

See discussions, stats, and author profiles for this publication at: <http://www.researchgate.net/publication/275257257>

Coming Out as Lesbian, Gay, or Bisexual: The Lasting Impact of Initial Disclosure Experiences

ARTICLE *in* SELF AND IDENTITY · APRIL 2015

Impact Factor: 1.42 · DOI: 10.1080/15298868.2015.1029516

READS

26

3 AUTHORS, INCLUDING:



William S. Ryan

University of California, Santa Barbara

5 PUBLICATIONS 10 CITATIONS

SEE PROFILE

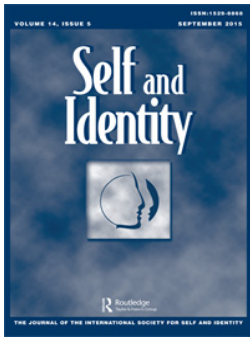


Nicole Legate

Illinois Institute of Technology

8 PUBLICATIONS 51 CITATIONS

SEE PROFILE



Coming Out as Lesbian, Gay, or Bisexual: The Lasting Impact of Initial Disclosure Experiences

William S. Ryan, Nicole Legate & Netta Weinstein

To cite this article: William S. Ryan, Nicole Legate & Netta Weinstein (2015) Coming Out as Lesbian, Gay, or Bisexual: The Lasting Impact of Initial Disclosure Experiences, *Self and Identity*, 14:5, 549-569, DOI: [10.1080/15298868.2015.1029516](https://doi.org/10.1080/15298868.2015.1029516)

To link to this article: <http://dx.doi.org/10.1080/15298868.2015.1029516>



Published online: 14 Apr 2015.



Submit your article to this journal [↗](#)



Article views: 170



View related articles [↗](#)



View Crossmark data [↗](#)

Coming Out as Lesbian, Gay, or Bisexual: The Lasting Impact of Initial Disclosure Experiences

William S. Ryan^{1*}, Nicole Legate², and Netta Weinstein³

¹Department of Psychological & Brain Sciences, University of California, Santa Barbara, CA 93106, USA

²Department of Psychology, Illinois Institute of Technology, Chicago, IL 60616, USA

³School of Psychology, Cardiff University, 70 Park Place, Cardiff, Wales CF10 3AT, UK

Though previous research indicates that lesbian, gay, and bisexual (LGB) individuals may benefit from disclosing their sexual identity, or *coming out*, doing so also carries with it significant risks due to its stigmatized status. LGB individuals ($N = 108$) were surveyed regarding their initial experiences coming out, including the first person to whom they disclosed, their mother, father, and best friend. Results indicated that negative reactions to disclosure were associated with higher depression and lower self-esteem, whereas positive reactions did not explain additional variance in well-being. Autonomy need satisfaction following disclosure mediated the relation between negative reactions and lower well-being. Discussion focuses on the coming out process and the importance of autonomy support in identity integration and well-being.

Keywords: Sexual identity; Coming out; Autonomy; Well-being; Disclosure.

Though a large body of literature documents that lesbian, gay, and bisexual (LGB) individuals on average have worse well-being than heterosexuals (Suicide Prevention Resource Center, 2008; The Pew Research Center, 2011), there is wide variation in mental health outcomes. Indeed, new research suggests that while some LGB individuals suffer costs to well-being, others are thriving, with well-being higher than their heterosexual counterparts (Juster, Smith, Ouellet, Sindi, & Lupien, 2013).

This paradox is mirrored in the coming out literature. There is much research and theorizing that suggests that *coming out*, or disclosing an LGB identity to others, is critical to developing a positive sense of self (e.g., Cain, 1991; Cass, 1984; Riggins, 2004; Wells & Kline, 1987). Yet, coming out may not be inherently beneficial. Although some LGB individuals find acceptance and even support in these experiences, others are met with negative reactions such as anger and rejection (D'Augelli, 2002). A growing body of evidence suggests that the reactions of others to sexual orientation disclosure vary widely and that these reactions have a significant impact on the subsequent well-being of LGB

Received 29 July 2014; accepted 9 March 2015; first published online 16 April 2015.

This research was conducted at the University of California, Santa Barbara.

The authors declare that there is no conflict of interest.

This material is based upon work supported by the National Science Foundation Graduate Research Fellowship [grant number 1144085].

Correspondence should be addressed to William Ryan, Department of Psychological & Brain Sciences, University of California, Santa Barbara, CA 93106, USA. Email: ryan@psych.ucsb.edu

individuals (e.g., D'Augelli, 2002; Juster et al., 2013). These reactions may, at least in part, account for the wide variation in the relation between disclosure and well-being documented among LGB individuals.

In this research, we examine LGB individual's initial coming out experiences, focusing specifically on their perceptions of the reactions received from disclosure targets, or confidants. We expect, in accord with past literature, that reports of positive and negative reactions by others to coming out are associated with variations in general well-being of LGB persons. Well-being refers to people's cognitive and affective evaluations of their current life circumstances (Diener, 2000). Here, we operationalize well-being as the absence of current symptoms of depression and high self-esteem. Applying *self-determination theory* (SDT; Ryan & Deci, 2000), we test the hypothesis that the impact of positive and negative reactions to initial disclosure experiences on subsequent well-being is due, at least in part, to the effect of those reactions on one's *autonomy*, or the sense that one is free to be oneself and express oneself authentically (Deci & Ryan, 2000; La Guardia & Patrick, 2008). In short, we test whether negative (positive) reactions to disclosure are associated with diminished (increased) autonomy, and whether such changes in autonomy can account for variations in wellness.

The Stigma of LGB Identities

Though increasingly accepted, LGB identities continue to be subject to *stigma*, or the devaluation of an identity within a specific social context or cultural milieu (Goffman, 1963). LGB individuals face a host of threats due to the stigma attached to these identities. These threats may be direct, such as when LGB individuals experience discrimination, harassment, abuse, or rejection from close others (D'Augelli, 2002, 2006; Faulkner & Cranston, 1998; Herek, 2009; Mays & Cochran, 2001). These threats may also be indirect. LGB individuals are generally aware of the negative stereotypes regarding homosexuality (D'Emilio, 1983), and thus can anticipate the impact of this stigma on others and potential rejection (Crocker, Major, & Steele, 1998).

Given LGB stigma and potential risks associated with the identity, many individuals choose to conceal this identity (Frale, 1993; Jones et al., 1984; Legate, Ryan, & Weinstein, 2012). To some degree, concealment is a function of experiencing or anticipating direct or indirect social costs of coming out. Thus, for many an LGB identity may take the form of a secret, defined as a form of silence or withholding of knowledge compelled by the threat of sanctions for disclosure (Shils, 1956). Though secrets are often kept to protect the self and others, secrets perpetuate shame and guilt (Karpel, 1980), and come with costs to mental and physical health (e.g., Pennebaker & Chung, 2011).

Concealment of sexual identity has been shown to take a toll on cognitive resources (Critcher & Ferguson, 2014), inhibit the expression of identity (Bosson, Weaver, & Prewitt-Freilino, 2012), and interfere with the maintenance and formation of close relationships (Pachankis, 2007). Perhaps in part for these reasons, concealment in LGB populations has been linked with diminished psychological and physical health (e.g., Cole, Kemeny, Taylor, & Visscher, 1996; Greene, Derlega, & Matthews, 2006; Gross & Levenson, 1993; Morris, Waldo, & Rothblum, 2001; Smart & Wegner, 2000; Ullrich, Lutgendorf, & Stapleton, 2003). This is even true at a within person level of analysis. Using experience-sampling methods, Beals, Peplau, and Gable (2009) found that gay and lesbian individuals reported lower psychological well-being (self-esteem, positive affect, and satisfaction with life) on days when they concealed rather than disclosed their sexual identity.

Mixed Results of Coming Out

Despite how critical coming out may be for self-acceptance and overall well-being for LGB individuals (Cain, 1991; Ragins, 2004; Wells & Kline, 1987), the link between coming out and well-being may be complicated by a person's interpersonal context. In fact some research suggests that coming out is not consistently beneficial (Cole, Kemeny, & Taylor, 1997; D'Augelli, 2002; Igartua, Gill, & Montoro, 2003; Legate et al., 2012; McGregor et al., 2001; Oetjen & Rothblum, 2000). Disclosure is one of the most stressful processes LGB individuals face (Hershberger, Pilkington, & D'Augelli, 1997), with short-term risks of harassment, victimization, and suicidality increasing following disclosure (D'Augelli, 2002; Igartua et al., 2003).

These mixed results on whether coming out is beneficial suggest the importance of looking more closely at coming out experiences and their relation to well-being. Increasingly, research on the disclosure of specific concealable stigmas (e.g., sexual orientation, mental illness, abortion status) indicates that the reactions of the confidant shape the impact that disclosure has on well-being. For example, in a study by Major et al. (1990), those who received mixed support after disclosing an abortion evidenced poorer adjustment relative to women who received either unequivocal support or who did not disclose at all. Chaudoir and Quinn (2010) examined the influence of motivation on disclosure and found that those who disclosed a stigmatized identity (including mental illness, medical condition, psychological issue, sexual orientation) for other-focused reasons (e.g., because the person felt especially close to the confidant) had more positive first-disclosure experiences. Positive experiences, in turn, related to current self-esteem and this effect was mediated by fear of disclosure.

