the coming out process in the context of the family.

Further, LGBTQIA+ research has been primarily concentrated around urban and metropolitan areas due to convenience, and little work has been conducted regarding LGBTQIA+ research in the rural, suburban, and typical city populations, particularly those in the South Eastern region of the United States, referred to as the Deep South (Stone, 2018). The lack of research in these areas of the Deep South leads to a narrow understanding of the normative experiences of LGBTQIA+ individuals. The limited amount of research that has occurred in the Deep South shows sustained negative perceptions of LGBTQIA+ support among college students located in the southeast regardless of the increased number of LGBTQIA+ resources (Garvey et al., 2017). Thus, regional impact on perceptions of LGBTQIA+ individuals is an important factor that needs to be considered, especially for this understudied population.

**Aims**

The overall purpose of this study is to illuminate parents’ perceptions and understanding of their reactions to their children's sexual and gender identity disclosures in families living in the Deep South. With this information, we can develop evidence-based resources and practices to
enable parents to react to disclosures in ways that are supportive of their children's mental health and emotional well-being and that can ultimately strengthen the quality of the parent-child relationship. Further, a better understanding of these relational processes can improve theoretical models of identity development and generate new, testable, hypotheses.

**Methods**

Data collection occurred from March 4th, 2019 to June 12th, 2019 in the Deep South of the United States, in the state of Alabama. The study site was in a city center in Alabama, but participants were recruited from city, suburban, and rural areas from Alabama and Georgia. Flyers for the study were distributed electronically via email, social media, and physical copies flyers were displayed in public locations. Interested individuals reached out to the study team by email or phone, and were screened for eligibility. To be eligible for the study, parents had to have a child under the age of 25 who is openly queer or whom they expect to be queer and be the biological parent of the aforementioned child. Eligibility was determined through Yes or No questions during a phone screening process (e.g., Is your child openly LGBTQIA+ or do you suspect them to be LGBTQIA+?). Eligible participants were then asked if they would still like to participate. Individuals who were still interested were then scheduled for either an appointment in person or over the phone.

**Interview procedures**

Following eligibility screening, participants were scheduled for a phone ($n=13$) or in-person interview ($n=11$). Upon arrival at the appointment or beginning of the phone appointment, informed consent was obtained before moving into the semi-structured interview. The interview guide can be found in Table 1. Sampling procedures and interview questions were constructed to span the full disclosure pipeline so for this reason we wanted to ensure we also sampled parents and parental experiences from the time from which parents first started to suspect their child might be LGBTQIA+, as it is possible that predictors of parental reactions take root during the pre-disclosure period.

In-person interviews occurred in a private office on a university campus. Of the 24 interviews completed, the first author served as the primary interviewer in 22 (91.6%); the second author was the primary interviewer for the other 2 interviews. Efforts were made to conduct all

<table>
<thead>
<tr>
<th>Table 1. Interviewer guide.</th>
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<tbody>
<tr>
<td>1. How old is your child?</td>
</tr>
<tr>
<td>2. When did you first suspect your child was not heterosexual, if you suspected at all?</td>
</tr>
<tr>
<td>3. Has your child disclosed their sexuality to you and how?</td>
</tr>
<tr>
<td>a. if yes, what do you think were deciding factors in your child's decision to disclose to you?</td>
</tr>
<tr>
<td>i. What was your reaction immediately after the disclosure event?</td>
</tr>
<tr>
<td>ii. Has your reaction changed over time?</td>
</tr>
<tr>
<td>iii. Describe, if (or how) your relationship with your child has been affected by your finding out about your child's sexuality?</td>
</tr>
<tr>
<td>iv. Describe how you think your reaction might have affected your child and your relationship with your child.</td>
</tr>
<tr>
<td>b. If no, why do you think your child might not be heterosexual?</td>
</tr>
<tr>
<td>i. Why do you think your child has not formally disclosed this information to you?</td>
</tr>
<tr>
<td>ii. How do you think you or other people in your child's life will react to this disclosure if and when it happens?</td>
</tr>
<tr>
<td>iii. Describe how you think your reaction to a disclosure could affect your child and your relationship with your child.</td>
</tr>
<tr>
<td>4. Describe your exposure to different sexualities besides that of your child. (e.g. people you knew who were openly homosexual, LGBT individuals in movies or television)</td>
</tr>
<tr>
<td>5. Describe what it is like to talk with your child about their strengths and weaknesses? Do you find yourself mostly commenting on positive aspects of his or her personality and behavior, mostly commenting on negative aspects, or somewhere in-between?</td>
</tr>
<tr>
<td>6. Is there anything else you think I need to know, but have not asked you?</td>
</tr>
</tbody>
</table>
interviews in person, but, due to potential difficulty with scheduling hard to reach participants or participants from outside of the immediate area, interviews also occurred over the phone. Telephone interviews have been used successfully in prior psychosocial research with both adults and children, and research has demonstrated that face-to-face interviews and telephone interviews with adults yield data of similar quality (Dillman, 2000; Sturges & Hanrahan, 2004). Interview procedures for in-person and phone interviews were identical in nature. After research procedures were completed, participants were provided compensation for their time, effort, and then thanked for their time. The study protocol was reviewed and approved by the IRB at the University of Alabama at Birmingham.

