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Learning About a Child's Gay or Lesbian Sexual Orientation: Parental Concerns About Societal Rejection, Loss of Loved Ones, and Child Well Being

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This article reports the results of a study examining heterosexual parents' concerns upon learning about their children's gay or lesbian sexual orientations. Three areas of parental concern are noted: (a) those about what society thinks of them because they have gay or lesbian children, (b) those about being rejected by loved ones, and (c) concerns for their child's physical and psychological well being. Results indicate that parents' concerns about having gay or lesbian children differ depending on the gender of the parent, gender of the child, awareness of stigma, and perceptions of parents' own gender role attributes.

KEYWORDS *gay, lesbian, parents, sexual, orientation*

Parents of gay and lesbian children have had various reactions upon learning that their children are gay or lesbian due to the stigma surrounding homosexuality in society and prevalence of heterosexism and homophobia in the United States. While the limited studies about such parental reactions have been enlightening, current data are limited in scope and point to a need for more research. Studies focusing specifically on parental reactions to learning that their children are gay or lesbian (Ben-Ari, 1995; Fields, 2001; Robinson, Walters, & Skeen, 1989; Saltzburg, 2004; Strommen, 1989) have overwhelmingly revealed that parents tend to react in a negative fashion. Numerous texts about parents' experiences of finding out that their children are gay or lesbian (Bernstein, 1995; Borhek, 1993; Fairchild & Hayward, 1979; Griffin, Wirth, & Wirth, 1986; Silverstein, 1978) have documented

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various reactions, with many of these writings coming from real-life case scenarios of parents of gay and lesbian children. While the available literature provides a rich, contextual understanding of both parent-oriented reactions (e.g. fear of having no grandchildren, or feeling to blame for their children's sexual orientation), and child-oriented reactions (e.g. fearing for their child's safety, or lack of equal civil rights), a comprehensive examination of the specific concerns, their magnitude, the influence of stigma on parents' concerns, and differences based on the gender of the parent and child is lacking.

Placing parental reactions to learning that a child is gay or lesbian within the context of homophobic and heterosexist responses have rarely occurred within empirical work. However, it can be suggested that many parents' negative reactions can be categorized as homophobic, as evidenced by the personal rejection of children that often occurs by mothers and fathers upon learning of their children's sexual orientations (Little, 2001; Rosenberg, 2003). Some research has shown that particular aspects of family dynamics, such as religiosity, family cohesion, concerns about conformity, and family values, influence parental reactions to learning that a child is gay or lesbian (Collins & Zimmerman, 1983; DeVine, 1984). Meanwhile, correlates of homophobic and heterosexist attitudes within the general population have been widely studied. Gender, gender roles, racism, and education have all been documented as variables that are strongly related to homophobic attitudes (Black & Stevenson, 1984; Ficarroto, 1990; Herek, 1984, 1988; Kite & Whitley, 1996; Parrot, Adams, & Zeichner, 2002). Furthermore, research on the perception of stigma within gay and lesbian individuals has shown that a strong relationship exists between this variable and internalized homophobia or the internalization of negative attitudes and views about sexual orientation (Lewis, Derlaga, Clarke, & Kuang, 2006; Ross & Rosser, 1996). While a great deal of research on the effects of stigma has been conducted with gay and lesbian individuals themselves, only minimal work to date has examined the role of sexual stigma within the heterosexual population and against the backdrop of heterosexism (Herek, Cogan, & Gillis, 2009).

Parents' concerns about the physical, psychological, and social welfare of their gay and lesbian children emerge from the many injustices suffered by individuals who violate societal norms. Heterosexism and homophobia are manifested in various types of behaviors, such as name calling and hate crimes; and institutionalized in laws, policies, and pronouncements that systematically exclude gay and lesbian individuals from privileges and benefits that heterosexual individuals receive and maintain. Differentiating between homophobia and heterosexism, homophobia locates the root or source of discrimination within fear, or as a mental disorder, whereas heterosexism couches the source of discrimination in structural features of society

and social ideologies (Wickberg, 2000). Both behaviorally and institutionally, heterosexism is a tool of oppression. Gay and lesbian couples in the United States do not enjoy the same legal protections and equivalent rights accorded to gay and lesbian couples in more liberal countries (Andersson, Noack, Seierstad, & Weedon-Fekjaer, 2006). According to Andersson et al. (2006), all same-sex couples in Nordic countries have the right to a legal civil status in the form of registered partnerships, with the civil status being equivalent to heterosexual marriage. Countries such as Belgium, Spain, and Canada have all approved same-sex marriage. Only recently have a few states in the United States begun to allow marriage between same sex partners (Nussbaum, 2009). According to the Human Rights Campaign (HRC; 2009), the nation's premier lesbian and gay legal advocacy organization, 29 states still maintain laws that allow individuals to be legally fired based on their gay or lesbian sexual orientations.