In relation to LGB individuals specifically, a number of studies have examined LGB adolescents' perceptions of parental reactions to disclosure (see D'Augelli & Hershberger, 1993; D'Augelli, Hershberger, & Pilkington, 1998; Hetrick & Martin, 1987; Savin-Williams, 1989). Results from these suggest that parental rejection is a primary risk factor for LGB youth (D'Augelli & Hershberger, 1993; Hetrick & Martin, 1987; Savin-Williams, 1989; Savin-Williams, Dubé, Dube, 1998). LGB youth who perceived acceptance from their parents report higher self-esteem than those whose disclosures were not met with such acceptance (Savin-Williams, 1989).

Taken together, this research suggests that the interpersonal context in which individuals disclose is critical to the well-being outcomes that follow. What remains to be examined, however, are the psychological mechanisms by which this impact occurs. Here we propose and test one potential mechanism, the experience of autonomy need satisfaction.

Autonomy in Relationships

SDT (Deci & Ryan, 1985, 2000; Ryan & Deci, 2000) posits that people have a need for *autonomy*, the feeling that they are able to be truly themselves and act in accord with their internal values and feelings. Important others such as friends and family members can behave in ways that are either supportive or thwarting of one's autonomy (Lynch, La Guardia, & Ryan, 2009; Ryan, La Guardia, Solky-Butzel, Chirkov, & Kim, 2005). Autonomy is supported when others convey acceptance for who one truly is (e.g., Lynch & Ryan, 2004), and is thwarted when others make their support and love contingent on the fulfillment of specific expectations. Such contingent love puts one in a position whereby autonomy must be sacrificed in order to preserve the relationship (Rogers, 1961; Roth, Assor, Niemiec, Ryan, & Deci, 2009).

Experiencing autonomy has been empirically linked to a host of positive outcomes including improved psychological well-being (e.g., Ryan & Deci, 2000), physical health (e.g., Williams, Grow, Freedman, Ryan, & Deci, 1996), more satisfaction at work (e.g., Richer, Blanchard, & Vallerand, 2002) and in relationships (La Guardia, Ryan, Couchman, & Deci, 2000). Furthermore, research in SDT demonstrates that parents who thwart autonomy have children who behave in less autonomous ways and develop psychopathology (e.g., Assor, Roth, & Deci, 2004; Roth et al., 2009), and these deleterious effects of being around autonomy-thwarting others hold across the lifespan (e.g., Grolnick & Ryan, 1989; La Guardia et al., 2000).

Applied to the experience of coming out, Legate et al. (2012) found that LGB individuals were more likely to be out in contexts perceived to be autonomy supportive and had better well-being than those who were out in contexts that failed to support autonomy. This study suggests that autonomy support is indeed a critical ingredient for well-being following disclosure in various environments (e.g. work, school, religious community). Given the deeply personal nature of identity disclosure and the potential for rejection, initial disclosure to important others may be particularly critical in shaping subsequent self- and identity-related attitudes, and in particular one's sense of autonomy. Furthermore, disclosure to one's parents may be especially impactful insofar as parent-child relationships are central to identity development and feelings of self-worth (Grolnick & Ryan, 1989; Joussemet, Landry, & Koestner, 2008). In support of this idea, Weinstein et al. (2012) found that individuals who perceived their parents to be autonomy-thwarting were more likely to develop contingent, or unstable, self-esteem and an incongruent sexual identity that reflected a failure to accept and express same-sex attractions.

Coming Out: Definition and Caveats

Coming out is generally used to refer to the events surrounding one's initial disclosure of sexual orientation to one's primary social circle. Though it is these initial disclosure experiences that are the focus of this article, it is important to note that identity disclosure is hardly a one-time event. Rather, it is a process, which must be engaged whenever new situations or relationships are entered (Bohan, 1996; Mohr & Fassinger, 2000). Indeed, gay and lesbian individuals have reported an average of three disclosure opportunities over the course of a two-week period (Beals et al., 2009).

Moreover, coming out does not always take the form of a direct, verbal disclosure. Individuals may come out via writing a message addressed to a specific individual(s) or by posting to a broad audience of their friends, acquaintances, and/or family on social media. Sexual orientation, like other secrets, may also become known indirectly through innuendo or other signs (Bellman, 1979) including visual cues (Rudd, 1996), gestures (Johnson, Gill, Reichman, & Tassinary, 2007), and facial features (Rule, Ambady, Adams, & Macrae, 2008; Rule, Ambady, & Hallett, 2009). LGB individuals may also be "outed" by others who are aware of the identity either with or without consent (Gross, 1999; Herek & Capitano, 1996; Johansson & Percy, 1994). Indeed, as with other secrets, sexual orientation may not be an individual secret, other members of one's family and social network may also hold this knowledge (Bellman, 1979; Karpel, 1980), and may also attempt to regulate its spread (Imber-Black, Roberts, & Whiting, 1988). Coming out is also not an all-or-nothing phenomenon; the degree to which one is out and the extent to which identity-relevant topics are discussed differs across contexts and relationships (Mohr & Fassinger, 2000).

It is also important to note the coming out process differs as a function of the specific identity in question (Russell & Seif, 2001). Gay men on average become aware of their

same sex attractions and identify themselves as gay at an earlier age than lesbian women (Bell, Weinberg, & Hammersmith, 1981; Troiden, 1988). Bisexual women, on average, come out at later ages and have less “stable” identity histories than lesbians (Bell et al., 1981; Rust, 1993). Regardless of gender, bisexuals are often perceived to have an easier time concealing this identity, particularly when in a relationship with an opposite-sex partner (McLean, 2007). The experience of bisexual men and women also differs from those of gay men and lesbians due to the different stereotypes attached to those identities (Israel & Mohr, 2004; Rust, 1993). Bisexuals are often stereotyped as indecisive, greedy, or in denial. For bisexuals discrimination can come from both heterosexuals, as well as, gay men and lesbians (Ochs, 1996) who view the identity as transitional, or believe that bisexuals are trying to hold on to heterosexual privilege. In addition, sexual orientation intersects with other identities including race, social class, and (dis)ability status. Little is known, however, about the nature and impact of these intersections on coming out, as they have not been the subject of systematic investigation (Consolacion, Russell, & Sue, 2004).

In attempt to balance a recognition of these complexities with the need to create variables amenable to statistical analysis, here we operationalize coming out as whether or not the participant told another person about their sexual orientation or whether they are otherwise aware. Though we are dichotomizing outness, this approach was intended to at least capture all of the ways in which one might be “out” to another person. We also collapsed across different sexual orientations (LGB) for the purposes of this study since our interest is in autonomy need satisfaction, a factor that has been shown to be critical across cultures and different identity groups (Legate et al., 2012; Ryan & Deci, 2000).

Present Research

This study examines the coming out process, focusing on individuals’ initial experience of coming out as well as their experiences disclosing to important others including their mother, father, and best friend. We examine coming out milestones for descriptive purposes (when people first realized they were LGB, when they first disclosed, to whom they first disclosed), as well as specific behaviors that represent positive or negative reactions (capturing both valence of the reaction, as well as its intensity). This work also connects the existing literature on coming out with the theoretical framework of SDT to help explain why others’ reactions to coming out impact current well-being. We postulate that the intensity of positive versus negative reactions to coming out will impact well-being by either supporting or thwarting perceived autonomy in the relationship. Intuitively one may think that disclosure would always lead to greater well-being and a sense that one can be oneself in the relationship. However, a negative reaction when first coming out to an important family member or friend is likely to leave one feeling evaluated and rejected, and thus perhaps less free to be authentic. However, receiving a positive reaction after coming out will likely lead one to feel like one can fully be oneself. The autonomy need satisfaction that follows from such a reaction should promote well-being, in keeping with past research (Vansteenkiste & Ryan, 2013). Thus, we expected that the relative satisfaction of autonomy needs would account for why positive reactions promote well-being and negative reactions undermine well-being.

Specifically, we hypothesize that the more negative the reaction a disclosure is met with, the more detrimental the reaction’s effect on well-being, as indicated by current symptoms of depression and low self-esteem. We also advance the parallel hypothesis that positive reactions would be associated with greater well-being. Furthermore, we hypothesize that autonomy need satisfaction in these relationships post-disclosure would be the mechanism through which these effects occur. In other words, we expect that people

experience more autonomy in relationships where reactions are positive, and less autonomy following negative reactions to identity disclosure. These experiences of autonomy are in turn expected to mediate the effects of reaction to coming out on well-being.

The present work fills several gaps in the existing literature. First, although disclosure reactions have been recognized as an important factor in the determination of psychological and physical health outcomes (e.g. D'Augelli et al., 1998; Quinn & Earnshaw, 2013) little work has examined specific behavioral reactions to LGB identity disclosure (Chaudoir & Quinn, 2010). Moreover, the mechanism by which positive or negative reactions impact well-being have not been well-studied (Chaudoir & Fisher, 2010; but see Chaudoir & Quinn, 2010 for an exception) and few studies examine specific disclosure events, with most aggregating across multiple experiences (e.g., Beals et al., 2009) or considering overall outness (Mohr & Fassinger, 2000) as the variable of interest. Even fewer studies have examined the psychological mechanisms underlying the impact of initial disclosure experiences and those with close others, both of which hold particular meaning for individuals. The present research is thus novel in that it examines and describes initial and specific disclosure experiences with close others, the impact of specific types of reactions across important relationships, and one mechanism through which reactions affect well-being (namely the perception of autonomy). This is important because autonomy need satisfaction in close relationships has been shown to be critical to self-acceptance and well-being (e.g., La Guardia et al., 2000), though the link has not yet been extended to disclosure of a stigmatized identity. Here, we explore whether the perception of autonomy support accounts for the differential well-being outcomes that follow from receiving positive and negative reactions to disclosure of a stigmatized identity.

