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ASSOCIATIONS BETWEEN IDENTITY AND FUTURE PARENTHOOD AMONG LGBTQ+ ASIAN/PACIFIC ISLANDER AMERICANS

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ASSOCIATIONS BETWEEN IDENTITY AND FUTURE PARENTHOOD AMONG
LGBTQ+ ASIAN/PACIFIC ISLANDER AMERICANS

DISSERTATION

A dissertation submitted in partial fulfillment of the
requirements for the degree of Doctor of Philosophy in the
College of Arts and Sciences
at the University of Kentucky

By
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Lexington, Kentucky
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2021

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ABSTRACT OF DISSERTATION

ASSOCIATIONS BETWEEN IDENTITY AND FUTURE PARENTHOOD AMONG LGBTQ+ ASIAN/PACIFIC ISLANDER AMERICANS

In recent years, the number of lesbian, gay, bisexual, transgender, and queer (and additional identities; LGBTQ+) identified people and the number of Asian Pacific Islander Americans (APIA) have been increasing in the United States (Movement Advancement Project 2019; Newport, 2018). As the individuals in these demographic groups develop over their lifespan, many will become parents and form families, but little work is currently available on the experiences of LGBTQ+ APIA individuals and future parenthood. Here, I report findings on the perceptions and importance of future parenthood, identity development, identity integration, and microaggressions and/or discrimination (as they relate to racial-ethnic and sexual identity) across three samples: LGBTQ+ APIA, LGBTQ+ White, and cisgender heterosexual people. Taking an intersectional, quantitative approach, I found that broadly, (racial-ethnic and sexual) identity development and integration, as well as experiences of microaggressions or discrimination, were not associated with perceptions and importance of future parenthood among LGBTQ+ APIA individuals. However, there were mixed findings such that racial-ethnic identity development and perceived racial-ethnic discrimination were associated with perceptions and importance of future parenthood, but only among LGBTQ+ White adults. Race-specific microaggressions against APIA were also associated with parenting intentions among cisgender heterosexual APIA people. How these findings can contribute to the foundation of literature on the experiences of LGBTQ+ APIA families and future parenthood is discussed.

KEYWORDS: LGBTQ+ future parenthood, Asian/Pacific Islander parenthood, Identity development, intersectionality

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ASSOCIATIONS BETWEEN IDENTITY AND FUTURE PARENTHOOD AMONG
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INTRODUCTION

Many individuals in the United States (U.S.) believe that becoming a parent is an integral part of what it means to be an adult independent of identities such as race-ethnicity or sexual orientation (Riskind & Patterson, 2010) and is a highly valued milestone of adulthood (Hammack & Toolis, 2014). As our cultural understanding of what constitutes a family has expanded (Smock & Schwartz, 2020) and advancements in family policy (e.g., adoption law; Farr & Goldberg, 2018) and assisted reproductive technologies (ART; Rafferty, 2019) have occurred, we have also seen increases in the number of families diverse in pathways to parenthood, racial-ethnic make-up, and headed by LGBTQ+ parents (Reczek, 2020; Smock & Schwartz, 2020). One way in which researchers and policymakers can gain a better understanding of the changing nature of what it means to be a family, and what a family “looks like,” is to study diverse groups of individuals who want to become parents in the future. In this way, we can begin to understand the development and formation of the next generation of families.

One group of individuals who are in need of study is LGBTQ+ Asian/Pacific Islander Americans (APIA)¹, given the rising numbers of LGBTQ+ and APIA individuals in the U.S. (Newport, 2018). To date, no research has investigated how LGBTQ+ APIA individuals think about future parenthood. This is concerning given that the numbers of LGBTQ+ APIA individuals will only continue to grow, and in turn, form families that may be underserved. Below I detail the demographic context of LGBTQ+, APIA, and LGBTQ+ APIA people, with and without children, and break down some of

¹ In the context of this manuscript, APIA indicates API individuals who are living in the United States regardless of citizenship or immigration status as has been done in previous demographic research with APIA people (Pew Research Center, 2013).

the unique experiences of these distinct groups, such as perceptions of future parenthood. Given that little research is present on the experiences of LGBTQ+ APIA people broadly, and in the family sciences, the literature review is structured to first present information on LGBTQ+ people, then APIA people, and then LGBTQ+ APIA people. The goal of this study is to provide foundational research on perceptions of future parenthood and identity development among LGBTQ+ APIA individuals that may help to inform law and policy decisions as they relate to race, sexuality, and families. I do this through a comparative approach in the literature review and research design (i.e., considering LGBTQ+ White, cisgender heterosexual APIA, and LGBTQ+ APIA samples) to show how intersections of identities may be associated with perceptions and importance of future parenthood.

LGBTQ+ People, APIA, and LGBTQ+ APIA as Individuals, in Couples, and in Families

LGBTQ+ and APIA individuals in the U.S. are fast growing demographic groups with millions of people holding at least one, or potentially both, of these identities. In the past decade, the number of LGBT²-identifying adults grew from 3.5% to 5.6% of the population (18 million), indicating that the number of LGBT adults likely will continue to increase (Jones, 2012; Newport, 2018). Among adults, there are more than 600,000 same-sex couples living in the same households in the U.S. (LGBT Demographic Data Interactive, 2019). Same-sex couples are also twice as likely to be in an interracial

² Throughout the manuscript, I switch between LGBTQ+, LGBT, and same-sex (couples) to reflect the research cited. I also do this in discussing APIA research, which may describe individuals as API or API(A). When broadly discussing the experiences of people, however, I use LGBTQ+ and APIA to focus on my target populations.

relationship than different-sex couples (Kastanis & Wilson, 2014), painting a complex picture of the diversity among LGBTQ+ communities at the intersection of sexuality and race. LGBT-parent families are also gaining increased visibility in the U.S. (Reczek, 2020). For example, same-sex parents are raising 220,000 children (under age 18) and at least 6 million adults in the U.S. report having an LGBT parent (Gates, 2014).

In the context of race, almost 5.8% of adults in the U.S. are of API³ descent (approximately 18 million; Pew Research Center, 2013). U.S. Census estimates suggest that the number of single- and multiracial APIA (e.g., White and APIA) individuals grew by more than 40% (compared to the population average of 10%; Hoeffel et al., 2012), indicating a substantial increase in the number of APIA individuals. However, estimating the total number of APIA parents in the U.S. has been difficult; no clear estimate exists (Pew Research Center, 2013). U.S. Census data on children's living arrangements suggest approximately 7 million households are headed by at least one API adult. Of these households, 35.4% report having at least one child in the household (U.S. Census Bureau, 2019)⁴. Thus, at least one-third of single-race API-headed households in the U.S. include children under age 18.

Regarding LGBTQ+ APIA individuals, estimates suggest at least 300,000 LGBTQ+ API adults live in the U.S., of these 300,000 LGBTQ+ API individuals, 10%

³ Asian as categorized by the U.S. Census includes those whose origin is in Southeast Asian, the Indian subcontinent, and the Far East which include Cambodian, Chinese, Japanese, Indian, Korean, Malaysian, Pakistani, Filipino, Thai, and Vietnamese, with "other Asian" as the final category (or a write-in response).

⁴ These estimates do not include children without a biological or legal connection to the householder (e.g., children in the home who have not been legally adopted) as well as children in households headed by same-sex couples regardless of marital status. Multiracial individuals not solely of API descent were not reported in these materials.

are in same-sex relationships (Kastanis & Wilson, 2014). In the context of parenthood, 25% of LGBT-identified APIA adults are raising children under age 18, higher than the proportion of White LGBT parents (21%) but noticeably lower than Latino/a (39%) and Black (34%) LGBT parents (LGBT Demographic Data Interactive, 2019).

Desires and Intentions of Future Parenthood

Although little research has explored how LGBTQ+ APIA individuals think about future parenthood, particularly their desires and intentions (or lack thereof) to become parents, research has investigated how LGBTQ+ *or* API(A) individuals think about future parenthood. Nationally representative survey research has found that LG individuals report lower desires and intentions compared to heterosexual individuals (Riskind & Patterson, 2010) with bisexual individuals showing mixed results (i.e., bisexual individuals show higher levels of desires and intentions if they had a different-sex partner and lower levels if they had a same-sex partner) as compared to either LG or heterosexual individuals (Tornello & Riskind, 2017). These lower levels of desires and intentions compared to heterosexual individuals may be due to the internalized belief that LGBTQ+ individuals should not become parents (Vaccaro, 2010), limited access to adoption and/or ART (Baiocco & Laghi, 2013) or a lack of support from biological family (as compared to cisgender heterosexual individuals) to become a parent (Gato et al., 2017). Desires and intentions of future parenthood among transgender individuals may also be compounded by considerations of hormone replacement therapy and potential experiences of gender dysphoria throughout the parenthood process (Tornello et al., 2019).

Among APIA individuals, while substantial research has been conducted on parenting styles and familial relationships, less work has focused on perceptions of future parenthood (e.g., desires and intentions; Juang et al., 2013). At the same time, aspects of familial obligation and patrilineal lineage are likely to shape perceptions of future parenthood among APIA people to a greater extent compared to other racial-ethnic groups (Huang et al., 2020). Unfortunately, no published work has reported on the desires and intentions of future parenthood among APIA individuals and what pathways to parenthood may be preferred.

Pathways to parenthood. Fortunately, there is substantial work on the experiences of LG/same-sex parent families (Farr et al., 2017; Reczek, 2020), and although less work has focused on bisexual, transgender, and queer parents (Brainer et al., 2020; Tornello et al., 2019), growing research among all LGBTQ+-parent families and those who wish to become parents provide a direction forward in LGBTQ+ family research. This foundation of literature does not seem to be present among APIA people and what work that has been done in contexts such as ART has revealed unfortunate racial-ethnic disparities (e.g., lower birth rates among APIA compared to White individuals; Lamb et al., 2009).

In the context of adoption, many LGBTQ+ individuals report fearing and experiencing discrimination as part of the family planning process such as adoption laws barring same-sex couples from adopting (Farr & Goldberg, 2018). This unduly burdens LGBTQ+ potential parents and may reduce the number of LGBTQ+ adoptive parents. For APIA individuals who may want to adopt a child of the same race or ethnicity, domestic adoption may not be an option (Zill & Bramlett, 2014). Recent findings suggest

that of the 440,000 youth currently in foster care, 2,112 (0.005%) of the youth are APIA, which is substantially lower than the number of White (44%), Black (23%), and Hispanic (21%) youth in foster care (AFCARS, 2019)⁵. Given the emphasis on biological lineage in API culture (Huang et al., 2020), adoption may also be highly stigmatized to APIA people (although research has yet to explore this directly; Chan et al., 2015). Thus, the combination of different challenges regarding pathways to parenthood may be greater, or more frequent, among LGBTQ+ APIA individuals compared to non-APIA LGBTQ+ individuals.

Identity Development

The development of one's identity is a dynamic process that includes a number of important milestones (e.g., becoming a parent; Hammack & Toolis, 2014) and cultural beliefs associated with specific identities of the dominant culture (e.g., all LGBTQ+ individuals experience same-gender attraction early in life; McClelland et al., 2016). Unfortunately, individuals also contend with stereotypes associated with their developing identity, which may in turn be linked with negative outcomes (Ocampo, 2016). At the same time, developing a positive identity can promote positive outcomes (e.g., developing unique coping strategies; Sung et al., 2015) and protect against negative outcomes (e.g., reducing internalized homophobia; Hammack, 2018). Thus, investigation of stereotypes and positive identity development serve as ways to inform future research, practitioners, intervention development, and law and policy (e.g., uplifting LGBTQ+

⁵ It is relevant to note that underrepresentation in the foster care system should not be interpreted as a negative outcome.

APIA voices also can make clear where disparities exist and highlight difficulties that this group may experience).

LGBTQ+ APIA stereotypes and microaggressions. The intersection of sexuality and racial-ethnic identity is particularly complicated among LGBTQ+ APIA individuals, such as the stereotype of being a perpetual foreigner (Wong-Padoongpatt et al., 2017) that is qualified by other identities. Research suggests that emerging adults perceive gay APIA individuals as “less foreign” than APIA individuals without a specified sexual identity (i.e., assumed to be heterosexual), and regardless of the gender of the perceived individual or participant (Semrow et al., 2020). One potential explanation is that the term “gay” is westernized, and as a result, the perpetual foreigner stereotype is less applicable. Thus, Semrow et al.’s (2020) study highlights how the intersection of identities can lead to findings distinct from those considering the LGBTQ+ or APIA communities more exclusively.

API(A) individuals also face de-sexualization and/or fetishization in the U.S. (Ching et al., 2018). Given the stereotype of LGBTQ+ people as hypersexual, how these stereotypes intersect among LGBTQ+ APIA people are still not well understood (Chan, 2017; Patel, 2019). However, research has made clear that LGBTQ+ APIA individuals also face microaggressions based on racial-ethnic and sexual/gender identity, such as frequent statements of “no fats, no femmes, no Asians” when potential partners (especially White cisgender gay men) note their dating preferences (Eguchi & Long, 2019; Poon & Ho, 2008). Further, LGBTQ+ APIA individuals also report experiencing a greater frequency of racial-ethnic microaggressions from romantic and sexual partners compared to Black and Latino/a LGBTQ+ individuals (LGBTQ+ White individuals were

not included in this study; Balsam et al., 2011). Thus, LGBTQ+ APIA individuals may have to navigate experiences of unique stereotyping (e.g., “more American” because they are gay; Semrow et al., 2020) and microaggressions from potential (or current) romantic/sexual partners (Balsam et al., 2011) in addition to others in their life.

Positive identity development as a protective factor. As individuals explore their developing identities, they navigate master narratives (i.e., the dominant discourse associated with an identity) and alternative narratives (i.e., those that push back against master narratives; Hammack & Toolis, 2015). This process, also referred to as narrative engagement, is an integral part of identity development (McLean et al., 2017). For example, rejecting the master narratives of cis- and heteronormativity by resisting beliefs about what makes an individual’s identity “legitimate” (e.g., beliefs that only those who want to transition are transgender; Bradford & Syed, 2019) can be a characteristic of positive identity development.

Learning how to present oneself in different contexts is one of many products of identity development throughout the lifespan such as the case for adolescents to emerging adults, and for some, eventually parents. For example, some research among lesbian, bisexual, and queer adults who intend to become parents suggests that becoming a parent in LGBTQ+ communities may be seen as one form of activism (although the majority of this work has been conducted with LGBTQ+ White people; Carroll, 2018; Simon et al., 2019). This may be one way in which identity development is associated with future parenthood among LGBTQ+ adults, given that many LGBTQ+ people report that activism (and being an activist) are important parts of their LGBTQ+ identity (Riggle et al., 2014). Thus, for some LGBTQ+ people, continuing to develop their LGBTQ+

identity through activism may promote interest in future parenthood (or vice versa; Simon et al., 2019) and could protect against potential negativity from others who believe that LGBTQ+ culture is incompatible with parenthood (Gato et al., 2017).