If gay and lesbian individuals were not oppressed and marginalized by broader society, parents may not react as negatively upon learning of their children's orientations. The disclosure process plays an important role in the psychological adjustment and identity development of gay and lesbian individuals (Ryan & Futterman, 1998). Parents, who are (a) not negative and (b) actually supportive, can assist in their children's progression through this developmental task. Of course, parents also have their own transitional and adaptive processes as a result of having marginalized children (Robinson et al., 1989).

While no one dominant theory can serve to explain the negative reactions and concerns of these parents, several theoretical perspectives can offer assistance when attempting to understand the reactions of parents when they first learn that their children are gay or lesbian. For the purpose of this study, two were considered; a *social constructionist* framework asserts the powerful impact of stigma on parental concerns, focusing on the challenge to dominant discourse inherent in gay and lesbian children stepping outside of socially constructed roles (Berger & Luckman, 1966). Second, a *feminist* theoretical lens emphasizes the stigmatizing nature of transgressive gender identity and expression. This study's examination of parental concerns raises issues from both theoretical paradigms thereby laying the groundwork for future research and the therapeutic application of these findings. Within the area of family systems, empirical support is greatly needed so that it can inform therapeutic interventions aimed at rapprochement and healing between parents and children. This article begins to bridge the literature gap in this area, with the following research question being investigated: What are the specific concerns of parents about having gay and lesbian children and how do gender, gender role perception, stigma consciousness, parent's race, education and income levels relate to concern about having gay or lesbian children?

METHOD

To access parents of gay or lesbian children, the nonprofit organization Parents, Families, and Friends of Lesbians and Gays (PFLAG) served as the sampling frame for this study. A cross sectional survey was administered in 2007 to a nonprobability sample of heterosexual parents of gay or lesbian children who attended one of the approximately 430 PFLAG chapters across the United States. A letter advertising the Concerns of Parents of Lesbians and Gays (COPLAG) studies was sent to contact persons listed for the various PFLAG chapters via the U.S. postal service or their Internet email addresses. The PFLAG chapter contact person was asked to forward the study invitation, along with an Internet address to an online survey data collection website, to PFLAG attendees on their chapter e-mail lists who met study inclusion criteria. PFLAG chapter contacts were also asked to announce the study at their chapter meetings. Parents wishing to participate were directed to a secure online survey Web site and asked to complete the survey. Because a national sample was being sought, the Internet was used to obtain the highest response rate at the lowest possible cost. The Internet survey software had built-in safety precautions that did not allow duplicate survey responses from participants. If preferred, study participants could complete a paper and pencil version of the survey. Those who chose to complete the paper-and-pencil format of the survey received postage paid self-addressed return envelopes.

Inclusion criteria for study participants were the following: (a) participants were required to be heterosexual parents of a gay or lesbian child; (b) they had to have reading comprehension above the eighth grade level; and (c) they had to either currently attend a chapter of the national organization, PFLAG, or had done so in the past. No personal incentives were offered for completing the survey. As this study was approved by the Institutional Review Board procedures of informed consent were observed and confidentiality of respondents was maintained.

Measures

The survey included questions relating to demographic information, length of time the parent knew about their children's sexual orientations, activity levels of the parents in PFLAG, social desirability, gender-role perception, stigma consciousness, and concerns parents may first experience upon learning that their children are gay or lesbian.

Social desirability was measured because of an underlying assumption that individuals with an inclination for self-deception tend to deny psychologically threatening thoughts or feelings. Because many parents of gay or lesbian children often experience some form of distress as a result of learning about their children's gay or lesbian sexual orientations, there was

a concern that they would tend to give socially desirable responses which could soften, or lessen parent's concerns. Therefore, the Balanced Inventory of Desirable Responding (BIDR) (Paulhus, 1984) was used to assess the extent to which study participants gave exaggerated claims of positive cognitive attributes as a result of avoiding psychologically threatening thoughts or feelings. The BIDR was used instead of other measures of social desirability because of its additional step of assessing self-deception. Items on the BIDR were developed on the assumption that some study participants over report their performance on a variety of desirable traits or behaviors. Social desirability was assessed in this particular study not only because of the sensitivity of the topic addressed, but because of the stigma associated with homosexuality. The BIDR was used based on the premise that the majority of parents would not want anyone to think that they thought badly of their children's identity and behaviors. The BIDR is a 40-item Likert scale measure in which participants indicate how true they believe each statement to be from 1 (*not true*) to 7 (*very true*). The BIDR's 40 items are in two subscales: Self-Deception and Impression Management. Previous studies using the BIDR reported Cronbach alphas between .68 and .80 for the Self-Deception subscale and between .75 and .86 for Impression Management subscale (Mellor, Conroy, & Masteller, 1986).

