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NATIONAL LOUIS UNIVERSITY

UNDERSTANDING LGBTQ+ INTIMATE PARTNER VIOLENCE & CHALLENGES IN  
SEEKING FAMILY SUPPORT: A MIXED-METHODS STUDY

A DISSERTATION SUBMITTED TO  
THE GRADUATE SCHOOL IN PARTIAL FULFILLMENT OF  
THE REQUIRMENTS FOR THE DEGREE

DOCTOR OF PHILOSOPHY

COMMUNITY PSYCHOLOGY DOCTORAL PROGRAM  
IN THE COLLEGE OF ARTS AND SCIENCES

BY

Juanita Yates

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Chicago, Illinois

January 2016

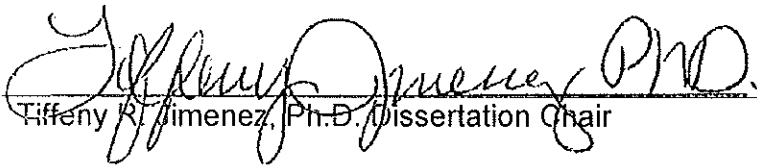
# Community Psychology Doctoral Program

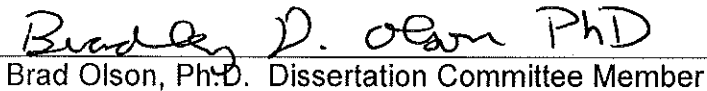
## Dissertation Notification of Completion

Doctoral Candidate: Juanita Yates

Title of Dissertation: UNDERSTANDING LGBTQ+ INTIMATE PARTNER VIOLENCE & CHALLENGES IN SEEKING FAMILY SUPPORT: A MIXED-METHODS STUDY

Certification: In accordance with the departmental and University policies, the above named candidate has satisfactorily completed a dissertation as required for attaining the Doctor of Philosophy degree in the Community Psychology Doctoral Program (College of Professional Studies and Advancement) at National Louis University.

  
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5/11/18  
Date

*I dedicate my dissertation:*

*To my mother, Exmeda Yates, who continues to learn, grow and develop and who has been a source of encouragement and inspiration to me throughout my life, a very special thank you for providing a 'writing space' and for nurturing me through the months of writing. And also for the myriad of ways in which, throughout my life, you have actively supported me in my determination to find and realize my potential, and to make this contribution to our world.*

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*I would also like to show my gratitude to my family who are always there for me no matter what, especially my mother Exmeda Yates who insists that I take my studies to the utmost level,*

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### **Abstract**

This research project is a focus on Intimate Partner Violence (IPV) within LGBTQ+ community and the challenges associated with seeking family support. IPV is defined as a violent or aggressive behavior within the home, typically involving the violent abuse of an intimate spouse or partner. However, IPV can happen on the street, in one's home or even in a public place. Those exposed to IPV can be children, men and women. IPV is a prevalent issue in our society (Bright 2008). According to Ristock (2005), violence in LGBTQ+ relationships may be referred to as partner violence, relationship violence, or LGBTQ+ IPV. IPV however, has been most strongly associated with heterosexual relationships and assumes certain gendered roles (male batterers, female victims). Due to this common set of assumptions about intimate relationships and what counts as IPV, members of the LGBTQ+ communities are outside of the common assistance as a result of these assumptions. People of the LGBTQ+ population take on a variety of differing gender roles that may or may not coincide with who they have an intimate relationship with and therefore challenge the traditional notions of what counts as an intimate partner. It is for this reason that particular attention needs to be paid to This study uses mixed-methods to explore the challenges associated with seeking support for IPV within the LGBTQ+ community, and based on survey findings, uses autoethnography to conduct an in-depth exploration of how one family provide support, as well as what prevents Black LGBTQ+ identified person from seeking family support. Future research and implications for policy and practice are discussed.

## **Introduction**

According to Ristock (2014), much like heterosexual Intimate Partner Violence (IPV), violence in same sex relationships involves the conscious manipulation and control of one person by another through the use of threats, coercion, humiliation and/or force. Some individuals within these relationships identify as lesbians or gay men whereas others may identify as bisexual or queer (Ristock 2014). According to Dunne (2014) IPV is more prevalent in LGBTQ+ communities than in heterosexual communities. Societal perception of IPV in same sex relationships is that of mutual combat. A large majority of victims within this community suffer in isolation, often faced not only with violence, but with a struggle for acceptance of their own identity. Research shows that members of the LGBTQ+ community are increasingly confined and unable to receive needed assistance, with regard to relationship violence, as well as other areas such as health and counseling. As a result of these deficits, individuals within this community suffer, in numerous ways, both mentally and physically (Dunne, 2014).

Mayes and Chochran (2011) found that LGBTQ+ individuals are discriminated against when it comes to receiving services that would improve their quality of life, and this may result in the individual developing psychiatric and potentially medical problems. We live in a society where discrimination and prejudice is routinely directed towards anyone who is not part of a dominant cultural group, the experience of same sex group can make it harder to address violence in relationships and to get the support needed. There are often concerns within these communities that any public discussion of violence in the LGBTQ+ community will only add to the negative

stereotypes that already exist about same sex people as sick or perverted (Mayes and Chochran 2011).

### **Intimate Relationship Violence and the Same Sex Community**

According to Ard & Makadon (2011), The medical community is making a strong effort to respond to the problem IPV, however there is still some notable exclusion such as; male victims of IPV receives very little attention in the health care field, gay women also have received little or no care from the medical community. When gay individuals try to obtain IPV services, they find that their options are limited. LGBTQ+ shelter services are rare to non-existent in many states. Gay men may not be admitted to shelters, regardless of their status as victims, because cisgender men may push back against their presence violently, or because of their discomfort with perceived romantic intentions. Often lesbian women may not gain access to women's shelters due to policy grounded in the fears of unwanted romantic advances, as well as well as the potential for discriminatory abuse. These barriers that LGBTQ+ people may face make it extremely important for the medical provider to become more pro-active in the care and safety of the LGBTQ+ community. Medical providers must recognize the problem, help ensure safety, and be alert to the possibility of IPV as a cause of distress and illness among their Gay and Lesbians patients (Ard & Makadon 2011).

### **Understanding the LGBTQ+ Community & Relationships**

According to Burwick (2014) and the Williams Institute (TWI), same sex populations face a basic disadvantage in the form of social stigma. Stigma refers to the inferior status, negative regard, and relative powerlessness that society collectively assigns to individuals and groups that are associated with various conditions, statuses, and attributes. It may be experienced or exhibited at the individual or structural level. Some people have negative attitudes toward homosexual people, which may cause homosexual people to internalize these negative attitudes. Individuals in

same sex relationships are at a disadvantage because they are not acknowledged when it comes to, implementing policy or programs. The assumption is that all people are heterosexual which is a form of active discrimination against them.

The Williams Institute (TWI) conducted a survey of gays and lesbians, and more than half of them (53%) believe there is significant discrimination against the homosexual community and a quarter of them report having been threatened or physically attacked (30%). Over 20% are treated unfairly by an employer because of their sexual orientation or gender identity. In addition, harassment or violence based on sexual orientation or gender identity often results in mental or physical harm. Gay & Lesbian individuals who experienced discrimination in employment and/ or housing may experience economic insecurity, and they may also have difficulty accessing needed services (Burwick et al. 2014).

According to Subhrajit (2014), same sex couples face many challenges today. If you are not heterosexual, you are not normal and are considered deviant. Same sex couples continue to face discrimination and exclusion across the world. Homophobic violence and abuse targeting same sex couples occur on a regular basis. In most states, LGBTQ+ individuals do not enjoy the same rights and protections as opposite sex couples, and consequently suffer from discrimination and disadvantage in access to social protection schemes, such as health care and pensions. Subhrajit states that discrimination against the LGBTQ+ individuals not only denies them equal rights under the amendment, but also marginalizes them in society which inevitably excludes them. Marginalization is preventing someone from living a full social life according to the level of society standards. People who are marginalized have relatively little control over their lives and the resources available to them they often stigmatized and receive negative attitudes from the

public. Their opportunities to make social contributions may be limited and they may develop low self-confidence and self-esteem and may become isolated (Subhrajit, 2014 pg. 318-319).

According to Barnhart (2014), on a social level, dominant groups in a given community may exclude same sex couples and gay and lesbians in the community. They are considered outsiders because of their sexuality, and thus are unable to participate in establishing these important social bonds. Stereotypical generalizations about this community persist, despite the fact that they are not upheld by proof, and that they are regularly used to pardon unequal treatment. For instance, confinements on openings for work, child rearing and relationship acknowledgment are regularly legitimized by stereotypic presumptions about lesbian, gay and androgynous individuals (Barnhart 2014).

### **LGBTQ+ Intimate Relationships and Cultural Differences**

According to Rohrbaugh (2006), LGBTQ+ individuals are found among all nationalities, race and ethnic groupings. Note that by and large LGBTQ+ families work well, in ways that most in the cis community do not recognize, but at the same time similar to the ways that of hetero families exist. However, there are LGBTQ+ families in which aggressive behavior at home happens. Thus the need to consider IPV (Rohrbaugh 2006).

The Chicago LGBTQ+ Needs assessment, (LCN) highlights issues which impact same sex couples at every level, such as homophobia/transphobia, particularly in the work environment, in the city, and in the justice system. It impacts the marginalized communities most because people without resources, most problems are exacerbated, which significantly impacts the ability to protect oneself in this community, most specifically when one is most in need, during the time of IPV crisis.

According to Morten, M. F., Smith, K. F., LSW PH. D, Smith, C., LCSW, Vega, A. T., MJ, & Kadish, J. (2012) found, in a study of the homosexual population that violence and safety within the LGBTQ+ community is the main concern in the community. 25% of participants in the study ranked it as a number one concern. 23% of participants in the study ranked it as a number two concern. Morten's results show the following issues as top concerns for the same sex couples community, safety in Chicago area, safety education, safety from/with police, violence prevention, and safe spaces. Per the results 67.7% report feeling safe at school and work, while only 56% indicated feeling safe within the city at large. Only 22.3% reported feeling comfortable that the police would respond to their needs, with 26.6% reporting a "not applicable" response. (Morten et al, 2012)

The American Psychological Association (2008) wanted psychologists to help remove the stigma of mental illness that has long been associated with LGBTQ+ individuals. Psychology purpose is to work with the well-being of people and groups and therefore with threats to that well-being. The prejudice and discrimination that people who identify LGBTQ+ individuals regularly experience have been shown to have negative psychological effects (APA 2008).

According to Harper & Schneider (2003), throughout North America and the world, the LGBTQ+ community continues to experience oppression and discrimination despite the social, legal, and political advances that have been put in place to help same sex couples to have basic human rights. Since the twentieth century the LGBTQ+ community has been actively engaged in community organizing and social action; however, research on the nuanced issues facing same sex couples has been, for the most part, conspicuously absent within the very field of psychology that is explicitly focused on community research and action—Community Psychology. Later advances developed within the field of Community Psychology related to LGBTQ+ research providing



suggestions for research and action. Community Psychology's models of intervention involved building on the strengths of the LGBTQ+ community and promoting social change while keeping in mind the end goal to construct better research and interventions for LGBTQ+ couple's, individuals, and groups. (Harper, Schneider 2003)

According to Gehring (2015), IPV is a noteworthy general wellbeing issue in the United States. People are increasingly aware of same sex IPV violence, however empathy for victims is still significantly skewed towards females in the community, who likely assume more traditional feminine roles. The minority status in American culture, of same sex couples and further couples enduring IPV violence creates a vacuum of fitting policy and sympathetic administrations, willing to customize legislation or even local policy equipped to combat this savagery (Gehring 2015).

According to Watkins (2009), Older LGBTQ+ individuals have been denied rights and privileges throughout history. Older Adults of the LGBTQ+ community face more issues than the younger adult do. Some, but not all of the issues that older adult contends with include stigma, isolation, and unequal treatment. Which mean being poorer and sicker and having fewer opportunities for social and community engagement than do their heterosexual peers. Many older LGBTQ+ individual's financial situations can be contributed to the fact that discrimination was legal during their working lives, which often meant thinner paychecks, limited access to health care, fewer chances to build pensions and smaller Social Security payments. Senior lesbian couples' Social Security benefits are typically 31.5% smaller and 17.8% smaller than are those of heterosexual couples (Watkins state, citing a 2009 study).

### **LGBTQ+ Intimate Partner Violence-Lifetime Victimization**

According to Balsam et al. (2005), a study of lifetime victimization was conducted. The sample consisted of 557 lesbian/gay, 163 bisexuals, and 525 heterosexual adults. Heterosexual

participants, same sex couple's participants reported more childhood psychological and physical abuse by parents or caretakers, more childhood sexual abuse, more partner psychological and physical victimization in adulthood, and more sexual assault experiences in adulthood than that of the heterosexual participants (Balsam et al., 2005). Ristock (1994) states, although IPV has remained significantly less visible, the literature has been gradually moving from addressing the prevalence of violence to increasing the understanding and response to this phenomenon (Ristock, 1994).

