“You Think You Know Me, But You Have No Idea”: Dynamics in African American Families Following a Son’s or Daughter’s Disclosure as LGBT

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Abstract
This article describes a qualitative project, utilizing grounded theory, to explore the experiences of African American families when one member discloses their identity as lesbian, gay, or bisexual (LGB) or their gender identity as transgender (T). Respondents in this study included the LGBT-identified son or daughter, and a parent, to explore the impact of the disclosure process within African American families in the Southwestern United States. Implications for counseling practice and future research will be explored.

Keywords
African American, family counseling, LGBT, disclosure, coming out, family systems

The cultural diversity of today’s population presents special challenges to mental health professionals (Sue & Sue, 2013). Each individual has multiple cultural identities (e.g., race, gender, and sexual orientation), which can impact their life experiences (Diller, 2011). Additionally, scholars have argued that counselors should make connections between client’s identities, and the societal oppressions they may face, as important factors to consider when developing interventions for client care. The needs of culturally diverse clients, however, are frequently poorly assessed by counselors, which can lead to ineffective interventions being utilized by mental health professionals (Diller, 2011; West-Olatunji & Conwill, 2011).

In an effort to explore this complex phenomenon, multicultural counseling literature (e.g., Steinhouse, 2001; Sue & Sue, 2013) has placed an emphasis on clinicians developing an understanding of how such factors overlap, thus examining the relationship between multiple identities which make up the individual. For example, one’s racial identity and sexual orientation are distinct constructs that overlap, which influence a client’s overall identity development (Santos, Ortiz, Morales, & Rosales, 2007). As such, it is important for mental health professionals to understand the interconnection of multiple identities. Despite the call in the counseling literature for one to develop cultural competence, professional counselors continue to struggle with cultural-specific interventions (Roysircar, Arredondo, Fuertes, Ponterotto, & Toporek, 2003; Sue & Sue, 2013), especially within the lesbian, gay, and bisexual (LGB; Shelton & Delgado-Romero, 2011) and transgender (T) communities. For example, scholars have argued that heterosexist bias has the potential to negatively impact professional counselors’ ability to understand the lenses that LGBT clients present with (Goodrich, 2009; Shelton & Delgado-Romero, 2011), which can interfere with their capability to develop an understanding of the clients presenting problems. More specifically, it is not uncommon for counselors to intentionally and/or unintentionally hold beliefs that directly impact their ability to build rapport with LGBT clients, such as (a) communicating in a manner that assumes that a client is heterosexual (e.g., using gender-specific language when referring to one’s partner); (b) focusing on one’s sexual orientation and/or identity when in fact their presenting problem is not related; (c) underestimating how being marginalized in society (e.g., heterosexist attitudes) may impact a client’s identity development; and (d) lacking an understanding of the coming out process. To this end, sexual identity microaggressions have the potential to arise during clinical work with LGBT clients. Similar concerns have been noted for clinicians in their work with the transgender population (Singh & Burnes, 2010). Given that communication (both

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verbal and nonverbal) between both parties have the potential to negatively influence the therapeutic relationship, due to lack of knowledge or skill, this targeted population will continue to be at risk.

Sexual orientation identity development can be defined as the process through which an individual comes to openly identify as LGB, thus progressing from an assumed identity of heterosexual or identity confusion to an open, more affirmed identity as LGB (e.g., see Cass, 1979; D’Augelli, 1994). Identity theorists have argued that this process follows a linear stage, which includes the following: (a) a general sense of feeling different, (b) an awareness of same-sex feelings, (c) a point of crisis in which the individual realizes that his and/or her feeling can be labeled as LGB, and (d) an eventual acceptance and integration of one’s gay identity (e.g., Cass, 1979, Phillips, 2007). Similarly, research has been conducted within the T community to explore the processes of gender identity development (Chaney, Filmore, & Goodrich, 2011), which has typically been argued as parallel to the above-cited LGB model. It should be noted, however, that disclosure of one identity status as T, as well as exploration in the family disclosure process, has been limited with a greater focus in the literature on the LGB disclosure process. Readers should be cautioned that although the extent literature (and as such, focus of this literature review) is more focused on LGB disclosure processes, it should not be assumed that the gender identity disclosure process is less significant or even similar. Research in this potentially distinct phenomenon is warranted in the future to further flesh out the unique concerns or issues within that developmental process.

Although there is research that pertains to LGB identity development (e.g., Cass, 1979; D’Augelli, 1994; Phillips, 2007), few studies have addressed the centrality of racial/ethnic identity status when discussing sexual orientation or gender identity development (Budge, Tebbe, & Howard, 2010; Lindsey, 2005). As Rosario, Schrimshaw, and Hunter (2004) have stated, one’s race and gender identity development has the potential to impact the coming-out process.

