ABSTRACT

THE INTERSECTIONALITY OF BEING A SEXUAL MINORITY AND AN ATHEIST

By

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One major conflict some lesbian, gay, and bisexual (LGB) individuals face is how to maintain their religious affiliations while developing their sexual identity. Some of these individuals choose to reject theist ideology altogether. Very little is known about the atheist and theist differences among the LBG populations. This study aimed to explore relationship challenges that LGB individuals face when having differing religious ideologies from their parents. In addition, the study addressed the need to examine additive links of multiple potential oppressive forces when identifying as a LGB atheist.

The study found that all participants perceived having relationship strain when having a theist parent. However, participants who identified as atheists had more relationship strain than participants who shared the same theistic belief as their parents. Most participants were not "out of the closet" and reported the greatest relationship strain in almost all subscales.

The implications for social work practice is to emphasize the importance of theist belief, or lack there of, in family dynamics. In addition, social workers must advocate in religious institutions for civil treatment not only for LGB but for atheists as well.

THE INTERSECTIONALITY OF BEING A SEXUAL MINORITY AND AN ATHEIST

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TABLE OF CONTENTS

	Page
ACKNOWLEDGEMENTS	iii
LIST OF TABLES	. vi
CHAPTER	
1. INTRODUCTION	1
Problem Statement.	1
Background	1
Social Work Relevance	
Multicultural Relevance	4
Purpose of the Study	4
Definition of Terms	5
Primary Relationship	5
Relationship Strain	5
Religious Affiliation	5
Atheism	5
Ideology	5
Theism	6
Sexual Minority	6
Intersectionality	
2. LITERATURE REVIEW	7
A History of Homosexuality and the New Atheism	
History of Homosexuality in America	
Rise of the New Atheism in America	
Primary Relationships	
Relationship with Parental Figures	9
Relationship Strain	10
Religious Coercion	
Impacts of Relationship Strain	
Intersectionality	
Stigma	17
Identity Formation	
Internalized Homophobia	
Religious Conflict	20

CHAPTER		Page
	Conversion Therapy Summary	
3. N	METHODOLOGY	25
	Research Design	25
	Sample	25
	Procedure	
	Instrument	26
	Data Analysis	27
4. I	RESULTS	28
	Theist Matched Comparisons	28
	Relationship Strain of Atheist/Theist Participants with Theist Parents	
	Sexual Orientation and Relationship Strain Subscales	
	Out to Parents Comparisons of Likelihood of Relationship Strain	
	Ethnic Comparisons of Likelihood of Relationship Strain	32
	Age and Relationship Strain	34
	Atheist and Theist Out to Their Theist Parents	35
5. I	DISCUSSION	36
	Findings	36
	Limitations	38
	Implications for Social Work Practice and Policy	39
	Further Research	40
APPEN	DICES	41
A. A	AGENCY CONSENT LETTER	43
В. (QUESTIONNAIRE	44
C. I	NFORMED CONSENT LETTER	49
D. I	NVITATION SCRIPT	52
REFERI	ENCES	54

LIST OF TABLES

ΓABLE	F	Page
1. The McMaster Family Assessment Device (FA	D)	27
2. Characteristics of Respondents		29
3. Theist Matched Comparisons of Likelihood of l	Relationship Strain	30
4. Relationships Strain of Atheist/Theist Participal	nts with Theist Parents	31
5. Sexual Orientation and Relationship Strain Sub	scales	32
6. Out to Parents Comparisons of Likelihood of R	elationship Strain	33
7. Age and Relationship Strain		34