According to Holt (2011), people who tend to be victims in an IPV situation are generally focused on the needs of their partner; they have generally been depressed and have felt inadequate. The victims do not have control in their relationship, and have tended to manipulate their environment and situations to maintain safety. Generally, they have not fought back, but may have expressed aggression covertly.

Holt states that the 2003 National Criminal Victimization Survey suggests that the domestic-violence rate is higher in gay couples than in heterosexual partners. The ambiguity in distinguishing the abuser from the victim in same sex couple's relationships can be reduced with profiling, a method based on typical characteristics or personality traits of abusers and victims. Several terms have been developed to denote the complex roles that occur within the context of an IPV situation. These terms include: primary aggressor and secondary aggressor. Primary aggressors have tended to be obsessive, jealous, controlling, and entitled. They have tended to blame their partners for the violence, have been self-centered, and have identified as having more privileges. They have projected their internalized and institutionalized homophobia onto their partners, which, as a result, has objectified their partners. The tactics employed to intimidate their

partners have generally included emotional and psychological abuse, as well as physical and sexual abuse (Holt, 2011).

According to Marrujo and Kreger (1996), an aspect of intimate partner violence that is less understood, is the part of the secondary aggressor. The term secondary aggressor refers to the person in an intimate partner violence situation that needs to fight back to protect themselves. Holt used the term mutual combatant to describe the secondary aggressor. The mutual combatant has tended to fight back and at times has initiated the violence. These authors also supported the perspective that women who have fought back are self-defending victims rather than mutual combatants. Police officers and other law enforcement agencies have shared the contradicting perspectives of these authors. Many factors need to be taken into consideration in order to accurately assess the role of a victim and aggressor. Sharing those perspectives, defined the secondary aggressors as the person who fights back in defense or retaliation. Once they are engaged in physical confrontations, they will not disengage. Their actions are motivated by a desire for retaliation for being abused (Holt 2011).

Hart (1986) defined LGBTQ community as exhibiting a pattern of violence or coercive behaviors, whereby a partner seeks to control the thoughts, beliefs, or conduct of her/his intimate partner, or to punish the intimate partner for resisting the perpetrator's control. IPV among same sex couple's relationships to include a pattern of abusive and/or coercive behaviors that are used to control and/or gain and maintain power over an intimate partner or family member. It is not restricted to physical abuse, but also includes verbal, emotional, financial and/or psychological abuse, as well as sexual abuse (Hart 1986 p. 173).

### **The Cycle of Violence**

According to the Funders (2005), for LGBTQ+ Issues, the cycle of violence in a relationship is defined by three stages: tension building, acute battering phase, and "calming." Social policy can stop domestic abuse, but it must include trained police and criminal justice personnel, as well as funding for safe houses and individual counseling. A victim of IPV will often feel like they are the only one abused, that is not true. Abuse happens to people from all backgrounds and all neighborhoods. IPV is a reality countless people face daily. Most of the time, abuse does not occur continually, but rather in a cycle. Some stress (ex: job, money or bills) begins this part of the cycle. The stress causes the abuser to feel powerless. The abuser chooses to act out toward a spouse or partner through name-calling, insults, and accusations. As the tension builds, the victim tries to calm the abuser and anticipate his/her every need. The tension becomes unbearable like walking on eggshells (Funders for LGBTQ+ Issues 2005).

### **Challenges to Seeking Help**

Brown T & Herman J (2015) states, that researchers reviewed 42 reports, from 1989 to the present, that include findings on the prevalence of IPV and Intimate Partner Sexual Abuse (IPSA), survivor barriers to seeking help, and the quality of available aid for same sex couples. Most fields of study, reviewed for this paper, found a lifetime prevalence of IPV among lesbian and bisexual women, gay and bisexual men, and transgender people, which is as high as or higher than the U.S. general population (Brown, T., & Herman, J. 2015).

According to Khan, S., Gallo, & M. M. (2005), homophobia, lesbian, gay, bisexual and transgender individuals face prejudice and destitution daily. Low income non-white individuals are especially undercounted and defenseless inside both the LGBTQ+ community and the more extensive society. The intersection of race and sexuality in this space creates a kind of suffering unique to minority populations in same sex couples experience IPV. They confront oppression,

limit resources to public benefits, the elimination of welfare, absence of moderate housing and homelessness, employment discrimination, immigration restrictions, labor issues and workers' rights, violence, incarceration and involvement with the criminal justice system; and environmental racism (Khan, et al.2005).

According to Chan (2005), one of the big barriers for LGBTQ+ individuals seeking services for IPV is that it may be hard for police or service agencies to determine which partner is the victim. It is sometimes difficult for the police to determine who is the victim and who is the abuser, because the abuser will call the police or seek services at an IPV shelter to further control the victim. Some IPV shelters or police may not understand that same sex couples can be in IPV situations. The abused partner's reasons for not seeking assistance in same sex couples IPV needs to be viewed in its broader social, political and legal context. For example, the decriminalization of homosexual activity did not take place until 1990 in Queensland. It is also only in recent years that the effect of the criminalization of sexual activity between gay men and, arguably, also lesbian sexual activity under the Tasmanian Criminal Code has been nullified by international legal action and Federal Government intervention (Chan 2005-cf-Astor 1996).

According to Petermen & Dixon (2003) gay men and lesbians are less inclined to report abuse, and more prone to stay with their accomplice because of homophobia, hetero-sexism (Petermen & Dixon 2003). According to Herek (1990) defined homophobia as the dread of being in close quarters with homosexuals, and in the case of homosexuals themselves, self-loathing. Internalized homophobia has been described as the internalization of cultural oppression and the negative evaluation of messages and attitudes of society, that have been incorporated into the self-concept of LGBTQ+ individuals (Herek, 1990 pp. 1- 4).

Russell (1982) states Roles in Lesbian IPV Within the heterosexual model, the roles of IPV have been defined by gender. The men have usually been perceived as the perpetrators and the women as the victims. However, researchers encountered many problems when they tried to use this model with same gender violence in women. The reliance on gender to define the role has not been useful when intimate partner violence has occurred and many lesbians have not reached out for help, or spoken out about the abuse, due to fear of discrimination or of being misunderstood by society, the community, the criminal justice system, health and social services (Russell, 1982).

Baker, Buick, Kim, Moniz, & Nava (2013) states, that IPV is a silent topic, which has forced not only women, but men that are in a same sex violent relationship, to feel afraid, and to refuse to seek help, especially in the minority community. Violence is prevalent throughout the Chicagoland area; however, it is highly saturated in areas where there is very little of community support. (Baker, et al. 2013). Brown (2008) states LGBTQ+ individuals may not report IPV for fear of discrimination and blame for abuse from a partner. They also may worry about their sexual orientation being revealed before they're comfortable with it. Some individuals view IPV as mutual combat, Violence between same sex couples is just mutual combat or a lover's quarrel. It is not considered violence when a same-gender couple fights. It's a fair fight between equals. It isn't violence when gay men fight. It's just being boys (Brown, 2008).

According to Taranto (2015), LGBTQ+ individuals are more likely to equally participate in violence than are heterosexuals. This type of IPV is even more dangerous in gay couples, because this is not considered to be battery and the victim is not protected but blamed. Eventually someone will end up seriously hurt or dead. Furthermore, the necessity to "man up" drives men to internalize pain as opposed to seeking help. Very little research and attention has focused on the nature of intimate partner violence within LGBTQ+ couple's relationships. Failure to examine

LGBTQ+ IPV has often historically been centered on issues such as social stigma, homophobia, discrimination, and the often-quoted gender-based myth that only men are aggressors and women are victims. Unfortunately, the life experiences of LGBTQ+ individuals and IPV victims have long been silenced and ignored (Taranto, A 2015).

Among these common myths it is perceived that societal standards manage men's and women's sex parts (Potoczniak, Mourot, Crosbie-Burnett, & Potoczniak, 2003). What's more, these lines block the presence of aggressive behavior at home between individuals from the LGBTQ+ community. Manly standards insist that a man ought not to be powerless, and considerably ought to have the capacity to protect himself against another man. It takes after that if a man looks for assistance from an outside source, he would be seen as frail and unfit. On the other hand, societal standards recommend that a woman ought not to display brutality toward a man or a woman. Such conventional female standards likewise direct that women ought to be sustaining and meek people; consequently, inside societal desires, a woman can be manhandled by a man, however not by another woman (Potoczniak, et al., 2003, p. 205-259).

According to Lundy (1993), confidentiality and isolation within the LGBTQ+ community is often hidden and can rely on friends and relationships as support within the local community, this is often compounded when living in smaller towns and rural areas and can make it difficult for the abused partner to seek help. They may feel ashamed about the abuse, or their partner may have tried to turn others in the community against them. An abusive partner may isolate their partner from contact with the LGBTQ+ community by preventing them reading any same sex couples material, attending LGBTQ+ events, and/or preventing those seeing friends from within the community. This can be especially true for people in their first LGBTQ+ relationship, who may

not have had much contact with the LGBTQ+ community before the relationship began (Lundy 1993).

Chan (2005) states that outing can be used by perpetrators as a tool for abuse, creating a barrier to help-seeking. In circumstances where victims hide their outward expression of sexuality, in fear of societal stigma or other repercussions, the perpetrator may exploit this decision by threats of forced outing. This can result in the manipulation of victims, where they remain in abusive relationships due to fears of isolation and rejection from the community fear of outing. Threats of outing, or exposing an individual's previously private sexual orientation to others, create a unique barrier to social services same sex couples IPV victims. Abusive partners can rely on homophobia or heterosexism as a tool to control their partner. This type of abuse can involve: 'outing' or threatening to out their partner to friends, family, police, church or employer; telling their partner that s/he will lose custody of the children because of being outed; telling a partner that the police or the justice system will not assist because the legal system is homophobic and does not understand lesbian or gay relationships or sexual practices because of heterosexism (Chan 2005). In addition, it has been suggested that a percentage of law requirement officers hold the conviction that homosexuality is unethical. Furthermore, the individual officers reacting to residential domestic violence calls might not credit the violence they observe to be legitimate domestic violence should couples be involved in an LGBTQ+ couple's relationship (Tesch, Bekerian, English, & Harrington 2010).

Survivors of LGBTQ+ couple IPV can receive the recognition and help they need with further research, better training for law enforcement officials, and more funding for relevant programs for the involved parties, especially in cases where the police have been repeatedly called to incidences of assault as a result of IPV (Gov.Wales 2014).



## **Purpose of the Study**

According to Barret (2015), understanding the scope and dynamics of IPV in the LGBTQ+ community has been impeded, not only by historical silence surrounding the issue, but also by a range of methodological issues, which complicate researchers' attempts to generate valid data about this phenomenon. Given the continuance of social stigma surrounding LGBTQ+ individual's identity and the potential for research findings to be misused to further pathologize LGBTQ+ as members of gender and sexual minority groups, which may make them feel distrustful of researchers and reluctant to disclose their experiences; particularly to researchers who are not members of the LGBTQ+ community themselves (Barret, 2015).

Hines (2018) states that IPV among LGBTQ+ couples is a serious public health concern. LGBTQ+ individuals in IPV relationships face added challenges when attempting to receive help. More same sex couple's victims of abuse are reporting their experiences as society becomes increasingly more accepting of LGBTQ+ couples' relationships. However, barriers to equal treatment for LGBTQ+ couples remain, and particularly within the complex cultural contexts in which people live geographically (Hines, 2018).

The purpose of this mixed method study is to (a) understand the barriers to LGBTQ+ populations seeking help for LGBTQ+ IPV, what influences help-seeking behavior among LGBTQ+ populations experiencing IPV and (b) to understand through an autoethnography how one family dealt with one of their family members coming out as someone who identifies with the LGBTQ+ community. More specifically, this study will conduct an in-depth analysis of how the family dynamics influenced the Lesbian family member and how they can move forward to better support her.

## **Research Questions**

1) What are family and friends perceptions of the LGBTQ+ community's reasons for not seeking help for IPV?

2) What are the barriers LGBTQ+ individuals face in seeking support from their family? How do family members adjust to one of their relatives coming out as a member of the LGBTQ+ community?

## **Methods**

### **Biases**

I look forward to expanding my research in IPV in the LGBTQ+ community, because the society must become aware that abuse in amongst same sex couples mutual combat. For me a degree in Community Psychology would arm me with the necessary tools that I would need to develop a stronger support system to work with troubled individuals in the LGBTQ+ community, as well strengthen my voice in the community.

As a young child, I grew up in a household filled with domestic violence at the hands of my father and my step dad. When I was 16 my mother was brutally rape by two teen boys, from our community, these boys made her walk home four blocks naked with her clothes in her hand and nobody would stop and help her. My mother suffered a psychotic breakdown, and she was hospitalized of a year. A year after my mother discharge from the hospital she got a job at Cook County Hospital and went back to school completed her Associates Degree at Malcolm X College, and received her Bachelor's degree at National Louis University.