Research among LGBTQ+ APIA individuals has also suggested various benefits from the intersection of their identities, such as unique coping strategies (e.g., a belief that group harmony and individuality are compatible and equally important because their APIA and LGBTQ+ identities are also compatible and equally important; Sung et al., 2015) or the ability to draw on multiple cultural histories (i.e., the histories, cultures, and communities of API, LGBTQ+, and LGBTQ+ API people) for support that may not be available to others (Choi & Israel, 2016; Sung et al., 2015). Part of the development of a positive LGBTQ+ APIA identity then may involve learning unique skills (e.g., coping strategies) or exploring the rich history associated with their identity. Research has also reported inconclusive findings on how LGBTQ+ APIA individuals' identities are protective against negative outcomes. For example, discomfort with one's racial-ethnic community was associated with lower well-being, but only among LGBTQ+ APIA individuals who reported both their sexual and racial identities as important as compared to those who reported only one identity as important (Kim & Epstein, 2018). Thus, continued research is needed given the potential of positive identities to promote well-being (Riggle et al., 2014).

Qualitative research has found that intersections of sexuality and race lead to different ways in which individuals develop their identities and create narratives for themselves (Frost et al., 2019). This may hold true from a quantitative approach, but measurement issues have generally limited the conclusions drawn (e.g., the assumption

that identities are additive rather than unique intersections; Bowleg & Bauer, 2016). One potential quantitative solution to address this concern (i.e., of not accounting for intersectional identities; Bowleg & Bauer, 2016) is to assess identity integration (i.e., perceived distance and conflict between two identities; Lilgendahl et al., 2018) in addition to identity achievement. While measures of identity achievement typically assess a singular identity (e.g., only racial-ethnic identity), identity integration would target the overlap of these identities (Lilgendahl et al., 2018), such as the combination of LGBTQ+ and APIA identities. It may be that the integration of sexual and racial-ethnic identities is more strongly associated with beliefs about future parenthood than is achieving a positive identity in either one's sexual *or* racial-ethnic identity. Given the dearth of research on future parenthood and identity development among LGBTQ+ APIA people, further work is needed.

Historical Stigmatization of LGBTQ+ and APIA people in the U.S.

Although the process of identity development is likely universal, the ways in which context shape this development over time is a necessary consideration (Lerner et al., 2015), including the history of sexual and racial-ethnic identities in the U.S. (Butler, 2006; Lee, 2015; Warner, 1991). Regarding sexual identity, sodomy laws have been present in the U.S. since its founding, and as such, have influenced stereotypes of LGBTQ+ people as sexually deviant and immoral (Warner, 1991). The publication of Alfred Kinsey's *Sexual Behavior in the Human Male* and the accompanying Kinsey scale in 1948 (Kinsey et al., 2003) were pivotal in shaping LGBTQ+ history in the U.S. in terms of representation and acknowledgement of LGBTQ+ people and same-sex romantic and sexual behavior. This, in turn, solidified an essentialist understanding (and

stereotypes) of sexuality as a singular behavior-based spectrum from heterosexual to homosexual as opposed to an identity-specific approach (Fausto-Sterling, 2000). That variations on the Kinsey scale are still used today is credit to this deep-seated cultural stereotype despite the many LGBTQ+ people who have reported its failure to capture the complexities of sexuality, particularly as it intersects with other identities such as race or gender (Galupo et al., 2014).

The beginning of the AIDS crisis in the early 1980s was another generation-defining event for LGBTQ+ history and culture, among others (e.g., Stonewall riot in 1969; Frost et al., 2019). The AIDS crisis would also bring to light a number of forms of stigmatization and discrimination that were occurring during this period of time. Two examples of stigmatization were particularly relevant in that the original name for HIV was GRID, the gay-related immune-deficiency syndrome (Shilts, 2007). The additional literal societal stigma of Kaposi Sarcoma's symptoms (i.e., lesions appearing on soft tissue, such as skin; Warner, 1991) as being associated with deviancy and homosexuality is one such example (Cruz-Malavé, 2007). Another example of stigmatization from a scientific perspective is that homosexuality as a mental health disorder was not removed from the Diagnostic and Statistical Manual (DSM) until 1973, and the cultural and social impacts of the scientific "legitimacy" of psychiatrists labeling sexual identity as a mental health disorder should not be understated (Drescher, 2015).

Additional notable cultural policies and events in the U.S. include the Don't Ask, Don't Tell policy from the early 1990s to 2011 (Frost et al., 2019), the transgender military ban (Dunlap et al., 2020), adoption laws (Farr & Goldberg, 2018), and the absence of legal same-sex marriage at a national scale until 2015 further shaped the

history of LGBTQ+ people in the U.S. (Bauermeister, 2014). These structural forces have contributed to internalized negative beliefs and assumptions about LGBTQ+ identity and who is fit to be a parent (Gato et al., 2017). Over time, hostile scientific, medical, and legal institutions likely impact the health of LGBTQ+ people (Bauermeister, 2014) and potentially their interest in becoming parents.

The history of APIA people in the U.S., like LGBTQ+ people, has also been turbulent. This is, in part, due to the history of immigration policy, war, and impact of the U.S. as a colonizing nation (Lee, 2015). That the first U.S. immigration policy specifically barred Chinese women from entering the country in 1875 and that these policies would shift to target specific API ethnic groups over the following century would set an enduring tone of hostility and racism toward APIA people (Lee, 2015). During and following World War II, immigration policy in the U.S. continued to change dramatically as it related to API people. This led to the creation of an immigration system in which API individuals with advanced educations, a substantial amount of money, or industry leadership skills were able to immigrate, while all other API groups struggled to enter the U.S. (Lee, 2021). It is no surprise to find that specific API ethnic groups would “overachieve” and become “model minorities” in the U.S. given a history in which only those who were already high achieving could enter the country (Zhou & Lee, 2017).

Co-occurring with this turbulent and racist history toward API people in the U.S. is also the stigmatization of API people, with eugenics-like descriptions of APIA people physically and cognitively inferior (Lee, 2015). In contrast, other depictions would show APIA people (primarily Japanese) as foreign invaders who were smart and “crafty” enough to infiltrate and bomb the U.S., such as the many political cartoons published by

Theodor Geisel, better known as Dr. Seuss (Minear & Deb, 2017) at the same time that Japanese (and other API) Americans were placed in internment camps and their properties seized (Lee, 2015, 2021). That these internment camps are open and were used until as late as 2019 (i.e., ‘migration centers’; Hennigan, 2019), paints a clear picture as to how APIA people, and their families could be treated in the U.S. Given this discriminatory history and context, the fact that APIA people in the U.S. may come to internalize these deeply entrenched beliefs, such as the stereotype of being a perpetual foreigner, is not surprising.

The Role of Theory in LGBTQ+ and APIA research

One way to collectively frame our understanding of LGBTQ+ APIA individuals experiences (e.g., how is identity associated with perceptions of future parenthood?) is to draw on relational developmental systems theory (RDS; Lerner & Chase, 2019) and intersectionality theory. RDS is a framework that emphasizes individual and relational processes that occur between the individual and various contexts (Lerner, 2019). Given that LGBTQ+ APIA individuals hold multiple minority identities (i.e., sexual/gender and racial-ethnic minority identities) intersectionality theory (Crenshaw, 1993) is well-suited to inform the development of the current study and interpretation of potential findings. Thus, RDS emphasizes the context in which an individual lives (e.g., historical context; Lerner, 2019), but also how the intersection of these identities changes such experiences (Cole, 2009).

Intersectionality theory encourages a deeper focus in exploring how the intersection of identities may lead to unique stressors among those with multiple marginalized identities. For example, common stereotypes hypersexualize gay men

(Nadal et al., 2016) and desexualize Asian men (Choi & Israel, 2016). There is also the stereotype of LGBTQ+ culture being incompatible with parenthood and at the same time, desires and intentions of parenthood may be even greater among APIA people as compared to other racial-ethnic groups because of cultural factors (e.g., filial piety; Huang et al., 2020). What then, does it mean for someone to exist at the intersection of being gay and male and Asian?

Current Study

With all of the above information in mind, the broader goal of this research was intended to provide exploratory findings about how LGBTQ+ APIA adults think about future parenthood and how identity may (or may not) be associated with these perceptions about parenthood. This study took the form of a cross-sectional, online survey. Analyses are quantitative, based on my questions of interest noted below.

1a) What do LGBTQ+ APIA think about future parenthood (i.e., perceptions) and how important is it to them?

1b) How do perceptions (i.e., desires and intentions) and importance of future parenthood among LGBTQ+ APIA adults differ (or not) as compared to individuals who only hold one, but not both, of these identities (LGBTQ+ White and cisgender, heterosexual APIA adults)?

Regarding potential anticipated findings, for RQ1, I expected to find that LGBTQ+ APIA adults would have lower perceptions and importance of future parenthood compared to cisgender heterosexual APIA childfree adults. I also anticipated cisgender heterosexual APIA adults to have greater perceptions and importance of future parenthood than LGBTQ+ White adults which has generally been supported by previous

literature (Ocampo, 2016; Pew Research Center, 2013; Riskind & Tornello, 2017). Given little available research or applicable theories, I did not make any other hypotheses related to distinctions between LGBTQ+ APIA and LGBTQ+ White childfree adults.

2a) How is identity achievement associated with perceptions and importance of future parenthood, if at all?

2b) Do these associations vary based on group (e.g., identity achievement predicts perceptions of future parenthood among LGBTQ+ APIA adults but not among LGBTQ+ White adults)?

2c) Do associations between identity achievement and perceptions and importance of future parenthood differ among LGBTQ+ APIA adults based on which identity is being measured (e.g., racial-ethnic, but not LGBTQ+, identity achievement is associated with perceptions and importance of future parenthood)?

For RQ2, I anticipated that identity development would be associated with perceptions and importance of future parenthood (RQ2a) given how many aspects of identity-based processes and development play a role in family planning (e.g., the belief of not being able to become a parent is associated with identity development among LGBTQ+ childfree adults; Simon & Farr, 2020). However, as to whether identity development is differentially associated based on which group individuals are a part of (RQ2b) as well as whether associations between identity development and perceptions and importance of future parenthood are different based on whether racial-ethnic or sexual identity development is assessed (RQ2c), I made no hypotheses given the lack of literature available.

3a) Is the integration of sexual and racial-ethnic identities associated with perceptions and importance of future parenthood among LGBTQ+ APIA adults?

3b) If identity integration is associated with perceptions and importance of future parenthood among LGBTQ+ APIA adults, is it a stronger predictor of perceptions and importance of future parenthood than identity achievement (i.e., does identity integration account for more variance in perceptions and importance of future parenthood than identity achievement)?

Given my anticipated hypothesis for RQ2a, that identity development is associated with perceptions and importance of future parenthood, I also anticipate that identity integration will be associated with perceptions and importance of future parenthood (RQ3a). However, whether identity integration is a greater predictor of perceptions and importance of future parenthood compared to identity development (RQ3b), I made no hypotheses.

4a) Are experiences of microaggressions based on sexual or racial-ethnic identity associated with perceptions and importance of future parenthood?

4b) Do associations of microaggressions based on sexual or racial-ethnic identity with perceptions and importance of future parenthood vary by group (e.g., microaggressions are significantly associated with perceptions of future parenthood among LGBTQ+ APIA adults but not among cisgender, heterosexual APIA adults)?

As to whether experiences of microaggressions or discrimination based on racial-ethnic and/or LGBTQ+ identity are associated with perceptions and importance of future parenthood (RQ4ab), I made no hypotheses given the lack of literature.

METHOD

Procedure

Participants were recruited through three different sources, Qualtrics, Prolific, and Amazon's Mechanical Turk (MTurk) all three of which are commonly used online recruitment websites/services. Qualtrics was also used to administer surveys via Qualtrics survey software. Multiple recruitment sources were needed given the difficulty of recruiting large samples of hard-to-reach populations. To be eligible for the study, participants needed to be between the ages of 18 and 39 years old, childfree, live in the United States, be proficient in English (to be able to complete the survey), and identify with one of the three groups of interest (i.e., LGBTQ+ APIA, LGBTQ+ White, or cisgender heterosexual APIA people). Participants were compensated a monetary value of \$3-4 USD through the respective recruitment sources (e.g., Qualtrics compensates participants with "points" which can be spent on various gift cards) based on the length of the survey (e.g., cisgender heterosexual participants received fewer measures than LGBTQ+ participants). Following consent, participants completed an online survey that asked a variety of questions primarily related to perceptions of future parenthood and identity. The project was approved by the University of Kentucky Institutional Review Board and data were collected between February 19th, 2021 and March 20th, 2021.

Participants

Participants were either APIA LGBTQ+ individuals (i.e., Group 1), White LGBTQ+ individuals (i.e., Group 2), or APIA cisgender and heterosexual individuals (i.e., Group 3), all of whom were childfree, and between the ages of 18 and 39 ($N = 869$). Participants recruited through Prolific were the largest group ($n = 466$; 53.7%), followed

by Qualtrics ($n = 352$; 40.5%), and MTurk ($n = 51$; 5.8%)⁶. In the first Group (i.e., LGBTQ+ APIA; $n = 220$), the majority of participants were cisgender women ($n = 120$; 54.5%), followed by cisgender men ($n = 60$; 27.3%), and finally, a number of additional transgender and nonbinary (TGNB) identities were represented (e.g., genderfluid, agender; $n = 40$; 18.2%). Regarding sexual identity, the most represented identities were bisexual/pansexual individuals ($n = 118$; 53.6%), followed by lesbian/gay individuals ($n = 61$; 27.7%), and additional identities (e.g., asexual, queer; $n = 41$; 18.6%). In the context of racial-ethnic identity, individuals in group 1 were all LGBTQ+ identified APIA. Any individual who identified as APIA (including multiracial individuals; $n = 20$; 9.1%) and LGBTQ+ were placed into group 1⁷. As for relationship status, there was a slight majority of individuals who reported that they were single ($n = 122$; 55.5%) as compared to those in a relationship ($n = 98$; 44.5%). Finally, Group 1 was on average age of 23.73 years old ($SD = 4.92$) and had a middle-class income ($M = \$69,692$; $SD = \$58,300$; Med = \$50,000).