Coming out to others consists of disclosing one’s sexual orientation as LGB or their gender identity as T (Herek, 2003). Scholars have noted that coming out is a sign of self-acceptance among individuals who identify as LGBT as well as a negotiation between one’s self and society (Corrigan & Matthews, 2003; Herek, 2003). According to Corrigan and Matthews (2003), this represents a significant milestone of the individual who identifies as LGBT and promotes self-integration, self-growth, and personal empowerment. Research has demonstrated that coming out to one’s parents is one of the most difficult developmental milestones in sexual orientation identity development (Martin & Hetrick, 1988; Savin-Williams, 2001; Willoughby, Malik, & Lindahl, 2006). In fact, parents are often the last to know about their son’s or daughter’s sexual orientation (D’Augelli & Hershberger, 1993; Goodrich, 2009; Goodrich & Gilbride, 2010; Savin-Williams, 2001). For example, in a study of 194 individuals who identified as LGB, 73% of the participants first disclosed to a friend, followed by teachers, counselors, and clergy (8%); mothers (7%); siblings (3%); and fathers (1%; D’Augelli & Hershberger, 1993). These individuals typically experience anxiety and apprehension when it comes to disclosing their sexual orientation to their parents, as many fear adverse reactions and consequences as a result of their disclosure (Savin-Williams, 2001). This should not, however, negate the experiences of disclosing to one’s parents or family. Although research has demonstrated families are often the last to know, some research also has pointed to the significance of this milestone as described by both children and family members (e.g., see Phillips, 2007; Rossi, 2010; Savin-Williams, 2001).

It should be noted, however, that majority of the existent LGBT literature is based upon White middle-class individuals. This then raises an empirical gap, silencing the experiences of persons of color, as well as their families, and how they come to learn and accept LGBT identity status. To this end, this then warrants the need for further exploration of the lived experiences of people of color who’s sexual orientation is LGB or gender identity T.

Negotiating multiple identities is a task that is faced by various culturally diverse LGBT persons (Lindsey, 2005). For example, disclosure as LGB to a family member within families of color presents challenges. People of color typically do not discuss issues related to sexuality and as such postulate a heterosexual orientation (Lindsey, 2005; Rosario, Schrimshaw, & Hunter, 2004). As such, culturally diverse LGBT persons are often forced to develop ways of negotiating their identities (Wynn & West-Olatunji, 2008) in order to avoid being stigmatized and/or exiled from their cultural groups. Additionally, LGBT people of color often experience exclusion from the mainstream LGBT culture and their family of origin, thereby increasing the risk for psychological vulnerability (Lindsey, 2005; Wynn & West-Olatunji, 2009). For example, research shows that racial microaggressions exist within the LGBT community and has even led to LGB people of color feeling as though they are not desired by their White counterparts (Han, 2007; Teunis, 2007). Moreover, persons of color in extant studies report feeling neglected and/or left out of various festivities that are common in the LGBT community (e.g., pride, social settings). In combination, this can be detrimental to the physical and mental health of the individual.

Sexuality theorists have suggested that parent–child dynamics, prior to coming out, may be the best predictor of parent’s initial reactions and subsequent adjustment to their son’s or daughter’s sexual orientation disclosure (Boxer, Cook, & Herdt, 1991; Savin-Williams, 2001). For example, research suggests that when a son or daughter who identifies as LGB discloses their sexual orientation to their parents, this awareness influences the family dynamics as well as the identified son or daughter’s worldview (Willoughby et al., 2006). Few theoretical models, however, have addressed how parents react and come to understand their son or daughter’s disclosure as LGB (Goodrich, 2009; Goodrich & Gilbride, 2010; Saltzburg, 2004). It is unclear why some parents may initially reject or deny their son or daughter’s sexual identity, whereas others
offered acceptance and support (Gallor, 2006; Saltzburg, 2004; Savin-Williams & Dube, 1998). Additionally, little is known about the effects of parental reactions on the psychological and behavioral health of the son or daughter who identifies as LGB. This ideology is prevalent in the traditional African American family.

The African American Family

In the traditional African American family, coming out as LGB is often viewed as an assault on traditional gender roles (i.e., masculine and feminine), which is deemed as counterproductive to the success of the African American culture (Goode-Cross & Good, 2009; Lemelle, 2010). This is particularly highlighted in the traditional Baptist church, which traditionally has ignored and/or denigrated its LGB members. According to Taylor, Chatters, and Levin (2004), the African American church typically consists of the following: (a) services are led by the pastor of the church, (b) congregants participate in rituals that have been passed down (e.g., call and response), and (c) in addition to restoring congregants’ humanity, services are intended to provide participants with spiritual growth, thereby deepening one’s relationship with God. Such practices are also associated with the negative view of LGB individuals in the church. Many pastors teach their congregants that identifying as LGB is a sin, which they justify by citing such books of the Bible as Genesis, Leviticus, Corinthians, and Romans. As such, individuals who self-identify as LGB lack the support network from the traditional Baptist church, which typically creates an inner conflict among the values and beliefs of the church and one’s sexual identity (Taylor, Chatters, & Levin, 2004). To this end, a significant number of LGB individuals in the African American community adopt a secret lifestyle, commonly referred to as the down low (“DL”).