Although my mother's road to recovery was tough, but she found strength within herself to regain her self-esteem. It was through her strength, determination, and optimism that I could find the spark within myself to set goals and dreams for my future. She encouraged me never to accept anything at face value, including the way our society attempts to define my womanhood.

Some might question American culture's classification of a successful family, and the factors that determine a stable family. I escape the thought of IPV, rape, and robberies that my mother endured, allowing myself to believe in a fantasy world of peace, and I remind myself daily something my mother would say to me the sun is always shining, and I am never cold. Fantasies like these dwindle as I arrive back to the reality that we live in a world where everyday children are victimized by an act of violence, women flee to live in shelters for safety because their spouse has beaten them, and same sex couples retreat to their closet afraid to ask for help. As a Community Psychologist I would be able to work with agencies in developing safety programs for community/families to avoid such tragedies. In doing so this program will enable me to make information available to people in the community/families that are need would be another expectation of mine. I am a product of the typical American nuclear family, a single parent household. As I began to study my family dynamics further.

### **Research Design Phase I Quantitative**

According to Studentresearchers.pbworks.com (2017), this research is a quantitative correlational study designed to determine the relationship between the dependent variable and the independent variables using statistical data. A regression analysis seeks to identify what are the best predictors of the dependent variable (Studentresearchers.pbworks.com, 2017). The dependent variable in this study is *Overall Fear*, and the independent variables in this study are: 1. *Abuse\_Normal* 2. *Social Service\_Help*, 3. *Violence\_Normal* 4 *Religious Orgs\_Help*, 5. *Police \_ Help*, 6) *Family \_ Help*.

### **Participants**

The goal of this study is to understand the experiences of the LGBTQ+ community, recruiting participants for this study was challenging we were not able to survey the ideal

population so ended up getting data from friends and family members that have firsthand knowledge of a Gay or Lesbian individual that has been/is in an intimate partner violence relationship. The information gathered was from individuals who have a friend or relative who is the LGBTQ+ community and have been in relationships where they experienced IPV. These participants have first-hand knowledge (one degree away) of a friend or relative who has experienced IPV. This investigation is exploratory; it was impractical to gather information from people who have encountered IPV relationship. Approximately 30 people participated in this research. All participants that participated with the survey was at least 18 years or older.

### **Measures**

This paper introduced the Intimate Partner Violence (IPV) framework for understanding how fear prevent help-seeking barriers for people experiencing partner abuse. A quantitative assessment was conducted to shed light on the strength of the relationship between *Total Level of Fear and Help Seeking Measures*. A survey was conducted to explore IPV in the same sex relationships. The purpose of this survey was to learn from limitations of previous studies and to produce data that could evolve existing data on victims of IPV relationships in the LGBTQ+ community, and to explore whether respondents had experienced a range of abuse the questionnaire included three subsections on emotional behavior, physical behavior and sexual behavior, asking whether individuals had experienced any of these. (Overstreet, N. M., & Quinn, D. M. 2013). The survey addressed these questions 1) What are the barriers Gay or Lesbian individual face coming out to their family? and 2) How do family members adjust to their relative Gay or Lesbian sexuality?

The quantitative study in this study found a strong relationship between *Total Level of Fear* and between the following 6 measures: *1. Belief that Abuse is Normal (Abuse\_ Normal), 2.*

*How well social services agencies will help the LGBTQ+ community (Social Service \_ Help), 3. Believe the violence they experience is not considered domestic violence (Violence \_ Normal), 4 How well religious orgs will help the LGBTQ+ community (Religious Orgs \_ Help), 5. Afraid they will be harassed by Police for being gay and lesbians individuals (Police \_ Help), 6) How well the family will help someone from the LGBTQ+ community (Family \_ Help).* It is important for future research to address how these stigma components impact behaviors and psychological well-being.

### **Study 1 - Data Collection Procedures**

Given that the LGBTQ+ community is a hard to reach population, participants were recruited through different methods. Flyers was posted at several local agencies that serve the same sex couples in the Near West Side community area (e.g., Haymarket agency, Malcom X Community College). A snowball sampling strategy was used starting with people that the researcher knew and word of mouth recommendations. In addition, a message was posted on Facebook that recruited friends and relatives that have more of an online presence.

The criteria that was used to assess whether someone is eligible to participate in this research study involves assessing a few things: 1) If they have experienced a relationship with IPV defined as situation where one of the partners was physically or mentally abused, including a partner who belittles or tries to control, and feelings of self-loathing, helplessness, and desperation; and 2) If they are a friend or relative of someone in an same sex couples relationship where they've experienced IPV, they must have first-hand knowledge of that person's experience of their relationship; and 3) they were at least 18 years of age.

### **Study 1 - Data Analysis Procedures**

An exploratory analysis was conducted using several statistical tests, including: 1) basic descriptive statistics, 2) correlations, and 3) linear regression. The correlations identified variables with high significance. The significant variables were used to develop a regression model.

It is expected that the general community perspective on why the LGBTQ+ community may not seek help when experiencing an IPV relationship is due to the negative attitudes and discrimination they expect to receive from common places people may seek help for IPV. (e.g., family, social services, police).

## **Results**

According to Bright (2008), as previously stated, the purpose of this study is to understand the challenges associated with Intimate Partner Violence (IPV) within the LGBTQ+ community. IPV is described as a violent or aggressive behavior within the home, typically involving the violent abuse of a spouse or partner. LGBTQ+ IPV can happen on the street, in one's home or even in a public place. The people who are exposed to IPV can be children, men and women of all genders and sexual orientations. IPV is a prevalent issue in our society (Bright 2008).

### **Participant Sample Descriptive**

There were 30 participants that completed the survey. It was anticipated that we would have participants fill out the survey who were of the LGBTQ+ community and identify as experiencing an IPV relationship using a snowball sampling procedure. However, we were unable to identify people willing to speak about their experiences of a relationship considered to involve IPV. Completed surveys were from individuals who stated they had a friend or relative who is the LGBTQ+ community and is in a relationship that involves IPV. Because of this sampling issue, the analysis shifted the questions to be more about how the general community on the West Side of

Chicago perceives why their LGBTQ+ individuals friend/ family member does not seek help for IPV related concerns.

### **Descriptive Statistics**

The nationality of the 30 participants (friend or family member) were White 16.7% (n=5), African American 56.7% (n=17), Hispanic 23.3% (n=7), Other 3.3% (n=1), Total 100% (n=30).

The gender identity of the 30 participants friend or family member were: Male 33.3% (n=10), Female 53.3% (n=16), Androgynous 6.7% (n=2), Trans M-to-F 6.7% (n=2), Total 100% (n=30).

The level of Education of the 30 participants friend or family member: High School Diploma 3.3% (n=1), Some College 33.3% (n=10), College Degree 23.3% (n=7), Graduate Degree 26.7% (n=8), Other 13.3% (n=4), Total 100% (n=30) (see Table 1).

***Table 1 Demographic Characteristics of Participant Sample***

<i>Demographic characteristics</i>	<i>Participants (n=30)</i>	
	<i>N</i>	<i>%</i>
White	5	16.7
Black	17	56.7
Hispanic	7	23.3
Other	1	3.3
<b>Gender</b>		
Male	10	33.3
Female	16	53.3
Androgynous	2	6.7
Trans M TO F	2	6.7
<b>Education</b>		
High School	1	3.3
Some College	10	33.3
Degree	7	23.3
Graduate	8	26.7

<b>Other</b>	4	13.3
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To begin this exploratory analysis, we developed a new variable to assess perceptions of total level of fear experienced within the West Side of Chicago regarding seeking help for IPV. This *Total level of fear* variable was developed to include 6 scale items including: 1) Fear of their financial situation being affected, 2) Fear of negative attention/stigmatism in the LGBTQ+ community 3) Fear of losing custody of their children (only if they have children), 4) Fear of experiencing homophobia by the LGBTQ+ community, 5) Fear of being ‘outed’ to family and friends, and 6) Fear of losing job. Across all fear related variables, the overall alpha value was fairly high (Alpha = .74). This variable was then used as one of the main variables within the following correlations.

After examining the correlation matrix, there were significant correlations at .05 (\*) and .01 (\*\*) levels of significance. This study results section will focus on those significant correlations at .01 (\*\*). There were 4 main highly significant correlations in the matrix: 1) the *Total Level of Fear* variables was positively correlated with *Belief that Abuse is Normal*  $r (.588), P < .001$ ; 2) *How well social services agencies will help the LGBTQ+ community* is positively correlated with *Believe the violence they experience is not considered domestic violence*  $r (.683), P > .000$ ; 3), *How well religious orgs will help the LGBTQ+ community* is positively correlated with *Afraid they will be harassed by Police for being the LGBTQ+ community*  $r (.666), P > .000$ ; 4), and *How well the family will help someone from the LGBTQ+ community* there is a negative correlation with *Afraid they will be harassed by Police for being the gay and/or lesbian’s*  $r (-.539) P < .002$  (see Table 2)



There was an inverse relationship observed between how well the family of the LGBTQ+ individuals would help and how much LGBTQ+ individual’s family/friend would be afraid they would be harassed by police. Looking back at the frequencies for these variables to further unpack this inverse relationship, we see that more people felt the LGBTQ+ individuals would not receive help from family and more people felt that the LGBTQ+ individuals would be afraid they would be harassed by the police. In both cases they perceive their LGBTQ+ individual’s family/friend does not perceive these community spaces to be good places for seeking help for LGBTQ+ individuals IPV. Overall, the correlations indicate that it is most likely that individuals from the LGBTQ+ community will not seek help because of the fear and attitudes of those that occupy the spaces in the services that are designed to assist people in their situation (social services, religious orgs, police).

**Table 2: Significant Correlations**  
**Correlations**

		Overall _Fear	Abuse is _Normal	Police _Not_ Domestic Violence	Police No Help	Support_ Social_ Services	Support_ Support_ Family
Overall Fear	Pearson Correlation	1	.588**	.298	.439	.454*	-.374
	Sig. (2- tailed)		.006	.202	.053	.044	.104
	N	20	20	20	20	20	20
Abuse_is_Normal	Pearson Correlation	.588**	1	.589**	.585**	.207	-.530*
	Sig. (2- tailed)	.006		.006	.007	.381	.016
	N	20	20	20	20	20	20
Police_Not_Dome stic_Violence	Pearson Correlation	.298	.589**	1	.514*	.534*	-.466*

	Sig. (2-tailed)	.202	.006		.020	.015	.038
	N	20	20	20	20	20	20
Police_No Help	Pearson Correlation	.439	.585**	.514*	1	.179	.000
	Sig. (2-tailed)	.053	.007	.020		.451	1.000
	N	20	20	20	20	20	20
Support_Social_Services	Pearson Correlation	.454*	.207	.534*	.179	1	-.183
	Sig. (2-tailed)	.044	.381	.015	.451		.441
	N	20	20	20	20	20	20
Support_Family	Pearson Correlation	-.374	-.530*	-.466*	.000	-.183	1
	Sig. (2-tailed)	.104	.016	.038	1.000	.441	
	N	20	20	20	20	20	20

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

\* . Correlation is significant at the 0.05 level (2-tailed).

### Linear Multiple Regression Analysis

Given that it is expected that those of the same sex couple's community will not access help with IPV because of levels of fear, a simple linear regression was calculated to understand what the general population perceives the barriers to seeking help might be related to perceptions of fear. Therefore, in this analysis, we sought to understand which variables predict the Dependent Variable (outcome variable), *Total level of fear* (Alpha=.74) using the following four Independent Variables (predictor variables): 1) *How well social services agencies will help the LGBTQ+ community*, 2) *How well religious organizations will help the LGBTQ+ community*, 3) *Believe that abuse is normal in the LGBTQ+ community intimate relationships*, and 4) *Believe the violence they experience is not considered domestic violence*. Results of the regression analysis

provided an  $R^2$  of .658 ( $F(5,14) = 5.393, p < .000$ ) indicating that the overall model fit was about 76%, which is fairly good.