CHAPTER 1

INTRODUCTION

Problem Statement

Research has indicated that the strongest protective factor for any marginalized group is support from family (Oliva, Jimenez, & Parra, 2009; Ryan, Russell, Huebner, Diaz, & Sanchez, 2010; Shilo & Savaya, 2011). However, relationships are often strained when the adult child does not share the same belief system as their parents (Colaner, Soliz, & Nelson, 2014; Stokes & Regnerus, 2009). Specifically, individuals who identify as atheist's or sexual minorities are ranked as some of the most untrusted people in America, because these individuals do not share the same ideology with the majority of the population (Edgell, Gerteis, & Hartmann, 2006; Gervais, Shariff, & Norenzayan, 2011). Research, with both atheists and sexual minorities show that they are highly marginalized by their families (Bostwick, Boyd, Hughes, West, & McCabe, 2014; Hammer, Cragun, Hwang, & Smith, 2012). Previous research has focused primarily on these groups separately and has yet to focus on the impact on familial relationships, when identifying as both an atheist and sexual minority together.

Background

As the population increases and becomes more progressive, there will likely be more people identifying as a sexual minority or also known as lesbian, gay, or bisexual (LGB). According to a researcher at the University of California Los Angeles, in 2011 it was estimated that nine million adults identified openly as LGB (Gates, 2011). In

another article by Gates in 2010, he found bisexual individuals were more likely to be non-White; however, there were no significant racial differences with gay and lesbian individuals. Lesbian, gay, bisexual individuals were also found to be less religious than the overall U.S. population (Herek, Noton, Allen, & Sims, 2010). Gates (2010) reported that younger people, 18-30 years old, tended to be more open about their sexual orientation. Moreover, Gates also reported that 1 in 8 LGB adults had never told anyone about their sexual orientation.

In the recent years, the LGB community has made progress in gaining civil rights; however, a big part of the dominant culture still has a hostile attitude toward LGB (Whitehead & Baker, 2012). An example of the stigma and oppression faced by the LGB community is exhibited by the protests against legalizing gay marriage and the hate crimes that are committed each year against LGB individuals (Swank, Fahs, & Frost, 2013). The stigma and oppression of the LGB community is partly spearheaded at times by religious dogma (Hooghe, Claes, Harell, Quinteller, & Dejaeghere, 2010). In other words, it is possible that religious organizations can sometimes influence how their congregations view LGB individuals in a harmful way. The Roman Catholic Church, the Southern Baptist Convention, and the United Methodist Church, which represent over one third of church memberships in the United States, have condemned same-sex behavior (Pew Research Center, 2008). Specifically, Hooghe et al. found the anti-gay sentiment was largely associated with individuals who attended non-affirming religious services frequently. Paradoxically, Hooghe et al. found that when Jewish individuals attended religious services frequently, it strengthened their support for gay rights.

Nonetheless, the intolerance for LGB individuals is pervasive and may be influenced by religious doctrines at times.

In addition to the growing population of LGB individuals, new ideologies are forming and more people now are identifying as atheists. According to one poll, almost 20% of Americans identify as not being affiliated with a religion (Pew Research Center, 2013b). In addition, the Pew Research article indicated that in 2007, less than 2% of Americans identified at atheists, however in 2012 that number grew to 2.4% and is rising. According to the same poll, between the ages 18-29 years old, and college graduates, were more likely to identify as atheists (Pew Research Center, 2013b).

Though more people are identifying as atheist, the dominant culture has been largely religious and consequently a more religious society may at times create a hostile environment for LGB individuals. For example, even though the United States has separation of church and state, many states have made it clear that atheists cannot hold a place in politics (Jewell, 2011). According to a Gallup poll, 53% of people reported they would refuse to vote for an atheist (Hutson, 2009). According to Pew Research Center (2013a), the Protestant respondent group of White evangelicals responded with more negative feelings toward atheists than any other theist group. Other researchers found that atheists reported experiencing discrimination in the work place, on college campuses, and in social settings (Cragun, Kosmin, Keysar, Hammer, & Nielsen, 2012; Hammer et al., 2012). Gervais and Norenzayan (2012) found in their experiments with 65 undergraduates that most believed that atheists have no moral code and thus cannot be trusted because of their non-belief in "god."