The DL

The DL is a term that has been used to describe men who engage in same-sex sexual activities but do not self-identify as gay (Boykin, 2004; Denizet-Lewis, 2003). As such, the DL refers to when someone behaviorally acts in one way, but identifies differently, perhaps to avoid rejection, discrimination, and oppression. For some when on the DL, they may secretly engage in same-sex behavior but may publicly date or be married to a person from the opposite sex.

Research has shown that the prevalence of this phenomenon is higher in the African American community, with stigmas of inconsistent condom use and elevated rates of HIV (Millett, Flores, Peterson, & Bakeman, 2007). As such, men who are on the DL (the process of secretly engaging in these activities) are believed to do so as a result of the stigma associated with engaging in secret sexual activities with same-sex partners (Lemelle, 2010; Millett et al., 2007). The empirical evidence available (e.g., Munoz-Laboy, 2004; Munoz-Laboy & Dodge, 2007) has suggested that men on the DL may benefit from culturally appropriate interventions; however, few studies have examined how best to craft such interventions (Goode-Cross & Good, 2009).

Purpose Statement

Counselors need to be able to effectively integrate culturally specific strategies into their practice in order to prevent clients of color from prematurely terminating (Sue & Sue, 2013), a trend commonly witnessed in the African American community (Brelend-Noble, Bell, & Nicolas, 2006; Briggs, Briggs, Miller, & Paulson, 2011). There is a need for counselors to understand how disclosure can affect parent social–emotional functioning and parent–child dynamics postdisclosure in the interest of family preservation (Goodrich, 2009; Goodrich & Gilbride, 2010; Savin-Williams, 2001). According to Martinez and Sullivan (1998), clinicians may have multiple tasks to consider when working with African American LGB individuals including but not limited to: (a) minimizing their anxiety from conflicting cultural expectations (e.g., “being hard”), (b) dealing with the stress of managing multiple identities (e.g., DL phenomenon), and (c) developing effective support networks that may include nontraditional family structures (e.g., “LGB family”). To this end, the primary purpose of this study was to develop an understanding of the family dynamics within African American families following a son’s or daughter’s disclosure as LGBT. The secondary purpose of the study was to solicit participants within the Southwestern United States, thereby extending knowledge about LGBT families outside of areas (see Goodrich, 2009; Savin-Williams & Dube, 1998) where this has typically been explored (e.g., large urban areas, the Northeast, and the West).

Method

Participants

A total of six African American persons participated in this study. All participants were from the Southwest, specifically the States of New Mexico and Texas. Three participants identified as female, while three participants identified as male. Of these six participants, five identified as members of the LGB community (i.e., three sons, two daughters) and one participant identified as a mother (i.e., parent) of a Transgender individual. Participants varied in ages from 19 to 47 years old.

Procedure

This study was reviewed and approved by the institutional review board at the coresearchers’ institution prior to recruitment and data collection. Participants were solicited using a two-step process. First, a list of LGBT-affirming groups and organizations within the Southwest were secured. The university’s LGBT resource center, the area’s PFLAG (parents, families, and friends of lesbians and gays chapter, and a number of the region’s religious support groups for LGBT individuals and their families were contacted via postal and e-mail as well as phone calls. The coresearchers explained the purpose of the
Once the group agreed to assist in identifying potential participants, they were mailed research invitation packets, including flyers and a letter to potential participants. They were asked to hang the flyers at their site and deliver research invitation letters to parents who met the participation criteria for the study. At some sites (e.g., the local PFLAG chapter), the coresearchers went to the organization or site to speak with potential participants. This was done at the request of these organizations both to (1) meet the researchers in order to gain a better understanding of who they were and what the purpose of the research was (to ensure comfort and security of vulnerable data) and (2) as the organization wished to have the coresearchers more accurately communicate with potential participants about the requirements of the research study. The snowball sampling technique was also utilized as part of this study; once participants were interviewed, they were also asked whether they knew anyone else who might meet the research criteria and be interested in participating in the project. If so, the participants were given copies of the invitation letters for other potential participants.

For the identified child participant, this included contacting their parents (if permitted and referred by participant). For parent participants, this included contacting their LGBT-identified child (if permitted and referred by participant).