Quantitative measures

To characterize the sample, participants completed a 12-item socio-demographic survey. Religiosity was assessed with the following question (Do you consider yourself a religious person? Yes, No, Not Sure); similarly, spirituality was assessed with: (Do you consider yourself a spiritual person? Yes, No, Not Sure). Surveys were completed following the interviews.

Data management and analysis

Interviews were audio-recorded, de-identified, transcribed, and imported into NVIVO for analysis. Transcripts were read and coded electronically using line-by-line coding consistent with phased thematic analysis methods (immersive transcript reading, generating initial codes and coding, developing and connecting themes) (Braun & Clarke, 2006); 20% were double-coded to ensure a systematic application of the codebook. Agreement of ≥ 80% was reached on each coding node. Descriptive statistics were used to describe the participant sample based on responses to the survey items.

Results

Sociodemographic characteristics are shown in Table 2. The sample was primarily female (83.8%, n = 20), married (54.2%, n = 13), educated (54.2% Four Year Degree or higher, n = 20), heterosexual (70.8%, n = 17), and White (79.2%, n = 19). The sample identified as primarily spiritual (66.7%, n = 16) and not religious (62.8%, n = 15).

The qualitative analysis resulted in a conceptual model of the disclosure process (Figure 1). Overall, the results indicated a highly individualized and repetitive disclosure process that unfolded over time with an array of factors that influence parental reactions. An initial disclosure was often followed by additional disclosures that varied in method of the disclosure (social media, in-person discussion) and content (e.g., a general concept or questioning, having feelings toward a specific individual). These disclosures also were very nuanced and variable with a great degree of heterogeneity in how children and adolescents managed information about their sexual and gender identity. The remainder of the results section is organized around this model. Illustrative quotes with pseudonyms are presented to highlight key themes.

Inputs to precursor events

Precursor events are incidents proximal to the disclosure that can serve to foreshadow that a disclosure is imminent. Inputs to precursor events are factors that may influence how the parent interprets and experiences a precursor event. Such factors may include the parent's prior exposure to the LGBTQIA+ community, their sexuality, religious affiliation, and age, or the age of their child, etc. When parents recounted their experiences of disclosure events, these inputs served as a lens through which they view the situation.
Table 2. Parent participant characteristics.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>16.7%</td>
</tr>
<tr>
<td>Female</td>
<td>83.3%</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>54.2%</td>
</tr>
<tr>
<td>Divorced</td>
<td>33.3%</td>
</tr>
<tr>
<td>Living with partner</td>
<td>12.5%</td>
</tr>
<tr>
<td>Sexual orientation</td>
<td></td>
</tr>
<tr>
<td>Straight/heterosexual</td>
<td>70.8%</td>
</tr>
<tr>
<td>Gay</td>
<td>4.2%</td>
</tr>
<tr>
<td>Lesbian</td>
<td>4.2%</td>
</tr>
<tr>
<td>Pansexual</td>
<td>4.2%</td>
</tr>
<tr>
<td>Other</td>
<td>12.5%</td>
</tr>
<tr>
<td>Race</td>
<td></td>
</tr>
<tr>
<td>African American</td>
<td>20.8%</td>
</tr>
<tr>
<td>White</td>
<td>79.2%</td>
</tr>
<tr>
<td>Religiosity</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>29.3%</td>
</tr>
<tr>
<td>No</td>
<td>62.8%</td>
</tr>
<tr>
<td>Not sure</td>
<td>8.0%</td>
</tr>
<tr>
<td>Spirituality</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>66.7%</td>
</tr>
<tr>
<td>No</td>
<td>20.8%</td>
</tr>
<tr>
<td>Not sure</td>
<td>12.5%</td>
</tr>
<tr>
<td>Education</td>
<td></td>
</tr>
<tr>
<td>High School/GED</td>
<td>4.2%</td>
</tr>
<tr>
<td>Some College</td>
<td>16.7%</td>
</tr>
<tr>
<td>Associates Degree</td>
<td>25.0%</td>
</tr>
<tr>
<td>Four Year Degree</td>
<td>37.5%</td>
</tr>
<tr>
<td>Master’s Degree</td>
<td>8.3%</td>
</tr>
<tr>
<td>Doctoral/Professional Degree</td>
<td>8.3%</td>
</tr>
</tbody>
</table>