Social Work Relevance

Social workers have the ethical obligation to uphold the importance of human relationships. By exploring the possible relationship challenges LGB who are atheists face, when having a parent who is religious, can perhaps start the developments of new specialized programs that can better serve families struggling with contradictory ideologies.

Multicultural Relevance

The LGB and atheist communities are highly stigmatized and are seen as immoral (Bostwick et al., 2014; Hammer et al., 2012). Often, both communities have been active in trying to create an identity in society that combats the immoral misconception mainstream culture can perpetuate. One example includes the influence of religiosity on the mental health of African American Men who have Sex with Men (AAMSM). In a study by Smallwood (2013), with a sample of 345 AAMSM, found that higher religiosity was positively associated with personal and moral "homonegativity" and negatively associated with gay affirmation and consequently sexuality-related psychological distress.

Purpose of the Study

Investigating the intersectionality of being a sexual minority and an atheist with family members who have varied religious affiliations can provide social workers with insight regarding the primary relationship challenges of individuals who are at this intersection. This study will address the following:

Hypothesis: Primary relationship strain will be greater when a sexual minority adult offspring who is an atheist does not share the same religious belief as their parents

when compared to a sexual minority adult offspring who shares the same religious belief as their parents.

Definition of Terms

Primary Relationships

For the purpose of this study primary relationships are anyone the adult child perceives as their dominant caregiver.

Relationship Strain

To have lower levels of shared family identity, higher rejection, decreased solidarity and communication (Colaner et al., 2014).

Religious Affiliation

It seems that one's religious affiliation can perpetuate the oppression and marginalization of groups like atheists and the LGB communities (Gervais, et al., 2011; Hooghe et al., 2010). For example, some religious affiliated groups within Mormonism, Islam, and Evangelical Christianity have socially condemned the LGB community to certain civil liberties (Pew Research Center, 2013a). Similarly, according to Hooghe et al. certain religious affiliations or individuals who reported being Muslim and White Protestant Evangelical Christians had less tolerance for atheists groups.

Atheism

Generally, a self-identified atheist denies or rejects any belief in a deity (Lorkoski, 2013).

<u>Ideology</u>

A relatively stable structure of attitudes and beliefs that provide a schema for understanding the social world (LeDrew, 2013b).

Theist

People who hold that God or Gods are a necessary beings for whom omnipotence, omniscience, and moral perfection are essential attributes (Kraay, 2011).

Sexual Minority

Sexual minorities are a group whose sexual identity, orientation, or practices do not fit with the status quo (Math & Seshadri, 2013). According to Math and Seshadri sexual minorities are generally composed LGB, and transgendered individuals.

<u>Intersectionality</u>

A sexual minority who is also an atheist is an intersection where multiple social categories and structures interact with each other. In other words, the intersectionality of these social categories can have effects on one another. Intersectionality is often described as someone who encompasses multiple oppressions, which can further influence inequality or act as protective factors (Kurian, 2011).

CHAPTER 2

LITERATURE REVIEW

In some parts of the world being LGB or an atheist is condemned and grounds for death (No God, 2012; Rowan, 2012). Generally these places are governed by a theocracy, thereby laws reflecting the words of "god." However, the United States does not recognize one religion to govern the people. The United States, based on the First Amendment, has secular undertones when governing the society. Nonetheless, according to the Pew Research Center (2008), 78% of people in the United States identify as Christian. Moreover, in a democracy like the United States, a Christian majority can likely influence state laws and social norms to be more in line with Christian values. The United States population seemingly has religious undertones, and according to the some research, can facilitate a society of less tolerance of non-normative ideas or behaviors, and can result in oppression of non-normative groups (Hooghe et al., 2010).

Carrying multiple identities, LGB atheist individuals, in a society that considers them to be untrustworthy and immoral, can foster many types of reactions. Researchers suggested that the people's religious affiliation, in the United States, influenced their opinions on immoral and moral behaviors (Olson, Cadge, & Harrison, 2006; Schulte & Battle, 2004). This review of the literature will look at the history of the LGB community in the United States examine how religion can influence the experiences of individuals who identify as LGB and atheist, and how the oppression and marginalization on atheist or LGB individuals can impinge on primary relationships and well-being.