In Step 2, participants who contacted the coresearchers were interviewed. Participants were divided between the coresearchers, with the coresearchers interviewing equal numbers of participants. Interviews occurred either face-to-face or via telephone, based on researcher’s and participant’s location and availability. Within these interviews, participants were asked to discuss their personal perspectives on their experience as either an LGB person who disclosed their identity to their family or their experience as a parent since their child disclosed as LGBT. Interviews were completed based on the availability of the participants.

The interviews were audiotaped and ranged from 45 to 90 min in length; individual interviews ranged from 45 to 60 min, couple interviews ranged from 60 to 75 min, and family unit interviews ranged from 80 to 90 min. The interviews were then transcribed by an outside medical transcription company that followed appropriate HIPAA (Health Insurance Portability and Accountability Act) guidelines. All names within this manuscript are pseudonyms that were chosen by the participants or researchers prior to beginning the interview phase of this project.

Instrument

The researchers conducted all interviews utilizing a semistructured interview protocol. The semistructured interview protocol was adopted from another interview protocol, created by the second author after reviewing the literature relating to LGBT disclosure, as well as family counseling, and was first implemented in a study of White parents of LGB persons in the Northeast (Goodrich, 2009). Given that there is a scarcity of literature that addresses this targeted population, the coresearchers were able to use the previous protocol as a basis to develop an understanding of the disclosure process with the participants in this study. Using grounded theory enabled the coresearchers to explain the process of disclosure (e.g., how it unfolded), what was central to the disclosure process, and conditions associated with the disclosure process (e.g., causal conditions). A copy of the semistructured interview protocol can be found in the study’s appendix.

Data Analysis

Consistent with grounded theory, the transcripts were shared with the interviewees to check for accuracy (Bogdan & Biklen, 2007; Creswell, 2007; Glaser & Strauss, 1967; Strauss & Corbin, 1998), and participants were invited to supplement their responses. Four of the six participants ultimately participated with this accuracy check. All of the information obtained during this process was retained by the coresearchers and utilized as new data.

Once the participant agreed with the transcript, the documents went through a series of coding. Each of the coresearchers interpreted three of the six participants and coded the transcripts of the three participants that they did not interview. This process consisted of the first author coding the transcripts of the participants that the second author interviewed and the second author coding the transcripts of the participants that the first author interviewed. This allowed both researchers access to all the study data and removed interviewer bias from the initial interview coding.

The transcripts and articles were analyzed using a constant comparative inductive analysis (Glaser & Strauss, 1967; Strauss & Corbin, 1998); interviews were coded following transcription, and this process was ongoing as other interviews were being conducted. As such, each interview that occurred following a coded interview was used to check with codes found from previous interviews, and coding was completed with previous interviews and codes in mind (Miles & Huberman, 1994). This theoretical sampling and interviewing occurred until saturation was achieved (Bogdan & Biklen, 2007; Fassinger, 2005), which was when no new themes or information was gained through additional interviews as measured and discussed by the coresearchers.

The researchers began by open coding the document, where transcribed data were reduced to the thought level (Fassinger, 2005), with open codes ranging from a few words to a short paragraph. As interviews and coding progressed, the codes were constantly reviewed and modified as necessary. Axial coding was then utilized so that codes were grouped based on relationships and larger categories (“themes”) were formed (Strauss & Corbin, 1998).

Trustworthiness Checks

At the point when larger categories were found, the coresearchers again returned to the interview transcripts, alongside the emergent themes, to participants in the study. This member-
check asked participants if the proposed theory of family development adequately represented their experiences after LGB disclosure in the family occurred (Fassinger, 2005; Strauss & Corbin, 1998), consistent with the trustworthiness process from the article we are replicating (Goodrich, 2009). Four of the six interviewees participated in this process. Participants reported comfort and consensus with the proposed theory, which was then written up by the coresearchers.

**Researcher Stance**

The first author is a heterosexual African American male who advocates for multiculturalism and social justice in contemporary society. Given the clientele that the author serves (primarily African American) and the lack of attention given to this targeted area (African American who identify as LGBT), the author felt that it was necessary to develop an understanding of how one’s family dynamics are impacted upon a son or daughter disclosing their sexual orientation as LGB or gender identity as T. The second author identifies as a White gay-identified male, whose research agenda has focused on the unique needs and concerns of LGBT persons. He has previously studied identity disclosure in families and identified an assumption that family dynamics in families of color may have some similarities, as well as differences, in the population typically studied (e.g., predominately White families). He also identified his assumption that religion and traditional family values may play a role in disclosure (or nondisclosure) within African American families. Both authors discussed their biases and assumptions going into the project and at times discussed how their assumptions could be influencing their questions and analysis of the data. Trustworthiness checks (i.e., seeking out potential bias that may have emerged during the interview/coding process through journaling, discussions, and having auditors view their data) were included to attempt to bracket and manage researchers’ assumptions.