Methods

Participants

Participants were recruited via Amazon Mechanical Turk (MTurk), an online forum that allows businesses and researchers to connect with workers who can complete posted tasks for payment. MTurk is being utilized increasingly in research and empirical work supports the quality of data collected through this interface (Buhrmester, Kwang, & Gosling, 2011). MTurk was selected as the recruitment platform for this study due to practical concerns regarding institutional review board policies on the online recruitment of participants, and because it provides a platform for recruiting diverse respondents. Only registered users identifying as lesbian, gay, or bisexual over the age of 18 and residing in the USA, Great Britain, and Canada were recruited for participation in this 20–30 min survey. Of the 108 people who completed this survey, 58 identified as female, 46 as male, 1 as transgender male to female (MTF), and one as transgender female to male. Two participants did not report their gender. Twenty-eight self-identified as lesbian, 25 as gay, and 55 as bisexual (34 female, 20 male, 1 MTF). Participants ranged in age from 18 to 61 ($M = 27.94$, $SD = 10.23$). Of participants 74% were white/Caucasian ($n = 80$), 6.5% Asian/Pacific Islander ($n = 7$), 12% black ($n = 13$), 4.6% Hispanic ($n = 5$), and 1.9% Native American ($n = 2$), with one person declining to specify.

Procedure

The survey consisted of demographic questions as well as a series of questions relating to the age at which participants realized their own sexual orientation, whether, when, and to

whom this information was disclosed and the perceived reaction to disclosure. The survey was designed to pipe participants through these questions according to their reactions. Specifically, participants were asked how old they were when they first became aware of their sexual orientation. They were then asked to select the identity of the person to whom they first “came out”, indicated the age at which they did so, responded to questions about confidant reactions and autonomy support. Participants indicated whether and, if so when, they came out to their mother, father, and best friend (or whether this relationship did not apply) and completed the same items assessing reactions and autonomy support separately for each confidant. If participants had already selected their mother, father, or best friend as their first disclosure target, questions for this target were skipped such that participants answered items only once for each target. Finally, participants completed measures of current global self-esteem and depression, employed as indices of psychological well-being.

Measures

Positive and negative reactions: Participants were asked to indicate the extent to which each person (first, mother, father, best friend) responded to their identity disclosure in 19 possible ways using a 5-point Likert-type scale (1—*not at all*, 5—*very much*). Items were generated by the researchers on the basis of written accounts of coming out experiences and discussions with LGB individuals about their disclosure experiences. Items were subjected to a factor analysis, and two factors emerged representing positive reactions and negative reactions. These explained 36.91 and 24.62% of the variance, respectively. Six of these items refer to negative reactions (e.g., “be furious” and “cry”). The remaining 13 items refer to positive reactions including, “try to see things my way” and “thanked me for sharing”. Factor loadings ranged from .64 to .86. Responses to these items were averaged to form subscales reflecting the extent to which each disclosure target reacted negatively or positively. Thus, a total of eight subscales were formed, two for each target (e.g., mother’s positive reaction, and mother’s negative reaction; see [Figures 1 and 2](#)). Cronbach’s alphas for positive and negative reactions from first person, mother, father, and best friend ranged from .88 to .97, suggesting high item homogeneity among these subscales. Two broader subscales reflecting positive and negative reactions averaged over each disclosure partner were also computed.

Autonomy need satisfaction was assessed for each disclosure target via the 3-item autonomy subscale of the Basic Psychological Need scale (La Guardia et al., 2000). Autonomy need satisfaction with each disclosure partner was assessed using items with stems adjusted to match the identity of each disclosure target. Example items include, “When I am with my [mother], I feel free to be who I am” and “When I am with my [mother], I feel pressured to behave in certain ways” (reverse scored). Participants responded on a 7-point Likert-type scale. Cronbach’s alphas for autonomy need satisfaction ranged from .77 to .79. As with reaction variables, overall autonomy need satisfaction was computed by averaging across disclosure targets.

Depression was measured via four items taken from the CES-D (Radloff, 1977). We selected four items on the basis of face validity and high factor loadings from previous research from the 20-item scale to reduce participant burnout after answering the same set of questions about multiple people in their lives. Sample items include, “I was bothered by things that usually don’t bother me” and “I felt hopeful about the future” (reverse coded). Participants indicated how often they felt this way in general during the past week using one of four response options that ranged from “rarely or none

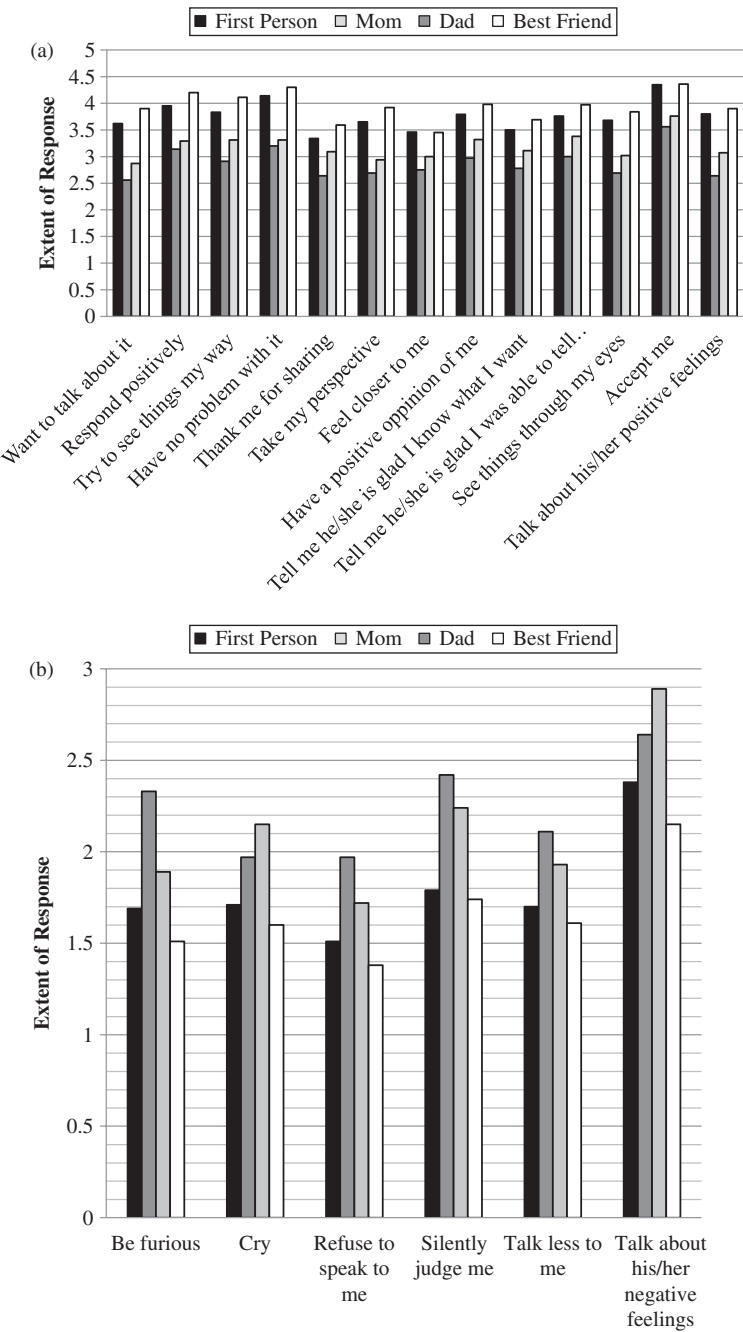


FIGURE 1(a) and 1(b) Mean values for each type of positive and negative reaction assessed for each disclosure target.

of the time (less than 1 day)” to “Most of the time (5–7 days)”. Cronbach’s alpha for this sample was .69.

Self-esteem: Four items from the Rosenberg Self-Esteem Scale (Rosenberg, 1979) assessed current self-esteem. Participants indicated their agreement with statements such

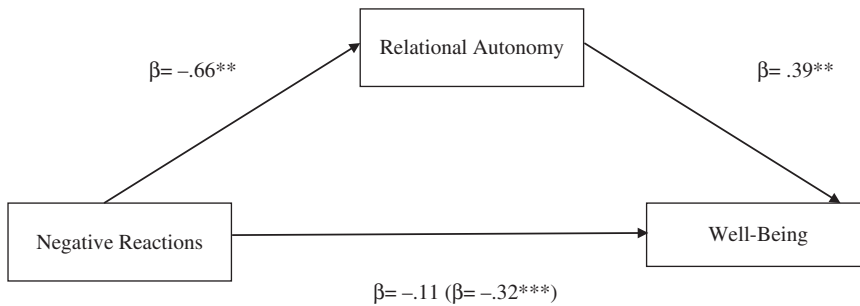


FIGURE 2 Mediation model of the effect of negative reactions from confidants on well-being as mediated by feelings of autonomy with confidants. Standardized path coefficients are shown. On the path from condition to negative affect, parenthetical values represent the effect when controlling for the mediator, and values outside parentheses represent the direct effect when the mediator is not included in the model. Asterisks indicate significant coefficients (* $p < .05$, ** $p < .001$). The mediation model for the effect of the first confidant's negative reactions follows a similar pattern of results.

as "I feel that I am a person of worth, at least on an equal plane with others" and "at times I feel I am no good at all" (reverse coded) using a 5-point Likert-type scale. Cronbach's alpha for this sample was high ($\alpha = .87$).