A History of Homosexuality and the New Atheism

History of Homosexuality in America

According to Professor Milt Ford (2013), the founder of the LGBT Resource Center, at Grand Valley State University, the movement toward homosexual culture, in the United States, in the early 20th century because of economic dislocations and farm crisis. Professor Milt Ford indicated that people were dislocating to urban areas for work and thus started to live in unorthodox arrangements. In other words, individuals were living in structures that had same sex settings. Ultimately, these settings made it easy for people with homosexual tendencies to live out their inclinations without the religious or familial persecution.

During WWII, dishonorably discharged LGB individuals were left at port cities, like San Francisco. These individuals refrained from leaving the port cities because of the shame of their behaviors, thus contributing to the increase of homosexuals in the urban areas (Ford, 2013).

During the 1950s the LGB movement started to take notice. In the early 1950s President Eisenhower presented an executive order that indicated homosexuality was grounds to be fired (Bontecou, 1953). The action of President Eisenhower set the tone for other government agencies to dismiss alleged LGB individuals (Ford, 2013). In addition, the 1950s were when the first assembly of gay political organizations started, and also the first documented police harassment and brutality of homosexual communities began (Potter, 2012).

Later, during the 1960s, marked a time when the first LGB movement for civil rights started. Though there was other earlier gay resistance to the brutality the LGB

population faced from society, the Stonewall incident in New York City, was the highly mediatized event that gave the gay community a voice to start their liberation or the "Coming Out" phenomenon (Carter, 2009; Gorton, 2009).

Rise of the New Atheism in America

The Coming Out phenomenon not only gave LGB individuals a place in society, it has also lent the New Atheist Movement momentum for their liberation (Smith, 2011). Partly spearheaded by Dr. Robin Elisabeth Cornwall, the "OUT Campaign" was a website the New Atheist Movement created for atheists to feel comfortable "coming out" (Smith, 2011). While there have been many notable individuals in the past years that expressed an atheist ideology here in the United States, according to Pigliucci (2013), the 9/11 terrorist attack on the United States was the turning point for the rise of the New Atheism Movement. The first book published in 2004 by neuroscientist Sam Harris gave the American people an answer for the reason the 9/11 attacks occurred (Pigliucci, 2013). Sam Harris (2005) emphasized that religious fundamentalism is the culprit to the many events in history that has harmed people. After Sam Harris's book was published many other scientists and philosophers authored similar books as well as gaining media attention exploring the debate around theism (Pigliucci, 2013). In other words, the United States population was now ready to entertain the concept of the binary world of theism and atheism.

Primary Relationships

Relationship with Parental Figures

While the process of coming out is an important part of solidifying ones selfidentity, many individuals find themselves disclosing their identities to their mothers first or not at all (Carnelley, Hepper, Hicks, & Turner, 2011). According to Carnelley et al. the type of relationship children have with their parents may determine disclosure of their identity. For example, in Carnelley et al. study LGB individuals (N = 309) who viewed their mothers as accepting when they were children, found it easier to come out. In addition, they also found that once the LGB identity was disclosed to mothers, subsequently fathers were also included. Furthermore, the Carnelley et al. suggested mothers might often hold a bridge for communication and acceptance from child-father relationships.

Similarly in another study, Mohr and Fassinger (2003) examined attachment style and self-disclosure of 489 LGB individuals. Mohr and Fassinger found that an individual that developed a fearful or avoidant attachment style were more likely to not come out to family or friends because of feelings of mistrust. For example, Mohr and Fassinger found that when mothers were viewed as unsupportive this was associated with fearful attachment style, which impinged on disclosure. In addition, when parents were perceived as sensitive in childhood, fearful and avoidant attachment styles were decreased. Overall, it is suggested that past childhood and parental relationship could determine an individual's declaration of identity.