Regarding Group 2 (i.e., LGBTQ+ White individuals; $n = 407$), the largest group of individuals were TGNB identified people (e.g., genderfluid; $n = 193$; 47.4%), followed by an equal split of cisgender women ($n = 107$; 27.2%) and men ($n = 107$; 27.2%). Similar to group 1 bisexual/pansexual individuals were the largest group ($n = 186$; 45.7%), followed by lesbian/gay individuals ($n = 112$; 27.5%), queer individuals ($n = 71$;

⁶ I also investigated whether relevant covariates to my variables of interest (i.e., age, income, relationship status) were significantly different based on the source of recruitment. On average, participants recruited through Qualtrics were older than Prolific participants, but no other significant differences were present among sources.

⁷ The multiracial individuals included in group 1 were APIA/White (13), APIA/Latinx (4), APIA/Latinx/White (1), APIA/Black/Native American/White (1), APIA/Alaska Native/Native American (1).

17.5%), and additional identities (e.g., asexual; $n = 26$; 6.2%). All participants in Group 2 were monoracial White and LGBTQ+ identified. Regarding relationship status, a slight majority of Group 2 reported that they were single ($n = 242$; 59.5%) compared to those in a relationship ($n = 165$; 40.5%). Finally, group 2 individuals were on average 27.96 years old ($SD = 6.29$) and had a middle-class income ($M = \$56,970$; $SD = \$87,676$; Med = \$40,000).

Regarding Group 3 (i.e., cisgender heterosexual APIA people; $n = 242$), there was an approximately equal split between cisgender women ($n = 123$; 50.8%) and cisgender men ($n = 119$; 49.2%), and all participants were heterosexual. In the context of racial-ethnic identity for Group 3, the vast majority of participants were monoracial Asian/Pacific Islander American ($n = 239$; 98.8%) in addition to 3 APIA/White biracial individuals. Regarding relationship status for Group 3, a slight majority of individuals who were single ($n = 139$; 57.4%) as compared to those who were not ($n = 103$; 42.6%). Finally, individuals in Group 3 were on average 25.38 years old ($SD = 5.27$) and had a middle-class income ($M = \$87,983$; $SD = \$74,099$; Med = \$70,000; see Table 1 for participant demographics).

Measures

Desires and intentions of parenthood. Participants responded to two items assessing the level of desire and intentionality that an individual has toward becoming a parent in the future. To assess parenting desires, participants received the question, “*How often do you think about becoming a parent?*” with responses on a scale of 1 (*Never*) to 5 (*Very often*) and to assess parenting intentions, participants receive the question “*What are you willing to give up to have children?*” with responses on a scale of 1 (*It doesn't*

matter whether or not I become a parent) to 6 (*I will do everything to become a parent*).

Higher scores indicate greater desires and intentions toward future parenthood. These two items have been previously used, in the United States, among childfree LGBTQ+ (Simon & Farr, 2020; Simon et al., 2018) and cisgender heterosexual adults (Van Balen & Trimpos-Kemper, 1995). These items were administered to all groups.

Perceptions of the importance of parenthood. How important parenthood was to each participant was assessed via the Idealization of Parenthood (IOP) measure (Eibach & Mock, 2011). The Idealization of Parenthood measure is on a scale of 1 (*strongly disagree*) to 5 (*strongly agree*) and is comprised of 8 items (e.g., “*Parents experience a lot more happiness and satisfaction in their lives compared to people who have never had children*”), with higher average scores indicating greater idealization of parenthood. This measure showed good reliability in this sample ($\alpha = .75$) and was administered to all groups.

LGBTQ+ identity. Participants received an adapted version of the LGB positive identity measure (LPIM; Riggle et al., 2014), which measures well-being related to one’s LGBTQ+ identity development and is comprised of five subscales associated with identity achievement which are self-awareness, authenticity, community, intimacy, and social justice. Some example items include, “*I have a sense of inner peace about my LGBT identity,*” and “*My LGBT identity has led me to develop new insights into my strengths*”. The LPIM is comprised of 25 items and is on a 1 (*strongly disagree*) to 7 (*strongly agree*) scale, with higher average scores indicating greater levels of positive LGBTQ+ identity. The adapted version only changes the measure instructions and items from “LGBT” to “LGBTQ+” to be more inclusive. The LPIM showed excellent

reliability in our sample ($\alpha = .95$). This measure was administered to the LGBTQ+ APIA LGBTQ+ group and the LGBTQ+ group (Groups 1 and 2).

Ethnic identity. The Multigroup Ethnic Identity Measure-Revised (MEIM-R; Chakawa et al., 2015) was used to assess ethnic identity achievement. The MEIM-R is made up of two subscales, ethnic identity exploration (e.g., “*I have spent time trying to find out more about my ethnic group, such as its history, traditions, and customs*”) and ethnic identity commitment (e.g., “*I have a strong sense of belonging to my own ethnic group*”), measured on a 1 (*strongly disagree*) to 5 (*strongly agree*) scale. Ethnic identity exploration and ethnic identity commitment are facets of identity achievement. The total measure is comprised of 12 items with greater average scores indicating higher levels of ethnic identity exploration and commitment. The MEIM-R has been validated among White/European American and racial-ethnic minority samples (Chakawa et al., 2015) and showed excellent reliability in our sample ($\alpha = .92$). The MEIM-R was administered to all participants.

Identity integration. An adapted version of the Sexuality-Professional Identity Integration measure (SPII; Henderson et al., 2018) was used to measure identity integration, which is the degree to which an individual perceives their sexual and professional identities as distant or in conflict with one another (Benet-Martínez & Haritatos, 2005). The 8-item SPII measure is scaled from 1 (*strongly disagree*) to 7 (*strongly agree*), with higher average scores (items are reverse scored) indicating greater integration of one’s sexual and professional identities. The SPII is comprised of identity distance and identity conflict subscales. Language was changed to the identities of interest. For example, the SPII distance question, “*My ideals as a nonheterosexual person*

differ from my ideals as a professional,” was changed to, *“My ideals as an LGBTQ+ person differ from my ideals as an APIA person.”* This measure was administered only to the APIA LGBTQ+ group and showed acceptable reliability in our sample ($\alpha = .80$).

Microaggressions based on LGBTQ+ identity. The Daily Heterosexist Experiences Questionnaire (DHEQ; Balsam et al., 2013) was used to assess the level of distress that heterosexist experiences have on the participant’s life. Participants are scored on a scale of 1 (*It happened, and I bothered me not at all*) to 5 (*It happened, and it bothered me extremely*) in response to the prompt: *“How much has this problem distressed or bothered you in the past 12 months?”*. Higher average scores indicate a greater frequency and distress surrounding heterosexist experiences. The DHEQ is made up of 50 questions with several subscales however, given the overarching goals (and limitations) of the study, a number of subscales were not included specifically the *parenting, HIV/AIDS, and gender expression*, leaving an overall scale made up of 32 items. The DHEQ measure in this study showed excellent reliability ($\alpha = .92$). LGBTQ+ identified participants received this measure.

Microaggressions based on APIA Identity. The Subtle and Blatant Racism Scale for Asian American College Students (SABR; Yoo et al., 2010) was used to assess experiences of microaggressions based on one’s APIA identity. The 8-item measure is comprised of two subscales: subtle (e.g., *“In America, I am viewed with suspicion because I’m Asian”*) and blatant (e.g., *“In America, I am told ‘you speak English so well’ because I’m Asian”*) racism, which are on a 1 (*Almost Never*) to 5 (*Almost Always*) scale; higher average scores across the two subscales indicate greater levels of perceived racism. The measure showed excellent reliability in our sample ($\alpha = .90$). Participants in

the APIA subsamples (Group 1, LGBTQ+ APIA participants and Group 3, cisgender, heterosexual APIA participants) received this measure.

Perceived ethnic discrimination. The Perceived Ethnic Discrimination Questionnaire (PEDQ; Keum et al., 2018) was used to assess participants' experiences of perceived discrimination based on their racial-ethnic identity. The PEDQ asks participants to report on a scale of 1 (*Never happened*) to 5 (*Happened very often*) based on the frequency of discriminatory experiences they have faced in their lifetime. The PEDQ is comprised of 17 items with four subscales: *exclusion/rejection*, *stigmatization/discrimination at work/school*, *threat/aggression*. An example item would be asking participants "*How often ... have people hinted that you are dishonest or can't be trusted?*" (stigmatization/discrimination subscale item). Higher overall average scores indicate a greater frequency of lifetime perceived discrimination based on one's racial-ethnic identity. The PEDQ showed excellent reliability in this sample ($\alpha = .94$). All participants received this measure.

Microaggression experiences for LGBTQ+ people of color. The LGBT People of Color (POC) Microaggressions Scale (LGBTPCMS; Balsam et al., 2011) was used to assess the intensity and frequency of experienced microaggressions based on *racism present in LGBTQ+ communities*, *heterosexism in racial-ethnic minority communities*, and *microaggressions in the context of romantic/sexual relationships* (i.e., 3 subscales). The LGBT-POC Microaggressions Scale is scored on a scale of 1 (*It happened, and I bothered me not at all*) to 5 (*It happened, and it bothered me extremely*), with greater average scores indicating greater negativity as a result of experienced microaggressions.

LGBTQ+ APIA participants received this measure and the measure showed excellent reliability in our sample ($\alpha = .93$).

Data Analytic Plan

First, I conducted descriptive analyses for all variables of interest to provide broader context for the study but also to investigate what LGBTQ+ APIA people think about future parenthood (i.e., perceptions) and how important is it to them (RQ1a). Following this, three one-way ANOVAs were conducted to address whether participants differed in perceptions and importance of future parenthood among LGBTQ+ APIA as compared to individuals who only hold one, but not both, of these identities (i.e., LGBTQ+ White and cisgender heterosexual adults; RQ1b).

Next, to investigate whether identity achievement is associated with perceptions and importance of future parenthood, if at all (RQ2a), and whether these associations varied by group⁸ (RQ2b), I conducted a series of Pearson's correlations with the overall sample and then separated by group. That is, desires, intentions, and idealization of parenthood as well as LGBTQ+ (i.e., LPIM) and racial-ethnic (i.e., MEIM) identity development were all included in a correlation matrix for the overall sample and then also broken down by group (see Tables 2-4). Further, to address whether associations between identity development and perceptions and importance of future parenthood is stronger based on the identity being measure (e.g., LGBTQ+ compared to racial-ethnic identity

⁸ I also investigated differences in potential covariates. LGBTQ+ White participants were older than LGBTQ+ APIA and cisgender heterosexual APIA participants. Further, LGBTQ+ White participants had significantly greater household income than cisgender heterosexual APIA participants. All covariates were either not significantly associated with variables of interest, or were statistically redundant when controlled for, and thus were not included in this study.

development measures; RQ2c), three multiple linear regression (MLR) models were conducted. Specifically, LGBTQ+ and racial-ethnic identity were regressed onto the three variables of interest assessing perceptions and importance of future parenthood (i.e., parenting desires, parenting intentions, and idealization of parenthood). Regression models were chosen over Pearson's correlations to control for the effect of one identity while assessing the effect of the other measure of identity development (e.g., assessing the effect of MEIM on idealization of parenthood while controlling for LPIM).

To investigate whether the integration of sexual and racial-ethnic identities was associated with perceptions and importance of future parenthood among LGBTQ+ APIA adults (RQ3a), Pearson's correlations were conducted between identity integration and the three variables related to perceptions and importance of future parenthood. Dependent on significant associations between identity integration and perceptions and importance of future parenthood variables, three MLR models were to be conducted, regressing identity integration (and the other two measures of identity achievement) onto the three variables assessing perceptions and importance of future parenthood (RQ3b). Finally, to investigate associations among perceptions and importance of future parenthood with microaggressions based on sexual identity (i.e., DHEQ), APIA identity (i.e., SABR), or the combination of the two (i.e., LGBT-POC Microaggressions Scale), the same analytic procedures as RQ2 were followed. An *a priori* power analysis was computed under the assumption of a one-way ANOVA at 95% power, $\alpha = .001$, and an effect size of 0.17 (approximately halfway between a small and medium effect size) and indicated that a total sample of 960 participants was needed to have excellent statistical power (Faul et al., 2007). I set $\alpha = .001$ to adjust for multiple comparisons. Maintaining the same input

parameters but changing my power analysis to reflect my current sample size ($N = 869$) indicated approximately 92% power.

I also included Bayes factors (BF) where relevant. These statistics were included as a way to provide additional evidence in favor of (or against) the null hypothesis. Given that my hypotheses were pre-planned and with a lack of empirical evidence (specifically for LGBTQ+ APIA populations) to inform said hypotheses, I include BFs to show whether there was substantial evidence in favor of the null hypothesis as traditional p -values are unable to confirm this (Andraszewicz et al., 2014; Dienes & Mclatchie, 2018; Wetzels & Wagenmakers, 2012). BFs that indicate no evidence toward null hypotheses are close to 1, with BFs between 1-3 indicating anecdotal evidence in favor of the alternative hypothesis, 3-10 for moderate evidence, 10-30 as strong evidence, 30-100 as very strong evidence, and BFs greater than 100 as extreme evidence in favor of the alternative hypothesis (with the inverse being in favor of the null hypothesis; Andraszewicz et al., 2014)⁹. For example, if I were to report $BF_{10} = 4$, this would indicate that the alternative hypothesis is 4 times more likely to occur as compared to the null hypothesis. BFs often coincide with p -values such that more extreme BFs correspond to lower p -values but unlike p -values, BFs are not heavily impacted by sample size or the number of tests conducted (Rouder & Morey, 2012; Wagenmakers et al., 2016). It is also relevant to note that although I made few specific hypotheses, statistical programs revert to a null versus alternative hypothesis model under the assumption that the null hypothesis indicates no difference between the groups.

⁹ F tests follow this pattern, which is indicated by BF_{10} . In contrast, Pearson's correlations as well as independent samples t -tests use the inverse, with Bayes Factor denoted by BF_{01} (e.g., .33 to .10 indicates moderate evidence, .09 to .03 indicates strong evidence, etc.).