Results

Descriptive Analyses

To contribute to the descriptive literature of identity disclosure, we gathered information concerning the ages at which participants reported first realized their non-heterosexual orientation and the age at which they disclosed to various targets. Reported ages of realization ranged widely, with one participant realizing at age 3 and one at age 38 ($M = 13.31$ years, $SD = 5.23$ years). Yet most participants first became aware of their sexual orientation between the ages of 10 and 15. The age at which participants first disclosed this orientation also ranged widely from 4 to 50 years ($M = 16.50$ years, $SD = 6.43$ years). Participants came out to their mother ($M = 19.39$ years, $SD = 5.57$ years), father ($M = 19.78$ years, $SD = 5.73$ years), and best friend ($M = 18.13$ years, $SD = 6.47$ years) at approximately the same age as they first disclosed (mean differences were not significant), suggesting that once participants came out to one person, they also came out to others.¹

Interestingly, but not unexpectedly, hierarchical regression analyses indicated that current age did not significantly relate to age of realization ($\beta = .14$, $t(106) = 1.47$, $p = .14$), though current age was significantly related to age of first disclosure ($\beta = .37$, $t(97) = 4.41$, $p < .001$). This indicates that generational differences had no impact on the age at which individuals become aware of or realized their sexual orientation, but do impact how long they waited to share this information with others. This finding is consistent with cohort effects found in other studies (e.g. Grov, Bimbi, NaníN, & Parsons, 2006) and suggests that LGB individuals from younger cohorts are coming out earlier and may reflect increasingly tolerant social attitudes towards sexual minorities.

Another question of interest was to whom participants first disclosed their sexual orientation. Most participants chose to *first* disclose their sexual orientation to their best friend ($n = 35$) or another friend ($n = 31$). Thirteen participants first came out to a

sibling, ten to their mother, and seven to another family member. No participants chose to come out to their father first. This is consistent with findings that fewer than 10% of youth first disclose to a parent (D’Augelli & Hershberger, 1993; Savin-Williams, 1990) and that they are much more likely to disclose to their mothers than to their fathers (D’Augelli et al., 1998). Comparing overall disclosure rates across the relationship categories of mother, father, and best friends indicated that participants were less likely to come out to their father ($n = 36$) relative to mother ($n = 55$) and best friend ($n = 88$).

Preliminary Analyses

We first tested for differences in gender and sexual orientation among major study variables. Gender was marginally related to receiving positive reactions to disclosure ($t(100) = 1.88, p = .06$), receiving negative reactions ($t(99) = -2.01, p < .05$), and total autonomy support after coming out ($t(99) = 3.89, p < .001$). Group means indicates that women received more positive ($M = 3.72, SD = .85$) and less negative ($M = 1.72, SD = .92$) reactions to disclosure compared to men ($M = 3.41, SD = .79; M = 2.10, SD = .93$, respectively). Furthermore, women ($M = 5.89, SD = 1.18$) benefited more than men ($M = 5.01, SD = 1.03$) in their autonomy need satisfaction after self-disclosing.

One-way analyses of variance (ANOVA) indicated significant differences by sexual orientation in depression ($F(2, 100) = 3.15, p < .05$) and autonomy need satisfaction after coming out ($F(2, 102) = 3.16, p < .05$). *Post hoc* analyses using Tukey’s HSD indicated that the effect on depression was driven by a significant difference between bisexuals ($M = 2.10 SD = .72$) and lesbians ($M = 1.71 SD = .62$), $p < .05$. Furthermore, the effect on autonomy was driven by a difference between bisexuals ($M = 5.69, SD = 1.20$) and gay men ($M = 5.01, SD = 1.06$), $p < .05$. Means and standard deviations for depression, anxiety, and autonomy need satisfaction with each disclosure target for each sexual orientation group appear in Table 3.

Due to these differences, gender, sexual orientation, and their interaction were controlled for in all primary analyses.² Table 1 displays correlations for variables related to disclosure to mother and father and Table 2 displays this same set or bivariate relations for first person and best friend. Across all relationships (mother, father, best friend, first person), positive reaction to disclosure was positively correlated with perceived autonomy support (r s ranged from .44 to .58, p s $< .05$). Negative reactions showed the opposite pattern, correlating negatively with perceived autonomy support following disclosure (r s range from $-.61$ to $-.69, p$ s $< .05$) (Table 3).

TABLE 1 Correlations for Mother and Father Variables

	1	2	3	4	5	6	7
1. Age realized	–	.15	.11	–.01	–.16	.10	–.08
2. Age told	.49**	–	–.18	.20	–.24	–.16	.14
3. Self esteem	.11	.15	–	–.58**	.55*	.19	–.50**
4. Depression	–.01	–.01	–.58**	–	–.41*	–.14	.39*
5. Autonomy need sat.	.13	.02	.22	–.23†	–	.51**	–.67**
6. Positive reaction	.26†	–.03	.27*	–.12	.58**	–	–.52**
7. Negative reaction	–.07	.05	–.26†	.34*	–.69**	–.52**	–

Note: Correlations for Mother variables are displayed below the diagonal, correlations for Father variables displayed above the diagonal. † $p < .1$, * $p < .05$, ** $p < .01$.

TABLE 2 Correlations for First Person and Best Friend Variables

	1	2	3	4	5	6	7
1. Age realized	–	.39**	.11	–.01	–.01	–.03	.08
2. Age told	.43**	–	.06	.11	.03	.04	–.13
3. Self esteem	.11	.06	–	–.58**	.39**	.19†	–.33**
4. Depression	–.01	.00	–.58**	–	–.40**	–.08	.36**
5. Autonomy need sat	.01	.09	.24*	–.26**	–	.44**	–.61**
6. Positive reaction	.00	.14	.23*	–.09	.58**	–	–.42**
7. Negative reaction	.10	–.07	–.21*	.28**	–.67**	–.37**	–

Note: Correlations for First Person variables are displayed below the diagonal, correlations for Best Friend variables displayed above the diagonal. † $p < .1$, * $p < .05$, ** $p < .01$.

Primary Analyses

First we tested the hypothesis that positive reactions to coming out are linked to lower depression and higher self-esteem, and that negative reactions have the opposite relation with these mental health outcomes. Four separate hierarchical regression analyses were conducted for each outcome variable (depression, self-esteem), one for each disclosure target (for a total of 8 models). The analyses for any specific disclosure partner (e.g. mother or father) only utilize data from those participants who came out to that partner. Results of these analyses and the size of the sample included in each are displayed in [Tables 4 and 5](#). In each case, the outcome variable was regressed onto positive and negative reactions simultaneously after controlling for sexual orientation, gender, and their interaction.³

Results indicated that negative reactions had a much stronger influence on depression than did positive reactions. Indeed, negative reactions from first person, father, and best friend all significantly predicted depression (β s ranged from .28 to .39, $ps < .05$). Results for mother were marginal ($\beta = .27$, $p = .09$). Positive reactions, in the context of any of the four relationships, did not significantly contribute to the explained variance in depression over and above negative reactions (β s ranged from $-.03$ to $.08$, $ps > .10$).

These same analyses were repeated for self-esteem. Here, only negative reactions from father and best friend significantly predicted self-esteem (β s = $-.58$ and $-.29$, $ps < .05$). As with depression, positive reactions were not related to self-esteem over and above negative reactions in the context of any of the assessed relationships (all $ps > .05$).

TABLE 3 Means and Standard Deviations for Depression, Self-Esteem, and Autonomy need Satisfaction by Sexual Orientation and Gender

	Depression	Self-esteem	ANS first person	ANS father	ANS mother	ANS best friend
1. Lesbian women	1.71 (.62)	3.95 (.66)	5.95 (1.44)	5.14 (2.04)	5.47 (1.50)	6.16 (1.11)
2. Gay men	1.92 (.57)	3.71 (.84)	5.32 (1.21)	4.18 (1.45)	4.78 (1.47)	5.29 (1.36)
3. Bisexual women	2.07 (.66)	3.74 (1.12)	6.21 (1.25)	5.78 (1.35)	4.73 (1.83)	6.31 (1.25)
4. Bisexual men	2.22 (.86)	3.52 (.92)	5.12 (1.33)	4.40 (1.36)	4.17 (.43)	5.26 (1.34)

Note: ANS stands for autonomy need satisfaction. This table displays means and standard deviations for each of four combinations of sexual orientation and gender. In our primary analyses however, we dummy coded sexual orientation (homosexual and bisexual) and gender (male and female) and controlled for these and their interaction.

TABLE 4 Regression Results-Impact of Positive and Negative Reactions from Each Disclosure Partner on Depression Controlling for Sexual Orientation, Gender, and their Interaction

	First person (<i>n</i> = 98)	Mother (<i>n</i> = 50)	Father (<i>n</i> = 31)	Best friend (<i>n</i> = 82)
Step 1 (<i>R</i> ²)	.10	-.21	.24.	.08
Sexual orientation	-.27**	-.44**	-.34*	-.24*
Gender	-.19†	-.30*	-.32†	.22*
Step 2 (<i>R</i> ²)	.09	.21	.31	.10
Gender × orientation	-.13	-.07	.62	-.23
Int.				
Step 3 (<i>R</i> ²)	.17	-.28	.36	.19
Positive reaction	.03	-.01	-.03	.08
Negative reaction	.28**	-.27†	.39*	.34**

Note: Table displays standardized regression coefficients. Gender coded as female = 1, male = 0, Sexual Orientation coded as 1 = gay/lesbian, 0 = bisexual. †*p* < .1, **p* < .05 and ***p* < .01.