**Findings**

In reviewing the participants’ discussion with interviews, it appears that respondents in this study discussed the identity disclosure and healing process for African American LGBT persons and their families (phenomenon). Using the analytic strategy of interpreting the data as proposed by Strauss and Corbin (1998, 130), these results present the “repeated patterns of happenings, events, or actions/interactions” that were reported by the participants who took part in the study. The process identified by the participants included a host of conditions that impacted their experience. Types of disclosure (whether by themselves or if “outed” by others), the contextual history of the “DL” in the African American community, and perceived support and experiences of others all played a role in how the participants in this study viewed the success of their disclosure process. The following sections reflect the components of this emergent model using verbatim dialogue from the participants who were studied.

**Causal Condition: Type of Disclosure**

The causal condition represents occurrences that influenced the phenomenon of the study. For the participants in this study, the way in which the disclosure of their identity occurred appeared to impact much of the process. Some participants made the decision to disclose themselves, taking power and oneness in sharing their identity with others. LaToya demonstrated this process when she stated:

> I was gathering with my family . . . and something came on television . . . two women were kissing on TV and my cousin said, ‘Oh my God. That is so gross.’ I just said, ‘Actually, it’s not so gross. I’ve done it before.”

In this statement, LaToya revealed her identity status to her cousin (as well as other members of her families) to change the negative discourse relating to LGB persons. Although jarring for her family at first, LaToya and her family were later able to have more intentional and deliberate conversations relating to her identity status and find common agreement and peace with her family members. LaToya also discussed the strength and sense of power she felt within herself after she made the scary decision to come out to her family, feeling increased amounts of self-worth related to her courage.

Similarly, Leon self-disclosed to his mother after breaking up with his partner, stating:

> I actually was going through my first breakup with another male. Being that she [Leon’s mother] lived on the east coast, I actually needed her support going through this breakup, but she had no idea it was a guy . . . I proceeded to let her know, hey, I’m in a relationship once we got home from the airport and that it was with a guy.

His mother’s initial reaction was shock and denial, but after a short period of time (approximately 1–2 days), she was more accepting and provided Leon with the support that he desired, given his emotional state following the break up.

Conversely, three participants discussed that they were unable to disclose themselves but instead were “outed.” Outed was discussed by participants when someone else took the steps to reveal the participant’s identity to others; oftentimes, this was a painful situation for participants, as it was related to labeling, someone appearing to take advantage of a situation, and other forms of trauma. Chris discussed a story from high school when he was ousted:

> I was a sophomore in high school. I had sexual relations with a neighbor of mine who actually happened to be a close friend of my brothers . . . his mother got involved . . . the situation was that he was trying to make it seem as though . . . I was harassing him.

Chris went on to discuss that the relationship that he had with this friend was revealed so that the friend could protect himself from his family and others when news about their relationship...
broke and the friend had second thoughts about the relationship (due to perceptions of same-sex relationships in the African American community). Chris discussed feeling pathologized and isolated within his community, and the sense of discomfort and disempowerment he experienced with his family when the disclosure first occurred. Although Chris was later able to come to some peace with his family and his identity, he did discuss how the outing process did have a negative impact on how he viewed himself as well as relationships with his family.

Similarly, Patrick described his experience of being outed as negative stating, When I was 15, I had told my cousin and my cousin had proceeded to tell my uncle and my uncle told my mom. Then when we discussed it, it was a negative conversation about how she could not have that in her house, that being me being gay... I knew my mom wouldn’t accept it and that she would push it as far away as she could... so she kicked me out.

Patrick asserted that his mother finding out that he was gay was a disappointment rather than a relief. This proved to be detrimental to Patrick’s relationship with his mother and immediate family and ultimately led to years of strain between the two of them, centered on the concept of sexuality.

**Contextual Conditions**

When the researchers discussed the identity disclosure process with participants, almost all participants discussed how the context of their specific community impacted their process of disclosure as well as how others in the community reacted to their disclosure. All participants discussed the prominent of the African American Baptist Church in the community and how that impacted the identity disclosure. Michelle discussed her own identity development process and how that was impacted by the African American Baptist Church: “I think for me, it was that time where there was a lot of confusion where, the Christianity piece was major and it weighed hard on me. That’s not the way that it’s supposed to be [lesbian], according to a lot of Christians.” Moreover, LaTonya described her religious affiliation [Baptist] as the reason why she delayed coming out to her family, out of fear of the ridicule and disapproval of your family. She described this process as follows:

“We’re all Christian, and we’re all Baptist, in a Black family. I don’t know if you know, in a Black family, being gay is like, wow, really, really taboo. That’s why a lot of Black men don’t come out. You know, it’s like a big deal in a Black family... you know we’ve all been going to church all of our lives and raised in church. That’s the reason I didn’t come out right away, because of that.