Table 1. *Descriptive and demographic information by group membership*

	Group 1 LGBTQ+ APIA (<i>n</i> = 220)	Group 2 LGBTQ+ White (<i>n</i> = 407)	Group 3 Cisgender heterosexual APIA (<i>n</i> = 242)	Total (<i>N</i> = 869)
Gender % TGNB	18.2%	47.4%	-	26.8%
Gender % Cisgender women	54.5%	27.2%	50.5%	40.3%
Gender % Cisgender men	27.3%	27.2%	49.2%	33.4%
Relationship Status (% Single)	55.5%	59.5%	57.4%	57.9%
Age (years)	23.73 (4.92)	27.96 (6.29)	25.38 (5.27)	26.15 (5.95)
Income (\$K)	\$69.69 (\$58.30)	\$56.97 (\$87.68)	\$87.98 (\$74.10)	\$68.73 (\$78.28)
Desire ^a	2.43 (1.09)	2.52 (1.24)	(2.59 (1.05)	2.52 (1.15)
Intention ^b	2.12 (1.49)	2.22 (1.64)	2.71 (1.62)	2.34 (1.61)
IOP ^c	2.14 (.62)	2.22 (.62)	2.47 (.63)	2.27 (.62)
LPIM ^d	5.01 (.97)	5.25 (1.08)	-	5.17 (1.05)
MEIM ^e	2.79 (.56)	2.43 (.65)	2.89 (.52)	2.64 (.62)
II ^f	3.72 (1.26)	-	-	3.72 (1.26)
PEDQ ^g	1.88 (.68)	1.71 (.83)	1.85 (.60)	1.79 (.74)
LGBTPCMS ^h	1.84 (.83)	-	-	1.84 (.83)
SABR ⁱ	2.45 (.89)	-	2.21 (.82)	2.31 (.85)
DHEQ ^j	1.71 (.57)	1.74 (.61)	-	1.73 (.59)

Note. TGNB = Transgender/Nonbinary ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire. Data missing throughout based on missing participant responses, only data used in analyses are represented here.

RESULTS

Research Question 1 and Descriptive Information

Overall, the sample of LGBTQ+ APIA, LGTQ+ White, and cisgender heterosexual APIA individuals reported relatively low desires ($M = 2.52$, $SD = 1.15$) and intentions ($M = 2.34$, $SD = 1.61$) toward future parenthood as well as idealization of parenthood ($M = 2.27$, $SD = .63$) (i.e., research question 1a). Specifically, the entire sample reported on how often they spend considering future parenthood and noted between “rarely” and “sometimes” (i.e., parenting desires). When asked about their parenting intentions, participants reported that, on average, “It would be nice if I could become a parent” and “I will do some to become a parent”. Further, participants reported generally disagreeing with idealization of parenthood statements such as, “*parents experience a lot more happiness and satisfaction in their lives compared to people who have never had children*”. Overall mean scores and standard deviations for all variables are presented in Table 1.

Regarding the racial-ethnic (i.e., MEIM) and LGBTQ+ identity (i.e., LPIM) development as well as identity integration variables (i.e., II), participants generally reported between average and above average levels of racial-ethnic ($M = 2.64$, $SD = .62$) and LGBTQ+ identity development ($M = 5.17$, $SD = 1.05$) and identity integration ($M = 3.72$, $SD = 1.26$). Specifically, participants reported average levels of racial-ethnic identity development between “disagree” and “agree” regarding statements reflecting ethnic identity exploration and achievement. Participants also had above average levels of positive LGBTQ+ identity development and were between “somewhat agree” and “agree” regarding affirming statements related to LGBTQ+ identities. Further,

participants reported average levels of identity integration, suggesting that they experience approximately equal levels of perceived distance and closeness between their racial-ethnic and LGBTQ+ identities. It is relevant to note that Group 3 (cisgender heterosexual APIA group) did not receive the sexual identity development or identity integration measures.

Finally, there were four measures that assessed negative experiences related to one's identities, that is perceived ethnic discrimination (i.e., PEDQ), experiences of subtle and blatant racism among APIA people (i.e., SABR), daily heterosexual experiences (i.e., DHEQ), and microaggressions based on the intersection of racial-ethnic and LGBTQ+ identity (i.e., LGBTPCMS). As it relates solely to racial-ethnic identity, participants reported slightly below average experiences of perceived ethnic discrimination ($M = 1.79, SD = .74$), as well as experiences of subtle or blatant racism among APIA individuals in particular ($M = 2.31, SD = .85$). Further, as it relates solely to LGBTQ+ identity, participants reported that they had experienced heterosexism, but that it did not impact them greatly ($M = 1.73, SD = .59$). Finally, participants reported that they experienced relatively low levels of LGBTQ+ racial-ethnic specific microaggressions, ($M = 1.84, SD = .83$). For all measures of discrimination and microaggression the length of time that participants should consider was either not specified (i.e., PEDQ; SABR) or one year (i.e., DHEQ; LGBTPCMS). It is also relevant to note that all participants received the perceived ethnic discrimination measure, yet only APIA participants received the subtle and blatant racism among APIA measure, and only LGBTQ+ participants received the sexual identity development, and only LGBTQ+

APIA participants received the microaggressions measure based on racial-ethnic and LGBTQ+ identity.

Research question 1b. A series of one-way ANOVAs were conducted to assess potential differences by group. Regarding parenting desires, there were no significant differences among the three different groups, $F(2, 858) = 1.03, p = .359, \eta_p^2 = .002, BF_{10} = .003$. However, there were significant differences among the three groups based on parenting intentions, $F(2, 858) = 9.67, p < .001, \eta_p^2 = .02, BF_{10} = 16.28$, and idealization of parenthood, $F(2, 858) = 19.36, p < .001, \eta_p^2 = .04, BF_{10} = 189,946$. Post-hoc analyses suggested that cisgender heterosexual APIA individuals reported significantly greater parenting intentions as compared to LGBTQ+ White individuals, $t(714) = 3.82, p < .001, BF_{01} = .013$, and LGBTQ+ APIA individuals, $t(457) = 4.04, p < .001, BF_{01} = .013 = .005$, but there was no significant difference between LGBTQ+ APIA and LGBTQ+ White individuals, $t(618) = .75, p = .453, BF_{01} = 11.37$. Similar to the last result, post-hoc analyses suggest that cisgender heterosexual APIA individuals reported significantly greater idealization of parenthood as compared to LGBTQ+ White individuals, $t(714) = 5.020, p < .001, BF_{01} < .001$, and LGBTQ+ APIA individuals, $t(456) = 5.85, p < .001, BF < .001$. There was no significant difference, however, between LGBTQ+ APIA individuals and LGBTQ+ White individuals, $t(619) = 1.55, p = .122, BF_{01} = 4.61$.

Research Question 2

To assess the potential ways in which identity development might be associated with perceptions (i.e., parenting desires and intentions) and importance of future parenthood (i.e., idealization of parenthood; RQ2a), a series of Pearson's correlations were conducted. We found that racial-ethnic identity development was positively and

significantly associated with parenting desires, $r(859) = .14, p < .001, BF_{01} = .01$, parenting intentions, $r(859) = .21, p < .001, BF_{01} < .001$, and idealization of parenthood, $r(858) = .21, p < .001, BF_{01} < .001$. Further, we found that LGBTQ+ identity development was not significantly associated with parenting desires, $r(612) = .05, p = .265, BF_{01} = 16.69$, intentions, $r(612) = -.004, p = .921, BF_{01} = 30.91$, or idealization of parenthood, $r(613) = -.13, p = .002, BF_{01} = .22$.

Research question 2b. I found that the associations between identity development and perceptions and importance of future parenthood generally followed the same patterns within each group as compared to the overall sample. Among LGBTQ+ APIA individuals, racial-ethnic identity development was no longer significantly associated with parenting desires, $r(217) = .12, p = .088, BF_{01} = 4.34$, intentions, $r(217) = .11, p = .102, BF_{01} = 4.90$, or idealization of parenthood, $r(217) = .09, p = .198, BF_{01} = 8.11$. Associations between LGBTQ+ identity development and perceptions and importance of future parenthood among LGBTQ+ APIA individuals were consistent with the overall sample, such that LGBTQ+ identity development was not significantly associated with parenting desires, $r(211) = .11, p = .110, BF_{01} = 5.12$, intentions, $r(211) = .10, p = .167, BF_{01} = 7.07$, or idealization of parenthood, $r(211) = -.15, p = .027, BF_{01} = 1.60$ (see Table 2 for all correlations).

Among Group 2 (i.e., LGBTQ+ White individuals), associations between racial-ethnic and LGBTQ+ identity development and perceptions and importance of future parenthood generally reflected the overall sample with one deviation. Specifically, racial-ethnic identity development was not significantly associated with parenting desires, $r(401) = .14, p = .006, BF_{01} = .58$. However, parenting intentions, $r(401) = .20, p < .001$,

BF₀₁ = .01, and idealization of parenthood, $r(401) = .26, p < .001, BF_{01} < .001$, were significantly and positively associated with racial-ethnic identity development (see Table 3 for all correlations).

Among Group 3 (i.e., cisgender heterosexual APIA individuals), associations between racial-ethnic identity development and perceptions and importance of future parenthood were slightly different than the overall sample. Specifically, ethnic identity development was positively and significantly associated with parenting intentions, $r(241) = .28, p < .001, BF_{01} = .001$, but not significantly associated with parenting desires, $r(241) = .18, p = .005, BF_{01} = .39$, or idealization of parenthood, $r(240) = .15, p = .024, BF_{01} = 1.52$ (see Table 4 for all correlations).

Research question 2c. Three MLR models were conducted to assess differences in potential associations between racial-ethnic or LGBTQ+ identity development and perceptions and importance of future parenthood, specifically among LGBTQ+ APIA individuals. To begin, I regressed racial-ethnic and LGBTQ+ identity development onto parenting desires and found that once each measure of identity development was controlled for (as a result of using a MLR model rather than Pearson's correlation), there were no significant associations between identity development and parenting desires, $R^2 = .02, F(2, 207) = 1.91, p = .150, BF_{10} = .031$, intentions, $R^2 = .01, F(2, 207) = 1.51, p = .224, BF_{10} = .02$, or idealization of parenthood, $R^2 = .04, F(2, 207) = 3.22, p = .042, BF_{10} = .11$.

Research Question 3

Following the investigation of associations of racial-ethnic and LGBTQ+ identity development and perceptions and importance of future parenthood, I explored how

identity integration might impact the MLR models. The inclusion of identity integration to the three MLR models, however, indicated that no significant associations in relation to parenting desires, $R^2 = .02$, $F(3, 206) = 1.58$, $p = .196$, $BF_{10} = .005$, intentions, $R^2 = .01$, $F(3, 206) = 1.00$, $p = .394$, $BF_{10} = .002$, and idealization of parenthood, $R^2 = .03$, $F(3, 206) = 2.14$, $p = .097$, $BF_{10} = .01$. Finally, research question 3b was dependent on significant associations of both racial-ethnic and LGBTQ+ identity development (and identity integration) with perceptions and importance of future parenthood, which did not occur. Therefore, no further analyses were conducted.

Research Question 4

The final and fourth set of research questions were concerned with experiences of discrimination and microaggressions and their associations with identity and perceptions and importance of future parenthood. I conducted a series of Pearson's correlations (i.e., research question 4a). There were mixed associations between discrimination and microaggressions with perceptions and importance of future parenthood. Specifically, perceived ethnic discrimination was positively and significantly associated with parenting desires, $r(853) = .19$, $p < .001$, $BF_{01} < .001$, and idealization of parenthood, $r(854) = .15$, $p < .001$, $BF_{01} = .004$. However, perceived ethnic discrimination was not significantly associated with parenting intentions, $r(853) = .11$, $p = .002$, $BF_{01} = .26$. Higher levels of perceived ethnic discrimination were associated with greater desires for future parenthood and idealization of parenthood.

Next, I found that experiences of subtle and blatant racism among APIA individuals was not significantly associated with parenting desires, $r(439) = .12$, $p = .010$, $BF_{01} = .97$, intentions, $r(439) = .05$, $p = .300$, $BF_{01} = 15.41$, or idealization of parenthood,

$r(439) = .03, p = .582, BF_{01} = 22.63$. Following, I found that daily heterosexist experiences were not significantly associated with parenting desires, $r(613) = .1, p = .005, BF_{01} = .65$, intentions, $r(613) = .04, p = .363, BF_{01} = 20.55$, or idealization of parenthood, $r(614) = -.08, p = .054, BF_{01} = 4.84$. Finally, LGBTQ+ racial-ethnic minority microaggressions were not significantly associated with parenting desires, $r(240) = .14, p = .035, BF_{01} = 2.12$, intentions, $r(240) = .07, p = .290, BF_{01} = 11.15$, or idealization of parenthood, $r(240) = .05, p = .405, BF_{01} = 13.80$.

Research question 4b. Finally, I investigated whether any associations between microaggressions and discrimination and perceptions and importance of future parenthood significantly varied based on group. Among Group 1 (i.e., LGBTQ+ APIA individuals), I found that daily heterosexist experiences were not significantly associated with parenting desires, $r(212) = .16, p = .022, BF_{01} = 1.32$, intentions, $r(212) = .04, p = .572, BF_{01} = 15.63$, or idealization of parenthood, $r(212) = -.07, p = .300, BF_{01} = 10.73$. In addition, LGBTQ+ racial-ethnic minority specific microaggressions were not significantly associated with parenting desires, $r(198) = .16, p = .028, BF_{01} = 1.59$, intentions, $r(198) = .08, p = .255, BF_{01} = 9.28$, or idealization of parenthood, $r(198) = .09, p = .219, BF_{01} = 8.35$. Experiences of subtle or blatant racism was not significantly associated with parenting desires, $r(189) = -.001, p = .985, BF_{01} = 17.32$, intentions, $r(189) = -.03, p = .738, BF_{01} = 16.38$, or idealization of parenthood, $r(189) = -.03, p = .723, BF_{01} = 16.27$. Further, perceived ethnic discrimination was also not significantly associated with parenting desires, $r(218) = .12, p = .081, BF_{01} = 4.09$, intentions, $r(218) = -.01, p = .898, BF_{01} = 18.44$, or idealization of parenthood, $r(218) = .05, p = .442, BF_{01} = 13.83$ (see Table 2).

Among Group 2 (i.e., LGBTQ+ White individuals), daily heterosexist experiences were not significantly associated with parenting desires, $r(400) = .09$, $p = .071$, $BF_{01} = 4.94$, intentions, $r(400) = .03$, $p = .494$, $BF_{01} = 19.89$, or idealization of parenthood, $r(401) = -.08$, $p = .102$, $BF_{01} = 6.63$. Further, perceived ethnic discrimination was positively and significantly associated with parenting desires, $r(395) = .22$, $p < .001$, $BF_{01} = .001$, parenting intentions, $r(395) = .18$, $p < .001$, $BF_{01} = .007$, and idealization of parenthood $r(396) = .27$, $p < .001$, $BF_{01} < .001$ (see Table 3).