Note: Gender and sex were queried using the following stems and response options: What was your sex at birth? Response choices: male, female, other [write-in]; What is your gender? Response choices: Male, Female, Trans male/man/boy, Trans female/woman/girl, Agender, other [write-in], Prefer not to answer; What is your sexual orientation? Response choices: Gay, Lesbian, Straight, Pansexual, ther [write in], Prefer not to answer. Response options that were unselected are omitted from the data table.

Figure 1. Key themes of the sexual and gender identity disclosure process.
Prior experience with the LGBTQIA+ community

Some parents view individuals living an openly LGBTQIA+ life as a dangerous way of life due to tragedies they witnessed within the LGBTQIA+ community while they were growing up. For these parents, an openly LGBTQIA+ lifestyle was associated with hate crimes that parents had witnessed.

“But it was the site, like we went and met up with one of our friends who’s gay and had a big cry. And I told him, I said, I’m, I’m terrified being gay is not safe all the time. My [name of relative] is buried near Billy Jack Gaither…He was murdered, and they tried to burn his body on a pile of tires because he was gay. … I mean it’s better than it used to be, but it’s still not, you know, we have government trying to prevent [them] having a job they want and yeah, they can get married, but how long are they going to be able to hold onto that? People can be violent.” (Karen, 49)

LGBTQIA+ parents talked about their own sexual identity influencing their opinions about their child coming out. Some LGBTQIA+ parents note their own sexuality as a positive factor they leaned into when their child came out; they expressed that their sexuality provided them with knowledge, more than heterosexual parents, and allowed them to better provide support and advice for their children:

“I feel like I have an advantage due to the fact that I know what all he's going to go through as he's growing…So, I can pretty much stop some things that's going to coming into existence with him. So, I feel like I pretty much got an advantage when it comes to it.” (Isabel, 33)

“I guess that was the thing that was like cool was that I got to experience pride with her and I guess maybe if I was a straight mom who wasn't in the community, that would have maybe been overwhelming, but I wasn't overwhelmed. I was just able to experience it with her. Um, so I guess it's maybe a unique advantage of also being in the community.” (Jenna, 37)

Other LGBTQIA+ parents talked about how their experience with their own sexuality made them nervous and fearful for their child being LGBTQIA+:

“My wife, she, she was kind of, she had a different reaction to it because she said she basically, you know, don't want him to go through all the stuff that we went through. She wants him to be a normal straight man, go, grow up and not go deal with anything. So, so we're kind of back and forth in the house when it came to it. So, we pretty much just, I don't know, but it didn't affect me. I mean it cannot affect me because he's his own person.” (Isabel, 33)

“If you're a parent who's in the community, and parenting somebody who's gay, you are fear- the very first thing that comes in front of your mind is your kid's safety. Here in the south, that's the number one- cause like, um, this, and this is a very big difference between my son and my daughter is like, I don't worry about my son's safety because he's straight and he's six foot two and he's built like a line-backer, but my daughter, you know, like she could be fired because she's gay and there's no recourse for it or, you know, someone can beat her up because she's gay and she's, you know, almost a walking target and that's really terrifying.” (Hannah, 47)

Religious affiliation

Some religious individuals discussed positive impacts their beliefs had on their reactions to their child citing inclusive beliefs or strength from God:

“I just remember thinking, okay, God, you must think we can handle this, and you got to get us through. And it was just that, it was almost comforting in the fact that we were in our church parking lot at that time, right when he told me.” (Callie, 50)

Not all felt comforted by their religious beliefs. Some mentioned the internal conflict they felt based on their church’s or their personal religious beliefs about homosexuality:
“In the earliest stages, that was kind of, there was some, some sense of dread, like, uh, especially, uh, especially with my line of work as a pastor and with all the baggage that goes around that and issues of sexuality.” (Trey, 53)