**Table 3 Linear Regression Model Summary**  
**Model Summary<sup>b</sup>**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.811 <sup>a</sup>	.658	.536	3.64473

a. Predictors: (Constant), How well the family will help someone from LGBT community, how well social services agencies will help same sex couples community, How well religious orgs will help the same sex couples community, Believe that abuse is normal in same sex couples intimate relationships, Believe the violence they experience is not considered domestic violence (legal evidence of systemic bias against LGBT)

b. Dependent Variable: Total level of fear across all fear related variables (GOOD measure Alpha = .74)  
Based on the simple linear regression the significant predictors include: **Believe that abuse**

**is normal in the LGBTQ+ community**  $b = .92, t(5) = 3.829, p = .002$ , **How well social services**

**agencies will help the LGBTQ+ community**  $b = .70, t(5) = 3.421, p = .004$  and **Believe the violence**

**they experience is not considered domestic violence** (legal evidence of systemic bias against the

LGBTQ+ community)  $b = -.702,$

$t(5) = -2.661, p = .01$  (see table 5). Overall, we conclude that Total Level of Fear is a product of a

few main factors that include perceptions that abuse is normal, the belief that same sex couples

IPV is not considered “violence”, and perceptions that they will not receive help from social

service agencies if they do choose to

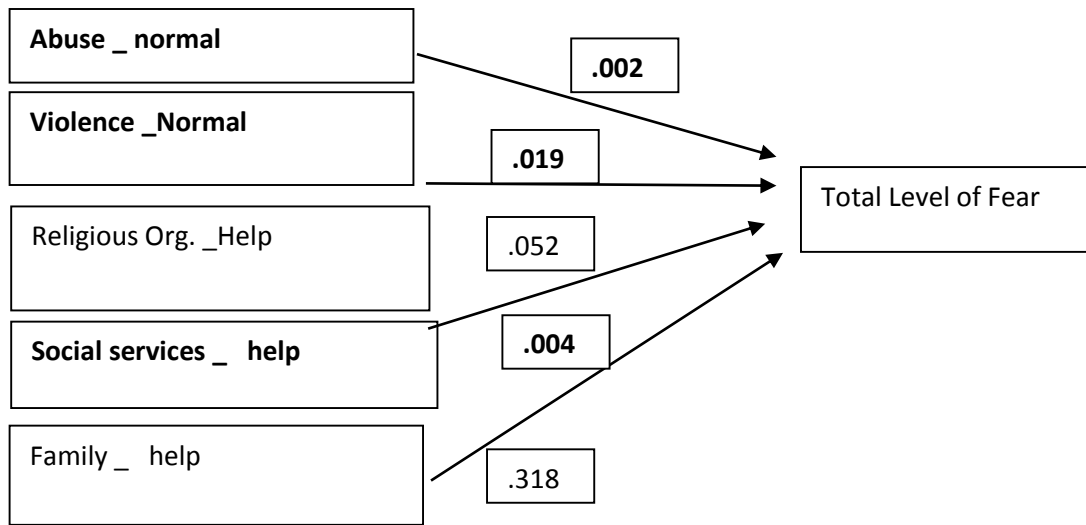
**Table 4 Regression Coefficient's**

Coefficients <sup>a</sup>						
Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	15.928	4.918		3.239	.006

Abuse_is_Normal	3.450	.901	.921	3.829	.002
Police_Not_Domestic_Violence	-2.946	1.107	-.702	-2.661	.019
Support_Social_Services	4.224	1.235	.701	3.421	.004
Support_Religious	-2.255	1.060	-.421	-2.127	.052
Support_Family	-1.095	1.057	-.199	-1.036	.318

a. Dependent Variable: Overall Fear

**Figure 1: Liner Regression Model indicating significant predictors of total level of fear**



**Primary Findings**

Linear regression is the next step up after correlation. It is used when we want to predict the value of a variable based on the value of another variable. The variable we want to predict is called the dependent variable or sometimes, the outcome variable. The variables that was used: (1. Abuse is normal, 2. Violence is Normal, 3. Religious Org. no Help, 4. Social services no help, 5. Family no help), to predict the outcome variables of “overall fear” to understand what factors are most likely preventing same sex couples from seeking help with IPV. To get to the model tested in

the regression, a correlation was calculated to identify the most related and significant variables.

The overall model was a good fit with an  $R^2$  of .74.

The researcher was not able to identify individuals willing to talk about their encounters of a relationship considered to include IPV, however, the researcher was able to acquire data from individuals who stated they had a friend or relative who is LGBTQ+ individuals and is in a relationship that involves IPV. Because of this sampling issue, the analysis shifted the questions to be more about how the general community perceives why their LGBTQ+ friend/ family member does not seek help for IPV related concern. Interestingly, while we might expect social services to be supportive of the LGBTQ+ community currently, the perspectives of the population sampled indicated that they feel there is still pervasive oppressive attitudes among social services that may be discriminating against the same sex population and that those attitudes will deter people from seeking help with IPV.

According to Brown & Herman, (2015) there are large gaps in the research about same sex IPV. The transgender population is often left out of policy and remedies for the IPV shortfalls altogether. Much more can be done to better understand, address, and prevent intimate partner violence and sexual abuse within the LGBT population. (Brown and Herman, 2015)

### **Study 2: Purpose of the Study**

According to Osofsky (2003), There is evidence indicating that both severe and moderate violence occurs frequently in homes among family members and children are exposed to this violence. Many perpetrators of IPV, have experienced trauma of their own earlier in life. Much of the violent expression of the aggressive partner is steeped in experience with domestic violence and sexual assault, often familial or as a child, including beatings, incest, molestation, and verbal abuse. In growing up in living situations where violence is normalized, the partner often does not

label the problem or recognize that the violence within the relationship is an issue. This can also translate into how the couple raises potential children and implements discipline (Osofsky, 2003).

Given the challenges associated with gaining access to the population of interest, the purpose of the study is to conduct an autoethnography about how one family dealt with one of their family members coming out as someone who identifies with the LGBTQ+ community as a lesbian. More specifically, this study will conduct an in-depth analysis of how the family dynamics influenced the LGBTQ+ family member and how the family can move forward to better support her.

### **Study 2 Research Questions**

The specific research questions to be explored in this study are:

1. What are the barriers LGBTQ+ individual face coming out to their family?
2. How do family members adjust to one of their relatives coming out as a member of the LGBTQ+ community?

### **Study 2 Methods**

#### **Study 2 Overview**

Study 1 included a Linear regression for predictors of total levels of fear among LGBTQ+ persons suffering from IPV. The study found that the total level of fear was significantly influenced by lack of family support. Understanding the lack of perceived family support, and how that perception is created, may lead to understandings about the ways in which perceived barriers to other supports are crafted by the victim. Family is often the first line of support for any victim of trauma. Often family will aid a victim in reaching out for further external support. If perception of familial barriers can be understood, it is possible to understand how those, and other potentially false perceptions can be abated towards healthier responses by the victim to abuse.

It is important to understand the role that family support plays in the perception of support from other institutions in order to gain understanding of the ways in which victims of LGBTQ+ IPV might come to feel less fear and ultimately seek help. Exploring the nuanced environment in which LGBTQ+ persons might craft their perceptions of family support, can be useful to further understanding of the ways in which perceptions of other supports are created. This study uses an in-depth autoethnography that explores the details of the researcher's own life as it intersects with her sibling, who is a person of the LGBTQ+ community. This study will give a complete picture of the life of a person undergoing this process of coming out and seeking support.

### **Study 2 - Research Design: An Autoethnography Approach**

Autoethnography is considered both a process and a product in the sense that the researchers learn simultaneously about themselves and the topic of study. There are a number of ways an autoethnography can be conducted and this study is using one of these approaches for the specific focus of this study. According to Boylorn and Orbe (2014) as cited in Chang (2008), autoethnography involves self-experiences by looking inward of self (auto) while giving a cultural analysis through personal narrative. (Boylorn and Orbe, 2014, as cited in Chang 2008). As explained by Boylorn and Orbe, 2014, as cited in Reed-Danahay 1997 autoethnography is defined by three different categories: 1) Native Anthropology-This is when the subject becomes the author of the ethnography which studies their own culture, 2) Ethnic Autobiography these individuals from the same culture write narratives about their background, 3) Autobiography ethnology is used when the writer talks about their personal experience into ethnographic writing. This study will explore the struggles and the acceptance that the researcher's family faced when the researcher's sister came out to her family after 21 years of living a heterosexual lifestyle.

### **Participant Background & Relevant Experiences**

According to Tomaselli et al. (2008), it is important to consider that the self/auto of 'autoethnography' is understood to be in an irredeemable relationship with the 'other', and that consequently, any thinking and writing about the self will always also concern and involve the other in some way (Tomaselli, et al., 2008). Since an autoethnography approach centers on understanding the lived experiences of the researcher and those closest to them, it is necessary to have the researcher speak in terms of "I" and "my" so as to speak more precisely from personal experience. Therefore, this section of this method will be written in first person to highlight these experiences.

I look forward to expanding my research in IPV in the LGBTQ+ community, because the society must become aware that abuse in amongst same sex couples mutual combat. For me a degree in Community Psychology would arm me with the necessary tools that I would need to develop a stronger support system to work with troubled individuals in the LGBTQ+ community, as well strengthen my voice in the community.

My personal beliefs, attitudes, experiences, and perceptions have influenced the direction of the study, including the interpretation and analysis of data. The act of writing this autoethnography allowed me to recognize the importance of reflecting on life events in order to learn how they affected my family and realize how my sister felt by being humiliated and isolated from our immediate and extended family. When you have a homosexual sibling, you watch a lot of emotions unfold such as: pain, anger, resentment, fear, love, confusion, acceptance, doubt, triumph. But most of all, you witness someone daring to go through hell to be who they are.

The participant was raised in the 60's and 70's by a single mother along with four other siblings. The researcher and siblings, at a young age, was taught by family members stereotypes and prejudices without even realizing it. Some of these messages may have been about ourselves



and what we are supposed to or not supposed to be, and one thing you are not supposed to be is gay/lesbian. As a young child, I grew up in a household filled with domestic violence at the hands of my father and my step dad. When I was 16 my mother was brutally raped by two teen boys, from our community, these boys made her walk home four blocks naked with her clothes in her hand and nobody would stop and help her. My mother suffered a nervous breakdown, and she was hospitalized of a year. A year after my mother discharge from the hospital she got a job at Cook County Hospital and went back to school completed her Associates Degree at Malcolm X College, and received her Bachelor's degree at National Louis University. Although my mother's road to recovery was tough, but she found strength within herself to regain her self-esteem. It was through her strength, determination, and optimism that I could find the spark within myself to set goals and dreams for my future. She encouraged me never to accept anything at face value, including the way our society attempts to define my womanhood.

Some might question American culture's classification of a successful family, and the factors that determine a stable family. I escape the thought of IPV, rape, and robberies that my mother endured, allowing myself to believe in a fantasy world of peace, and I remind myself daily something my mother would say to me the sun is always shining, and I am never cold. Fantasies like these dwindle as I arrive back to the reality that we live in a world where everyday children are victimized by an act of violence, women flee to live in shelters for safety because their spouse has beaten them, and same sex couples retreat to their closet afraid to ask for help. As a Community Psychologist I would be able to work with agencies in developing safety programs for community/families to avoid such tragedies. In doing so this program will enable me to make information available to people in the community/families that are need would be another

expectation of mine. I am a product of the typical American nuclear family, a single parent household.

### **Study 2 - Data Collection Procedures**

The researcher will conduct 30-60-minute-long interview with her sibling using a digital recorder. The researcher has received permission from the sibling to record the interview. The researcher will record and take notes from the conversation, type them into a word document after the interview, and save those notes as data for that participant. The researcher's sibling will be provided with the consent form for participants' review and signature. (see Appendix A)

### **Study 2 - Data Analysis Procedures**

This study will use an inductive analysis process across multiple types of data. Overall, the data included the researcher's story around the phenomena of interest and the interview conducted with the researcher's sister. While there are two types of qualitative analysis, inductive and deductive approaches, both approaches to analyzing involve understanding data through categorization. Inductive research mainly focuses on building new theories, whereas deductive research focuses on verifying or challenging theories (Thomas, 2003). This study sought to develop a visual model of the story surrounding the phenomena of interest to place the experiences of the participants within a broader context using an inductive approach.

In this study the researcher will be using the strategy of inductive analysis which is suggested by Thomas (2003) (see Figure 2). This strategy has five steps: 1) Preparation of raw data files, 2) Close reading of text, 3) Creation of categories, 4) reducing overlap and redundancy among the categories, and 5) creating a model incorporating most important categories. According to Thomas (2003), the following inductive analysis process includes the following procedures in more detail: 1) Preparation of raw data files- data cleaning this is done by formatting the raw data

files into APA format which includes the autoethnography interview. 2) Close reading of text- Once text has been prepared, the raw text should be read in detail so the researcher is familiar with the content and gains an understanding of the themes and details in the text. 3) Creation of categories- involves grouping the data, reducing the number of categories by combining similar headings into broader categories. The lower level or specific categories will be derived from multiple readings of the raw data (using the participant own language). 4) Overlapping coding reducing overlap and redundancy among the categories. 5) Continuing revision and refinement of category system creating a model incorporating most important categories (Thomas 2003).

**Figure2: Data Analysis Coding Procedures Steps 1-5**

1. Initial read through text data	2. Identify specific segments of information	3. Label the segments of information to create categories	4. Reduce overlap and redundancy among the categories	5. Create a model incorporating most important categories
Many pages of text	Many segments of text	30-40 categories	15-20 categories	3-8 categories

The inductive analysis procedure was used to analyze both the researcher’s story and the interview with her sister. After both written documents were coded, further discussion of the codes and an understanding of the data was discussed with the study chair to address issues related to interrater reliability. This process of discussing the data further detailed parts of the story that needed to be further clarified to outside readers.