Finally, among Group 3 (i.e., cisgender heterosexual APIA individuals), experiences of subtle and blatant racism was positively and significantly associated with parenting desires, $r(240) = .25$, $p < .001$, $BF_{01} = .007$, but not with intentions, $r(240) = .16$, $p = .015$, $BF_{01} = .99$, or idealization of parenthood, $r(240) = .14$, $p = .029$, $BF_{01} = 1.81$. In addition, perceived ethnic discrimination was not significantly associated with parenting desires, $r(240) = .19$, $p = .003$, $BF_{01} = .23$, intentions, $r(240) = .05$, $p = .409$, $BF_{01} = 13.88$, or idealization of parenthood, $r(240) = -.04$, $p = .497$, $BF_{01} = 15.49$ (see Table 4).

Table 2. Pearson's correlations for all variables of interest among LGBTQ+ APIA participants

Variable	Desire	Intention	IOP	LPIM	MEIM	II	LGBTPC MS	SABR	PEDQ
Desire ^a	-								
Intention ^b	$r(218) = .63^*$	-							
IOP ^c	$r(218) = .30^*$	$r(218) = .49^*$	-						
LPIM ^d	$r(211) = .11$	$r(211) = .10$	$r(211) = -.15$	-					
MEIM ^e	$r(217) = .12$	$r(217) = .11$	$r(217) = .09$	$r(210) = .20$	-				
II ^f	$r(212) = .02$	$r(212) = -.04$	$r(212) = .04$	$r(211) = -.21$	$r(211) = -.08$	-			
LGBTPCMS ^g	$r(198) = .16$	$r(198) = .08$	$r(198) = .09$	$r(197) = .07$	$r(197) = .09$	$r(198) = .10$	-		
SABR ^h	$r(189) = -.001$	$r(189) = -.03$	$r(189) = -.03$	$r(182) = .02$	$r(183) = .21$	$r(183) = .21$	$r(180) = .34^*$	-	
PEDQ ⁱ	$r(218) = .12$	$r(218) = -.01$	$r(218) = .05$	$r(211) = -.04$	$r(217) = .08$	$r(212) = .20$	$r(200) = .30^*$	$r(189) = .39^*$	-
DHEQ ^j	$r(212) = .16$	$r(212) = .04$	$r(212) = -.07$	$r(211) = .31^*$	$r(211) = .01$	$r(212) = .15$	$r(198) = .39$	$r(183) = .46^*$	$r(212) = .21$

*

* $p < .001$

Note. ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire.

Table 3. *Pearson's correlations for all variables of interest among LGBTQ+ White participants.*

Variable	Desire	Intention	IOP	LPIM	MEIM	II	LGBTPCMS	SABR	PEDQ
Desire ^a	-								
Intention ^b	$r(402) = .72^*$	-							
IOP ^c	$r(402) = .44^*$	$r(402) = .41^*$	-						
LPIM ^d	$r(400) = .01$	$r(400) = -.05$	$r(401) = -.13$	-					
MEIM ^e	$r(401) = .14$	$r(401) = .20^*$	$r(401) = .26^*$	$r(399) = .18^*$	-				
II ^f	-	-	-	-	-	-			
LGBTPCMS ^g	-	-	-	-	-	-	-		
SABR ^h	-	-	-	-	-	-	-	-	
PEDQ ⁱ	$r(395) = .22^*$	$r(395) = .18^*$	$r(396) = .27^*$	$r(394) = -.01$	$r(394) = .14$	-	-	-	-
DHEQ ^j	$r(400) = .09$	$r(400) = .03$	$r(401) = -.08$	$r(399) = .22^*$	$r(399) = -.01$	-	-	-	$r(394) = .24^*$

* $p < .001$

Note. ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire.

Table 4. *Pearson's correlations for all variables of interest among cisgender heterosexual APIA participants.*

Variable	Desire	Intention	IOP	LPIM	MEIM	II	LGBTPCMS	SABR	PEDQ
Desire ^a	-								
Intention ^b	$r(241) = .71^*$	-							
IOP ^c	$r(240) = .34^*$	$r(240) = .51^*$	-						
LPIM ^d	-	-	-	-					
MEIM ^e	$r(241) = .18$	$r(241) = .28^*$	$r(240) = .15$	-	-				
II ^f	-	-	-	-	-	-			
LGBTPCMS ^g	-	-	-	-	-	-	-		
SABR ^h	$r(240) = .25^*$	$r(240) = .16$	$r(240) = .14$	-	$r(240) = .18$	-	-	-	
PEDQ ⁱ	$r(240) = .19$	$r(240) = .05$	$r(240) = -.04$	-	$r(240) = -.04$	-	-	$r(240) = .64^*$	-
DHEQ ^j	-	-	-	-	-	-	-	-	-

* $p < .001$

Note. ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire

DISCUSSION

This research, to the best of my knowledge, is the first quantitative investigation of the experiences of LGBTQ+ APIA people's beliefs about future parenthood and identity. Across three childfree samples of LGBTQ+ APIA, LGBTQ+ White, and cisgender heterosexual APIA adults, I found that overall, individuals reported moderate desires toward future parenthood, on average, but relatively lower intentions of future parenthood or idealization of parenthood. Although there were some significant group differences (i.e., the three different samples), generally speaking, there were few significant associations between identity development and future parenthood variables. In contrast to my expectations, there was strong support in favor of presumed null hypotheses (i.e., no differences between groups) across many of my research questions. These findings are particularly important given the noticeable gap in the literature on LGBTQ+ APIA people, and in turn, provide a foundation with which to guide directions for future research (as well as intersections with law, policy, and intervention). Below, I detail and interpret my descriptive findings as well as the findings addressing my core research questions. I also describe how this work informs theory and future research, and its strengths and limitations.

Descriptive statistics. To begin, participants had moderate levels of parenting desires but relatively lower levels of parenting intentions and idealization of parenthood. That parenting intentions and idealization of parenthood were descriptively lower than parenting desires aligns with previous literature on LGBTQ+ future parenthood (Riskind & Tornello, 2017; Simon et al., 2018). Further, all three groups (where applicable) reported average, or above average, identity development, indicating that most childfree

adults do indeed think about and invest in the identities they hold (e.g., sexual, racial-ethnic). This has also been previously reported in the literature (Kiang et al., 2016). Finally, participants reported few negative experiences as related to their identities, such as microaggressions or experiences of discrimination – and these findings did not necessarily align with previous research (Ching et al., 2018). One potential explanation for this is that participants' identity saliency (i.e., how often people think about their identity) was relatively low. This may have led to participants not labeling some negative experiences as microaggressions or discrimination if those actions were occurring leading to fewer reports, which has been reported on in the literature previously (Quinn & Earnshaw, 2013)¹⁰. Although each of these different areas of interest have been investigated and reported on in the literature, to my knowledge, no single study has incorporated simultaneous attention to these constructs, as well as among LGBTQ+ APIA people (Choi & Israel, 2016).

Research question 1. Given my specific interest in the experiences of LGBTQ+ APIA people, the first research question addressed how LGBTQ+ APIA people think about future parenthood and how important it is to them (RQ1a). Regarding perceptions of future parenthood, LGBTQ+ APIA people reported moderate desires toward becoming a parent in the future, but their intentions to do so and the importance of future parenthood (i.e., idealization of parenthood) were lower, not unlike the overall sample. However, when investigating potential group differences as they related to perceptions

¹⁰ Another potential explanation is that, due to COVID the number of interactions an individual has on any given day is likely far lower than we might typically expect, as a result we also see fewer instances of negativity. Understanding the proportion of microaggressions and discriminations based on number of average interactions a person has could be an important area of future research but is outside the scope of this study.

and importance of future parenthood (RQ1b), there were some significant differences, particularly regarding parenting intentions and importance of future parenthood. Specifically, cisgender heterosexual APIA people reported significantly greater intentions to become parents in the future and placed greater importance on parenthood than the other two groups, but LGBTQ+ APIA and LGBTQ+ White people were not significantly different from one another. Thus, my initial hypothesis was generally supported such that cisgender heterosexual APIA people reported greater perceptions and importance of future parenthood compared to LGBTQ+ APIA and LGBTQ+ White people (excluding desire to become a parent). Previous research has indicated that LGBTQ+ individuals generally report lower parenting desires and intentions than cisgender heterosexual individuals (Riskind & Patterson, 2010), although this appears to vary with numerous factors (e.g., partner gender assigned at birth; Riskind & Tornello, 2017). To the best of my knowledge, this is the first study to have uncovered this pattern of results among LGBTQ+ APIA, LGBTQ+ White, and cisgender heterosexual APIA individuals.

Finding that all individuals across groups reported moderate parenting desires, on average, and also relatively lower intentions and importance of future parenthood was unsurprising, given similar findings previous literature on future parenthood (Riskind & Tornello, 2017). It was interesting, however, to find differences between cisgender heterosexual APIA and LGBTQ+ individuals, but not between LGBTQ+ APIA and LGBTQ+ White groups. That LGBTQ+ APIA individuals more closely (statistically) resembled the LGBTQ+ White group as compared to the cisgender heterosexual APIA group is a unique finding in that it signals how different aspects of identity may impact perceptions and importance of future parenthood.

There are a number of potential explanations for these findings, one of which may be that the combination of LGBTQ+ and APIA identities function differently based on the sexual and gender identities in question. That is, the intersection of cisgender heterosexual and APIA identities may magnify one another such that cisgender heterosexual APIA people may report even greater perceptions and importance of future parenthood compared to their respective counterparts (i.e., LGBTQ+ and non-APIA people respectively; Ghavami et al., 2016). However, this magnification of beliefs around future parenthood may not occur at the intersection of LGBTQ+ and APIA identities. Previous work, informed by intersectionality theory, might suggest that the ways in which racial-ethnic, sexual, and gender identities “interact” with one another is dependent on the domain (e.g., outness) and situation in question (e.g., navigating disclosure among family compared to friends is different among LGBTQ+ POC), which has been supported by research among gay Filipino and Latino men (Ocampo, 2014). Thus, future work should continue to investigate these and other unique intersections, such as similarities or differences that might be present among lesbian, bisexual, and heterosexual APIA women, given that current work on the experiences of sexual minority individuals and future parenthood has largely focused on White women (Simon et al., 2018).

Another potential explanation for the above finding (i.e., differences between cisgender heterosexual APIA and LGBTQ+ participants, but no differences between the two LGBTQ+ groups) is that the intersection of race and/or sexuality more strongly impacts aspects of parenthood and family life *after* an individual is already a parent (or transitioning to become one). For example, previous work among Black lesbian mothers has found nuances in division of labor and relationship quality as compared to other

lesbian mothers in other racial-ethnic groups (Moore, 2011). For instance, research among predominantly White lesbian and gay adoptive parents has demonstrated generally egalitarian divisions of labor (Farr & Patterson, 2013), indicating that both racial-ethnic identity and sexual identity play roles during parenthood. Another possibility is that different associations based on intersecting identities change over time, such that the same study with older participants might yield different results, as informed by relational developmental systems theory (Lerner et al., 2015). Future work should continue to investigate how each of these identities, and their intersections, may impact (future) parenthood and family life, as well as these potential associations over time.

Research question 2. In addition to descriptively investigating perceptions and importance of future parenthood among the whole sample, I was also interested in understanding how aspects of identity development and achievement may be associated with future parenthood (RQ2a). My initial hypothesis that identity development would be associated with perceptions and importance of future parenthood had mixed support, such that racial-ethnic and LGBTQ+ identity development were associated with perceptions and importance of future parenthood, but in distinct ways. Specifically, greater racial-ethnic identity development was associated with greater perceptions and importance of future parenthood. This was not the case, however, for LGBTQ+ identity development, as no significant associations between LGBTQ+ identity development and perceptions and importance of future parenthood were present. This may in part be due to how engrained family values (as cultural norms) are in different racial-ethnic groups whereas these family values are not inherently part of LGBTQ+ culture (Ocampo, 2016). This further

indicates that identity development plays distinct roles based on the identity being assessed (i.e., racial-ethnic or LGBTQ+) and should be studied further.

Following initial associations of identity and future parenthood, I investigated group differences in these associations among LGBTQ+ APIA, LGBTQ+ White, or cisgender heterosexual APIA individuals. A small number of changes in associations occurred, in that evidence toward an alternative hypothesis generally weakened as compared to a null hypothesis of no differences (i.e., BFs between 0.33 to 3.00; Andraszewicz et al., 2014). Among the LGBTQ+ APIA group, racial-ethnic identity development was not associated with perceptions and importance of future parenthood, which was a deviation from the overall sample. This pattern did not occur among the LGBTQ+ White group (although racial-ethnic identity development was also not significantly associated with parenting intentions in LGBTQ+ White group as well). Consistent with the overall sample, however, LGBTQ+ identity development was not associated with perceptions and importance of future parenthood for LGBTQ+ APIA or LGBTQ+ White individuals. Finally, among the cisgender heterosexual APIA group, associations of racial-ethnic identity development with perceptions and importance of future parenthood were weaker or not significant as compared to the overall model. Specifically, parenting intentions were significantly associated with racial-ethnic identity development, but desires and idealization of parenthood were not. The final aspect of research question 2, whether associations of perceptions and importance of future parenthood differed among LGBTQ+ APIA while controlling for the overlapping variance in LGBTQ+ and racial-ethnic identity development, revealed no significant associations. That is, among LGBTQ+ APIA childfree adults, LGBTQ+ and racial-ethnic

identity development were not associated with perceptions and importance of future parenthood.

Descriptions of overall average perceptions and importance of future parenthood and finding that sexual and racial-ethnic identities seem to play unique roles in associations with perceptions and importance of future parenthood are important starting points for future intersectional research (Ching et al., 2018; Choi & Israel, 2016). That among LGBTQ+ White individuals racial-ethnic identity development was significantly associated with parenting desires and idealization of parenthood is particularly interesting. That these associations were not present among the LGBTQ+ APIA and that some of these associations were weaker or no longer significant compared to the previous model among the cisgender heterosexual APIA group is also particularly interesting. These findings may provide evidence that each intersection of sexual and racial-ethnic identities has unique associations with perceptions and importance of future parenthood, as has been found in other domains (e.g., familial relationships; Choi & Israel, 2016).

There are a number of potential explanations for this interesting pattern of results related to group differences in associations between racial-ethnic identity development and future parenthood. It may be that that LGBTQ+ White individuals who are considering future parenthood are more likely to grapple with their social identity as a White person, compared to a cisgender heterosexual individual, given the degree to which beliefs about family life and the process of (future) parenthood are racialized in the U.S. (Carey, 2012; Lee, 2015). One such example of how the family planning process is racialized is adoption. When individuals are completing forms to become adoptive parents, they must explicitly designate the racial identities of children who they would be

comfortable adopting (deBoer, 2009). Given that LGBTQ+ adults are more likely to adopt compared to cisgender heterosexual parents, it may also be more likely that LGBTQ+ White adults have engaged in racial-ethnic identity development as it relates to their beliefs about parenthood (Goldberg & Conron, 2018). That LGBTQ+ adults have been shown to be more proactive in some domains of preparing for parenthood (e.g., transitioning friendship networks during the transition to parenthood; Simon et al., 2019) may indicate that racial-ethnic identity development is also part of this preparation. Thus, an intersectional perspective of this work might suggest that this is how LGBTQ+ people come to interpret and understand their experiences, *through* the lens of race (Ghavami et al., 2016).