Parents' gender role perception was assessed to explore the relationship between stereotyped gender roles (e.g., domineering/passive), parents' concerns about having gay or lesbian children, and their stigmatized statuses as parents of gay or lesbian children. The full-length Personal Attributes Questionnaire (PAQ; Spence, Helmreich, & Stapp, 1974) was used to classify parents into masculine, feminine, androgynous, or undifferentiated categories. The PAQ describes attributes or characteristics that people commonly believe differentiate the sexes and for which both men and women differ (Spence & Helmreich, 1978). The PAQ contains items that are typically more associated with one gender or the other, but are seen as being socially desirable for both of the sexes. The PAQ has two subscales: The Instrumental scale and the Expressive scale. The Instrumental scale contains eight items that describe characteristics that are more typical of men than women, and the Expressive scale, also eight items, describes those characteristics that are more typical of women than men. The Expressive scale also contains items that are viewed as desirable for both men and women, or androgynous. The PAQ has been widely used with studies that have used the PAQ (Adams, 1984; Cota & Fekken, 1988; Yoder, Rice, Adams, Priest, & Prince, 1982) reporting Cronbach alphas between .51 to .85 for the Instrumental scale, and .65 to .82 for the Expressive scale. Spence and Helmreich (1978) reported internal consistencies for the PAQ at .78. Both the Instrumental (masculinity) and Expressive (femininity) subscales have a potential scoring range from 0 to 32. Scoring of the PAQ consists of summing item scores on both subscales, with scores dictating the gender role classification.

The Stigma Consciousness Questionnaire (SCQ; Pinel, 1999) was used to explore the relationship between parents' consciousness of stigmatized statuses as parents of gay and lesbian children, and their overall concern. Although the instrument is primarily used with actual members of marginalized groups, such as gay and lesbian individuals, it was used with parents of gay and lesbian children by slightly altering 2 of the 10 items. Permission was given for the SCQ's use and alteration by its original author (Pinel, 1999). Those parents of gay or lesbian children who score high on the SCQ, relative to those who score low on the SCQ are more likely to focus on themselves and be concerned about how others view them. The scoring range for the SCQ was from 0 to 60. The Cronbach alpha of the SCQ was .81 in its original state and deemed acceptable for this exploratory study. The SCQ was deemed as the only appropriate instrument to use with this sample population, as no other measure existed that measured parental experiences of stigma due to having gay or lesbian children.

To assess the specific areas and magnitude of parents' concerns about having gay or lesbian children upon their learning of their children's sexual orientations, a 21-item semantic differential scale was developed by the author and validated in a prior study (Conley, 2007). The Concerns of Parents of Lesbians and Gays scale (COPLAG) (Conley, 2011) has three subscales: well being, parent ego, and love loss. Internal consistency of each of the subscales of the COPLAG that measures parents concerns about their child's physical and psychological well being (well being), societal rejection (parent ego), and their own loss of loved ones (love loss) was shown to be very strong in its initial piloting. Cronbach alphas for each subscale of the COPLAG were high with well being (10 items) having a .91 alpha. parent ego (7 items) having an alpha of .88, and love loss (4 items) demonstrating an alpha of .89.

The COPLAG scale provides statements for parents to rank from 1 (*not at all concerned*) to 7 (*extremely concerned*) about concerns that many parents experience when they first learn of their children's' gay and lesbian sexual orientations. Each item of the COPLAG begins with the stem statement, "When you FIRST learned that your child is gay or lesbian, to what extent were you concerned that . . . ," followed by a concern statement such as "you would always be ashamed for having a gay or lesbian child."

Items of the COPLAG that assess parents' concerns about their gay or lesbian child's physical and psychological well being include statements such as "your child may be physically assaulted because they are gay or lesbian" and "your child will be ashamed for who they are." Items that assess parents concerns about what society thinks of them as parents as a result of having gay or lesbian children included statements such as "you would be judged as a parenting failure by society because your child is gay or lesbian." Finally, items that assess parents concerns about losing loved ones because they have a gay or lesbian child included statements such as "you may lose friends

if they learned that your child is gay or lesbian.” Parents’ concern levels were calculated by taking the scores from each item on each subscale and summing to achieve a total score. No item on the COPLAG scale required reverse scoring. Higher scores on the COPLAG indicated greater concern, with participants having a possible total scoring range between 21 and 147. The subscale of well being had a possible score range of 10 to 70, that of parent ego had a possible score range between 7 and 49, and love loss a range of 4 to 28, respectively.