**Data Trustworthiness**

When writing a dissertation, the researcher must show trustworthiness. This study will use member checking. Member checking is when the validity of an interview is checked and verified by the participant. According to Lincoln and Guba (1958), member checks the most crucial

technique for establishing credibility in a study. “It consists of taking data and interpretations back to the participants in the study so that they can confirm the credibility of the information and narrative account”. After the data is analyzed, the researcher will go back to speak with her sibling to review the results of the interview and ask her if there are any concerns about what is being written. The researcher will be sure that they are both on the same page about the main findings before writing up the final results.

## **RESULTS**

The findings of this autoethnography study demonstrate the coming out process when deciding to disclose a same-sex sexual orientation to their family members. The findings show how disclosure impacted the support participant received from individual family members. The process continues after disclosure when young people make decisions about the level of openness they can have about their sexual orientation to those on whom they depend for emotional and other kinds of support.

According to Tomaselli et al. (2008), it is important to consider that the self/auto of ‘autoethnography’ is understood to be in an irredeemable relationship with the ‘other’, and that consequently, any thinking and writing about the self will always also concern and involve the other in some way (Tomaselli, et al., 2008). Since an autoethnography approach centers on understanding the lived experiences of the researcher and those closest to them, it is necessary to have the researcher speak in terms of “I” and “my” so as to speak more precisely from personal experience. Therefore, this section of this method will be written in first person to highlight these experiences.

### **Family Historical Context**

To begin my autoethnography I give a perspective of my upbringing. I was born in Nurnberg, Germany. We lived in a 13-room house and we had a live-in house keeper whom my mother told me gave me my name. She and my mother became good friends (see below figure 2 and Figure 3)

**FIGURE 3**



Home in Germany

**FIGURE 4**



German House Keeper

We moved to Chicago, IL when I was 3yrs old. I grew up on the Westside of Chicago in the Rockwell housing projects in the 60's and 70's. I was raised by my single mother along with four other siblings. I am third child out of five children. My parents both was born and raised in Alabama. My mother married my father when she was 16yrs old my father was in his 20's and in the military when he married my mother. (See Below Figures 3 and 4)

**FIGURE 5**



My father

**Nürnberg, Germany**

**FIGURE 6**



My Mother

Where ever my father was station my mother went with him, and that is how Germany became my birth place. My father was a very abusive man towards my mother he would beat her regularly, he would call her names lock her out of the house. Shortly after he moved us to Chicago I remember my father pulling a knife on my mother and threaten to kill her and us if my mother would try to leave him. My mother got us and we left and went to my grandmother's house and she called the police. I remember my father few days later left and went back to Washington D.C. leaving my mother with no job, no money, and four children to raise. The pressure was too much to bare for my mother, and that is when she was hospitalized with her first of two mental breakdowns when I was 8 years. The second breakdown happened when I was 16 when my mother was brutally raped by two teen boys from Rockwell these boys made her walk home four blocks naked with her clothes in her hand and nobody would stop and help her. Only one of them was caught and he served less than a year in jail. My mother was robbed 4 times when we lived in the projects each time was on the first of the month when she would receive her food stamps for public aid. My mother suffered a nervous breakdown, and she was hospitalized of a year, because she lost touch with reality she did not recognize us, my grandmother, nor my uncles. She was hospitalized at Michael Reese Hospital where they gave her electrical shock treatment to revive her memory.

A year after my mother discharge from the hospital she got a job at Cook County Hospital and went back to school completed her Associates Degree at Malcolm X College, and received her Bachelor's degree at National Louis University. Although my mother's road to recovery was tough, but she found strength within herself to regain her self-esteem. It was through her strength, determination, and optimism that I could find the spark within myself to set goals and dreams for my future.

On an average day in the projects I would walk around my neighborhood as a kid, and all around me I would see abandoned buildings and garbage on the sidewalks. You would see people addicted to drugs buying their poison on street corners from teenaged boys who dropped out of school, and young girls selling their bodies. You wouldn't see any businesses or safe places for kids to hang out. You wouldn't see any diversity because everybody that lived in the projects or for that fact on the west side of Chicago was Black, and almost everyone is poor. Chicagoans who don't live on the West Side only hear about the projects on the local news when somebody gets shot, which happened very often where I grew up. From the day I started school, my mother always told us that an education was the ticket to a better life. "Stay in school," she said, "and you will go to college and be successful." It was a promise that I heard over and over again. A promise that doesn't mean much when you are hungry and when you have no heat in your house and no clean clothes to wear. But that promise was all I had. It was my only chance to make it out.

It was hard growing up in the projects when faced with opposition every day, watching your friends that dropped out of school, and that was dealing, wearing new clothes and new shoes, and I walked past them in my mostly hand me down clothes and too-small shoes. It's funny because when I was growing up in Rockwell Projects, all I thought about was how I was going to make it out of there. Now, I see that Rockwell made me who I am. I know how to be tough, how to survive, how to overcome obstacles. Most of all, growing up in Rockwell gave me faith that will carry me through even the toughest moments of my life. I get sad when I look at the kids that are out there now just thinking about how to survive another day. There were all kinds of politics involved in being gay, something I was entirely unaware of, but learning about. This culture my family and I was not entirely part of. My siblings and myself, at a young age, was taught to believe that homosexuality is, to unnatural. In fact, homosexuality is, unconventional, unsafe sex,

homosexuality is the most dangerous to our way of life. We were your typical stereotypes and prejudiced against homosexuals without even realizing it. We were raised to believe that gay people are mentally ill and this influenced how my family chose to respond to her coming out.

My mother was the oldest of three children she had two brothers both of which preceded her in death. Both of my uncles had a child that is gay. When homosexuality became a part of my family discussion is when both of my cousins came out to the family, and they both was kicked out the house by my uncles neither one of them was allowed to come to family functions. I think my sister was afraid to come out because she might be disowned by us as well. After my sister made it known about her sexuality my mother reached out to my cousins and bought them around my family as long as their fathers was not around.

When we were children we always talked about getting married and having children, and how our kids would grow up together, and when she finally got married I knew that dream would come true, but it didn't she was only married for a month she and her husband went on a honeymoon and when she came back he moved out of state. Shortly after that she reluctantly came out to the family as being gay.

In the beginning when my sister told us about her sexuality it felt like my entire world was just turned upside down. I was so afraid that she would get hurt or worse get killed. All I could think about was how gay people was treated during the 70's and 80's. The hardest thing for me was the deceit and lies my sister felt she had to tell to keep her identity secret. I found myself feeling a lot of different emotions shock, sad, and relieved. I was shocked to find out that if it had not been for the altercations between my cousin and my sister's friend, and her friend blurted out that she and my sister were lovers my sister said she doesn't know if she would have told the family about her sexuality, because she was afraid of losing our love and respect. I was sad when



we talk about how she and her friends were bullied and attacked because of her sexuality and my sister felt she could not come and talk with the family about it because she felt that we would not support her. I was relieved because after almost 40 years we finally had a conversation about her sexuality. I got used to it but sometimes I would get angry, because I just couldn't understand why my sister felt that she couldn't talk to me. I mostly got angry how some of my extended family turned their backs not only on my sister but on my entire family.

During that time homosexuals was taunted, and/or beaten so badly they had to be hospitalized. All this happen to them because of who they choose to love, and this made them a target, and now my sister has that target on her back. I never asked my sister if she experienced any harassment I just assumed that she never did experience any adversity because of her sexuality since she never told any of us whether she had. That fear became a reality during my interview with my sister I found out that she and her friends was attacked. One of the questions I asked her was "Were you ever harassed"? and her response was "Yes, one night me and some of my friends was leaving a gay club on the North side, and a group of white boys start throwing rocks and bottles at us, and calling us names like pussy eaters, dykes, we ran to our car and one of the bottles hit the car window and broke it glass went everywhere I got cut on the arm one girl got a cut above her eye. We went back in the club and called the police when they finally got there they took our statement and left". At this point I felt myself angry and afraid my mind began racing, and the only thing I could ask her was "Why didn't you call us or tell us that this happen to you"? and her reply was "I don't know, Yes I do I didn't think yawl would understand why I would go to a gay club knowing that would put a target on my back".

My personal beliefs, attitudes, experiences, and perceptions have influenced the direction of the study, including the interpretation and analysis of data. The act of writing this

autoethnography allowed me to recognize the importance of reflecting on life events in order to learn how they affected my family and realize how my sister felt by being humiliated and isolated from our immediate and extended family. When you have a homosexual sibling, you watch a lot of emotions unfold such as: pain, anger, resentment, fear, love, confusion, acceptance, doubt, triumph. Some of these messages may have been about ourselves and what we are supposed to or not supposed to be, and one thing you are not supposed to be is gay/lesbian. As a young child, I grew up in a household filled with domestic violence at the hands of my father.

Some might question American culture's classification of a successful family, and the factors that determine a stable family. I escape the thought of IPV, rape, and robberies that my mother endured, allowing myself to believe in a fantasy world of peace. I remind myself daily something my mother would say to me the sun is always shining, and I am never cold. Fantasies like these dwindle as I arrive back to the reality that we live in a world where everyday children are victimized by an act of violence, women flee to live in shelters for safety because their spouse has beaten them, and same sex couples retreat to their closet afraid to ask for help.

### **Current Family Dynamics**

I grew up in a very open-minded, liberal household. I always considered myself an open-minded person. I never knew about my sister sexuality, but when I found out I never felt the need to talk about it. I knew it was different but I just accepted it. I worried about what other people would think about her, but to my surprise she is stronger than I gave her credit for. When people would say horrible things, she would stand strong and go right back at them. Coming out was crucial both for the LGBTQ individual and for my family relationship both internal and external family. My mother knew that we could not let anything break our family bond so she took the lead

to educate herself and us about homosexuality, and the coming out process she made our family much stronger and supportive.

My mother always told us “we are her children and she will always love and support us regardless what we do and who we become”. “We are family united we will stand or divided we will fall never let no one or nothing break that bond”. Those words I lived by then and stand by today as far as support for my sister I treat her as I always have. She has always been the same sister regardless of what her sexual orientation was. I told my sister then that her sexual preference isn’t even the most interesting thing about her, after all I don’t give a damn who you sleep with as long as you are happy!

Until recently my sister’s sexuality rarely comes up as a topic of conversation, because it is not important to me or my other internal family members, she is just our sister, and an aunt. Who she chooses to love does not matter as long as she is safe and happy.

### **Comparing Family to “Coming Out”: The Act of Disclosing**

According to Tony Adams (2014), in a book on critical perspectives using autoethnography, there is a chapter describing experiences people have in coming out and being out with their families. Within this chapter we learn that there are complications when an individual from the LGBTQ+ community decides that they want to come out to their family and friends. Knowing when and how to come out to your family can present challenges. Adams talks about four different instances of individuals that told their family about their sexuality and the challenges that they faced with their families. In the conclusion of each story I talk about whether there are/not similarities between the families of the stories and my family’s relationship with my sister during her coming out process.

**Family 1.** This story is about James who lived as a gay man in Florida with his partner until his partner convinced him to tell his family about his sexuality. 2006 James and his partner traveled to Danville IL to talk with his family when he came out to his parents in 2006, He was told by his father that he was not no longer welcomed to visit his extended family. James distances himself from his parents and his family because he felt unwelcome. Coming out during that time when homosexuality, HIV AND AIDS was misunderstood people treated you like you a disease if you were gay you automatically had aids and you were contagious. The similarities were how people treated her differently. The difference is that my family never made my sister feel unwanted or made her eat from plastic ware or paper plates. The author talks about the coming out process and the struggle is no longer the coming out process it become the struggle of the relationship. The similarities I see how my sister compares to this is after her girlfriend blurted out about my sister's sexuality while we were at a family gathering. There became a strain on their relationship and shortly after that they broke-up.

**Family 2.** The story continues with James and his father. James went to a conference not too far from Danville, James and his father picked him up from his hotel and they went to Hooters restaurant where the women are half dressed. One of the waitress began to flirt with James and his father watch to see what his reaction would be. This made James uncomfortable because he was reluctant to be himself in public with his father, so he did not tell the waitress that he was gay and she made him uncomfortable, because he knew that his father did not approve of his sexuality. James felt if he was with his gay peers he would be more comfortable coming out in public. The similarities for my sister was somewhat the same for she was not always comfortable talking about her sexuality, but today she is very comfortable.

**Family 3.** This story was about a gay couple visiting his mother and his mother said that she wanted to take a family photo but the gay lover could not be in the picture. I don't see any similarities, because my family has never been malicious towards my sister's friends we have always been accepting and open to her friends.

**Family 4.** In this story the mother tells her son how she envies her neighbor because she can spend time with her son wife. The son tells her that she could spend time with his partner her response was no he is not your wife therefore he is not family. The mother continued to disrespect her son by boldly telling him she hates that he is gay and she wish that he was straight, because she wants a daughter-in-law I don't see any similarities, because my mother has never told my sister that she wish that she was not gay. From the beginning my mother has be accepting and loving towards my sister and never once made her feel slighted.