Relationship Strain

While the literature is still in its infancy, in regards to the struggles of holding both labels LGB and atheist, both identities separately have shared experiences of being ostracized from the society as well as from their primary relationships. Members of both groups often have an experience of coming out to their primary relationships and report unsupportive responses from their parents (Shilo & Savaya, 2011; Smith, 2011). Shilo

and Savaya (2011), as well as Smith (2011) indicated that many of these individuals end up having strain in their primary relationships, which can then impinge on the individuals well-being.

Many LGB individuals face the choice of coming out to family and for some it can be difficult depending on the type of parents they have (Potoczniak, Crosbie-Burnett, & Saltzburg, 2009). According to the Potoczniak et al. LGB individuals found it more difficult to come out to parents who had a strong religious background. Once these individuals disclosed their sexual orientation, their parents were often hurtful and negative. Some of the parents would express how the individual was "bringing evil in their family" or how being a sexual minority was "destroying their soul" (Potoczniak et al., 2009, p. 198). In another study, the authors Subhi and Geelan (2012) interviewed 20 LGB individuals. Some of the participants mentioned their Christian parents held resentment and anger toward them, which consequently led them to sever the relationship.

In addition, once the family is aware their child is a sexual minority, their communication with their child can be strained (Friedman & Morgan, 2009).

Researchers found that sexual minorities felt more uncomfortable asking family advice on sexual issues than heterosexual individuals. Friedman and Morgan explained that sexual minority women found more discomfort discussing their relationship issues with parents because of the lack of understanding from parents.

While LGB individuals face negative responses from their families in regards to their orientation, Smith (2011) examined the journey of self-proclaimed atheist individuals and discovered that the participants all shared the tension and fear of coming

out to their family and friends. Some of the participants described the event of coming out as a negative experience.

In another study, Colaner et al. (2014) examined different religious identities in the parent-child relationship among young adults (N = 409). They found that when parents and adult children had a different religious affiliation it compromised relationship well-being. For example, many of the individuals in the study reported in the survey that they had diminished solidarity and satisfaction in their relationships with their parents. Overall coming out LGB or atheist led some of these theist parents to become angry and say hurtful messages to their children, which created or intensified fear and decreased solidarity and satisfaction in their relationships.

Religious Coercion

Because some parents have a hard time when their children do not adhere to their religious affiliation, they will sometimes use "god" as a tool to coerce the individual into denial of their self-identity or choices they have made (Etengoff & Daiute, 2014).

Statements like, "god will punish you" or "you will go to hell," are examples of how some parents or families will coerce their relatives to believe they are making the wrong choice. For example, the authors Etengoff and Daiute (2014) did a qualitative study with 23 gay men and the familial reactions post-coming out. They found that when parents or family members used "god" as a way to redirect them to not being gay, this further impinged on their familial relationships. Ultimately, because "god" is moral and good, using the "god" argument eliminated the parents from being the person the adult child should be angry with.

Impacts of Relationship Strain

Both the LGB and atheist communities have similar experiences in the marginalization and oppression of being a part of these subcultures. The relationship strain in their primary relationships can create a barrier for these individuals to feel connected to society as researchers found from the analysis of the of the responses of over 680 youth who identified as a sexual minority in the Youth Risk Behavioral Survey and the 40 in-depth interviews on the identity formation process of atheists (Mayer, Garofalo, & Makadon, 2014; Smith, 2011).

For example, some LGB individuals experience diminished psychological well-being, when they feel unsupported in their primary relationships (Detrie & Lease, 2007). Detrie and Lease (2007) conducted a study with 218 LBG individuals and found that when the family was perceived as unsupportive this negatively impacted self-acceptance, positive relations with others, autonomy, and environmental mastery, in the youth group. However, in the adult LGB group, family support was not as impactful to psychological wellbeing.