RESULTS

Data Screening

After downloading data from the survey Web site and importing them into SPSS version 13.0 (SPSS, Inc., Chicago IL), data were screened for missing data, univariate, and multivariate outliers prior to any statistical analyses. Screening of the data also included graphical exploration of distributions in the forms of histograms and scatter plots. A total of 361 responses were received, with 11 responses not being used because of excessive missing data values. The remaining 350 responses were analyzed after several outliers were removed because of their ability to inflate error rates and distort parameter and statistical estimates (Zimmerman, 1994). While a precise response rate for this study cannot be determined due to the electronic data collection methods employed, of the study participants (742) who accessed the online data collection website, 361 individuals completed the survey for a 48% completion rate. Data were minimally skewed and corrections to any violations of statistical test assumptions are noted. Of the 350 responses, 19 were paper versions and 331 were submitted online.

Descriptive statistics of the sample demographics are presented first, followed by bivariate and multivariate analyses. These examine the concern areas by (a) parent gender, (b) child gender, (c) social desirability, (d) gender role perception and stigma consciousness, (e) parent’s race and years of education, and (f) parent’s annual income.

Descriptive Statistics

Study participants were asked to provide the following information: (a) age, (b) income, (c) years of education, (d) gender, (e) race, and (f) number of years involved with PFLAG. The demographic data of participants are shown in Tables 1 and 2.

All geographic regions of the United States were represented in the study. The greatest response was from the East North Central region, represented by responses from Illinois, Indiana, Michigan, Ohio, and Wisconsin ($n = 81$, 26%; see Table 3).

TABLE 1 Demographic Data

	N	Range	Minimum	Maximum	Mean	Median	SD
Years in PFLAG	284	31	0	31	6.50	5	5.7
Annual Income	137	\$395,000	\$5,000	\$400,000	\$77,493	\$62,500	\$54,840
Years of Education	326	17	12	29	16.40	16.00	2.6
Age	320	51	35	86	58.70	59.00	9.4

TABLE 2 Frequencies and Percentages of Children's Gender, Parents' Race, and Parents' Gender

	n	Groups	Frequency	Percentage
Children's Gender	183	Lesbian Daughter	57	31.1%
		Gay Son	118	64.5%
		>1 Gay or Lesbian Child	8	4.4%
Parents' Race	331	African American	4	1.2%
		Caucasian	314	94.9%
		Hispanic	3	.9%
		Asian American	1	.3%
		Bi-Racial	1	.3%
		Other	8	2.4%
Parents' Gender	327	Women	273	83.5%
		Men	54	16.5%

PARENT GENDER AND CONCERN

For mothers and fathers combined, the estimated mean overall concern score was 63 out of a possible score of 21–147. The range of scores was between 21 and 133. Mean differences in overall parent concern scores between mothers and fathers were calculated using independent samples *t* tests and showed a significant disparity. Mothers had higher overall concern levels about having gay or lesbian children ($M = 64.46$, $SD = 24.92$) than fathers ($M = 56.47$, $SD = 21.92$), $t(294) = 2.12$, $p = .035$, $\eta^2 = .02$ upon learning of their children's sexual orientations.

Significant differences between mothers and fathers in specific concern areas were found in the child well being subscale. Mothers had greater concern for their gay or lesbian child's physical and psychological well being ($M = 31.26$, $SD = 15.80$) than fathers ($M = 24.52$, $SD = 12.59$), $t(308) = 3.38$, $p = .001$, $\eta^2 = .04$. Significant differences about societal rejection and loss of loved ones were not found. Regarding societal rejection, mothers had the same mean score ($M = 23.51$, $SD = 12.10$) as fathers ($M = 23.51$, $SD = 11.22$), $t(310) = -.004$, $p = .997$. Mothers concern levels about the loss of loved ones due to having a gay or lesbian child were slightly higher ($M = 10.08$, $SD = 6.87$) than those of fathers ($M = 8.32$, $SD = 5.54$), $t(311) = 1.72$, $p = .085$, although not statistically significant.