Finally, mediation analyses were conducted to test our third hypothesis that autonomy need satisfaction after coming out would account for the relation between reactions and well-being outcomes. Only negative reactions were used as the predictor variables in both tests of mediation since positive reactions did not relate to wellness outcomes. We followed Hayes and Preacher (2011) mediation script to calculate direct and indirect effects. In the first model, we used negative reactions (aggregated across all disclosure partners) as the predictor, post-disclosure autonomy as the mediator (also aggregated across partners), and a composite measure of well-being (collapsing self-esteem and depression, correlated at *r* = -.58, *p* < .01) as the outcome, controlling for sexual orientation. A separate model tested first disclosure reactions as the predictor and well-being as the outcome.

Post-disclosure autonomy did indeed explain why important others' negative reactions related to lower well-being (indirect effect = -.41, 95% bootstrap confidence interval (-.75 to -.08)). The effect of negative reactions on well-being was significant without (*t* = - 3.40, *p* = .001), but not with (*t* = -.85, *p* > .15) post-disclosure autonomy present in analyses, suggesting full mediation (see Figure 2). We estimated the proportion of variance explained in overall model following procedures outlined in MacKinnon (2008), and found that *R*² = .16. This pattern replicated for first disclosure experiences: negative

TABLE 5 Regression Results- Impact of Positive and Negative Reaction from Each Disclosure Partner on Self-Esteem Controlling for sexual Orientation, Gender, and Their Interaction

	First person (<i>n</i> = 98)	Mother (<i>n</i> = 50)	Father (<i>n</i> = 31)	Best friend (<i>n</i> = 82)
Step 1 (<i>R</i> ²)	.04	.03	.05	.02
Sexual orientation	.15	.02	-.07	.08
Gender	.16	.19	.22	.14
Step 2 (<i>R</i> ²)	.04	.03	.05	.05
Gender × orientation	.07	.02	-.15	.29
int.				
Step 3 (<i>R</i> ²)	.10	.11	.33	.15
Positive reaction	.16	.14	-.1	.10
Negative reaction	-.14	-.17	-.58**	-.29*

Note: Table displays standardized regression coefficients. Gender coded as female = 1, male = 0, Sexual Orientation coded as 1 = gay/lesbian, 0 = bisexual. †*p* < .1, **p* < .05, ***p* < .01.

reactions from the first person to whom participants came out had a negative effect on their well-being through post-disclosure autonomy (indirect effect = $-.36$, 95% confidence interval $(-.63 - .12)$). Results again suggested full mediation: negative reactions from one's first disclosure partner were significantly linked to lower well-being ($t = -2.93$, $p = .004$), but not after the mediator was included in the model ($t = -.61$, $p > .15$), with the model explaining .13 of the proportion of variance of current well-being. These findings thus support our expectation that negative reactions (from important others as well as the first person to whom participants disclosed) have a lasting negative effect on well-being because they undermine people's sense that they can "be themselves" in relationships.

Discussion

The present study was aimed at understanding experiences of coming out with a particular focus on the effects of others' reactions following disclosure on LGB individuals' psychological well-being. Specifically, we tested the hypothesis that negative reactions after coming out have deleterious effects on well-being because they thwart autonomy need satisfaction, or the sense that one can be oneself in his or her relationships. We also tested the complementary hypothesis that positive reactions would promote well-being by enabling people to be themselves with others.

Study results indicated that negative, but not positive, reactions to disclosure had a significantly lasting impact on well-being. Specifically, receiving negative reactions from any of the relationship partners we examined was associated with greater depression. This same pattern of effects emerged when predicting self-esteem, but only in the case of fathers and best friends. That negative reactions dominated in predicting well-being is supported by research indicating that humans are both more attuned to and affected by negative events and emotions (e.g., Frijda, 1988), particularly in the domain of interpersonal rejection (e.g., Williams, Forgas, & von Hippel, 2005). As well, it is consistent with other work suggesting that negative interpersonal exchanges surrounding stressful and stigmatizing events (e.g., abortion) uniquely predict distress, whereas positive support reactions predict adjustment (Major, Zubek, Cooper, Cozzarelli, & Richards, 1997).

Further, for coming out reactions from the first person and from important others (mom, dad, and best friend), autonomy need satisfaction following disclosure fully mediated the relation between negative reactions and well-being. This not only attests to the importance of autonomy to individual wellness (Ryan & Deci, 2000; Vansteenkiste & Ryan, 2013), but also to the strong and lasting impact that negative reactions to coming out have on LGB individual's overall well-being. Taken together, these results suggest that perceiving stronger negative reactions to early disclosure experiences impacts depression and self-esteem by leaving one feeling a sense of disconnection from and an inability to express one's true self. Thus, results indicate that autonomy need satisfaction may be an important mechanism underlying previous findings linking coming out to improved well-being (e.g., Cain, 1991).

The present findings may help to explain the inconsistency of this positive relation between coming out and well-being. Whereas some research indicates disclosure to be beneficial (e.g., Rags, 2004; Wells & Kline, 1987), other work had failed to find such well-being benefits (e.g., Cole et al., 1997; D'Augelli, 2002; McGregor et al., 2001; Oetjen & Rothblum, 2000). The current work suggests that the well-being outcomes that follow from disclosure are heavily dependent on the perceived reaction to this disclosure and the implications this has for the self.

This research also informs previous work by Legate et al. (2012), who found that being out in a given context was related to wellness only when the interpersonal climate was autonomy-supportive, encouraging authentic self-expression. Coming out to an autonomy-thwarting person, or someone whose positive regard is contingent on others acting in certain ways, was not associated with benefits to well-being. In the current study, we provide a possible account of why this might be: with those who react with high levels of negativity, LGB individuals learn they are not free to be themselves. This research shows that it is this thwarted sense of autonomy in these relationships, and potentially the expectations that others will react similarly, that leads to lower well-being. This finding may also partially explain why contact with similarly stigmatized others relates to greater well-being (e.g., Frable, Platt, & Hoey, 1998): presumably, people would anticipate acceptance among similarly stigmatized others and thus feel like they could be themselves. This speculation, however, remains to be tested.

Limitations and Future Directions

Though this research is first to examine the mechanisms and outcomes of specific positive and negative reactions and their intensity to coming out among LGB individuals, several limitations open promising avenues for future research. First, the sample used in these analyses was relatively small ($N = 108$) and participants were recruited from a single source, MTurk. Thus, whether the present findings generalize to larger samples and those recruited by other means remains a question for further study. However, data attesting to the representativeness of MTurk samples (Buhrmester et al., 2011) mitigates these concerns, as do the characteristics of the present study participants, which are in with those found in previous investigations (e.g. D'Augelli & Hershberger, 1993; D'Augelli et al., 1998; Grov et al., 2006; Savin-Williams, 1990).

Still, the relatively small sample size limits exploration of potential interactions between specific identity types and targets in predicting well-being. With larger samples and more power, future research may explore such questions as whether fathers or mothers react more negatively to a son disclosing a gay identity than towards a daughter coming out as lesbian. Mean differences in self-esteem, depression, and perceived autonomy support among the different identity groups (lesbians, gay men, bisexual men, bisexual women) found in the present study suggest that there may indeed be important differences to be explored here.

Relatedly, our preliminary analyzes revealed gender differences in several of our major study variables. Most notably, results indicated that women reported greater perceived autonomy support post-disclosure than did men. Such gender differences in perceived autonomy support have not been found in previous research (Adie, Duda, & Ntoumanis, 2008; Ryan et al., 2005). It is therefore likely that these differences are due to differences in some aspect of the coming out experience. This makes sense as stigma towards men who are gay or bisexual is generally more virulent than that directed toward women who are lesbian or bisexual (LaMar & Kite, 1998; Herek, 2000). Indeed, in the present study significant gender differences were also found in the intensity of positive and negative responses from disclosure targets, such that women reported more accepting reactions on average. Future research specifically designed to test whether these gender differences are indeed due to greater stigma directed toward sexual minority men is needed.

Additionally, our sample contained a large proportion of participants who identified as bisexual. Though the goal of the present research was to illuminate factors relating to disclosure common across sexual identities, the distribution of identities in this sample

should be kept in mind when interpreting the results and considering their generalizability. Bisexuals as an identity group have been less extensively studied, particularly in relation to the process of coming out. It would therefore be of interest to examine how reactions and outcomes differ when disclosing a bisexual versus gay or lesbian sexual orientation. The issue of how experiences differ by sexual orientation and the factors that contribute to these differences should not be overlooked and is an area ripe for future research.

There are of course multiple other features of coming out experiences that may also influence others' reactions and their relation to well-being. For example, whether coming out was done directly in person, or via more indirect means (e.g. posting on social networking websites, being told by someone else) may also impact this relation. Future work should assess variables that capture more of the diversity of coming out experiences and relates these to reactions and well-being. Relatedly, how these identities, disclosure interactions, and reactions vary across and within cultures deserves further exploration.