“Coming from a Christian background, I was like, ah, I’ve done something wrong. So, I did blame myself, and I still do sometimes it’s like, could I have done differently?” (Rebecca, 44)

**Age of parent or child**

The age of the child at disclosure also influenced parents’ reactions. Parents of younger children were concerned about their child’s sexuality interfering with the development of their identity:

“I was devastated cause I, I [want] him to feel out, figure out who he was first before he’s started getting into his sexuality... So, it was kind of devastating for me because I want him to be more, I don’t want to necessarily say be like manly, but just be more of who he was.” (Willow, 32)

**Precursor events**

Precursor events are actions before the actual disclosure that prepare parents or alert parents to the disclosure event. These events can take a variety of forms. Some parents report their child behaving in gender non-conforming ways (i.e., behaviors that they did not consider expected of their child's gender assigned at birth or assumed heterosexuality). Gender nonconforming behaviors are actions like deviations in dress (e.g., boy wearing dresses), actions (e.g., using a gay “voice”), watching LGBTQIA+ specific shows (e.g., watching *Ru Paul’s Drag Race*), or choosing to play with toys more typically associated with the opposite gender (e.g., girl playing army toys). Parents note these as moments of pause where they would evaluate the actions of their child against their expectations and the actions of others, like older children in the home:

“But I started noticing that he didn't want to play with boy toys. Everything... And at first it didn't bother me. I just feel he's a child and he just, he had a sister and he just wanted to play with sister. But then it progressed to him not even wanting to play with a boy, his peers. He just wanted to play with girls and girls only do girl things. Several times tried to put on my wife's wigs, go and putting makeup on his face, polishing his finger[nails]. I mean it's after, while he just, the, the body movements and all of that, and he once told me that he wants to be a girl. Maybe he wants to be a girl, or maybe he's just gay.” (Xenia, 49)

“Growing up, not so much, but by the time middle school, high school, there were days he wanted to see if he could convince people that he was the other kid's brother instead of sister there like go to the soccer game with a baseball cap and a t-shirt and see if he could convince people he was a brother instead, but then other days not.” (Quinn, 47)

Another example of a precursor event is when a child “tests the waters” before their disclosure. For example, if a child mentioned something about same sex attraction, gender dysphoria, etc. in passing or projected as about another person to see how the parent reacts. These small actions can allow for the child to see how a parent reacts before making a more formal disclosure to their parent(s). These actions do not go unnoticed by parents. Some parents mentioned these “feeling out” moments as instances where they began to suspect their child may be LGBTQIA+:

“He said he just thought he might kind of like have a crush on a boy in his class. Um, and, but he didn't, you know, it wasn't, I don't think I'm gay, I just, you know, I really like this, I kinda like this boy, I like to be by this boy. So, then a year later, you know, he actually came out.” (Grace, 52)

**Disclosure events**

Children disclose through a variety of ways. Some parents reported their child directly disclosing to them, such that the child approached the parent and initiates the conversation. This direct
disclosure can take on different forms as well. Children can disclose directly through formal discussions:

“It took him like a week to tell me. He told me in different kind of like parts and at one point I told him just sit down and just have the full conversation with me. And he cried before he told me that he felt different and I asked him, why do you feel different? He said because inside he feels like a girl, but on the outside, he's a boy” (Isabel, 33)

“Um, and he just said, you know, I think I've got something I have to tell you any, you know, you might not like it. And then he just blurted it out kind of how it happened.” (Nancy, 35)

In addition to in-person conversations, children disclosed through email, letters, and social media:

“She kind of wrote me little letter and like did it all pretty and designed all around it. Just kind of laid it out and she was like, are you mad, and I was like, ‘No!” [and] she's like, ‘I didn't think you would be.” (Ophelia, 28)

“I got an email from my child in my house.” (Debbie, 54)

Some child-initiated disclosure can even occur through passive communication:

“You know, one day he just came to me and kind of almost mentioned it in passing.” (Elaine, 29)

“I was cleaning up her room, I guess this has probably been about four years ago. Uh, I found a note and I read it and it disturbed me… I was just hysterical when I first read it and everything made me paranoid that like, she, I thought she was sneaking the girl in my house.” (Rebecca, 44)

“I think we had just discussed it a few times and I asked her if she'd, she'd really, I think she was about 14 years old and I asked her if she kind of decided which way she was leaning and she just kind of let me know, and so there wasn't any big, huge thing about, I think we were in the car just kind of talking about it. Um, and it wasn't any kind of big surprise.” (Hannah, 47)