TABLE 3 Study Participation by Geographic Region

	States by Region of the U.S.	Frequency	Percentage
Pacific	Alaska, California, Hawaii, Oregon, and Washington	49	15.7%
Mountain	Arizona, Colorado, Idaho, Montana, Nevada, New Mexico, Utah, and Wyoming	19	6.1%
East North Central	Illinois, Indiana, Michigan, Ohio, and Wisconsin	81	26%
New England	Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont	19	6.1%
Mid Atlantic	Delaware, Maryland, New Jersey, New York, Pennsylvania, and Washington, DC	33	10.6%
South Atlantic	Florida, Georgia, North Carolina, South Carolina, Virginia, and West Virginia	50	16.0%
West North Central	Iowa, Kansas, Minnesota, Missouri, Nebraska, North Dakota, and South Dakota	24	7.7%
East South Central	Alabama, Kentucky, Mississippi, and Tennessee	20	6.4%
West South Central	Arkansas, Louisiana, Oklahoma, and Texas	17	5.4%
Total		312	100%

IMPACT OF CHILD GENDER ON PARENTAL CONCERNS

Mean differences in concern scores between gay sons and lesbian daughters were calculated via an independent samples *t*-test. Parents had higher concern scores for their gay sons ($M = 66.48$, $SD = 25.50$) than for their lesbian daughters ($M = 56.20$, $SD = 27.44$), $t(157) = -2.33$, $p = .021$, $\eta^2 = .03$. Concern scores between gay sons and lesbian daughters were statistically significant within the well being subscale. Mean concern scores among well being of lesbian daughters were much lower ($M = 31.61$, $SD = 13.66$) than those among gay sons ($M = 39.81$, $SD = 14.58$), $t(166) = -3.48$, $p = .001$.

SOCIAL DESIRABILITY AND PARENTAL CONCERNS

To examine the role of social desirability in the relationship between parent gender and overall concern, an analysis of covariance (ANCOVA) was conducted. No violations of the assumptions of normality, linearity, or homogeneity of variances, homogeneity of regression slopes, and reliable measurement of the covariate were present. After controlling for social desirability, no significant effect between parent gender and overall concern was present [$F(1, 131) = 1.92$, $p = .17$]. These results suggest that social desirability did not play a part in parents' responses about their concerns about having gay or lesbian children irrespective of parent gender.

GENDER ROLE PERCEPTION, STIGMA CONSCIOUSNESS,
AND PARENTAL CONCERN

To determine if parents' concerns about having gay or lesbian children could be predicted by parents' gender role perceptions of masculinity, femininity, and stigma consciousness, a standard multiple regression analysis was conducted. Factors such as parent age, years of PFLAG attendance, and years known about child's sexual orientation were not used in the regression model due to these variables having little to no correlation with parental concern. Using the three independent variables of femininity, masculinity, and stigma consciousness, no multivariate outliers were identified using Mahalanobis distance (16.27). Homoscedasticity was examined via scatterplots, and an indication of a reasonable spread of data were present within the distributions. Multicollinearity was not an issue, as the correlations among the predictor variables were small, ranging between $-.03$ (masculinity and stigma total) and $.245$ (femininity to masculinity).

Since this study was exploratory, with limited empirical findings and theory guiding the entry of variables in the regression equation, a direct entry method was chosen. The predictor of masculinity did not contribute significantly to the model and was removed from subsequent analyses. A two predictor model of femininity and stigma consciousness provided for the most parsimonious solution, producing an adjusted R^2 of $.23$ [$F(2, 163) = 26.07, p < .001$] for the prediction of parental concern. Together, these two predictors accounted for 23% of the variance in parents' concerns. Regression analysis results are summarized in Tables 4 and 5.

TABLE 4 Means, Standard Deviations, and Intercorrelations for Parental Concern and Predictor Variables of Femininity and Stigma Consciousness

Variable	M	SD	1	2
Parental Concern (COPLAG)	63.76	26.86	.29**	.44**
Predictor Variables				
1. Femininity	24.94	4.13	—	.15
2. Stigma Consciousness	43.34	7.92	.15	—

** $p < .001$.

TABLE 5 Regression Analysis Summary for Variables Predicting Parental Concern

Variable	B	SE B	β
Femininity	1.50	.450	.231**
Stigma Consciousness	1.36	.234	.401**
R^2 <i>adj</i>		.23	
F		26.07	

** $p < .001$, * $p < .05$.

PARENTS' GENDER ROLE CLASSIFICATIONS AND CONCERN

Scores on the Personal Attributes Questionnaire were calculated to determine the degree to which parents could be classified into the categories of masculinity, femininity, and androgyny. Over 62% of the sample had scores that placed them in the category of femininity, with 1.1% being classified as masculine, 17.4% as androgynous, and 18.5% as undifferentiated. Further examination of gender role classifications by actual parent gender revealed interesting findings. PAQ scores revealed that over 48% of the sample's fathers could be classified into the category of femininity, while 16% could be classified into the category of androgyny, and 28% into the undifferentiated category respectively. The undifferentiated category is reflected by low scores on both the expressive (femininity) and instrumental (masculinity) subscales. No father had scores on the PAQ that allowed him to be classified within the category of masculinity.