## **Study 2 - Main Findings**

This study was a autoethnography qualitative study. This study was an exploratory interview with one participant the researcher sister. The purpose of this study was to gather information on how family support their LGBTQ. The participant was several sets of questions related to sexual identity, family structure and family support. For example, participant was asked to define her family in her own word. In addition, participant was asked to describe how family members and others (e.g., immediate family and extended family) demonstrated support for her after she told them she was gay.

**Research Question 1:** *What barriers do LGBTQ+ individuals face in seeking support from their family?*

### **Theme 1: Fear Loss of Connection & Sense of Community**

This fist barrier discusses why my sister was afraid that she would become disconnected from the community because she felt that if her sexuality was known she would be isolated from the society she pointed this in the interview when she said:

*“It was in the “70’s”, and being gay was not accepted. Society expects you to be married, have babies, live a certain particular lifestyle and when you buck the norm, you know, it’s difficult. It was difficult for me to accept that I wasn’t going to sit in that bucket, so I had to go through that shit”.*

**Fear sibling feelings.** Coming out takes a lot of courage and finesse. It was difficult for my sister to tell us about her sexuality because of how we were raised. We were taught to believe that homosexuality is too unnatural. It was taught by society that homosexuality is unconventional, unsafe sex, and that homosexuality is the most dangerous to our way of life. Given that we were taught this, I think my sister knew that we would have a hard time accepting her identity and was therefore afraid of how we might feel about her and if we would not allow her to be a part of the family anymore:

*“I did have conversations with them, my family, with my siblings in particular because again I had that concern about they’re not wanting me around their children”*

**Fear family attitudes.** Our family held your typical stereotypes and were prejudiced against homosexuals without even realizing it. We were raised to believe that gay people are mentally ill. She was afraid to tell us because gay individuals at that time were treated brutally and in some cases totally disowned by their families.

*“I did initially because I didn’t know how my family would feel about me being around their children. My siblings how they would feel about me being around their children because of the stereotype out here in the community”.*

### **Lack Minority Representation Within Local Community**

When you belong to two distinctive groups, two marginalized groups, being both Black and Gay, it can be isolating and sometimes lead to traumatizing experiences. My sister falls into both

of these groups and therefore I was scared for her. I saw her with two targets on her back now. She sought support from the broader LGBTQ+ community by connecting to the Center on Halstead here in Chicago but they do not really have many minorities represented:

*“Center Halstead, when they have certain fundraisers, and stuff like that. I really try to go out and support them as well. The human rights committee that campaigned with them, there’s certain events that they do that I will go but I’m really a little leery about them sometimes because they don’t have a lot of minority representation within them.”*

My sister was first hand witness to the ways marginalized minority populations experienced lack of representation and understanding when she was a supporting advocate at the Center on Halsted.

*“Halstead, I think people, in general, feel like they get what they deserve. With those teenagers at that center, a lot of them have been put out of their house because of their sexuality. Some of them have been victimized by the families themselves, within . . . there’s a “can’t be gay” type of thing that’s going on in all the families, especially minority families. If you are, they disown you”.*

## **Theme 2: Feeling Not Understood**

The second barrier to coming out and seeking support from my family described by my sister involved not feeling understood. This manifested in a couple ways: 1) needing time to learn more about herself, and 2) grapple with knowing that our family would not understand putting herself in harm’s way.

**Needed time to learn understanding of self.** I am unsure about how this works but it seems my sister did not fully know that she was a lesbian until much later in life, and even then, there was confusion, so she needed to seek out external support through a therapist to work on figuring this out before she could talk with us about it.

*“I went and I found a gay male therapist, initially and eventually I just transitioned over to a lesbian therapist”.*

**Knew family would not understand putting self in harm's way.** For someone who is from the gay community building community and just having safe spaces to explore their identity can be kind of challenging. Although Chicago has a wide variety of neighborhoods that might be area where gay people gather, but it is not always a safe place to socialize. The stigmatism of being known as a gay area puts a target on your back from being verbally harass and/or physically abused. For my family this fear became a reality.

*" After being attacked I didn't think yawl would understand why I would go to a gay club knowing that would put a target on my back".*

***Research Question 2: How do family members adjust to one of their relatives coming out as a member of the LGBTQ+ community?***

**Family Support: Mixed Reactions from Family – from Sister's perspective**

Families should love you no matter what and not judge you based on your sexual preferences. Even though that's the way it should be, it's not always the way it is. In most families you will all have different opinions, attitudes, and beliefs. My family is an average nuclear black family we all have our own opinions, attitudes and beliefs.

**Siblings Mixed – Some struggled, some accepted**

In the beginning I can say we all struggled with my sister's sexuality. Being uninformed about homosexuality we did not really understand what to expect. My brother at that time was shame that we have someone gay in the family. He felt that his friends would associate with him anymore. I was concerned that the family would be harass and she would get hurt. As time went on and the more informed we became about homosexuality the more accepting the family became of her and her friends. We treat her close gay friends/partners like family. Treat them like anyone



else's partner in life. Even when they are not dating anymore, the friends are still welcome to come around like family. "Yawl embraced me. De & Clf said they knew. They were saying, they were waiting for you to say, my family was basically saying they were waiting on

### **No Connection – Extended Family**

When my extended family found out about my sister's sexuality, they became distant from my entire family. When she would see them at family functions they would make her feel unwanted and uncomfortable. Eventually she stopped attending family gatherings as well as my immediate family. "We grew up in Alabama and the extended family was all close knit when we all moved to Chicago. Homes and meals were shared. When they found out about her sexuality, all that closeness stopped. This impacted everyone from her immediate family. Some family did come around for her mom's funeral recently to share condolences. They have more recently reached out to get more connected".

### **Threat of disownment – Father**

My father, "MY DNA ONLY", he left our family when we were small children. From the time he left us until we were adults we saw only a few times and then it was only for couple hours. I never understood why my sister felt the need to tell him but she did. He refuses to accept her and told her if she was gay she was not welcome in his house anymore. When he got ill 10 yrs. ago he contacted her for help, and she took care of him until his passing. "Dad, I'm gay." Then I saw his face, but what I saw was not an expression of acceptance or love, but a face he hadn't given me before—he looked at me with disgust. "You're confused," he said, before going on to tell me that this was a phase, a mental problem and that I must never speak of it to anyone. Then told me that he would disown me, and I was a disappointment to him".

### **Understanding – Mother**

My mother never once made her feel unwanted or unloved. She would always reassure my sister that she was loved and accepted by her, and nothing would ever change that.

## **Main Themes/Learnings**

### **Family Support**

Families may not know how much their words and actions matter. Many accept and support their children. Some don't know what to say or do. Families have a big impact on all of their children, regardless of their sexual orientation or gender identity.

### **Gay Family Members were disowned historically**

My mother was the oldest of three children she had two brothers both of which preceded her in death. Both of my uncles had a child that is gay. When homosexuality became a part of my family discussion is when both of my cousins came out to the family, and they both was kicked out the house by my uncles neither one of them could come to family functions. I think my sister was afraid to come out because she might be disowned by us as well. After my sister made it known about her sexuality my mother reached out to my cousins and bought them around my family if their fathers were not around.

### **Mother sought understanding and accepting**

From the beginning my mother accepted my sister's sexuality. My mother was the matriarch of our family. My mother knew that we could not let anything break our family bond so she took the lead to educate herself and us about homosexuality, and the coming out process she made our family much stronger and supportive. My mother always told us "we are her children and she will always love and support us regardless what we do and who we become". "We are family united we will stand or divided we will fall never let no one or nothing break that bond".

### **Feelings of disappointment – no American dream**

My sister and I was raised in Rockwell projects in the 60's and 70's. Like most kids raised in the projects, our goal was to get out. But it's not that easy. Growing up in my neighborhood, I've seen dice games. I've seen drugs users. Deals gone bad. People carry beefs that can follow you, even if you move away. It's frustrating. My sister and I would sit up and talk about what profession we would do, and how many children we have. We would talk about how our kids would grow up together, but when she told us that she was gay it became a life-changing experience, I felt as if my dream would never come true.

### **Fear for her safety – double target**

After my sister "came out" to the family, I begin to understand how Important it was to accept her decision, but I still struggle with the fact that she had just put a target on her back. I was comfortable and relieved that nothing had happened to her, until I was not. I found out about a single event where she went to a gay bar with some friends and she became a victim of discrimination and hate crime. She and her friends was attacked verbally and physically leaving a gay bar.

### **Fear bringing bad things for the rest of the family**

My sister was afraid to tell us about her sexuality not only because she was afraid that she would lose our love, but she was afraid of the back lash the family might get from the community.

### **Siblings hurt by the lies**

I would get angry, because I just couldn't understand why my sister felt that she couldn't talk to me. I mostly got angry how some of my extended family turned their backs not only on my sister but on my entire family. I got angry because when she was attacked she felt that she could not come to me and tell us what happened.

## **Additional Findings**

Most families care and is concern for their child. Some families who force their child out of the home usually regret it greatly. They want to help, but they don't have enough information. According to Katz-Wize, (2008) research has shown that just a little bit of education can have a big impact on how families react, and in turn, just a little bit of change within the family can have a huge impact on decreasing risks for the LGBT young person. Clinical case study examining family acceptance of Transgender youth. Family acceptance has serious implications for physical and mental health of Trans youth and family acceptance may be an important protective factor for trans youth health. (Katz-Wize 2008).

In this study interview with my sister we discussed the indirect way of how the family found out about her sexuality and the affect it had on the family to find out from someone else not her. According to Rossi, N.E. (2010) Who conducted a qualitative study found that they would most likely come out to friends first, then mothers, and fathers were usually told about their kid's sexuality by indirect communication. Mothers tended to inquire about their son's sexuality more than their daughters. (NE, 2018). According to Savin-Williams, R., & Dubé, E. (1998). Disclosure may be a direct act of self-revelation or an indirect process such as leaving gay literature where parents can find it or have another gay friend to talk with family. (Savin, et. al 1998). Savin-Williams, R., & Dubé, E. (2003) Discussed the reason participants did not disclose to mothers was because it was not the right developmental time; the reason they did not disclose to fathers was because they were not close to them (Savin, et al 2003).

The coming out process can be hard especially when you don't know how your family will respond to your sexuality. During the interview with my sister we discussed what she perceived the family reactions when she told us she was gay. She told me for the most part everyone

accepted her and did not treat her any different, however my younger brother that is deceased had difficulty accepting her. According to Willoughby, Brian & Laghi, Fiorenzo. (2014) The negative parental reaction to the disclosure of same-sex attraction and the differences between maternal and paternal responses, as reported by their homosexual daughters and sons (Willoughby et al., 2014).

### **Importance of Understanding Family Context**

**Figure7**



Rockwell Garden Projects in 1970's (Where I grew up)

I think back where I came from and where I could of been today and I'm grateful. I could have still been out there in the projects or the streets, because I know a lot of my friends that are still out there. And I'm not better than them. God just made an escape for me. I'm living now, I'm not just existing. My family lived in a housing project called "Rockwell Garden". The first 10 years growing up in Rockwell Gardens was pleasant until right after the Martin Luther King assassination riots in 1968 which destroyed much of the west side of the city, especially my neighborhood. For the next 10 years after that these projects began experiencing early gang activity from the Vice Lords gang and others. By the late 1970s crime and gang activity heavily increased, homeless people sleeping in the stairway or by the elevator lobby because the shelters or

halfway houses they lived in got burned down during the riot, gang members and drug dealers hanging around, and most of them did not actually reside in this complex. Some might ask how could you live like that? My answer being black and poor in the 70's you just didn't have many options, and it was not an option at that time for my family to leave the projects.

Growing up myself and my siblings was taught that sex is strictly between one man and one woman, and that was not to be debated, that was a very black-and-white issue, and to be gay was taboo and was seen as destroying the family, and this was the perspective of most people that lived in the projects. Being black, female, in the projects in the 60's and 70's was not easy, but being black, female and gay put a triple threat on your back. Growing up I witnessed gay and transgender people beaten, urinated on, clothes strip of them all while people watched and stood by and did not help myself included. Growing up with so much hate for homosexuals all around us made it difficult for my sister to let us know about her sexuality. However, my sister from her late teens and early twenties believed that values our mother raised us with didn't align with her sense of who she was. After years of struggling with severe depression, she came to terms with a fact she'd known for some time but was afraid to admit she's gay.

For me I believed that my sister felt that it became a matter of life and death because from my conversation with her she explained to me how she spiraled into such a deep dark place of low self-esteem. Our mother, who was our family back bone sat us down after my sister came out to the family, she said "When you're taught to kind of hate that group of people and then that group of people becomes you, then you start to hate yourself and I don't want none of my children feel hate for themselves or no one else". For me it was important to be able to reconcile my support for my sister sexuality both theologically and personally for my mind to be able to wrap around and

then also just for my heart to be able to understand that it was going to be possible for her to live a happy fulfilling life in the future.