There is, however, also the possibility that parenthood is believed to be a heteronormative (i.e., the normalizing of heterosexuality; Sadika et al., 2020) practice, and by becoming a parent, an LGBTQ+ person is investing in and maintaining current practices and institutions surrounding family life (Cao et al., 2016; Polikoff, 2008; Warner, 1991). Further, heteronormative practices and beliefs about parenthood and family life are themselves racialized based on what narrative milestones are believed to be acceptable, respectable, or even required pathways to “normal” life (Lee, 2015; Polikoff, 2008). Given that childlessness, and being “unfit” parents, are deep-seated, inappropriate (and incorrect) stereotypes about LGBTQ+ people (Cao et al., 2016; Gato et al., 2013), the exact opposite action (i.e., becoming a parent) may serve as a point of access to normative institutions and social power (Warner, 1991). What does and does not count as the “normal” or “correct” way of being as they relate to aspects of family life (and what makes a family), community building, and identity development, are pivotal

throughout life given that deviations from “normal” or “correct” are often punished by societal structures (e.g., discriminatory laws) and interpersonal relationships (e.g., harassment; Polikoff, 2008; Warner, 1991). At the same time, these aspects of family life are also imbued with our understandings of race (or Whiteness; Butler, 2006; Polikoff, 2008; Warner, 1991), gender, and sexuality (Butler, 2017), among other constructs (e.g., class status or country of origin as an identity; Hammami, 2016).

At the same time, that Whiteness has worked to shape our understanding and beliefs about family life also suggests that there is an opportunity for racial-ethnic identity development among White people during the transition to parenthood and prior to it. Previous qualitative work among (cisgender heterosexual) White transracial adoptive parents has found that these parents’ racial consciousness and awareness of their own identity increased across the transition to parenthood (and during the stage of middle childhood for their children; Killian & Khanna, 2019). One possibility among LGBTQ+ adults, then, is that even at the onset of considerations of parenthood, development around one’s racial-ethnic identity may occur (deBoer, 2009).

In the context of the cisgender heterosexual group (i.e., Group 3), I am able to draw on previous literature to understand why cisgender heterosexual APIA individuals’ identity development was only associated with parenting intentions but not desires or idealization of parenthood. Research has found that APIA individuals report becoming a parent as one of the most important goals in life at a rate 17% higher than the general public (Pew Research Center, 2013). It may be that while parenting desires are not heavily impacted by racial-ethnic identity development, the degree to which an individual *intends* to become a parent in the future is related to one’s identity development.

Distinctions between parenting desires and intentions are not uncommon in the family psychology literature (Riskind & Tornello, 2017), yet establishing the ways in which (APIA) identity development is associated with perceptions of future parenthood would fill a clear gap in the literature (Choi & Israel, 2016). Another possibility is that the *intent* to become a parent in the future is associated with racial-ethnic identity development but at a later point in time following other developmental or narrative milestones (e.g., getting married or having stable finances; deBoer, 2009). For example, previous work has found that lesbian women report wanting a stable job prior to becoming a parent more than do bisexual or heterosexual women (Simon et al., 2018), and thus other such conditions may need to be met before associations between racial-ethnic identity development and parenting intentions appear.

Another explanation for the differences found in perceptions and importance of future parenthood based on race are the ways in which we emphasize parenthood in the U.S. That is, the way in which parenthood is discussed as desirable and a cultural milestone (in Western nations; Berg & Peltola, 2015; Hammack & Toolis, 2014) is grounded in an image of middle-class, suburban family life, which is inevitably also composed of monoracial (cisgender heterosexual) White families (deBoer, 2009) and thus pushes families that do not conform to this milestone to social margins of how we define (normative) family life (Peltola, 2016; Warner, 1991). If APIA people are perceived as foreign, so much so that a Westernized identity, such as being gay, makes them more socially acceptable (Semrow et al., 2020), it seems understandable that APIA people might report less than positive feelings or clear intentions regarding future parenthood.

Research question 3. The third research question investigated how identity integration may have been associated with LGBTQ+ and racial-ethnic identity development and perceptions and importance of future parenthood. My initial hypothesis was that identity integration would be associated with perceptions and importance of future parenthood, which was not supported. Given that initial models without identity integration were not significant (i.e., RQ2c), it was unsurprising to find that identity integration was not associated with perceptions and importance of future parenthood. One potential explanation for these non-significant findings is that identity integration is simply not associated with perceptions and importance of future parenthood or instead may impact outcomes only once an individual becomes a parent. Another explanation, informed by intersectionality theory, might suggest that identity integration is distinct from identity intersections (Syed & McLean, 2016). For example, identity integration may more closely resemble aspects of identity management and disclosure surrounding various identities (e.g., LGBTQ+ identity; Ocampo & Soodjinda, 2016), as individuals perceive their identities to be more or less close to one another (Chrobot-Mason et al., 2001). These findings only further confirm the need for continuing intersectional research as well as qualitative research, given that even across shared identities (e.g., racial-ethnic; sexual), such as those in this study, research findings may not always overlap (Bowleg & Bauer, 2016).

Research question 4. The fourth and final research question was focused on how negative experiences such as microaggressions and/or discrimination based on sexual and/or racial-ethnic identity might have been associated with perceptions and importance of future parenthood. I found mixed associations here such that racial-ethnic

discrimination was positively associated with perceptions and importance of future parenthood – that is, those who reported experiencing greater levels of discrimination also had higher perceptions and importance of future parenthood. However, daily heterosexual experiences, subtle and blatant racism toward APIA people, and LGBTQ+ POC specific microaggressions were all not significantly associated with perceptions and importance of future parenthood. It may be that sexual identity based microaggressions are specific to domain. That is, microaggressions specific to family life or (future) parenthood would be associated with perceptions and importance of future parenthood, but microaggressions related to other domains (e.g., gender expression) would not be expected to be relevant to expectations for future parenthood. However, to the best of my knowledge, this possibility has not yet been investigated in the context of future parenthood. The finding that subtle and blatant racism toward APIA people was not significant may be due to underreporting, as noted earlier in the discussion, such that having multiple marginalized identities may make it difficult to pinpoint which identity has been targeted (Bowleg et al., 2003). That is, among the LGBTQ+ APIA group, subtle and blatant racism may be underreported which may not occurred in the cisgender heterosexual APIA group. This might explain why subtle and blatant racism toward APIA people was only associated with one aspect of future parenthood (intentions) among cisgender heterosexual APIA people but not LGBTQ+ APIA people.

Specifically, among LGBTQ+ APIA individuals, I found that perceived ethnic discrimination was not significantly associated with perceptions and importance of future parenthood, in addition to all previous non-significant associations. However, the LGBTQ+ White group followed the patterns among the overall sample, such that

perceived ethnic discrimination was significantly associated with perceptions and importance of future parenthood, but daily heterosexist experiences were not. Interestingly, among the cisgender heterosexual APIA group, subtle and blatant racism toward APIA people was significantly and positively associated with parenting desires but not with intentions or idealization of parenthood (importance of future parenthood). However, perceived ethnic discrimination showed no significant associations with perceptions and importance of future parenthood. It may be that specifying distinct instances of racism as they relate to APIA people, rather than assessing broad experiences discrimination, could lead to greater accuracy of reporting or account for specific experiences not always represented in broader measures of discrimination (Balsam et al., 2011). The need for purposefully tailored measures, such as the distinctions between subtle and blatant racism toward APIA people and general perceived ethnic discrimination, has also been reported on in the literature (Logie & Earnshaw, 2015). Thus, this distinction among cisgender heterosexual APIA adults may have occurred as a result of measurement issues rather than theoretical distinction.

Indeed, the unique intersection of identities (e.g., LGBTQ+ APIA) may have led to distinct findings as compared with an alternative approach of a traditional quantitative additive process (e.g., including multiple categorical identity variables into a single model). Although there were instances in which LGBTQ+ APIA individuals statistically resembled LGBTQ+ White individuals, there were several instances in which this did not occur. For example, I found that there were no significant associations between LGBTQ+ identity development and perceptions and importance of future parenthood among LGBTQ+ people, irrespective of group, but there were differences in associations

between racial-ethnic identity development and perceptions and importance of future parenthood among LGBTQ+ White but not LGBTQ+ APIA individuals. Further, cisgender heterosexual APIA and LGBTQ+ APIA people rarely statistically resembled one another. Specifically, the associations around racial-ethnic identity development and parenting intentions among cisgender heterosexual APIA people, as well as with perceived ethnic discrimination and perceptions and importance of future parenthood among cisgender heterosexual APIA people, were significant while this was not the case among LGBTQ+ APIA people. One potential explanation is that LGBTQ+ APIA may have a difficult time determining whether the microaggression or discrimination they were targeted for was related to their sexual or racial-ethnic identity or a combination of both. This difficulty may then lead to an underreporting of experiences, which has been supported by literature informed by intersectionality theory (Bowleg et al., 2003).

Implications for theory. Finally, it is relevant to note this work's contribution to relevant theories used in the psychological sciences such as intersectionality (Cole, 2009) and relational developmental systems theories (Lerner, 2019; Lerner & Chase, 2019). This work also establishes the potential for these two theories to be readily applied to LGBTQ+ APIA populations while including other more well-studied populations (i.e., LGBTQ+ White people; cisgender heterosexual APIA people) as comparisons. This is a needed incremental step in LGBTQ+ family psychology's increasing attention to the role of theory in developmental science (Farr et al., 2017). That this work is also quantitative and informed by intersectionality theory also serves as an example of the nuanced and distinct ways that intersectionality can be integrated in quantitative approaches (Bowleg & Bauer, 2016).

Previous studies have taken additive or “stacking” approaches to intersectional analyses, such that a variable is included in each model to indicate an identity (e.g., dummy coded sexual identity variables; Cole, 2009). However, this additive approach “controls” for the other identities in question during this process, and in turn, wipes away the diversity of experiences that individual groups may have. Thus, by intentionally creating groups before analyses, I was able to circumvent this initial barrier to intersectional research. In place of dichotomous variables to indicate categorical identities, I was instead able to investigate the development of the identities of interest allowing me to research various processes in identity development, rather than group membership as a sole determinant. That I did find differential associations between identity and perceptions of future parenthood based on group membership further confirms the importance of intersectionality theory in the psychological sciences (Bowleg & Bauer, 2016; Sarno et al., 2015).

My work can also be understood under relational developmental systems (RDS) theory (Lerner, 2019) as a snapshot on how LGBTQ+ people view perceptions of future parenthood and identity development at a singular moment in time (i.e., cross-sectional). As a meta-theory that could incorporate intersectionality theory, RDS might suggest an emphasis on the processes among these three different identity intersections of sexual and racial-ethnic identity. That relationship status, as well as age, both common factors in perceptions and importance of future parenthood (Riskind & Tornello, 2017), were not associated with future parenthood here is particularly interesting. Identifying relational processes that are likely to occur and impact specific domains, such as having romantic and sexual partners and beliefs about parenthood is an important consideration for future

research. At the same time, the absence of significant associations is equally as important in identifying the relational processes and relationship that are associated with various outcomes (Lerner & Chase, 2019). RDS also points to another next step in informing this work, which is whether the associations between these relational processes (i.e., associations of identity development and perceptions of future parenthood) change at different developmental stages over time (Lerner, 2019).

Strengths, Limitations, and Future Directions

As with any study, there are a number of strengths and limitations to this work. To begin, the separation of distinct identities into three groups created a foundation with which quantitative intersectional analyses could occur. In addition to this is my overarching contribution to the literature on LGBTQ+ APIA people's experiences as they relate to future parenthood. Another strength is that a number of the measures used in this study were applicable, with little to no editing, to all participants. That I was able to readily compare across all three groups because the measures themselves were the same is a strength, as it reduces the possibility that individual measures separately applied to each group accounted for differences.

At the same time, however, this also represents a limitation in that measures are not explicitly tailored to each of these identity groups and thus may result in the loss of relevant associations that could be present. Additional limitations include the cross-sectional aspect of my research design as well as the lack of analyses that emphasize within-group variation (e.g., analyses by specific ethnic identity in the APIA group) and diversity of the sample more broadly (e.g., race representation beyond APIA and White individuals). Further, that this sample was collected online (through marketing and

behavioral research companies) and that it was done so during the COVID pandemic may impact the generalizability of these findings. For example, it may be that aspects of life related to (future) parenthood has changed dramatically as a result of a loss of income, lack of social support or social contacts, as well as a lack of resources. Recent literature suggests that individuals are more likely to develop a mental health disorder without any prior history (among LGBTQ+ adults; Flentje et al., 2020), this drop in mental health may then impact considerations of one's future and in turn parenthood.

Future research should continue this line of work and emphasize identity-based processes while “controlling” for group membership, similarly to the design that I created. It may be that other identity-based processes such as socialization (McLean et al., 2020; Ocampo, 2016) or identity importance (distinct from development; Huang & Fang, 2019; Kim & Epstein, 2018) are associated with aspects of future parenthood. Longitudinal designs would also provide a major benefit in that it would allow the tracking of identity development rather than cross-sectional estimations of development. Another consideration would be to further investigate within-group variation for these three groups. Given previous literature, it is likely the case that more specific distinctions (and intersections) between sexual and racial-ethnic identity may be associated with future parenthood that are obscured by the collapsing of various identities (e.g., all LGBTQ+ APIA individuals in a singular group). This also is an important consideration among the APIA groups in that the ethnic diversity present in just these two groups is staggering and additional research is needed to investigate potential ethnic identity-based similarities or differences. Thus, the increasingly complex intersection of racial and ethnic identity with sexual and gender identity is a much-needed area of study.

The inclusion of other racial-ethnic groups (e.g., Black Americans) would also provide additional information as to potential similarities and differences across multiple different larger racial-ethnic groups (e.g., Latinx Americans) which in turn could inform law, policy, and interventions (e.g., culturally informed and tailored interventions for each group). Finally, further investigation of the associations found between perceived ethnic discrimination and future parenthood among White LGBTQ+ individuals open many doors toward future research on understanding the role of Whiteness with other identities (e.g., LGBTQ+) and the impact of race on future parenthood. That White individuals report similar reports of racial-ethnic identity development and perceived ethnic discrimination as compared to APIA groups has a number of implications that are outside of the scope of this current study. Given that many of the effects found here, while likely are able to be replicated, are small also indicates that additional research is needed before a more substantial and stark interpretation of these findings occurs. A replication should also be conducted, as some of the (non-significant) findings indicated only anecdotal evidence (from a Bayesian framework), to ensure a strong foundation for future research.