Mothers, on the other hand, appeared to align with their stereotyped gender role classification of femininity. Approximately 59% of mothers had scores on the PAQ that allowed them to be classified within the category of femininity. Another 17% of mothers could be classified within the category of androgyny, .01% within masculinity, and 16% within the undifferentiated category. To examine mean differences in parental concern scores among these gender role classifications, a one-way analysis of variance (ANOVA) was conducted. The results revealed significant differences in overall parental concern across the four levels of classifications [$F(3, 161) = 2.97, p = .033$], $\eta^2 = .04$. A Bonferroni post hoc test determined that those individuals who could be classified within the femininity category had higher mean parental concern scores ($M = 67.39, SD = 27.31$) than those who could be classified as undifferentiated ($M = 51.40, SD = 20.46$).

PARENT RACE AND CONCERN

The majority of the sample was homogenous in regard to race, with approximately 95% of the participants identifying as Caucasian, 1.2% as African American, and 3.8% as other minorities such as Hispanic and Asian American. Participants' race was recoded into a separate variable to reflect majority (White) and minority (non-White). Mean differences in concern scores of those parents who identified as majority and minority were calculated via an independent samples t test. Although results were not statistically significant between the groups for overall concern, significant differences were found in the area of concern about love loss. Parents who identified as White or Caucasian had higher mean *love loss* concerns ($M = 9.94, SD = 6.74$) than those parents who identified as non-White ($M = 7.18, SD = 4.15$), $t(326) = 3.10, p = .004, \eta^2 = .03$. Minorities had lower mean concern scores in all three areas about having gay or lesbian children.

PARENT EDUCATION AND INCOME LEVELS

The median number of years of education completed by participants was 16, with the lowest number of years of education completed at 12 and the highest at 26 years. A one way ANOVA was calculated to determine if mean group differences in parents' overall concern scores would be present among individuals with differing educational levels. The groups were formed as the following: (a) 0–12 years education, (b) 13–17 years education, (c) 18–21 years education, and (d) 22+ years of education. Statistically significant results were not found in the overall parent concern score, although notable differences in the mean scores were present. The group with the lowest mean parent concern score was individuals who had over 22 years of education ($M = 54.36$, $SD = 28.03$), compared to those with 13–17 years of education with the highest mean parent concern score ($M = 65.04$, $SD = 25.04$).

The median current annual income for the sample participants was \$62,500, with a range between \$5,000 and \$400,000. Income groups were formed in the following manner: (a) \$5,000 to \$29,999, (b) \$30,000 to \$59,999, (c) \$60,000 to \$99,999, and (d) over \$100,000. A one way ANOVA was calculated to determine if mean group differences in parents' overall concern scores were present among individuals with differing incomes. No statistical significance in overall concern scores was present among any of the income groups. The group of individuals with the lowest mean concern score was those who earned between \$5,000 and \$29,999 ($M = 55.61$, $SD = 26.07$) compared to those who earned between \$60,000 and \$99,999 ($M = 67.69$, $SD = 31.84$) who had the highest mean concern score among parents.

DISCUSSION

In the three areas of parental concern about having gay or lesbian children, differences were found among mothers and fathers in relation to their concern for their children's well being, with mothers' concern levels being considerably higher than fathers on this factor. The array of data in this study merely begins to reveal some insight into the possible theories that might explain why this gender difference prevails among parents. One can hypothesize that this finding may be congruent with more general maternal concerns for their children. This result is further supported by the strong relationship between feminine gender roles and concern levels. Irrespective of parent gender, those individuals who scored higher on the femininity subscale of the PAQ had higher concern scores about their gay or lesbian children. Furthermore, those who could be classified as feminine had both higher stigma consciousness and higher concerns, thereby suggesting the impact of social stigma on parental concerns. While gender differences in

parenting styles and socialization practices have been explored with other populations, such as with children with disabilities, very limited research on parents of gay or lesbian children has been conducted, let alone an examination of the impact of gender expression on this population. This finding warrants additional research.