Similarly, a number of participants (including all male participants) discussed the phenomenon of the DL within the African American community. The DL is described as the process of hiding one’s sexual orientation within the community due to strict social codes in the African American community to act masculine and be heterosexual (or “straight”). Leon described this phenomenon more when he stated:

With Black men, you have to almost hide it. I think that’s why the DL community was such a big deal or became so large because it’s a... there are certain codes or things that you have to do in order to be perceived as straight. If you don’t do those things, then you’re considered gay. As a Black man, you can’t express... you can’t cry, you can’t be the emotional. I feel that this is the reason for the growth of the DL community... there are certain expectations that Black men have to do in order not to be stigmatized in society.

Consistent with Leon’s argument, Chris asserted:

I am very uncomfortable around African-American men, period... my family is not really tolerable [sic] with homosexuality, especially the men. I’ve heard them speak about it even growing up. They assign I guess weakness and femininity and pretty much someone of insignificance, a man that’s not truly a man, but more or less a weaker being to homosexuality. I never wanted to be viewed like that in their eyes. Among other reasons, that’s probably one of the major reasons why I didn’t come out to them... it’s very uncomfortable for me to even talk to other men, especially African-American men because of the stigma within the community.

This stigma led to Chris to continuing his adoption of a DL identity publicly for several years, which continued even after he disclosed his sexual orientation to his mother.

**Intervening Conditions: Personal or Familial Connection to LGBT Persons**

An intervening condition, one that cut the impact of the stigma and shame felt when a participant disclosed their identity was if they, or a member of their family, had prior positive experiences within the LGBT community. Deondre, a parent of a T child, noted that she never had any issues when her child disclosed his identity as a transgender person. She stated, “I don’t quite get it [the conflict that some families face after disclosure] because as I said I’ve always had friends, probably since I was 17, who were LGBT.” Although this was an uncommon experience for the other five participants, for this parent, having prior positive experiences with the LGBT community appeared to strongly influence her reaction to her son’s disclosure more positively, as well as appeared to make the actual act of disclosure that much easier for her son.

**Action Strategies: Support of Others**

The action strategies are defined by Strauss and Corbin (1998) as the critical steps that result in consequences. These are behavioral strategies that the participants underwent to better solidify their identity and later disclose it to others. Participants discussed that for their own process of understanding their identity, mentorship, and support within the LGBT community
Consequences: Participants’ Success and Later View of Disclosure in African American Community

As a consequence to their disclosure process, and reactions that they faced from their family members, participants had differing views on how one can successfully disclose within the African American Community. Patrick discussed how the process was challenging and that persons needed to have a good understanding of the resources at their disposal and what life would be like in the home following that disclosure. He discussed firm preparation and thoughtful decisions to disclose when he stated:

“I would first tell them to weigh the pros and cons. If coming out puts you in a dangerous situation or eliminates resources that would be helpful to you and that are needed or makes things extremely uncomfortable at home to the point where it becomes dangerous or not good for them, I would say don’t do it.”

Other participants responded similarly that rejection was possible and the need to be independent based upon the responses that could be faced with their families. Each participant drew from their past experience when attempting to explain how they would discuss this process with other youths, wanting to ensure safety for younger members of their community. In regard to the family adjusting after disclosure, the participant’s responses varied. For example, LaTonya asserted:

Too many of us, when we come out, we hide and different things, and we make it seem like its wrong, so other people are going to automatically think that our life is wrong. If you stand up for who you are and let your life be normal, just like their life is normal, just like you talk about your husband, I can talk about my wife. If you can do that, if you can just stand it and don’t, you make it everything normal... it’d be so much easier and your family will respect you more because you don’t hide who you are from them about what when you’re having hard times with your girlfriend or your boyfriend, whoever you’re with at the time.

Alternatively, several participants experienced periods of time where their family stopped communicating with them (ranging from 6 months to 2 years), with one participant still lacking consistent communication with his family. For example, Chris disclosed:

“I honestly feel that if you have come to acknowledge that people in your family truly love you, then regardless of who you are or what you claim—who you really are or what you tell them, I think eventually over time they will understand and that love will not falter. Like I said, even though my mom went through that whole six month period of time when I feel like she mistreated me by not speaking to me like she should have and not actually nurturing me as being her son and just saying everything’s going to be okay, she eventually came around.”

These excerpts demonstrate the various adjustment periods that one may encounter after disclosing in the African American community.

Discussion

The participants in this study discussed the process of disclosing an LGBT status with their family in the African American community. The findings of this study support that there is a unique disclosure process for participants in this study (e.g., reasoning for disclosing one’s identity). Respondents discussed that form of disclosure (e.g., self-disclosure, being outed) influenced their family dynamics, with varying degrees of the impact. For some participants, the experience of self-disclosing their identity was utilized as a means to own their sexual identity and development. On the other hand, for participants who had not self-disclosed but instead were outed, as a period of betrayal and discomfort, led to estrangement in the family structure. The context of the African American Baptist Church heavily influenced participants’ perception of identifying as a member of the LGBT community and curtailed their decision to disclose their sexual identity; instead, many of the participants discussed the implied need to adopt a heterosexual identity out of concern of violating principles that were taught and instilled in their family system.