### **Family Timeline**

Family history is very important to an individual. By knowing where you come from, you can have a better perspective of your life. Having a clear understanding of your family background allows you to better appreciate the things that you would normally take for granted. I developed a family timeline to give a deeper insight of my family history. My family timeline for me is with my birth in Nuremberg Germany, and it ends with my family life today. My family moved to Chicago in 1958 this is the year my younger sister was born. We lived in a house on Westside of the city during that particular time the Westside was considered elite part of the city. We lived there until my parents' divorce in 1960. When my father left my mother she was unemployed with no income and she could not afford the house we lived in so we moved to the housing projects.

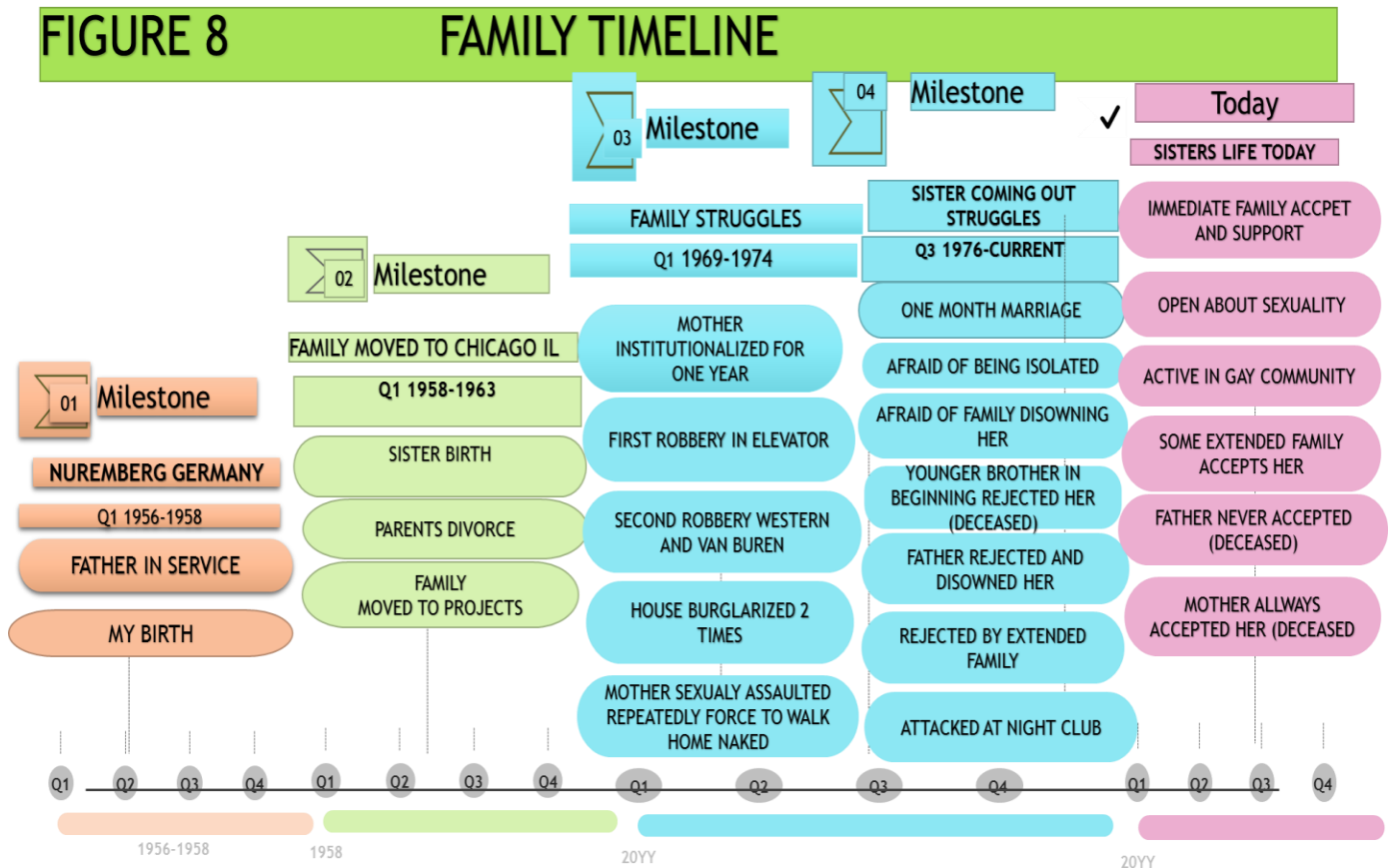
We lived in the housing projects until 1976, but while we lived their family endured struggle after struggle, challenges after challenges, such as my mother struggle with depression and being hospitalized for a year, rape victim, rob at gun point, house burglarized. The challenges my family faced was with my sister struggle with her sexuality, her being isolated by extended family and friends, and my bother difficulty accepting her. Today my family we still struggle, not with my sister's sexuality because she is very open about her sexuality, but with the death of my younger brother and my mother. My father is no longer with us but I don't struggle with his death sometimes I think about him not often.

I remember when I was in high school I had an English teacher that loved Henry David Thoreau. Every day she would start the class with a quote from Thoreau. I found myself thinking

about Thoreau quote as I was creating my family timeline. Thoreau wrote “Where I Lived, and What I Lived For”

“I wished to live deliberately, to front only the essential facts of life' and see if I could not learn what it had to teach, and not, when I came to die' discover that I had not lived. I did not wish to live what was not lie, living is so dear; nor did I wish to practice resignation, unless it was quite necessary”. (Prometheus Unbound, 2014)

I think of my mother and the strength she had through all the struggles and challenges she faced she never gave up nor did she surrender. Thoreau stresses the importance and value of living the simplest life nature affords, which I believe is as important now as it was in his day. I developed a timeline detailing my families milestones from my birth to my life today see figure 8 below.





### **Intersectionality Theory**

Intersectionality recognizes that identity markers (e.g. “female” and “black”) do not exist independently of each other, and that each informs the others, often creating a complex convergence of oppression. Intersectionality theory contributes to our understandings of sexuality in that it can be used to bridge two seemingly disparate approaches to understandings of sexuality: those that take a foundational approach, framing sexuality and gender – or other forces, such as the material – as fundamental to the ways in which individual and social identities are shaped, and those that seek to deconstruct foundational categories (Monro, 2010).

According to Brown (2011), coming out of the closet and sharing a disclosure narrative is considered an essential act to becoming gay. For my sister her coming out experience was difficult. She stated that she was stressed, because she feared that she would be isolated and rejected by the family. Brown states in the 90’s coming out of the closet was less difficult due to homosexuality becoming normalized (Brown 2011). Although my sister had her struggles with her sexuality in the beginning I believe how evolved and acceptance society has become about homosexuality has given my sister the courage to be comfortable and open about her sexuality.

In light of such arguments, this dissertation research was constructed to explore coming out experiences, and we have learned from this mixed-methods study that there is a lot of fear associated with coming out as part of the LGBTQ+ community. Even more so for people who have social identities that span across multiple oppressed social groups, such as being a black woman from a lower socioeconomic class. These findings are consistent with what we know from the research of Kinberle Crenshaw (1989; 1995), who found that “intersectionality exposes how privilege functions as a dimension to coming out stories, leading to marginalization and oppression amongst already discriminated identities.” In sum, while the experience of coming out as LGBTQ+

member as a white male might not have such high level of fears associated with it, the experience is quite different for a black woman from the housing projects of Chicago because she does not have the privileges provided by other non-oppressed statuses.

This study is a contribution to the literature because this is the only autoethnography study conducted to understand the coming out process and level of family acceptance experienced by an African-American family. There are similar studies that was conducted with other nationalities and whether or not if the families support their gay family member. According to Bic Ngo, Sarah Hansen, Silvy Un. (2015), qualitative interviews were conducted with two queer Hmong immigrant youth to explored the experiences of how their family provided care, support, and acceptance. This country offers an alternative to discourses of family rejection. Not all people are against being gay but it can put the family in harm's way if they come out to the family so they use a different service for coming out. (Bic Ngo et. al 2015). According to Nguyen, T. Q., Bandeen-Roche, K., German, D., Nguyen, N. T. T., Bass, J. K., & Knowlton, A. R. (2016), a qualitative study with SMW in Ha Noi Vietnam from 2009 highlighted significant challenges in SMW's relationships with their parents. Most respondents reported concealing their same-sex relationships from their families to protect themselves from rejection and to protect their families from pain and suffering (Nguyen et al 2016), and According to Campaign, H. (2018), Latino men reported the highest number of negative family reactions to their sexual orientation in adolescence (Campaign 2018).

### **Main Findings Summarized**

Families play a key, supportive role in the lives of many lesbian and gay adults. Yet Families are rarely considered in the literature regarding the coming-out process. Families can have mix reactions to their relative coming out, but overall reactions were mostly positive, with

families making sure that their family member knew that they still loved them. Even those families who really struggled to come to terms with the fact that their child was gay made sure to tell their child that they loved them. There are difficulties and struggles with families coping with the homosexuality of their family member such as concerned for their safety, if they would be ok. A big issue for some people can be letting go of their ideas of who that family member was and how their life would be, for example letting go of the idea that they would get married and have children.

According to Ilga-europe.org, (2009) Family members stressed the need for a variety of supports to meet the varying needs of family members. These included support groups, confidential phone lines and internet information. This would enable people to access services without having to meet someone if they didn't feel ready for that, while providing opportunities to meet others in similar situations for those who were ready to do so. Family members also stressed the need for age appropriate supports, particularly for the children of lesbians and gay men. This will require states to not just incorporate their needs into the planning process but also to take specific action through inclusive approaches. This will require the appropriate governing agencies to network community organizations to identify local agencies and community-based needs to identify members of populations and their specific needs; and formally networking with other states and localities to share information and model policies. Using these approaches will likely increase states' success in serving these socially isolated communities and their families, and the federal government should support their adoption (Ilga-europe.org, 2009).

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## APPENDIX A

### DOCUMENTATION OF INFORMED CONSENT

#### **Understanding LGBTQ+ Intimate Partner Violence & Needs Within the Near West Side of Chicago**

Participant ID# \_\_\_\_\_

**Purpose of the Study** - You are being asked to participate in a research study. The study is titled Understanding LGBTQ+ Intimate Partner Violence & Needs Within the Near West Side of Chicago. The purpose of the study is the purpose of this study is to determine how residents on the West Side of Chicago experience a sense of community and perceive Intimate Partner Violence (IPV).

**The Interview Process** - With your consent, you will participate in a 11-question interview lasting approximately 30-45 minutes in duration. For your records you will be provided a copy of your signed consent form. Participants identified to complete the 30-minute interview will receive a 10-dollar gift card. Your participation is voluntary, and you may discontinue your participation at any time without penalty.

**Use of Participant Data** - The data from this study will be used for an independent research project and only I and my advisors will be analyzing and discussing the findings of this research. It is possible that the findings may be published, and in that case, I will ensure that the data will be discussed in an anonymous way so that no one individual can be identified.

**Protection of Data & Ensuring Confidentiality** - Upon completion of the interview, the recorded video will be stored in the video recorder for no more than 24 hours. In the allotted time, the video will be transferred from the video recorder to a personal laptop, which is password protected where I only have the password. The data will remain on a personal laptop for the duration of the study. The recordings will be transcribed and cleaned for any personal identifying information (e.g., names, addresses) and provided an accompanying participant ID number. Personal identifying information will be stored with the assigned ID number in a separate excel file so the primary investigator may identify the participant but that will be unidentifiable to others. Therefore, transcribed data will not be identifiable to anyone in the case that the security of my personal computer is breached. These interview data will be stored for 3 years as I proceed to write up and possibly publish these findings.

**Potential Risks & Benefits** - Participating in this study is anticipated to have low-minimal risk. The probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life. The researcher does consider it important to note that participants may experience some discomfort or emotional strain as they talk about being in/ aware of LGBTQ+ IPV relationship.

There are no direct benefits to you from participation in this study, but your thoughts and statements will contribute to the base of knowledge gathered about LGBTQ+ individuals and your specific experiences. Your thoughts may also provide information helpful in creating support services and improving upon services that currently exist. Socially, you may feel uncomfortable by reflecting and answering questions about your knowledge and/or lived experiences in a IVP relationship, and you may feel discomfort reflecting on the challenges in your community. It is also possible you may feel good about reflecting on LGBTQ+ community. you are likely to not have any direct benefit from being in this research study, your taking part in this study may contribute to our better understanding of how to establish better resources for the LGBTQ+ community. Please remember you may choose to withdraw from this study at any time.