Furthermore, parents' overall concern levels were higher for their gay sons than for their lesbian daughters. This finding is supported by both the anecdotal information that society is far more accepting of lesbian women, than gay men, as well as the current rate of hate crimes targeted toward gay men in the United States. According to a 2008 report of the National Coalition of Anti-Violence Programs (NCAVP; 2008) in the United States, of the 2,435 hate-crime incidents reported, 1,261 (56%) were against men, compared to 654 (29%) incidents committed against women. Heterosexism, through the lens of feminist theory, can help us understand why parents would be more concerned about their gay sons rather than their lesbian daughters. Attitudes that privilege male sexuality, and consequently fear its misuse, highlight the continued, distinctive gendered biases that are manifest in these data. Heterosexism punishes those who depart from normative gender roles, with anti-woman slurs such as "faggot" and "sissy." Traditional male behavior is regulated by specific activities designed to produce socially normative masculine men. According to Pharr (1997), two venues or arenas exist in which affection between males is acceptable: war and sports. Any same sex male affection outside of these two arenas deviates from traditional gender roles and are grounds for punishment or ostracization. Alternatively, it could be argued that parents' increased concerns for their sons may reflect more generic parental concerns for their children's health, and be related to beliefs about gay men's higher risks for contracting HIV/AIDS. Additional research about the relationship between homophobia and HIV stigma, as it relates to parental concerns is warranted.

One of the most surprising findings in this study pertained to parents' classifications of their own gender roles and attributes. Approximately 63% of the sample identified with attributes that allowed them to be classified into the category of femininity as opposed to masculinity or androgyny. This finding arouses many questions for future research with this population, and poses further questions, such as:

- a. Did mothers and fathers always identify with adjectives stereotyped as feminine, versus those stereotyped to be masculine, or androgynous, or did this change over time, from the influence of their gay or lesbian child's rejection of gender role norms and sex-typed behavior?
- b. Is there something inherent about having gay or lesbian children that makes a parent identify with adjectives characterized as feminine, or can we predict a child's sexual orientation based on the parent's classification of gender role norms and behaviors?

- c. What role does PFLAG play in parent's identification with feminine, masculine, or androgynous adjectives or does the programming of this national support group mediate the relationship between gender role identification and parental concern about having gay or lesbian children?
- d. Is this well-known inventory of sex roles applicable to this sample population, or is there something inherent about parents of gay and lesbian children that makes them different in regard to gender role identification versus parents of children who identify as heterosexual?

Mothers and fathers who were classified as undifferentiated (low masculinity and low femininity) had less concerns about having gay or lesbian children than those parents who were classified as feminine. This finding may support the hypothesis that parents who have eschewed society's prescriptive gender roles may be more understanding of their children's deviation from society's sexual norms. A feminist and social constructionist interpretation of this finding might further suggest that children of undifferentiated identified parents might somehow be predisposed to seeing gender and sexuality as more fluid constructs. It is particularly striking that the majority of men in this study could be classified as feminine, further bolstering the possible (theoretical vs. biological) connections between parental gender expression, concern, and children's sexual orientation. When parents feel shame, blame, or guilt as a result of having gay or lesbian children, is this related to their own fears of not being appropriate sex role models, or their own identity confusion projected onto their children? This finding warrants additional research on the topic of parent gender role identification and concern levels about having gay or lesbian children, and supports the theory that defines homophobia as it relates to one's repressed homosexuality (Campbell, 2000).

Small, but noteworthy differences prevailed in parental concern areas among non-White and White parents. Regarding overall concern, there was no statistically significant difference between White and non-White parents. However, when the three concern areas were investigated separately, those parents who identified as non-White had lower mean concern scores on each factor than those parents who identified as White, with concern about losing loved ones being statistically significant. A plausible interpretation of these findings is that non-White parents of gay and lesbian children are members of racially marginalized groups, who have first handedly experienced the effects of oppression on their own lives. Perhaps this finding speaks to these groups' inherent resilience, and points to the interrelated nature of prejudice. Further studies may indeed suggest that those individuals who have experienced oppression in some form or fashion believe that their children can also survive other forms of oppression—even overcome obstacles of equality and social justice—compared to the dominant White groups who have not experienced racial oppression.

While education did seem to have some effect on parental concerns, it was minimal; and there was no difference among parents regardless of their annual income. These findings are in accordance with the pervasive nature of homophobia across the social spectrum. Consequently, this study suggests the possibility that parental concerns emerge from parents' own internalized experiences and identities. Could it be that parental concerns about their gay or lesbian children say more about the parents than their alleged objects of concern? Future studies are needed to determine the effectiveness of psychotherapy and self-awareness in mitigating against these parental concerns, and ensuring positive outcomes for these families.