Additionally, it appeared that gender may have influenced some of our participants’ responses. For male participants, the ideology they utilized to discuss their identity disclosure process was linked with the DL identity, wherein they reported having life experiences living an outwardly heterosexual lifestyle but secretly engage in sexual intercourse with other men. For one participant, given the ambiguity of how he perceives other African American men in his family will react to his sexual identity, he still identifies with the DL community. As such, selective members of his family (e.g., primarily women) knows how he self-identifies internally. This phenomenon is critical for clinicians to understand when working with clients who adopt a DL identity and will be discussed in the implications section.
Family members’ prior experience with the LGBT community as well as the support and mentorship of others (individuals who identify as LGBT) all influenced and impacted their experiences in their disclosure process. Participants whose family had an understanding of the coming out process and who were familiar with the LGBT community through prior engagements/friendships, proved to be beneficial for the disclosure process. On the other hand, participants whose family members had a negative perception of the LGBT community, combined with being outed, proved to be a tumultuous experience and led to some participants losing contact with their family for extended periods of time. To this end, several participants described how identifying with other LGBT individuals provided them with a sense of self and support system which enabled them to embrace their sexual identity.

The findings of this study both match and challenge prior studies of LGBT disclosure in families (e.g., Goodrich, 2009; Goodrich & Gilbride, 2010). Prior experiences with the LGBT community, how disclosure took place (self-disclosure vs. “outed”) and context appear to be helpful for participants across these studies, although unique conditions (e.g., DL, African American Church) had powerful connections for participants in the African American sample. In addition, participants in this study appeared to speak less about the emotional and cognitive strategies used by family members (such as in the Gallor, 2006, Goodrich, 2009, and Goodrich and Gilbride, 2010 studies) but instead spoke more matter-a-fact about the behavioral consequences of coming out. This might be a different discourse strategy used between the two different communities (e.g., White participants vs. persons of color) or different in the actual cognitive and emotional strategies felt or used. However, this is an interesting finding worthy of future research.

**Practice Implications**

Counselors who work with African American clients who self-identify as a member of the LGBT community should develop a knowledge base about the process of coming out and/or being outed in this targeted community. This knowledge acquisition should be completed in order to assist clients with their sexual identity and the following adjustment period within their family structure. Members of this community who have been in the closet (e.g., on the DL) may encounter severe stressors as a result of trying to adjust post-disclosure or being outed. LGBT individuals live in a society that expects normative gender behavior (e.g., masculine and feminine), which impacts their ability to accept or come to understand their sexual identity. Individuals in this community are forced to grapple with societal norms that reinforce the idea that their sexual orientation and/or gender identity is abnormal. As such, it is possible that some members of this targeted community may still deny their internal sexual identity and assume a DL identity. Therefore, it is imperative that clinicians understand the lenses that clients are coming from with the understanding that not all clients will experience the same disclosure process in order to avoid imposing one’s personal values on their clients. By doing so, clinicians could violate one of the foundational ethical principles of do no harm. Counselors should allow clients to create their own narrative around the disclosure process and post disclosure family dynamics in order to collaboratively identify goals for counseling. Additionally, noting the differences between discourse strategies used to describe the experience, clinicians may focus more on behavioral concerns than emotional or cognitive strategies, as it appeared more helpful for participants in this study when compared to White participants in previous studies (e.g., Gallor, 2006, Goodrich, 2009; Goodrich & Gilbride, 2010).

Given the maladaptive thought process that accompanies many African American families when it comes to the LGBT community, counselors need to adjust family counseling strategies accordingly to allow the voice of individual family members to be heard. This will increase the likelihood of other family members (including the identified LGBT son or daughter) “hearing” what/where members of their family are proclaiming. This can then be used as a means to create more effective listening and communication skills, which has the potential to interject periods of estrangement due to lack of understanding.

**Training Implications**

Counselor education programs are required to infuse multicultural and social justice content into their training programs. As such, counselor educators can infuse material in their core and specialized courses that address family therapy in order to promote new understandings and identities for LGBT persons and their families. Specifically focusing on the intersection of race and sexuality, counselor educators can train their students to engage clients when acceptance is not forthcoming, which may lead to clients choosing to adopt a DL identity. Given that the African American community, in addition to the LGBT community, typically has a biased outlook on therapy, counselors-in-training need to develop an understanding of how a heterosexist and cisgender positionality in the therapy can lead to clients prematurely terminating. To this end, training programs need to continue increasing the emphasis of LGBT individuals lived experiences concurrently with racial disparities facing such individuals.