Rather than waiting for their child to disclose, some parents actively chose to solicit this information from their children. Some parents stated their concern for their child’s wellbeing if they were LGBTQIA+ as a reason why they asked their child about their sexuality/gender identity. They expressed concern for their child not having normal social encounters like dating if they were to remain “in the closet”:

“And, I finally just kind of asked him one day, I'm like, Hey, it's just you and me. And I'd kind of gently prodded at it. And finally, I'm just like, well, just tell me… And so I told him, I said, it's really important that I know, because I want you to be able to date and have a normal dating experience that you would with anybody else, you know? And so, he finally just kinda was like, yeah, I am, I'm gay. And I was like, okay. You know, so, so I would say around, I can't remember for sure if it was eighth or ninth grade.” (Karen, 49)

Parent reactions

Many parents evidenced self-awareness of how important their reactions were to their child. Some parents described using this self-awareness to actively shape their reaction in real-time. For example, some discussed holding back all their feelings in favor of displaying a more positive reaction outwardly for their child's benefit:

“I wanted to make sure that I had a good reaction because I don't want him to ever feel like he's not loved and accepted by his family.” (Elaine, 29)

“And I was really concerned for him. I really was concerned that I did not want any negative emotions I was, I might be feeling anything I might be feeling. I wanted to make sure he didn't see that cause I didn't want him to think badly of himself.” (Grace, 52)

“I think what I told him was, okay, it's awesome. I can't wait to buy rainbow stickers for my car, and I was trying to be as encouraging as possible.” (Lauren, 41)
Other parents looked into LGBTQIA+ resources to gather knowledge about what actions and reactions they should have for their queer children. Parents described reaching out to LGBTQIA+ centers and LGBTQIA+ literature to get more information about what their children were experiencing:

“I work actually at a LGBTQIA+ community center. I started working there after my son came out and I wanted to learn more about the community.” (Grace, 52)

“So my primary concern was making sure that she had the resources that she needed, um, once she, once she came out, um, because at the time there wasn't a whole lot here.” (Hannah, 47)

“I felt like when we had that actual face-to-face sit down conversation that, uh, I was, I could also bring him some hope because I didn't know if he was going to be coming to me in tears or coming to me in great joy or relief. I just didn't know. But I thought, yeah, I've got some answers, already in my pocket and so, I'm, ready for this.” (Debbie, 54)

Parents also talk to queer friends or friends of queer children to get advice or share concerns for their children. Parents mentioned using these relationships as a means to gather support for themselves and to discuss their own feelings and concerns about their child's sexuality or gender identity:

“One of my close girlfriends, her, daughter is younger than mine. And so, they openly talk about the issue, because she had said that she was and then one of my cousins, her daughter's grown and got divorced and decide that she wants to try lesbianism and so she's dealing with that fact too. So, we just kinda talk in a little circle.” (Rebecca, 44)

“Um, that friend that I reached out to, uh, who, you know, was supportive and helpful, uh, she said: Debbie, you need to be prepared for it. I get all misty, just talking about it, but she said you need to be prepared for it. The loss of the girl child you had because you did invest emotionally. You know, a big part of your life and raising a girl for whatever that entails.” (Debbie, 54)

Some parents experienced a sense of sadness or loss when their child came out:

“There will be times when you, you know, kind of feel that that girl that's no longer there, and you got a wonderful boy that, you know, there was a girl and she's not there anymore...it's not really like the loss of a child, but it's like the loss of, you know, something that was in your life that had a certain shape and form and that doesn't exist anymore...there were occasions like when we were, getting ready to sell our house and move and I had to go through things, pack them up, I found, you know, the, the baby box, you know, full of little pink things and I could give a shit about pink, but, you know, it did remind me. You know, I remember thinking, you know, oh: boy, girl, twins, how cute. And that girl is not there anymore.” (Debbie, 54)

Not all parents experience a sense of loss; some are happy or relieved when their child is open about their sexuality/gender identity:

“There was a big sense of relief that okay, well now, yeah, now we can just kind of let him really be himself.” (Lauren, 41)

“I was, I think I was just happy that she finally felt that she could tell me.” (Xenia, 49)

“I just want him happy and healthy and because this is probably the happiest and healthiest I've seen him in quite some time. I'm happy with that.” (Pam, 36)

“Just to be really honest, immediately I saw that she had better taste in girls than boys because her, her now wife is a delightful young woman, about a year or two ahead of her in school.” (Trey, 53)