LIMITATIONS

There are several limitations of this study that must be noted. Limitations are primarily present in the areas of sampling, measures, and data collection procedures.

Sampling Frame

First, the sampling frame was the national support organization, PFLAG. Concerns are very likely to be different for parents of gay or lesbian children who have sought support and services from an organization than those parents who choose not to do so for various reasons. Therefore, an inherent bias toward those parents who were participating in PFLAG is a possibility. Other sampling frames from which to draw parents of gay and lesbian children must be found and utilized in future studies to minimize the possibility of this bias.

The sample was homogenous in race—approximately 95% Caucasian. Thus, the results from this study are limited in their applicability to PFLAG parents of color who have gay or lesbian children, not to mention non-PFLAG parents. Although the sample was racially homogenous, it was an accurate reflection of PFLAG membership, as the organization has historically struggled to increase its membership with communities of color (PFLAG, 2009).

Additional limitations to the accuracy of these findings include the researcher relying upon self-report retroactive data from parents of gay or lesbian individuals. Much debate has taken place about the validity and reliability of retrospective data (Bernard, Killworth, Kronenfeld, & Sailer, 1984; Henry, Moffit, Caspi, Langley, & Silva, 1994), and participants were asked to recollect what their concerns were when they first learned that their children were gay or lesbian. Analysis of the variable regarding the length of time the parents knew about their children's sexual orientations revealed a

wide range (40 years); therefore, the accuracy of some of these participant reports may be questioned.

Instrumentation

Perception of gender role attributes was measured by the PAQ (Spence, Helmreich, & Stapp, 1974), which was designed to measure the degree to which a person can be classified according to masculine or feminine adjectives. Because parents feel the effects of heterosexism as it works to denigrate women and men who depart from ascribed gender roles, it was important to have a better understanding of how parents perceive gender/sex role characteristics and their influence on overall parental concerns. Since only the expressive (femininity) subscale of the PAQ was a significant predictor of parental concern, speculation must occur about whether the PAQ remains a valid and reliable measure of masculinity. Results from this study may indicate that the social norms for gender role behavior and expectations or stereotypes around masculinity and femininity have changed over time.

Stigma consciousness was the largest predictor of parental concern in the study, and while intuitively, the findings associated with this variable make sense, the validity and reliability of the measure as it applies to parents of gay and lesbian children requires further study as a couple of its items were adjusted to apply to the sample population under investigation. The SCQ (Pinel, 1999) was the only instrument found in the literature that measured awareness of homosexual stigma and its effects that could easily be modified to apply to parents of gay or lesbian children.

While the COPLAG scale was designed to be easily administered and understood when assessing parents concerns about having gay or lesbian children, the scale does not come without limitations. While in prior studies, the COPLAG has shown to be a valid and reliable instrument, many of the items are similarly worded and do not contain reversed score items—leading to a potentially inflated Cronbach alpha and producing response bias. More research on the COPLAG Scale is needed to rule out this potential limitation.

Technology

PFLAG parents of gay or lesbian children completed the survey at an online data collection software web site. This method of data collection has its limitations in that some individuals were skeptical about completing the survey online because of the personal nature of the questions and preferred to complete paper versions. This issue raises the question as to whether a sampling bias was present among those PFLAG parents who chose to complete the survey online versus on paper.

Moreover, because not every PFLAG parent had computer access, limited internet connectivity, or were uncomfortable with computer technology, individuals could have been unintentionally excluded. Others who received the study invitation may have interpreted the message to be junk mail and deleted it, or had computer software that deletes emails automatically if the source of the message is unknown. Either way, the invitation for study participation may not have been received by PFLAG parents, inadvertently excluding them from the study. While online data collection methods have the potential to garner a large national sample economically and in a quick fashion, they have limitations, a few of which have previously been highlighted.

CONCLUSION

In conclusion, three distinctive areas of parental concern emerge from this research study, with concern for child well being significantly higher than fears for social rejection or love loss. This finding is particularly significant for practitioners working from a strengths-based approach who can identify this healthy concern and redirect it to a more accepting and affirming stance. Practitioners who can assist parents in differentiating between their concerns will be able to (hopefully) sidestep ideological impasses and help parents grieve and process their concerns about possible love loss in their own social spheres, thereby facilitating parent-child individuation. By helping parents distinguish between their concerns, the possibility for familial healing is brought to the fore. Because parents' gender role perceptions were so influential in shaping their concerns, further research is warranted with additional sample populations of parents of gay and lesbian children to discern the magnitude and commonality of this finding. Additional findings pertaining to gender role perceptions and parent concern are needed to assess the best way to focus gender-specific therapeutic interventions.

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