Implications for policy and practice. There are a number of ways in which this work can inform future policy and practice. With the recent completion of the 2020 U.S. Census, which projected APIA people to be one of the fastest growing demographic groups (Budiman & Ruiz, 2021), the ways in which we “count” individuals based on our identities and relationships (e.g., same-sex couples) also determines a number of fiscal policies, such as determining the resources allocated to scientific research with those very groups. For example, my work might suggest that funding programs focused on identity

development in the context of family life rather than family planning may be more effective in supporting LGBTQ+ and APIA groups. This work also further confirms the need to provide additional training for family planning practitioners to attend to how racial-ethnic identity does, and does not, play a role in beliefs about future parenthood. That LGBTQ+ APIA individuals have the highest rates of interracial relationships, and with White partners (Kastanis & Wilson, 2014), may make this particularly relevant.

Conclusion

This research contributes to the growing foundation of literature on the experiences of LGBTQ+ APIA individuals (Choi & Israel, 2016), particularly in the context of future parenthood and identity development. With such a new area of study in the family psychological sciences, reporting on the absence, as well as the presence, of associations is much needed. As the numbers of LGBTQ+ and APIA people in the U.S. continue to rise (Budiman & Ruiz, 2021), understanding LGBTQ+ APIA people's experiences will become increasingly relevant as we develop ways to support future families. This work may also be of use to practitioners and clinicians working in family planning settings as well as those who rely on clinical models with which to support their clients to inform culturally appropriate practices where needed (Ching et al., 2018; Choi & Israel, 2016). Finally, this work can also inform law and policy reform among LGBTQ+ and APIA individuals in the U.S. With the recent completion of the U.S. Census for 2020, governmental agencies will use this information to allocate funding toward specific racial-ethnic groups. This work can provide direction in the allocation of these funds by indicating where support may be especially impactful among LGBTQ+ APIA individuals but also their families and surrounding communities.

APPENDIX A

Table 1. *Descriptive and demographic information by group membership*

	Group 1 LGBTQ+ APIA (<i>n</i> = 220)	Group 2 LGBTQ+ White (<i>n</i> = 407)	Group 3 Cisgender heterosexual APIA (<i>n</i> = 242)	Total (<i>N</i> = 869)
Gender % TGNB	18.2%	47.4%	-	26.8%
Gender % Cisgender women	54.5%	27.2%	50.5%	40.3%
Gender % Cisgender men	27.3%	27.2%	49.2%	33.4%
Relationship Status (% Single)	55.5%	59.5%	57.4%	57.9%
Age (years)	23.73 (4.92)	27.96 (6.29)	25.38 (5.27)	26.15 (5.95)
Income (\$K)	\$69.69 (\$58.30)	\$56.97 (\$87.68)	\$87.98 (\$74.10)	\$68.73 (\$78.28)
Desire ^a	2.43 (1.09)	2.52 (1.24)	(2.59 (1.05)	2.52 (1.15)
Intention ^b	2.12 (1.49)	2.22 (1.64)	2.71 (1.62)	2.34 (1.61)
IOP ^c	2.14 (.62)	2.22 (.62)	2.47 (.63)	2.27 (.62)
LPIM ^d	5.01 (.97)	5.25 (1.08)	-	5.17 (1.05)
MEIM ^e	2.79 (.56)	2.43 (.65)	2.89 (.52)	2.64 (.62)
II ^f	3.72 (1.26)	-	-	3.72 (1.26)
PEDQ ^g	1.88 (.68)	1.71 (.83)	1.85 (.60)	1.79 (.74)
LGBTPCMS ^h	1.84 (.83)	-	-	1.84 (.83)
SABR ⁱ	2.45 (.89)	-	2.21 (.82)	2.31 (.85)
DHEQ ^j	1.71 (.57)	1.74 (.61)	-	1.73 (.59)

Note. TGNB = Transgender/Nonbinary ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire. Data missing throughout based on missing participant responses, only data used in analyses are represented here.

Table 2. Pearson's correlations for all variables of interest among LGBTQ+ APIA participants, p-values.

Variable	Desire	Intention	IOP	LPIM	MEIM	II	LGBTPCMS	SABR	PEDQ
Desire ^a	-								
Intention ^b	$r(218) = .63,$ $p < .001$	-							
IOP ^c	$r(218) = .30,$ $p < .001$	$r(218) = .49,$ $p < .001$	-						
LPIM ^d	$r(211) = .11,$ $p = .110$	$r(211) = .10,$ $p = .095$	$r(211) = -.15,$ $p = -.153$	-					
MEIM ^e	$r(217) = .12,$ $p = .088$	$r(217) = .11,$ $p = .102$	$r(217) = .09,$ $p = .198$	$r(210) = .20,$ $p = .004$	-				
II ^f	$r(212) = .02,$ $p = .782$	$r(212) = -.04,$ $p = .616$	$r(212) = .04,$ $p = .549$	$r(211) = -.21,$ $p = .002$	$r(211) = -.08,$ $p = .245$	-			
LGBTPCMS ^g	$r(198) = .16,$ $p = .028$	$r(198) = .08,$ $p = .255$	$r(198) = .09,$ $p = .219$	$r(197) = .07,$ $p = .351$	$r(197) = .09,$ $p = .232$	$r(198) = .10,$ $p = .185$	-		
SABR ^h	$r(189) = -.001,$ $p = .985$	$r(189) = -.03,$ $p = .738$	$r(189) = -.03,$ $p = .723$	$r(182) = .02,$ $p = .806$	$r(183) = .21,$ $p = .004$	$r(183) = .21,$ $p = .005$	$r(180) = .34,$ $p < .001$	-	
PEDQ ⁱ	$r(218) = .12,$ $p = .081$	$r(218) = -.01,$ $p = .898$	$r(218) = .05,$ $p = .442$	$r(211) = -.04,$ $p = .557$	$r(217) = .08,$ $p = .230$	$r(212) = .20,$ $p = .003$	$r(200) = .30,$ $p < .001$	$r(189) = .39,$ $p < .001$	-
DHEQ ^j	$r(212) = .16,$ $p = .022$	$r(212) = .04,$ $p = .572$	$r(212) = -.07,$ $p = .300$	$r(211) = .31,$ $p < .001$	$r(211) = .01,$ $p = .880$	$r(212) = .15,$ $p = .025$	$r(198) = .39,$ $p < .001$	$r(183) = .46,$ $p < .001$	$r(212) = .21,$ $p = .002$

* $p < .001$

Note. ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire.

Table 3. Pearson's correlations for all variables of interest among LGBTQ+ White participants, p-values.

Variable	Desire	Intention	IOP	LPIM	MEIM	II	LGBTPCMS	SABR	PEDQ
Desire ^a	-								
Intention ^b	$r(402) = .72,$ $p < .001$	-							
IOP ^c	$r(402) = .44,$ $p < .001$	$r(402) = .41,$ $p < .001$	-						
LPIM ^d	$r(400) = .01,$ $p = .807$	$r(400) = -.05,$ $p = .296$	$r(401) = -.13,$ $p = .010$	-					
MEIM ^e	$r(401) = .14,$ $p = .006$	$r(401) = .20,$ $p < .001$	$r(401) = .26,$ $p < .001$	$r(399) = .18,$ $p < .001$	-				
II ^f	-	-	-	-	-	-			
LGBTPCMS ^g	-	-	-	-	-	-	-		
SABR ^h	-	-	-	-	-	-	-	-	
PEDQ ⁱ	$r(395) = .22,$ $p < .001$	$r(395) = .18,$ $p < .001$	$r(396) = .27,$ $p < .001$	$r(394) = -.01,$ $p = .906$	$r(394) = .14,$ $p = .005$	-	-	-	-
DHEQ ^j	$r(400) = .09,$ $p = .071$	$r(400) = .03,$ $p = .494$	$r(401) = -.08,$ $p = .102$	$r(399) = .22,$ $p < .001$	$r(399) = -.01,$ $p = .842$	-	-	-	$r(394) = .24,$ $p < .001$

* $p < .001$

Note. ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire.

Table 4. *Pearson's correlations for all variables of interest among cisgender heterosexual APIA participants, p-values.*

Variable	Desire	Intention	IOP	LPIM	MEIM	II	LGBTPCMS	SABR	PEDQ
Desire ^a	-								
Intention ^b	$r(241) = .71,$ $p < .001$	-							
IOP ^c	$r(240) = .34,$ $p < .001$	$r(240) = .51,$ $p < .001$	-						
LPIM ^d	-	-	-	-					
MEIM ^e	$r(241) = .18,$ $p = .005$	$r(241) = .28,$ $p < .001$	$r(240) = .15,$ $p = .024$	-	-				
II ^f	-	-	-	-	-	-			
LGBTPCMS ^g	-	-	-	-	-	-	-		
SABR ^h	$r(240) = .25,$ $p < .001$	$r(240) = .16,$ $p = .015$	$r(240) = .14,$ $p = .029$	-	$r(240) = .18,$ $p = .007$	-	-	-	
PEDQ ⁱ	$r(240) = .19,$ $p = .003$	$r(240) = .05,$ $p = .409$	$r(240) = -.04,$ $p = .497$	-	$r(240) = -.04,$ $p = .549$	-	-	$r(240) = .64,$ $p < .001$	-
DHEQ ^j	-	-	-	-	-	-	-	-	-

* $p < .001$

Note. ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire.

Table 5. Pearson's correlations for all variables of interest among LGBTQ+ APIA participants, Bayes Factors.

Variable	Desire	Intention	IOP	LPIM	MEIM	II	LGBTPCMS	SABR	PEDQ
Desire ^a	-								
Intention ^b	$r(218) = .63$, BF < .001	-							
IOP ^c	$r(218) = .30$, BF = .001	$r(218) = .49$, BF < .001	-						
LPIM ^d	$r(211) = .11$, BF = 5.12	$r(211) = .10$, BF = 7.07	$r(211) = -.15$, BF = 1.57	-					
MEIM ^e	$r(217) = .12$, BF = 4.34	$r(217) = .11$, BF = 4.90	$r(217) = .09$, BF = .811	$r(210) = .20$, BF = .292	-				
II ^f	$r(212) = .02$, BF = 17.65	$r(212) = -.04$, BF = 16.17	$r(212) = .04$, BF = 15.33	$r(211) = -.21$, BF = .147	$r(211) = -.08$, BF = 9.323	-			
LGBTPCMS ^g	$r(198) = .16$, BF = 1.59	$r(198) = .08$, BF = 9.28	$r(198) = .09$, BF = 8.35	$r(197) = .07$, BF = 11.46	$r(197) = .09$, BF = 8.67	$r(198) = .10$, BF = 7.37	-		
SABR ^h	$r(189) = -.001$, BF = 17.32	$r(189) = -.03$, BF = 16.18	$r(189) = -.03$, BF = 16.27	$r(182) = .02$, BF = 15.40	$r(183) = .21$, BF = 9.04	$r(183) = .21$, BF = .230	$r(180) = .34$, BF = .001	-	
PEDQ ⁱ	$r(218) = .12$, BF = 4.09	$r(218) = -.01$, BF = 18.44	$r(218) = .05$, BF = 13.83	$r(211) = -.04$, BF = 15.40	$r(217) = .08$, BF = 9.04	$r(212) = .20$, BF = .230	$r(200) = .30$, BF = .001	$r(189) = .39$, BF < .001	-
DHEQ ^j	$r(212) = .16$, BF = 1.32	$r(212) = .04$, BF = 15.63	$r(212) = -.07$, BF = 10.73	$r(211) = .31$, BF < .001	$r(211) = .01$, BF = 18.09	$r(212) = .15$, BF = 1.50	$r(198) = .39$, BF < .001	$r(183) = .46$, BF < .001	$r(212) = .21$, BF = .17

* $p < .001$

Note. ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire.

Table 6. *Pearson's correlations for all variables of interest among LGBTQ+ White participants, Bayes Factors.*

Variable	Desire	Intention	IOP	LPIM	MEIM	II	LGBTPCMS	SABR	PEDQ
Desire ^a	-								
Intention ^b	$r(402) = .72,$ BF < .001	-							
IOP ^c	$r(402) = .44,$ BF < .001	$r(402) = .41,$ BF < .001	-						
LPIM ^d	$r(400) = .01,$ BF = 24.40	$r(400) = -.05,$ BF = 14.56	$r(401) = -.13,$ BF = .88	-					
MEIM ^e	$r(401) = .14,$ BF = .58	$r(401) = .20,$ BF = .01	$r(401) = .26,$ BF < .001	$r(399) = .18,$ BF = .06	-				
II ^f	-	-	-	-	-	-			
LGBTPCMS ^g	-	-	-	-	-	-	-		
SABR ^h	-	-	-	-	-	-	-	-	
PEDQ ⁱ	$r(395) = .22,$ BF = .002	$r(395) = .18,$ BF = .05	$r(396) = .27,$ BF < .001	$r(394) = -.01,$ BF = 24.77	$r(394) = .14,$ BF = .48	-	-	-	-
DHEQ ^j	$r(400) = .09,$ BF = 4.94	$r(400) = .03,$ BF = 19.89	$r(401) = -.08,$ BF = 6.63	$r(399) = .22,$ BF = .002	$r(399) = -.01,$ BF = 24.61	-	-	-	$r(394) = .24,$ BF < .001

* $p < .001$

Note. ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire.

Table 7. Pearson's correlations for all variables of interest among cisgender heterosexual APIA participants, Bayes Factors.

Variable	Desire	Intention	IOP	LPIM	MEIM	II	LGBTPCMS	SABR	PEDQ
Desire ^a	-								
Intention ^b	$r(241) = .71,$ BF < .001	-							
IOP ^c	$r(240) = .34,$ BF < .001	$r(240) = .51,$ BF < .001	-						
LPIM ^d	-	-	-	-					
MEIM ^e	$r(241) = .18,$ BF = .39	$r(241) = .28,$ BF = .001	$r(240) = .15,$ BF = 1.52	-	-				
II ^f	-	-	-	-	-	-			
LGBTPCMS ^g	-	-	-	-	-	-	-		
SABR ^h	$r(240) = .25,$ BF = .01	$r(240) = .16,$ BF = .99	$r(240) = .14,$ BF = 1.81	-	$r(240) = .18,$ BF = .49	-	-	-	
PEDQ ⁱ	$r(240) = .19,$ BF = .23	$r(240) = .05,$ BF = 13.88	$r(240) = -.04,$ BF = 15.49	-	$r(240) = -.04,$ p = .549	-	-	$r(240) = .64,$ BF < .001	-
DHEQ ^j	-	-	-	-	-	-	-	-	-

* $p < .001$

Note. ^aDesire for future parenthood. ^bIntentions of future parenthood. ^cIdealization of Parenthood. ^dLGB-Positive Identity Measure. ^eMultigroup Ethnic Identity Measure. ^fIdentity Integration. ^gPerceived Ethnic Discrimination Questionnaire. ^hLGBT People of Color Microaggressions Scale. ⁱSubtle and Blatant Racism against Asian Americans. ^jDaily Heterosexist Experiences Questionnaire.