Others focus on the fear they feel when their child discloses relating to their physical and mental safety:

“Um, but my biggest concern really is of somebody, somebody hurting her, physically, you know... that's the scariest part.” (Xenia, 49)

Medical concerns were also observed, especially for parents of trans children. These parents expressed concerns for the medical procedures that are associated with their child's transitioning.
The permanency of medical transitions as well as social implications for transitioning weighed heavily on parents:

“We pulled like for real articles and like the whole nine and it was pretty intense because I wanted him to be like, very well aware, like, this is what happens when you start T and this is what happens when you have top surgery and bottom surgery and you know, bottom surgery for female to male is not quite as progressed as the other way and so, you know, you need to be well aware of what you're asking for, what that means for you and what you want to do.” (Pam, 36)

A topic that nearly every parent interviewed mentioned was the presence of fear when their child came out. Parents cite concern or fear for their child as the primary driving force behind what is driving their reactions and actions post disclosure:

“I was worried for her sake, his sake, he was her at the time, um, because Alabama can be very difficult place to do that and I wasn't sure how supportive friends and friends' families were going to be. And um, I was, uh, she's got ADD and she's got anxiety and I thought I was afraid this was going to compound some of the anxiety issues” (Quinn, 47)

“He's small. He's about five foot five and he weighs about 135 pounds. So, he small too. Um, you know, we're just extra careful and, um, want to just look out for not only his rights as a person, but his safety.” (Karen, 49)

“And then I'm also terrified that when I see him heading out somewhere, cause you know he'll go to parties all dressed up, and so scared for him that somebody is going to hurt him. There was a transgender woman murdered in the Mobile area just a couple of years ago and it was by somebody that she knew. And so, it's just, it's scary. It's scary as a parent, out of all of my children, including my daughter who's about to go to college, I'm most scared for him.” (Lauren, 41)

“I mean just fear for her safety, fear for her rights, fear for her quality of life, you know, just in general.” (Ophelia, 28)

Parents expressed fear of the social implications for their child being LGBTQIA+:

“You know, and I was, I was a little worried maybe of not worried, not worried that he might be gay, more just worried about what would, how the world would treat him if he was, you know” (Grace, 52)

“Um, I don't have to worry or fear about the lifestyle, in general, except for how others would react to her being in that lifestyle, like my mother knows nothing about any of this. And so, ain't wanna tell her, I didn't want to reveal any of that to her.” (Rebecca, 44)

Living in the Deep South was a significant contributing factor for parents' fear due to perceptions about the homophobic political and social climate of the area. Parents discussed the South in a political context citing the prevalence of conservative views particularly regarding homosexuality or gender identities outside of the gender binary. Historically anti- LGBTQIA+ events that occurred in the South were also frequently mentioned:

“Well, just living in the Deep South, I mean I guess if we lived in California it would be different... You know, I mean just like I knew it was gonna be a challenge.” (Callie, 50)

“I'm probably more so concerned about, not necessarily us like the immediate family, but the extended family. We have, you know, relatives in- which she's from Georgia and I'm from Louisiana and then, you know, we live here in Alabama, you know, so kind of like the Bible Belt there, you know?” (Monica, 35)

“I also was aware of the difficulties being in the south and, um, you know, living in a conservative environment and my child attending a, you know traditional white conservative suburban school I've, I've kind [of knew] about also some of the struggle that was ahead for him” (Debbie, 54)

“I think like politically and culturally that, you know, we were headed on the arc. Yeah. It's more, not necessarily an arc but more with a straight line where we were headed up and I am now, I'm kind of watching the political climate and I'm watching, some things that are happening, and I, in all honesty, I actually think I'm more afraid now than I was before.” (Lauren, 41)

Another theme that repeatedly comes up is the concept of parental love. Parents discuss the unconditional nature of parental love regardless of their child’s sexual or gender identity:
“When my child was born, you know, I just held him in the arms and I thought Oh, you are just going, you know, have the best life ever. And it occurred to me well, he could be many things. He could be healthy. He could be sick. He could be tall. He could be short. He could be straight. He could be gay. He could be gay? Oh my God, I want him- and while it wasn't that much harder because, um, you know, I'm going to have his back if he's gay I said, you know, I just love you no matter what. And I'm always here, and this isn't going to affect how much I love you and that you're going to be okay and it's all gonna be alright. I always told him to be himself, I don't care. I told him I don't care what you do but you always come, you, you, you can sleep with- you can always come to me, we've got a problem or go to her it doesn't matter, just be authentic and choose your friends wisely.” (Debbie, 54)