In the event you have questions or require additional information you may contact the researcher:

Juanita Yates, National-Louis University, 122 S. Michigan Chicago IL.60603 (773)-494-9517

If you believe that answering any questions is harming you, you may stop at any point. If you have any concerns or questions before or during participation that you feel I have not addressed, you may contact my Primary Advisor and Thesis/Dissertation Chair: Dr. Tiffeny Jimenez, National Louis University, 122 South Michigan, Chicago, Illinois, 60603. Email address: [tiffeny.jimenez@nl.edu](mailto:tiffeny.jimenez@nl.edu)

If you have any questions or concerns about this study that you would like to ask of the university, you may contact the chair of NLU's Institutional Research Review Board is Shaunti Knauth, Ph.D., National Louis University, 122 South Michigan Avenue, Chicago, Illinois 60603; Phone: 312.261.3526 Email: [shaunti.knauth@nl.edu](mailto:shaunti.knauth@nl.edu).

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Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Researcher's Signature \_\_\_\_\_ Date \_\_\_\_\_

## **Appendix B**

### **Study 2**

#### **Interview Protocol**

#### **Understanding the construction of real or perceived barriers to family support by LGBTQ+ persons.**

1. Can you tell me the story of when your first began to realize you might be gay?
2. Do you remember what your thoughts were about how the family would feel about your new discover?
3. Did you ever want to talk to the family at that time about your sexuality? Why?
4. Talk about what you saw and heard during that time which influenced the what you thought your family might think about what you were learning about yourself.
5. Tell me the story of your coming out to your family
6. Was there a sense of relief or fear, once your sexual identity was revealed?
7. How did the family handle it?
8. What did the family do, say, or imply, when you came out?
9. How open are you about your sexual orientation/gender identity? At work? At home? With new acquaintances?
10. How has your sexual orientation/gender identity affected your relationship with your family
11. Do you have support from your family?
12. Did you have concerns about coming out to your family?
9. Are you still part of the family? Are you welcome in the family? (immediate and extended family)

10. What is your relationship like with your family? (immediate and extended family)
11. Does your family welcome your partner(s)? (immediate and extended family)
- 12.) Have your partners been accepting of your family?
12. How are you involved in the lesbian, gay, bi, trans, (LGBT) communities? If yes what activities are you involved with
15. Did you utilize counseling to help you understand your sexuality?
16. What, if any, influences did the gay community have, which in hindsight may have prevented you from informing your family about your sexuality?
17. A good portion of your life was lived as a heterosexual woman. What role did the homosexual community play in your coming to clarity about your identity.
18. Do you feel passionate about LGBTQ rights? If so, how and when did that passion emerge?

## Appendix C

### Participants Research Questions

- I am intrigued by interviewing you due to your relationship with the LGBTQ+ community. I need to comprehend your background and/or your relationship with the person from that community, adapting practices. Much of the focus of the interview is on: 1.) your personal story as its' relates to being homosexual or your relationship with the community, 2.) your family relationship with your sexuality.
- I need you will contemplate your life as if it might have been a book or a play, holding chapters, scenes, fundamental characters. I will need you to concentrate on intricate parts of your story. For instances, I will ask something like secondary points, low points, what's more turning focuses on the abuse (only if it applies).

*Before we started do you have any questions?*

Survey Protocol for person who is aware of friend or family member that has experienced IPV:

You have decided to participate in this study because you are aware that a friend or family member has experienced some type of intimate partner violence. Thank you for taking the time to complete this survey about your experiences. For this study, intimate partner violence refers to being controlled either, physically, financially, or verbally by your intimate partner.

1. Are you aware how your friend or family member identify themselves within the LGBT Community?
  - a. Lesbian
  - b. Gay
  - c. Transgender
  - d. Bisexual
2. What is your friend or family member ethnicity?
  - a. White
  - b. African American
  - c. Hispanic

- d. Asian
- e. Other\_\_\_\_\_

3. Are you aware how your friend or family member identify their gender?

- a. Male
- b. Female
- c. Androgynous
- d. Trans M to F
- e. Trans F to M

4. Are you aware of your friend or family member level of education?

- a. High School Diploma
- b. Some College
- c. College degree
- d. Graduate Degree
- e Other: \_\_\_\_\_

5. Are you aware of your friend or family member's household income?

- a. Under \$20,000
- b. \$20,000 - \$30,000
- c. \$30,000-\$40,000
- d. \$40,000-\$50,000
- e. \$50,000-\$60,000
- f. \$60,000-\$70,000
- g. Over \$70,000

6. To what extent do you agree that your friend or family member's sexual orientation or gender identity prevent them from seeking help?

- a. Strongly agree (5)
- b. Agree (4)
- c. Not Sure (3)
- d. Disagree (2)

- e. Strongly disagree (1)
7. To what extent do you agree that your friend or family member will not seek help because they are afraid that their financial situation might be affected by their partner?
- a. Strongly agree (5)
  - b. Agree (4)
  - c. Not Sure (3)
  - d. Disagree (2)
  - e. Strongly disagree (1)
8. To what extent do you agree that your friend or family member will not seek help because they are afraid of being alienated and/or isolated from the LGBT community, because their partner is established in the LGBT community.
- a. Strongly agree (5)
  - b. Agree (4)
  - c. Not Sure (3)
  - d. Disagree (2)
  - e. Strongly disagree (1)
9. To what extent do you agree that your friend or family member will not seek help because they are afraid if they report the abuse they will bring negative attention/stigmatism to the LGBT community.
- a. Strongly agree (5)
  - b. Agree (4)
  - c. Not Sure (3)
  - d. Disagree (2)
  - e. Strongly disagree (1)
10. To what extent do you agree that your friend or family member will not seek help because they are afraid they will lose custody of their children? (answer only if you aware they have children. If no, please go to next question)
- a. Strongly agree (5)
  - b. Agree (4)
  - c. Not Sure (3)



- d. Disagree (2)
- e. Strongly disagree (1)

11. To what extent do you agree that your friend or family member will not seek help because they are afraid of being faced with homophobia from non-LGBT survivors of Intimate Partner Violence (IPV) who might otherwise provide empathy and assistance to me.

- a. Strongly agree (5)
- b. Agree (4)
- c. Not Sure (3)
- d. Disagree (2)
- e. Strongly disagree (1)

12. To what extent do you agree that your friend or family member will not seek help because they are afraid of being “outed” to other family, friends.

- a. Strongly agree (5)
- b. Agree (4)
- c. Not Sure (3)
- d. Disagree (2)
- e. Strongly disagree (1)

13. To what extent do you agree that your friend or family member will not seek help because I am afraid of being fired by my employer.

- a. Strongly agree (5)
- b. Agree (4)
- c. Not Sure (3)
- d. Disagree (2)
- e. Strongly disagree (1)

14. To what extent are you aware that your friend or family member feel they worthy of healthy intimate relationship.

- a. Very aware (5)
- b. Aware (4)

- c. Not sure (3)
- d. Somewhat aware (2)
- e. Not aware (1)

15. To what extent are you aware of what an Intimate Partner Violence (IPV) relationship is?

- a. Very aware (5)
- b. Aware (4)
- c. Not sure (3)
- d. Somewhat aware (2)
- e. Not aware (1)

16. Which of the following would you agree that your friend or family member would consider to be identified as being in an abusive relationship? (Check all that apply)

- a. Physical abuse
- b. Verbal abuse
- c. Financial abuse
- d. Controlling Partner
- e. Forced sex by partner

17. To what extent are you aware if your friend or family member know where they need to go to seek assistance for problems they experienced in their relationship.

- a. Very aware (5)
- b. Aware (4)
- c. Not sure (3)
- d. Somewhat aware (2)
- e. Not aware (1)

18. To what extent would you agree that your friend or family member know that there are adequate resources available to them when they have issues in their relationship.

- a. Strongly agree (5)
- b. Agree (4)
- c. Not Sure (3)
- d. Disagree (2)
- e. Strongly disagree (1)

19. To what extent would you agree that your friend or family member feels that Social Service Agencies in their community will not help LGBT individuals that request help for relationship issues.
- Strongly agree (5)
  - Agree (4)
  - Not Sure (3)
  - Disagree (2)
  - Strongly disagree (1)
20. To what extent would you agree that your friend or family member feels that Health Care Agencies in their community will not help LGBT individuals that request help for relationship issues.
- Strongly agree (5)
  - Agree (4)
  - Not Sure (3)
  - Disagree (2)
  - Strongly disagree (1)
21. To what extent would you agree that your friend or family member feels that Religious Institutions in their community will not help LGBT individuals that request help for relationship issues.
- Strongly agree (5)
  - Agree (4)
  - Not Sure (3)
  - Disagree (2)
  - Strongly disagree (1)
22. To what extent would you agree that your friend or other family members feels that their family will extend help to them with issues that they are having in their relationship.
- Strongly agree (5)
  - Agree (4)
  - Not Sure (3)
  - Disagree (2)
  - Strongly disagree (1)

23. To what extent would you agree that your friend or family member would not seek help because they are afraid that they will be ostracized from their community, family, and friends.
- Strongly agree (5)
  - Agree (4)
  - Not Sure (3)
  - Disagree (2)
  - Strongly disagree (1)
24. To what extent would you agree that your friend or family member is afraid to seek help, because they were told by another; friend, family member or community member that abusive behavior is a normal part of LGBT relationships.
- Strongly agree (5)
  - Agree (4)
  - Not Sure (3)
  - Disagree (2)
  - Strongly disagree (1)
25. To what extent would you agree that your friend or family member is afraid to seek help, because they were told by another; friend, family member or community member that the violence in their relationship is not considered domestic violence.
- Strongly agree (5)
  - Agree (4)
  - Not Sure (3)
  - Disagree (2)
  - Strongly disagree
26. To what extent would you agree that your friend or family member is afraid to seek help, because they were told by another; friend, family member or community member that because they are either: lesbian, gay, bisexual or transgender, and for that reason they deserve the abuse.
- Strongly agree (5)
  - Agree (4)

- c. Not Sure (3)
- d. Disagree (2)
- e. Strongly disagree (1)

27. To what extent do agree that your friend or family member would not likely seek help from the police, because they are afraid that they will be judged because of their sexuality?

- a. Strongly agree (5)
- b. Agree (4)
- c. Not Sure (3)
- d. Disagree (2)
- e. Strongly disagree (1)

28. To what extent do you agree that your friend or family member would not likely seek help because they are afraid that they will be harassed by law enforcement.

- a. Strongly agree (5)
- b. Agree (4)
- c. Not Sure (3)
- d. Disagree (2)
- e. Strongly disagree (1)

Juanita Yates

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Survey questions were developed from the article Ard, K. L., & Makadon, H. J. (2011). Addressing Intimate Partner Violence in Lesbian, Gay, Bisexual, and Transgender Patients. *Journal of General Internal Medicine*, 26(8), 930–933. <http://doi.org/10.1007/s11606-011-1697>

## Appendix D

### Recruitment Flyers for Research Participants

#### Understanding LGBTQ+ Intimate Partner Violence & Needs Within the Near West Side of Chicago



IDENTIFYING AND RESPONDING

TO

INTIMATE PARTNER ABUSE

HAVE YOU?

ARE YOU?

DO YOU KNOW SOME ONE THAT IS?

IN A LGBTQ+ IVP RELATIONSHIP

I am seeking individuals to participate in a 30-45 minute CONFIDENTIAL interview about IPV in the LGBTQ+community. Participant must be 18 years or older. For more information please contact:

Juanita Yates @ 773-494-9517

[jyjuanita@gmail.com](mailto:jyjuanita@gmail.com)

**Appendix E**  
**Face Book Participants Recruitment**  
**Understanding LGBTQ+ Intimate Partner Violence & Needs Within the Near West Side of**  
**Chicago**

My name is Juanita. I am a doctoral candidate in the Community Psychology Department at National Louis University. I am conducting a research study as part of the requirement of my degree in Community Psychology, and I would like to invite you to participate.

I am studying Intimate Partner Violence (IVP) in the LGBTQ+ community. If you decide to participate, you will be asked to describe your personal with IVP, or if have firsthand knowledge of someone who is/was in a IVP relationship. You can meet with me for an interview about or complete questions on-line and return to me at email address at the bottom of questionnaire.

The meeting will take place at a location we mutually agreed upon time and place, and should last about 30-45 minutes. The interview will be videotaped so that I can accurately reflect on what is discussed. The tapes will only be reviewed by myself only and I will transcribe and analyze them. They will then be destroyed.

You may feel uncomfortable answering some of the questions. You do not have to answer any questions that you do not wish to. Although you probably won't benefit directly from participating in this study, we hope that others in the community/society in general will benefit from your participation. Participation is confidential. Study information will be kept in a secure location. The results of the study may be published or presented at professional meetings, but your identity will not be revealed. Participation is anonymous, which means that no one (not even the research team) will know what your answers are. So, please do not write your name or other identifying information on any of the study materials.

Taking part in the study is your decision. You do not have to be in this study if you do not want to. You may also quit being in the study at any time or decide not to answer any question you are not comfortable answering. I will be happy to answer any questions you have about the study.

You may contact me at;

Juanita Yates

jyjuanita@gmail.com.