APPENDIX B

Method (additional description)

Example Survey can be found at:

https://osf.io/7urpk/?view_only=50aeeabee665467ca635f9a525324388

Procedure

Participants were recruited through three different sources, Qualtrics, Prolific, and Amazon's Mechanical Turk (MTurk) all three of which are commonly used online recruitment websites/services. Qualtrics was also used to administer surveys via Qualtrics survey software. Multiple recruitment sources were needed given the difficulty of recruiting large samples of hard-to-reach populations. To be eligible for the study, participants needed to be between the ages of 18 and 39 years old, childfree, live in the United States, be proficient in English (to be able to complete the survey), and identify with one of the three groups of interest (i.e., LGBTQ+ APIA, LGBTQ+ White, or cisgender heterosexual APIA people). Participants were compensated a monetary value of \$3-4 USD through the respective recruitment sources (e.g., Qualtrics compensates participants with "points" which can be spent on various gift cards) based on the length of the survey (e.g., cisgender heterosexual participants received fewer measures than LGBTQ+ participants). Following consent, participants completed an online survey that asked a variety of questions primarily related to perceptions of future parenthood and identity. The project was approved by the University of Kentucky Institutional Review Board.

Participants

Participants were either APIA LGBTQ+ individuals (i.e., group 1), White LGBTQ+ individuals (i.e., group 2), or APIA cisgender and heterosexual individuals (i.e., group 3), all of whom were childfree, and between the ages of 18 and 39 ($N = 869$). Participants recruited through Prolific were the largest group ($n = 466$; 53.7%), followed by Qualtrics ($n = 352$; 40.5%), and MTurk ($n = 51$; 5.8%). In the first group (i.e., LGBTQ+ APIA; $n = 220$), the majority of participants were cisgender women ($n = 120$; 54.5%), followed by cisgender men ($n = 60$; 27.3%), and finally, a number of additional transgender and nonbinary (TGNB) identities were represented (e.g., genderfluid, agender; $n = 40$; 18.2%). Regarding sexual identity, the most represented identity were bisexual individuals ($n = 106$; 48.2%), followed by smaller numbers of gay ($n = 37$; 16.8%), lesbian ($n = 24$; 10.9%), asexual ($n = 20$; 9.1%), queer ($n = 20$; 9.1%), and pansexual ($n = 12$; 5.5%) and questioning ($n = 1$; 0.4%). In the context of racial-ethnic identity, individuals in group 1 were all LGBTQ+ identified APIA. Any individual who identified as APIA (including multiracial individuals; $n = 20$; 9.1%) and LGBTQ+ were placed into group 1. As for relationship status, the largest group of individuals reported that they were single ($n = 122$; 55.5%), followed by being in a committed relationship ($n = 50$; 22.7%), dating ($n = 28$; 12.7%), legally recognized marriage ($n = 12$; 5.5%), engaged ($n = 4$; 1.8%), and not legally recognized marriage ($n = 2$; 0.9%). Finally, group 1 was on average age of 23.73 years old ($SD = 4.92$) and had a middle-class income ($M = \$69,692$; $SD = \$58,300$; Med = \$50,000).

Regarding group 2 (i.e., White LGBTQ+ individuals; $n = 407$), there was an equal split for cisgender women ($n = 107$; 27.2%) and men ($n = 107$; 27.2%), followed by nonbinary people ($n = 73$; 18.0%), transgender men ($n = 46$; 11.3%), gender nonconforming individuals ($n = 26$; 6.4%), genderfluid people ($n = 24$; 5.9%), transgender women ($n = 15$; 3.7%) and additional identities (i.e., write-in options) not listed above such as agender or bigender ($n = 9$; 2.2%). Similar to group 1, bisexual individuals were the largest sexual identity group in group 2 ($n = 140$; 34.4%), followed by gay ($n = 83$; 20.4%), queer ($n = 71$; 17.5%), pansexual ($n = 46$; 11.3%), lesbian ($n = 41$; 10.7%), and asexual people ($n = 25$; 6.1%) or another self-described identity (monosexual; .2%). All participants in group 2 were monoracial White and LGBTQ+ identified. Regarding relationship status, a slight majority of group 2 reported that they were single ($n = 242$; 59.5%), followed by committed relationship ($n = 125$; 30.7%), legally recognized marriage ($n = 42$; 10.3%), dating ($n = 37$; 9.1%), engaged ($n = 19$; 4.7%), not legally recognized marriage ($n = 8$; 2.0%), and those who reported a polyamorous/sexual relationship ($n = 3$; 0.7%). Finally, group 2 individuals were on average 27.96 years old ($SD = 6.29$) and had a middle-class income ($M = \$56,970$; $SD = \$87,676$; Med = \$40,000).

Regarding group 3 (i.e., cisgender heterosexual APIA people; $n = 242$), there was an approximately equal split between cisgender women ($n = 123$; 50.8%) and cisgender men ($n = 119$; 49.2%), and all participants were heterosexual. In the context of racial-ethnic identity for group 3, the vast majority of participants were monoracial Asian/Pacific Islander American ($n = 239$; 98.8%) in addition to 3 APIA/White biracial individuals. Regarding relationship status for group 3, the largest group was single ($n = 139$; 34.2%), followed by committed relationship ($n = 47$; 11.6%), legally recognized marriage ($n = 29$; 7.1%), dating ($n = 18$; 4.4%), engaged ($n = 5$; 1.2%), not legally recognized marriage ($n = 2$; 0.5%), separated ($n = 1$; 0.2%) and friends with benefits (a write-in option; $n = 1$; 0.2%). Finally, individuals in group 3 were on average 25.38 years old ($SD = 5.27$) and had a middle-class income ($M = \$87,983$; $SD = \$74,099$; Med = \$70,000; see Table 1 for participant demographics).

Measures

Desires and intentions of parenthood. Participants responded to two items assessing the level of desire and intentionality that an individual has toward becoming a parent in the future. To assess parenting desires, participants received the question, “*How often do you think about becoming a parent?*” with responses on a scale of 1 (*Never*) to 5 (*Very often*) and to assess parenting intentions, participants receive the question “*What are you willing to give up to have children?*” with responses on a scale of 1 (*It doesn't matter whether or not I become a parent*) to 6 (*I will do everything to become a parent*). Higher scores indicate greater desires and intentions toward future parenthood. These two items have been previously used, in the United States, among LGBTQ+ (Simon & Farr, 2020; Simon et al., 2018) and cisgender heterosexual childfree adults (Van Balen & Trimbos-Kemper, 1995). These items were administered to all groups.

Perceptions of the importance of parenthood. How important parenthood was to each participant was assessed via the Idealization of Parenthood (IOP) measure (Eibach & Mock, 2011). The Idealization of Parenthood measure is on a scale of 1 (*strongly disagree*) to 5 (*strongly agree*) and is comprised of 8 items (e.g., “*Parents experience a lot more happiness and satisfaction in their lives compared to people who*”).

have never had children”), with higher average scores indicating greater idealization of parenthood. This measure showed good reliability in this sample ($\alpha = .75$) and was administered to all groups.

LGBTQ+ identity. Participants received an adapted version of the LGB positive identity measure (LPIM; Riggle et al., 2014), which measures well-being related to one’s LGBTQ+ identity development and is comprised of five subscales associated with identity achievement which are self-awareness, authenticity, community, intimacy, and social justice. Some example items include, “*I have a sense of inner peace about my LGB identity,*” and “*My LGB identity has led me to develop new insights into my strengths*”. The LPIM is comprised of 25 items and is on a 1 (*strongly disagree*) to 7 (*strongly agree*) scale, with higher average scores indicating greater levels of positive LGBTQ+ identity. The adapted version only changes the measure instructions and items from “LGBT” to “LGBTQ+” to be more inclusive. The LPIM showed excellent reliability in our sample ($\alpha = .95$). This measure was administered to the White LGBTQ+ group and the APIA LGBTQ+ group.

Ethnic identity. The Multigroup Ethnic Identity Measure-Revised (MEIM-R; Chakawa, Butler, & Shapiro, 2015) was used to assess ethnic identity achievement. The MEIM-R is made up of two subscales, ethnic identity exploration (e.g., “*I have spent time trying to find out more about my ethnic group, such as its history, traditions, and customs*”) and ethnic identity commitment (e.g., “*I have a strong sense of belonging to my own ethnic group*”), measured on a 1 (*strongly disagree*) to 5 (*strongly agree*) scale. Ethnic identity exploration and ethnic identity commitment are facets of identity achievement. The total measure is comprised of 12 items with greater average scores indicating higher levels of ethnic identity exploration and commitment. The MEIM-R has been validated among White/European American and racial-ethnic minority samples (Chakawa et al., 2015) and showed excellent reliability in our sample ($\alpha = .92$). The MEIM-R was administered to all participants.

Identity integration. An adapted version of the Sexuality-Professional Identity Integration measure (SPII; Henderson, Simon, & Henicheck, 2018) was used to measure identity integration, which is the degree to which an individual perceives their sexual and professional identities as distant or in conflict with one another (Benet-Martínez & Haritatos, 2005). The 8-item SPII measure is scaled from 1 (*strongly disagree*) to 7 (*strongly agree*), with higher average scores (items are reverse scored) indicating greater integration of one’s sexual and professional identities. The SPII is comprised of identity distance and identity conflict subscales. Language will be changed to the identities of interest. For example, the SPII distance question, “*My ideals as a nonheterosexual person differ from my ideals as a professional,*” will be changed to, “*My ideals as an LGBTQ+ person differ from my ideals as an APIA person.*” This measure was administered only to the APIA LGBTQ+ group and showed acceptable reliability in our sample ($\alpha = .80$).

Microaggressions based on LGBTQ+ identity. The Daily Heterosexist Experiences Questionnaire (DHEQ; Balsam, Beadnell, & Molina, 2013) was used to assess the level of distress that heterosexist experiences have on the participant’s life. Participants are asked to report on a scale of 0 (*Did not happen to me/not applicable*) to 5 (*It happened, and it bothered me extremely*) in response to the prompt: “*How much has this problem distressed or bothered you in the past 12 months?*”. The DHEQ is made up of 50 questions with several subscales further specifying heterosexist experiences such as

negativity from *family of origin*, *hyper vigilance*, *gender expression*, *vicarious trauma*, *isolation*, *victimization*, and *harassment and discrimination*. Scores of 0 and 1 (*It happened, and it bothered me not at all*) are coded as a 1 (Balsam et al., 2013) resulting in scale of 1 to 5 with overall higher average scores indicating greater frequency and distress surrounding heterosexist experiences. Example items include having experienced such as *being rejected by your mother because you are LGBT* and *pretending that you have an opposite-sex partner*. Given the overarching goals (and limitations) of the study, a number of subscales were not included specifically the *parenting*, *HIV/AIDS*, and *gender expression*, leaving an overall scale made up of 32 items. The DHEQ measure in this study showed excellent reliability ($\alpha = .92$). LGBTQ+ identified participants (i.e., groups 1 and 2) received this measure.

Microaggressions based on APIA identity. The Subtle and Blatant Racism Scale for Asian American College Students (SABR; Yoo, Steger, & Lee, 2010) was used to assess experiences of microaggressions based on one's APIA identity. The 8-item measure is comprised of two subscales: subtle (e.g., "*In America, I am viewed with suspicion because I'm Asian*") and blatant (e.g., "*In America, I am told 'you speak English so well' because I'm Asian*") racism, which are on a 1 (*Almost Never*) to 5 (*Almost Always*) scale; higher average scores across the two subscales indicate greater levels of perceived racism. The measure was not adapted to a broader population beyond university students, as the indication of college students is only in reference to the initial population in which the measure was validated; items are applicable to Asian Americans of all ages (Yoo et al., 2010). The measure showed excellent reliability in our sample ($\alpha = .90$). Participants in the cisgender, heterosexual APIA sample and the LGBTQ+ APIA sample received this measure.

Perceived ethnic discrimination. The Perceived Ethnic Discrimination Questionnaire (PEDQ; Keum, Thai, Truon, Ahn, & Lu, 2018) was used to assess participants' experiences of perceived discrimination based on their racial-ethnic identity. The PEDQ asks participants to report on a scale of 1 (*Never happened*) to 5 (*Happened very often*) based on the frequency of discriminatory experiences they have faced in their lifetime. The PEDQ is comprised of 17 items with four subscales: *exclusion/rejection*, *stigmatization/discrimination at work/school*, *threat/aggression* (and an additional item asking about police brutality which is included in this study). An example item would be asking participants "*How often ... have people hinted that you are dishonest or can't be trusted?*" (*stigmatization/discrimination* subscale item). Higher overall average scores indicate a greater frequency of lifetime perceived discrimination based on one's racial-ethnic identity. The PEDQ showed excellent reliability in this sample ($\alpha = .94$). All participants received this measure.

Microaggression experiences for LGBTQ+ people of color. The LGBT People of Color (POC) Microaggressions Scale (LGBTPCMS; Balsam et al., 2011) was used to assess the intensity and frequency of experienced microaggressions based on racism present in LGBTQ+ communities (e.g., "*Feeling misunderstood by White LGBT people*"), heterosexism in racial-ethnic minority communities ("*Feeling unwelcome at groups or events in your racial-ethnic community*"), and microaggressions in the context of romantic/sexual relationships ("*Reading personal ads that say 'White people only'*"). The LGBT-POC Microaggressions Scale is made up of 18 items and is rated on a 0 (*Did not happen to me/not applicable*) to 5 (*It happened, and it bothered me extremely*), with

greater average scores indicating greater negativity as a result of experienced microaggressions. Similarly, to the DHEQ (Balsam et al., 2013) above, the LGBTPCMS is coded such that 0 and 1 (*It happened, and it bothered me not at all*) are combined leading to a 1 to 5 scale. LGBTQ+ participants of color received this measure and the measure showed excellent reliability in our sample ($\alpha = .93$).

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