“It's like I told her, you know, your sexual identity doesn't define you as a person, as a human being, you know, and in a perfect world, this wouldn't, you know, even be a thing to worry about, but it's not, you know. But as far as I go, you know, I'm always gonna love you no matter what. I don't judge you or look down on you or anything like that.” (Bernard, 40)

**Discussion**

The overall purpose of this research study was to systematically collect first-hand accounts of parents’ reactions to their children's sexual identity disclosures. The central output of this qualitative study was to generate an emic account of the sexual identity disclosure process from the perspective of the parent (Figure 1). This concept model can be used to inform a set of testable hypotheses that can be used to identify risk and protective factors for the development of a stigmatized identity, and other indicators of positive and negative adjustment.

For example: parental religiosity, age of child at the time of the disclosure, parental sexuality and gender identity, geographic location and sociocultural milieu of the family residence, parents’ prior exposure to the LGBTQIA+ community, parental attitudes toward child rearing, parents’ homophobia, parental education and work life, parent social support, and parents’ prior and current relationship status were all identified as influential factors associated with parental reactions. It is also important to note that in constructing the model in Figure 1, it became apparent that both child reactions and post-disclosure events needed to be included, although these constructs were not an explicit focus of the current study, and thus should be explored in future research in connection to individual differences in preceding factors.

The importance of parent reactions for children's mental health outcomes is well documented in the literature, however the underpinnings of why parents react positively, negatively, or otherwise are less well understood. This conceptual model (Figure 1) can be used in future work to better understand what drives parental reactions, thus allowing for better targeted interventions to increase the likelihood of parents having positive reactions. For example, several parents mentioned being thoughtful and self-aware about their reactions and wanting to react in ways that were beneficial to their child. However, they were also struggling with very strong emotions including fear about their child's safety and anxiety about reacting in a productive way. Strong emotions can be hard to control and may come out in unpredictable ways and parents may be interpreted as rejecting by their child. Parents may be questioning their own identity as what it may mean for them to have a son instead of a daughter or be thinking about how to manage potential negative relatives, coworkers and community members’ reactions and these parental concerns may be observed by LGBTQAI+ children, adding to stress or stigma that they may already be feeling. Parents may have prejudicial feelings and beliefs that they need to confront and these may be juxtaposed with love for their child. Making space to acknowledge and to process these dissonant thoughts and feelings away from their child could increase the likelihood of positive parental reactions to disclosure events could lead to increased positive mental and physical health outcomes for their LGBTQAI+ children. Many parents in our study described engaging in help-seeking behaviors to enable them to process the disclosure and more effectively parent their child, but not all parents may react this way so better understanding and reducing barriers to parents’ help-seeking is an important avenue for future research.
It is well documented that autonomy granting increases with age and adolescents take increasing ownership over how they manage information about themselves. However, most of the developmental research on this topic has been heteronormative in nature and it is not clear how applicable it is for LGBTQIA+ adolescents. For example, in the case of adolescents who are considering medical procedures associated with gender reassignment, parents may expect to have more control and input over what they perceive is a medical decision than what adolescents perceive to as very personal identity issue.

Due to the salient and real concerns that queer adolescents face with respect to violence, types of information that may seem purely social (e.g., going on a date) can have serious social, health and safety ramifications if LGBTQIA+ adolescents are “discovered” by the wrong people, especially in the Deep South. These adolescents also must face the added pressure from legislation, such as HB1 and SB10 in Alabama, aimed to limit their access to healthcare particularly gender affirming treatments and hormone blockers for minors and preexisting discriminatory language in legislation, such as Alabama code 16–40 A that outlines that same sex relationships are not acceptable to the general public and are criminal. LGBTQIA+ adolescents may be kicked out of their homes by parents, ostracized by their church, and face physical threats to their safety simply by wearing gender non-conforming clothing or holding hands with a same-sex romantic partner. Prevailing theories of information management in adolescence that include the classification of types of information into concrete categories (e.g., prudential, personal) will need to be re-considered for LGBTQIA+ families (Keijsers & Laird, 2010; 2014; Smetana et al., 2009). It may be that increasing parental knowledge, which is typically considered a positive step toward less risky behavior in children (Reynolds et al., 2011), may in fact be dangerous for LGBTQIA+ youth in some circumstances if that knowledge is used to curtail medical treatment related to gender reassignment, to seek dangerous psychological interventions such as “conversion therapy”, and ultimately to stigmatize the LGBTQIA+ child.