Another limitation of the present work is its cross-sectional nature and reliance on retrospective reports of coming out experiences, which are vulnerable to reporting biases. We found that greater negative reactions predict lower well-being, and that controlling for time since disclosure did not change the significance or pattern of these results. Still, it is possible that those with more depressive symptoms and lower self-esteem remember the reactions of others more negatively and feel less free to be themselves in their relationships. It is also likely that other factors, not assessed in the present study, contribute to current well-being, particularly for those who recalled coming out experiences that occurred a number of years ago. Relationship status, whether one has had children, and other factors may influence both recalled disclosure experiences and current well-being. As these variables were not assessed in the present study, their influence on well-being cannot be accounted for here. Still, the fact that reactions were related to well-being despite the relatively long intervening time interval suggests that reactions to coming out do indeed impact well-being.

Future research should also assess other potential mediators of the relation between coming out reactions and well-being. The inclusion of variables such as simply feeling loved would allow these variables to be tested against autonomy need satisfaction as potential mediators. Without ruling out such potential mediators we cannot claim that experiencing relational autonomy is the only factor explaining the effect of reactions on well-being. Still, our results suggest that it is at least one factor that accounts for the relation between the intensity of negative reactions to identity disclosure and subsequent well-being.

Although conceptualized within an SDT framework, the current findings also have relevance to other theories. For example, sociometer theory (Leary & Baumeister, 2000) suggests that self-esteem is a reflection of perceived social acceptance and rejection. Thus, it may be that specific reactions, rather than impacting well-being uniquely, are simply indicative of a general failure to support the individual, which leads to lower well-being. Still, we assert that initial coming out experiences are likely an important context in which general attitudes are communicated and that these experiences set the tone for future interactions. We hope, of course, that subsequent interactions also carry predictive weight as others may warm up to the idea of having an LGB son/daughter/friend over time and with increasingly positive interactions can hopefully convey that his/her autonomy is supported. Testing how closely related specific initial reactions to coming out are to general supportiveness of an LGB identity, and how support may change over time represents an important line of future research; we expect that both impact well-being.

Taken together, it is clear that testing our model against alternative models with longitudinal and experimental methods is critical for future research. Longitudinal studies

in particular have the potential to shed light on the dynamic relation between coming out experiences and identity development. Such longitudinal studies, however, are logistically challenging and notably lacking in the literature. One means by which coming out reactions may be studied as they occur is by assessing identity development and disclosure among first-year college students. Given that many LGB individuals come out after leaving high school (Evans & D'Augelli, 1996), this may be an opportunity to study disclosure experiences without relying on retrospective reports, allowing for exploration into the causal nature of the links between disclosure, autonomy, and well-being.

Conclusions

The results of this study shed light on the question of whether coming out supports LGB well-being. Our finding that negative reactions to sexual identity disclosure have a greater impact on well-being than positive reactions may, at first pass, seem discouraging. However, this result also implies that, so long as LGB individuals are not met with rejection of this identity, they will not suffer costs to well-being. Rather than requiring a carefully crafted, supportive, and politically correct reaction, disclosure may only need to be met with some measure of openness, or even just an absence of negativity from important others. As such, this study has important implications for counselors, clinicians, and anyone who may interact with LGB individuals. A better understanding of the role that such reactions have on the well-being of LGB individuals is an important agenda for educating families and schools dealing with youth as they become aware of their sexual orientation, and prepare to disclose to important others. An important take-away from this research is that LGB youth need not be met with acceptance; so long as their disclosure is not met with high levels of rejection, their mental health should not suffer greatly. By educating families of LGB youth about the quality and consistency of their reactions, the well-being of these individuals may be improved.

Notes

1. Note that the age of coming out to best friend is lower than age first coming out. Though this seems impossible, this finding is due to a few individuals in the sample who came out to the first person rather late in life, but have not (yet) disclosed to their best friend. These individuals pulled up the average age of first disclosure but they did not contribute to the average calculated for disclosure to best friend.
2. Whether or not gender was included as a control variable in these regression analyses the direction and significance of effects remained the same.
3. Adding time since first disclosure as a covariate does not change the significance or pattern of results.

References

- Adie, J. W., Duda, J. L., & Ntoumanis, N. (2008). Autonomy support, basic need satisfaction and the optimal functioning of adult male and female sport participants: A test of basic needs theory. *Motivation and Emotion*, 32, 189–199. doi:10.1007/s11031-008-9095-z
- Assor, A., Roth, G., & Deci, E. L. (2004). The emotional costs of parents' conditional regard: A self-determination theory analysis. *Journal of Personality*, 72, 47–88. doi:10.1111/j.0022-3506.2004.00256.x
- Beals, K. P., Peplau, L. A., & Gable, S. L. (2009). Stigma management and well-being: The role of perceived social support, emotional processing, and suppression. *Personality and Social Psychology Bulletin*, 35, 867–879. doi:10.1177/0146167209334783

- Bell, A. P., Weinberg, M. S., & Hammersmith, S. K. (1981). *Sexual preference: Its development in men and women* (Vol. 2). Bloomington, IL: Indiana University Press.
- Bellman, B. (1979). The paradox of secrecy. *Human Studies*, 4(1), 1–24. doi:[10.1007/BF02127445](https://doi.org/10.1007/BF02127445)
- Bohan, J. S. (1996). *Psychology and sexual orientation: Coming to terms*. New York, NY: Routledge.
- Bosson, J. K., Weaver, J. R., & Prewitt-Freilino, J. L. (2012). Concealing to belong, revealing to be known: Classification expectations and self-threats among persons with concealable stigmas. *Self and Identity*, 11, 114–135. doi:[10.1080/15298868.2010.513508](https://doi.org/10.1080/15298868.2010.513508)
- Buhrmester, M., Kwang, T., & Gosling, S. D. (2011). Amazon's mechanical turk: A new source of inexpensive, yet high-quality data?. *Perspectives on Psychological Science*, 6, 3–5. doi:[10.1177/1745691610393980](https://doi.org/10.1177/1745691610393980)
- Cain, R. (1991). Relational contexts and information management among gay men. *Families in Society*, 72, 344–352.
- Cass, V. C. (1984). Homosexual identity formation: Testing a theoretical model. *Journal of Sex Research*, 20, 143–167. doi:[10.1080/00224498409551214](https://doi.org/10.1080/00224498409551214)
- Chaudoir, S. R., & Fisher, J. D. (2010). The disclosure processes model: Understanding disclosure decision making and postdisclosure outcomes among people living with a concealable stigmatized identity. *Psychological bulletin*, 136, 236–256. doi:[10.1037/a0018193](https://doi.org/10.1037/a0018193)
- Chaudoir, S. R., & Quinn, D. M. (2010). Revealing concealable stigmatized identities: The impact of disclosure motivations and positive first-disclosure experiences on fear of disclosure and well-being. *Journal of Social Issues*, 66, 570–584. doi:[10.1111/j.1540-4560.2010.01663.x](https://doi.org/10.1111/j.1540-4560.2010.01663.x)
- Cole, S. W., Kemeny, M. E., & Taylor, S. E. (1997). Social identity and physical health: Accelerated HIV progression in rejection-sensitive gay men. *Journal of Personality and Social Psychology*, 72, 320–335. doi:[10.1037/0022-3514.72.2.320](https://doi.org/10.1037/0022-3514.72.2.320)
- Cole, S. W., Kemeny, M. E., Taylor, S. E., & Visscher, B. R. (1996). Elevated physical health risk among gay men who conceal their homosexual identity. *Health Psychology*, 15, 243–251. doi:[10.1037/0278-6133.15.4.243](https://doi.org/10.1037/0278-6133.15.4.243)
- Consolacion, T. B., Russell, S. T., & Sue, S. (2004). Sex, race/ethnicity, and romantic attractions: Multiple minority status adolescents and mental health. *Cultural Diversity and Ethnic Minority Psychology*, 10, 200–214. doi:[10.1037/1099-9809.10.3.200](https://doi.org/10.1037/1099-9809.10.3.200)
- Critcher, C. R., & Ferguson, M. J. (2014). The cost of keeping it hidden: Decomposing concealment reveals what makes it depleting. *Journal of Experimental Psychology: General*, 143, 721–735.
- Crocker, J., Major, B., & Steele, C. (1998). Social stigma. In D. Gilbert & S. Fiske (Eds.), *Handbook of Social Psychology* (Vol. 2, 4th ed., pp. 504–551). New York, NY: McGraw Hill.
- D'Augelli, A. R. (2002). Mental health problems among lesbian, gay, and bisexual youths ages 14 to 21. *Clinical Child Psychology and Psychiatry*, 7, 433–456. doi:[10.1177/1359104502007003039](https://doi.org/10.1177/1359104502007003039)
- D'Augelli, A. R. (2006). Developmental and contextual factors and mental health among lesbian, gay, and bisexual youths. In A. M. Omoto & H. S. Kurtzman (Eds.), *Sexual orientation and mental health: Examining identity and development in lesbian, gay, and bisexual people* (pp. 37–53). Washington, DC: American Psychological Association.
- D'Augelli, A. R., & Hershberger, S. L. (1993). Lesbian, gay, and bisexual youth in community settings: Personal challenges and mental health problems. *American Journal of Community Psychology*, 21, 421–448. doi:[10.1007/BF00942151](https://doi.org/10.1007/BF00942151)
- D'Augelli, A. R., Hershberger, S. L., & Pilkington, N. W. (1998). Lesbian, gay, and bisexual youth and their families: Disclosure of sexual orientation and its consequences. *American Journal of Orthopsychiatry*, 68, 361–371. doi:[10.1037/h0080345](https://doi.org/10.1037/h0080345)
- Deci, E. L., & Ryan, R. M. (1985). *Intrinsic motivation and self-determination in human behavior*. New York, NY: Plenum.
- Deci, E. L., & Ryan, R. M. (2000). The “what” and “why” of goal pursuits: Human needs and the self-determination of behavior. *Psychological Inquiry*, 11, 227–268. doi:[10.1207/S15327965PLI1104_01](https://doi.org/10.1207/S15327965PLI1104_01)
- D'Emilio, J. (1983). Capitalism and gay identity. *Section I: Culture, Society and Sexuality 11 Part 1: Conceptual Frameworks*, 13, 239–247.