Trainees need to develop a full understanding of the role that religious beliefs and gender role expectations (e.g., masculinity) play in African American LGBT individuals secretly engaging in same-sex activities rather than disclosing their sexual identity. Counselors-in-training will be exposed to and equipped with the skill set to address differences associated with disclosure in communities of color. Additionally, they will learn how to advocate for LGBT persons and identity in all communities.

**Future Research Implications**

Although there appeared to be some similar concerns discussed between the participants in this study and other studies relating
to disclosure of LGB identity status, a number of differences were found within the study. The impact of the African American Church and DL were two significantly different issues discussed by participants in this study and those of others. As such, it suggests that future research should pay particular attention to the disclosure process in African American communities and how it may be similar or different than those previously studied. In particular, attention should be paid to the role of the African American Baptist church and how membership in this religious community might influence how disclosures are made and received in African American families. Additionally, further attention needs to be paid to the DL phenomenon and how that impacts identity, support, and/or isolation in this particular cultural community. Quantitative studies could explore the impact of religiosity, number of LGBT relationships that family members previously had as well as how LGBT-persons disclosed on later LGBT person identity status, wellness attributes, or measures of family functioning (e.g., Goodrich & Gilbride, 2010). As this has been a community not often studied in the past, future research specifically exploring the experiences of this population would be necessary to more fully flesh out the experience of diverse groups within the LGBT community.

Conclusion

Overall, it appears that within the African American community, the identity disclosure process to family members is both similar to, and different from, the identity disclosure process discussed in other extent LGB scholarship (e.g., Gallor 2006; Goodrich, 2009; Goodrich & Gilbride, 2010). In particular, it appears that it is important for clinicians and researchers to carefully consider the impact of the African American church, as well as the DL phenomenon, when working with clients and families following the disclosure of a son or daughter as LGBT. Such specific knowledge is important to be culturally appropriate and sensitive when working with members of historically and culturally marginalized populations. As all counseling is multicultural, and all clients have multicultural identities, it is fundamental for professional counselors to explore with their clients the specific and unique concerns that they bring based upon their socially constructed identities. Additionally, it is imperative that clinicians examine their views regarding heterosexuality and determine how this viewpoint will impact their work with clients who self-identify and/or are in the closet. It is through client’s narration, and counselor’s sensitivities, that we are able to better and more intentionally respond to the needs of the diverse clientele who we are all asked to serve.

Appendix A
Questions as Ssemi-structured Interview Protocol (Identified LGBT Son or Daughter)

You have been nominated as an individual who identifies as LGBT. How did you experience that disclosure?

- Please describe your disclosure experience? How did you disclose to your parents?
- What were you thinking when you disclosed? Immediately after disclosure?
- How, if any, did your thoughts change over time about your disclosure experience?
- What did you feel during your disclosure experience? How have your emotions related to your disclosure changed, or remained the same?
- Has your behavior changed in any way which your disclosure? In general? Toward your parents/family?
- How has your relationship with your parents/family changed, or remained the same, since your disclosure?
- What resources or supports were helpful for you in your disclosure experience? Before? During? After?
- What advice or recommendations would you provide other LGBT persons thinking about coming out to their families? Parents of LGBT persons? Other family members?
- What would you have done differently? The same?
- How would you classify your parents’ identity as a parent of an LGBT person? Are they “successful”? Not?
- What areas of strengths are present in your family relationship now? Challenges?

Appendix B
Questions as Semi-Structured Interview Protocol (Parent)

You have been nominated as a parent of a son or daughter whose child identifies as LGBT. How did you experience that disclosure?

- What has your experience of your child been like since they disclosed their sexual orientation?
- What did you think when your child disclosed? Have your thoughts changed since their disclosure? If so, how?
- What did you feel when your child disclosed their sexual orientation? Have your feelings changed since their disclosure? If so, how?
- How do you conceptualize sexual orientation? How has this changed or evolved since your child’s disclosure?
- What experiences have been relatively easy in your experience of your child’s disclosure?
- What experiences have been difficult since your child has disclosed?
- What influenced your reaction to your child’s disclosure?
- What experiences have contributed to your “success” since your child’s disclosure?
- What experiences have detracted from your “success” since your child’s disclosure?
- How has your child’s disclosure of their sexual orientation impacted your life/experience? How has it impacted your identity as a parent? How has it impacted your identity has a heterosexual?
• Have you utilized any resources or support to assist you in your experience of your child’s disclosure? If so, what resources or support services have you utilized? What has been most effective/least effective?

• How have your experiences with other lesbian/gay/bisexual individuals been like since your child’s disclosure? Have your experiences changed since their disclosure? If so, how?

• How do you view yourself since your child’s disclosure? Has there been any change in your identity since they disclosed? If so, how?

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