In our study, parents were explicit that the way they thought, felt, and acted was motivated by their perceptions of the socio-political climate where they lived, which in this case, was quite conservative. This is a clear example of how it is imperative to consider the socio-political climate in which research is conducted, such as the Deep South where our participants were recruited, for developing theoretical models intended to explain core developmental phenomena. For example, Alabama is the only state in the country where most of the population does not support same-sex marriage (Vandermaas-Peeler et al., 2018). Theoretical models of core processes such as sexual and gender identity development and how children manage their information about their lives should explicitly acknowledge the participant sample that contributed data to the model and socio-political context in which the data were collected. Coming out in the Deep South should not be assumed to be the same as coming out in more liberal areas, and parenting a child who is coming out in the Deep South should not be assumed to be the same either. Parents described tangible mental and physical health concerns, safety concerns and social concerns and spoke clearly about wanting their children to have healthy sexual and romantic experiences consistent with their sexual and gender identity and uncertainty if this could happen because of where they lived.

The COVID-19 pandemic may further complicate these processes as many young people, especially emerging adults, moved back in with their parents due to on campus sessions being suspended in many areas and young people being laid off from work (Ohannessian, 2021). Young people who have moved away for work or to attend college and initiated identity exploration in those, potentially more liberal, settings may have had to suddenly balance maintaining new and important social networks with ones from their youth that predated any coming out that they have done after they have moved away. This process may include the potential for having to disclose to parents more information at a different pace than what the young people initially planned. This change of pace and content of the disclosure could have positive and negative effects on the quality of the parent-child relationship and consequently the young person’s mental health and family functioning more broadly. More research on this topic is critically important.
Strengths and limitations

This study consisted of in-depth semi-structured interviews with parents of LGBTQIA+ children in the Deep South of the United States. The majority of existing research has been conducted in the coastal regions of the Country in predominantly socio-politically liberal or large urban areas (Stone, 2018). This study is one of the first to directly collect information about parent reactions from parents themselves; previous studies have focused on children’s opinions about their parents’ reactions. However, parents may have intentionally or unintentionally chosen to modify their accounting of how the disclosure(s) transpired and how they thought and felt about it in addition to suffering from recall bias and memory rehearsals. Yet, the primary purpose of this study was to gather perceptions with the understanding that people will experience and interpret the same event differently, and that these perceptions shape future behavior, rather than trying to identify a singular “truth”. Future research with children and parent dyads will help to broaden our perspective of how the disclosure process is experienced by families as well as aid in identifying key differences in perception of the event. Determining where the parent’s and the child’s version of the disclosure event and ensuing parental reactions align and differ is integral in identifying interventions for parents of LGBTQIA+ youth.

Additionally, the study sample was self-selected so it is possible that parents who were aware of the study, but chose not to participate, may differ from the parents in our study in ways that could have affected the pattern of responses in the data. Parents that chose to participate may be more accepting of their child than the average parent of an LGBTQIA+ child, although some parents within study vocalized their previous and/or persisting disapproval about their child’s LGBTQIA+ status. More (women) mothers than (men) fathers chose to participate in this study. Obtaining male’s/father’s perspective is important. Future studies should investigate differences on reactions to disclosure based on the gender of the parent and if that varies based on the identity of the child. Most parents in this study identified as heterosexual/straight (70.8%). While heterosexual parents may still represent most parents of queer youth, more and more queer individuals are becoming parents and thus may become parents of queer youth as well. Future work should attempt to compare the experiences of queer parents and heterosexual parents with respect to reactions to disclosure. In addition, our sample was 20.8% percent racial and ethnic minority. Intersectional identities like being a racial minority and queer add layers of complexity to the disclosure process. Further research should be done to compare the experiences of racial minority individuals and White individuals to identify the differences in the proposed disclosure process model.

The Deep South still harbors negative attitudes toward the LGBTQIA+ community disproportionately more than the national average according to the Gay and Lesbian Alliance Against Defamation in America’s (GLAAD) Southern Stories (LGBT Life in the South, 2016). As such, these data fill in an important gap in the literature and shed new and important light on the experiences of parents of LGBTQIA+ children living in politically, religiously, and socially conservative areas. This study begins to address the need for LGBTQIA+ research focused on the Deep South as well as focused on parents’ experiences. Understanding the mechanism behind what drives how parents react to disclosures is integral to developing evidence-based and culturally sensitive interventions for parents and queer youth.

References