- Diener, E. (2000). Subjective well-being: The science of happiness and a proposal for a national index. *American Psychologist*, 55, 34.
- Evans, N. J., & D'Augelli, A. R. (1996). Lesbians, gay men, and bisexual people in college. In R. C. Savin-Williams & K. M. Cohen (Eds.), *The lives of lesbians, gays, and bisexuals: Children to adults* (pp. 201–226). Fort Worth, TX: Harcourt Brace College.
- Faulkner, A. H., & Cranston, K. (1998). Correlates of same-sex sexual behavior in a random sample of Massachusetts high school students. *American Journal of Public Health*, 88, 262–266. doi:10.2105/AJPH.88.2.262
- Frable, D. E. S. (1993). Dimensions of marginality: Distinctions among those who are different. *Personality and Social Psychology Bulletin*, 19, 370–380. doi:10.1177/0146167293194002
- Frable, D. E. S., Platt, L., & Hoey, S. (1998). Concealable stigmas and positive self-perceptions: Feeling better around similar others. *Journal of Personality and Social Psychology*, 74, 909–922. doi:10.1037/0022-3514.74.4.909
- Frijda, N. H. (1988). The laws of emotion. *American psychologist*, 43, 349–358. doi:10.1037/0003-066X.43.5.349
- Goffman, E. (1963). *Stigma: Notes on the management of spoiled identity*. Engelwood Cliffs, NJ: Prentice-Hall.
- Greene, K., Derlega, V. J., & Matthews, A. (2006). Self-disclosure in personal relationships. In A. L. Vangelisti & D. Perlman (Eds.), *Cambridge handbook of personal relationships*. New York, NY: Cambridge University Press.
- Grolnick, W. S., & Ryan, R. M. (1989). Parent styles associated with children's self-regulation and competence in school. *Journal of Educational Psychology*, 81, 143–154. doi:10.1037/0022-0663.81.2.143
- Gross, J. J., & Levenson, R. W. (1993). Emotional suppression: Physiology, self-report, and expressive behavior. *Journal of Personality and Social Psychology*, 64, 970–986. doi:10.1037/0022-3514.64.6.970
- Gross, L. (1999). Contested closets: The politics and ethics of outing. In L. P. Gross & J. D. Woods (Eds.), *The Columbia Reader on Lesbians and Gay Men in Media, Society, and Politics* (pp. 421–428). New York: Columbia University Press.
- Grov, C., Bimbi, D. S., Nani, J. E., & Parsons, J. T. (2006). Race, ethnicity, gender, and generational factors associated with the coming-out process among gay, lesbian, and bisexual individuals. *Journal of Sex Research*, 43, 115–121. doi:10.1080/00224490609552306
- Hayes, A. F., & Preacher, K. J. (2014). Statistical mediation analysis with a multicategorical independent variable. *British Journal of Mathematical and Statistical Psychology*, 67, 451–470.
- Herek, G. M. (2000). The psychology of sexual prejudice. *Current Directions in Psychological Science*, 9, 19–22. doi:10.1111/1467-8721.00051
- Herek, G. M. (2009). Hate crimes and stigma-related experiences among sexual minority adults in the united states: Prevalence estimates from a national probability sample. *Journal of Interpersonal Violence*, 24, 54–74. doi:10.1177/0886260508316477
- Herek, G. M., & Capitano, J. P. (1996). "Some of my best friends" intergroup contact, concealable stigma, and heterosexuals' attitudes toward gay men and lesbians. *Personality and Social Psychology Bulletin*, 22, 412–424. doi:10.1177/0146167296224007
- Hershberger, S. L., Pilkington, N. W., & D'Augelli, A. R. (1997). Predictors of suicide attempts among gay, lesbian, and bisexual youth. *Journal of Adolescent Research*, 12, 477–497. doi:10.1177/0743554897124004
- Hetrick, E. S., & Martin, A. D. (1987). Developmental issues and their resolution for gay and lesbian adolescents. *Journal of Homosexuality*, 14, 25–43. doi:10.1300/J082v14n01_03
- Igartua, K. J., Gill, K., & Montoro, R. (2003). Internalized homophobia: A factor in depression, anxiety, and suicide in the gay and lesbian population. *Canadian Journal of Community Mental Health (Revue canadienne de santé mentale communautaire)*, 22, 15–30.
- Imber-Black, E., Roberts, J., & Whiting, R. A. (1988). *Rituals in families and family therapy*. New York, NY: W.W. Norton.

- Israel, T., & Mohr, J. J. (2004). Attitudes toward bisexual women and men. *Journal of Bisexuality*, 4, 117–134. doi:[10.1300/J159v04n01_09](https://doi.org/10.1300/J159v04n01_09)
- Johansson, W., & Percy, W. (1994). *Outing: Shattering the conspiracy of silence*. New York, NY: Harrington Park Press.
- Johnson, K. L., Gill, S., Reichman, V., & Tassinary, L. G. (2007). Swagger, sway, and sexuality: Judging sexual orientation from body motion and morphology. *Journal of Personality and Social Psychology*, 93, 321–334. doi:[10.1037/0022-3514.93.3.321](https://doi.org/10.1037/0022-3514.93.3.321)
- Jones, E. E., Farina, A., Hastorf, A. H., Markus, H., Miller, D. T., & Scott, R. A. (1984). *Social stigma: The psychology of marked relationships*. New York, NY: Freeman.
- Joussemet, M., Landry, R., & Koestner, R. (2008). A self-determination theory perspective on parenting. *Canadian Psychology*, 49, 194–200. doi:[10.1037/a0012754](https://doi.org/10.1037/a0012754)
- Juster, R. P., Smith, N. G., Ouellet, É., Sindi, S., & Lupien, S. J. (2013). Sexual orientation and disclosure in relation to psychiatric symptoms, diurnal cortisol, and allostatic load. *Psychosomatic Medicine*, 75, 103–116. doi:[10.1097/PSY.0b013e3182826881](https://doi.org/10.1097/PSY.0b013e3182826881)
- Karpel, M. A. (1980). Family secrets: I. Conceptual and ethical issues in the relational context. II. Ethical and practical considerations in therapeutic management. *Family Process*, 19, 295–306. doi:[10.1111/j.1545-5300.1980.00295.x](https://doi.org/10.1111/j.1545-5300.1980.00295.x)
- La Guardia, J. G., & Patrick, H. (2008). Self-determination theory as a fundamental theory of close relationships. *Canadian Psychology/Psychologie Canadienne*, 49, 201–209. doi:[10.1037/a0012760](https://doi.org/10.1037/a0012760)
- La Guardia, J. G., Ryan, R. M., Couchman, C. E., & Deci, E. L. (2000). Within-person variation in security of attachment: A self-determination theory perspective on attachment, need fulfillment, and well-being. *Journal of Personality and Social Psychology*, 79, 367–384. doi:[10.1037/0022-3514.79.3.367](https://doi.org/10.1037/0022-3514.79.3.367)
- LaMar, L., & Kite, M. (1998). Sex differences in attitudes toward gay men and lesbians: A multidimensional perspective. *Journal of Sex Research*, 35, 189–196. doi:[10.1080/00224499809551932](https://doi.org/10.1080/00224499809551932)
- Leary, M. R., & Baumeister, R. F. (2000). The nature and function of self-esteem: Sociometer theory. *Advances in Experimental Social Psychology*, 32, 1–62.
- Legate, N., Ryan, R. M., & Weinstein, N. (2012). Is coming out always a “good thing”? Exploring the relations of autonomy support, outness, and wellness for lesbian, gay, and bisexual individuals. *Social Psychological and Personality Science*, 3, 145–152. doi:[10.1177/1948550611411929](https://doi.org/10.1177/1948550611411929)
- Lynch, M. F., La Guardia, J. G., & Ryan, R. M. (2009). On being yourself in different cultures: Ideal and actual self-concept, autonomy support, and well-being in China, Russia, and the United States. *The Journal of Positive Psychology*, 4, 290–304. doi:[10.1080/17439760902933765](https://doi.org/10.1080/17439760902933765)
- Lynch, M. F., & Ryan, R. M. (2004). On being yourself: Consistency versus authenticity of self-concept in cultural and interpersonal contexts. In H. W. Marsh, J. Baumert, G. E. Richards, & U. Trautwein (Eds.), *Self-concept, motivation and identity: Where to from here? Proceedings of the third international biennial SELF research conference*, Berlin. SELF Research Centre, University of Western Sydney, Australia.
- MacKinnon, D. P. (2008). *Introduction to statistical mediation analysis*. Mahwah, NJ: Erlbaum.
- Major, B., Cozzarelli, C., Sciacchitano, A. M., Cooper, M. L., Testa, M., & Mueller, P. M. (1990). Perceived social support, self-efficacy, and adjustment to abortion. *Journal of Personality and Social Psychology*, 59, 452–463. doi:[10.1037/0022-3514.59.3.452](https://doi.org/10.1037/0022-3514.59.3.452)
- Major, B., Zubek, J. M., Cooper, M. L., Cozzarelli, C., & Richards, C. (1997). Mixed messages: implications of social conflict and social support within close relationships for adjustment to a stressful life event. *Journal of Personality and Social Psychology*, 72, 1349–1363. doi:[10.1037/0022-3514.72.6.1349](https://doi.org/10.1037/0022-3514.72.6.1349)
- Mays, V. M., & Cochran, S. D. (2001). Mental health correlates of perceived discrimination among lesbian, gay, and bisexual adults in the United States. *Journal Information*, 91, 1869–1876.
- McGregor, B. A., Carver, C. S., Antoni, M. H., Weiss, S., Yount, S., & Ironson, G. (2001). Distress and internalized homophobia among lesbian women treated for early stage breast cancer. *Psychology of Women Quarterly*, 25(1), 1–9. doi:[10.1111/1471-6402.00001](https://doi.org/10.1111/1471-6402.00001)

- McLean, K. (2007). Hiding in the closet?: Bisexuals, coming out and the disclosure imperative. *Journal of Sociology*, 43, 151–166. doi:[10.1177/1440783307076893](https://doi.org/10.1177/1440783307076893)
- Mohr, J. J., & Fassinger, R. E. (2000). Measuring dimensions of lesbian and gay male experience. *Measurement and Evaluation in Counseling and Development*, 33, 66–90.
- Morris, J. F., Waldo, C. R., & Rothblum, E. D. (2001). A model of predictors and outcomes of outness among lesbian and bisexual women. *American Journal of Orthopsychiatry*, 71, 61–71. doi:[10.1037/0002-9432.71.1.61](https://doi.org/10.1037/0002-9432.71.1.61)
- Ochs, R. (1996). Biphobia: It goes more than two ways. In B. A. Firestein (Ed.), *Bisexuality: The psychology and politics of an invisible minority* (pp. 240–259). Newbury Park, CA: Sage.
- Oetjen, H., & Rothblum, E. D. (2000). When lesbians aren't gay. *Journal of Homosexuality*, 39, 49–73. doi:[10.1300/J082v39n01_04](https://doi.org/10.1300/J082v39n01_04)
- Pachankis, J. E. (2007). The psychological implications of concealing a stigma: A cognitive-affective-behavioral model. *Psychological Bulletin*, 133, 328–345. doi:[10.1037/0033-2909.133.2.328](https://doi.org/10.1037/0033-2909.133.2.328)
- Pennebaker, J. W., & Chung, C. K. (2011). Expressive writing and its links to mental and physical health. In H. S. Friedman (Ed.), *Oxford handbook of health psychology* (pp. 417–437). New York, NY: Oxford University Press.
- Quinn, D. M., & Earnshaw, V. A. (2013). Concealable stigmatized identities and psychological well-being. *Social and Personality Psychology Compass*, 7, 40–51. doi:[10.1111/spc3.12005](https://doi.org/10.1111/spc3.12005)
- Radloff, L. S. (1977). The ces-d scale: A self-report depression scale for research in the general population. *Applied Psychological Measurement*, 1, 385–401. doi:[10.1177/014662167700100306](https://doi.org/10.1177/014662167700100306)
- Ragins, B. R. (2004). Sexual orientation in the workplace: The unique work and career experiences of gay, lesbian and bisexual workers. *Research in Personnel and Human Resources Management*, 23, 35–120.
- Richer, S. F., Blanchard, C., & Vallerand, R. J. (2002). A motivational model of work turnover. *Journal of Applied Social Psychology*, 32, 2089–2113. doi:[10.1111/j.1559-1816.2002.tb02065.x](https://doi.org/10.1111/j.1559-1816.2002.tb02065.x)
- Rogers, C. R. (1961). *On becoming a person*. Boston, MA: Houghton–Mifflin.
- Rosenberg, M. (1979). *Conceiving the Self*. New York, NY: Basic Books.
- Roth, G., Assor, A., Niemiec, C. P., Ryan, R. M., & Deci, E. L. (2009). The emotional and academic consequences of parental conditional regard: Comparing conditional positive regard, conditional negative regard, and autonomy support as parenting practices. *Developmental Psychology*, 45, 1119–1142. doi:[10.1037/a0015272](https://doi.org/10.1037/a0015272)
- Rudd, N. A. (1996). Appearance and self-presentation research in gay consumer cultures: Issues and impact. *Journal of Homosexuality*, 31, 134.
- Rule, N. O., Ambady, N., Adams, R. B., & Macrae, C. N. (2008). Accuracy and awareness in the perception and categorization of male sexual orientation. *Journal of personality and social psychology*, 95, 1019–1028. doi:[10.1037/a0013194](https://doi.org/10.1037/a0013194)
- Rule, N. O., Ambady, N., & Hallett, K. C. (2009). Female sexual orientation is perceived accurately, rapidly, and automatically from the face and its features. *Journal of Experimental Social Psychology*, 45, 1245–1251. doi:[10.1016/j.jesp.2009.07.010](https://doi.org/10.1016/j.jesp.2009.07.010)
- Russell, S. T., & Seif, H. (2001). Bisexual female adolescents. *Journal of Bisexuality*, 2, 73–94. doi:[10.1300/J159v02n02_05](https://doi.org/10.1300/J159v02n02_05)
- Rust, P. C. (1993). “Coming out” in the age of social constructionism: Sexual identity formation among lesbian and bisexual women. *Gender & Society*, 7, 50–77. doi:[10.1177/089124393007001004](https://doi.org/10.1177/089124393007001004)
- Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, 55, 68–78. doi:[10.1037/0003-066X.55.1.68](https://doi.org/10.1037/0003-066X.55.1.68)
- Ryan, R. M., La Guardia, J. G., Solky-Butzel, J., Chirkov, V., & Kim, Y. (2005). On the interpersonal regulation of emotions: Emotional reliance across gender, relationships, and cultures. *Personal Relationships*, 12, 145–163. doi:[10.1111/j.1350-4126.2005.00106.x](https://doi.org/10.1111/j.1350-4126.2005.00106.x)
- Savin-Williams, R. C. (1989). Coming out to parents and self-esteem among gay and lesbian youths. *Journal of Homosexuality*, 18(1-2), 1–35. doi:[10.1300/J082v18n01_01](https://doi.org/10.1300/J082v18n01_01)

- Savin-Williams, R. C. (1990). *Gay and lesbian youth: Expressions of identity*. Washington, DC: Hemisphere Publishing Corp.
- Savin-Williams, R. C., Dubé, E. M., Dube, E. M.. (1998). Parental reactions to their child's disclosure of a gay/lesbian identity. *Family Relations*, 47, 7–13. doi:[10.2307/584845](https://doi.org/10.2307/584845)
- Shils, E. A. (1956). *The torment of secrecy: The background and consequences of American security policies*. London: Heinemann.
- Smart, L., & Wegner, D. M. (2000). The hidden costs of stigma. In T. F. Heatherton, R. E. Kleck, M. R. Hebl, & J. G. Hull (Eds.), *The Social Psychology of Stigma* (pp. 220–242). New York: Guilford Press.
- Suicide Prevention Resource Center. (2008). *Suicide risk and prevention for lesbian, gay, bisexual, and transgender youth*. Newton, MA: Education Development Center.
- The Pew Research Center. (2011). *A survey of LGBT Americans: Attitudes, experiences and values in changing times*. Washington, DC: Pew Research Center.
- Troiden, R. R. (1988). Homosexual identity development. *Journal of Adolescent Health Care*, 9, 105–113. doi:[10.1016/0197-0070\(88\)90056-3](https://doi.org/10.1016/0197-0070(88)90056-3)
- Ullrich, P. M., Lutgendorf, S. K., & Stapleton, J. T. (2003). Concealment of homosexual identity, social support and CD4 cell count among HIV-seropositive gay men. *Journal of Psychosomatic Research*, 54, 205–212. doi:[10.1016/S0022-3999\(02\)00481-6](https://doi.org/10.1016/S0022-3999(02)00481-6)
- Vansteenkiste, M., & Ryan, R. M. (2013). On psychological growth and vulnerability: Basic psychological need satisfaction and need frustration as a unifying principle. *Journal of Psychotherapy Integration*, 23, 263.
- Weinstein, N., Ryan, W. S., DeHaan, C. R., Przybylski, A. K., Legate, N., & Ryan, R. M. (2012). Parental autonomy support and discrepancies between implicit and explicit sexual identities: Dynamics of self-acceptance and defense. *Journal of Personality & Social Psychology*, 102, 815–832. doi:[10.1037/a0026854](https://doi.org/10.1037/a0026854)
- Wells, J. W., & Kline, W. B. (1987). Self-disclosure of homosexual orientation. *Journal of Social Psychology*, 127, 191–197. doi:[10.1080/00224545.1987.9713679](https://doi.org/10.1080/00224545.1987.9713679)
- Williams, G. C., Grow, V. M., Freedman, Z. R., Ryan, R. M., & Deci, E. L. (1996). Motivational predictors of weight loss and weight-loss maintenance. *Journal of Personality and Social Psychology*, 70, 115–126. doi:[10.1037/0022-3514.70.1.115](https://doi.org/10.1037/0022-3514.70.1.115)
- Williams, K. D., Forgas, J. P., & von Hippel, W. (Eds.), (2005). *The social outcast: Ostracism, social exclusion, rejection, and bullying*. New York, NY: Psychology Press.