Family rejection of LGB sexual orientation has been linked to various mental health problems (Walls, Potter, & Leeuwen, 2009). For example, in a study of 129 LGB homeless youth and adults, the researchers found that these individuals were three times more likely to report suicide attempts when compared to heterosexual group. In addition, the sexual minority group had more attempts of suicide if they were previously in custody of social services when compared to other sexual minorities that have never been in custody of social services (Walls et al., 2009). According to Mayer, et al. (2014), parents can be powerful allies to mitigating the mental distress these individuals may face.

The impact of relationship strain on atheist is both negative and positive.

According to Smith (2011), some of the participants described the badgering of being a self-proclaimed atheist led to constant emotional pain and social discomfort. For example, to emphasize social discomfort, in an article on atheists in America, one participant who openly identified as a lesbian, said her worst nightmare is people finding out she was an atheist (Baggini, Andrew, & Thibodeaux, 2012). When examining the research, pain was a common theme that was linked to familial rejection or non-acceptance of an atheist's identity (Fonza, 2013; Smith, 2011). Moreover, the non-acceptance from others and family, strengthened their identity and gave them a sense of liberation. In fact, many of them described having a strong sense of self. Consequences related to the mental and physical health of atheists, from relationship strain of primary relationships, have not been investigated (Brewster, Robinson, Sandil, Esposito, & Geiger, 2014).

Even though there is limited research on the atheist community and their relationships with their families, using the Minority Stress Theory can be helpful in examining the mental health and wellbeing of atheists. The theory hypothesizes that negative physical and psychological outcomes are associated with identifying as a member of a socially stigmatized and oppressed group. Researchers on other marginalized groups have supported this theory (Thoits, 2013); therefore, because atheists are a highly marginalized group, one can suggest that the discrimination and stigma may increase psychological and physical stress on these individuals.

Intersectionality

Looking at the intersection of being a LGB and an atheist, one would assume this combination would have a substantial amount of struggles with their primary relationship, due to marginalization that both labels carry. However, the research is limited on this specific intersection. Nonetheless, research has looked at the challenges of the intersection of ethnic differences among LGB individuals. Drawing a parallel from those studies can suggest whether multiple oppressions can create a more hostile environment and negative outcomes for these individuals.

For example, Rosario, Schrimshaw, and Hunter (2004) investigated ethnic difference in the coming out process of 145 LGB youths, ranging from 14-21 years old. The participants were given a survey on sexual identity integration and self-disclosure to others. Rosario et al. found that Black LGB youths were less involved in gay-related social activities and were more uncomfortable with others knowing their sexual orientation as opposed to White and Latino LGB youths. In other words, Black LGB youths may have limited social support and stay in the closet longer than White and Latino LGB youths.

In another similar study, Lytle, De Luca, and Blosnich (2014) examined the racial difference in suicide attempt and depression between 4,321 LBG individuals. Lytle et al. found that Latino, Asian, and Black LGB adults have been found to report more attempted suicide as opposed to Non-Hispanic White LGB. However, they found a lower prevalence of reported depression in Black and Latino LGB individuals compared to non-White Hispanics LGB.

However, in another study, Szymanski and Gupta (2009) examined the relations between multiple oppressions of 106 African American sexual minority individuals self esteem and psychological distress. The authors Szymanski and Gupta administered the Preencounter Self-Hatred subscale of the Cross Racial Identity Scale (CRIS) to assess for the individuals negative view of being black. In addition, they administered the Martin and Deans (1988) Internalized Homophobia Scale (IHP) to the participants. They found that internalized racism and homophobia were related to lower self-esteem and more psychological distress. In other words, the multiple internalized oppressions may be a predictor to negative impact on ones sense of self.

Challenges in other intersections have been explored, specifically with ageism and the LGB population. Woody (2014) explored social discrimination and alienation in an in-depth interview with 15 older African Americans LBG individuals. Many of the participants echoed similar struggles as the participants in Szymanski and Gupta's (2009) study, in regards to the their race and sexual orientations, however these participants experienced isolation in the LGB community because they appeared to be older. All participants expressed discomfort of aging in a youth-oriented culture. Some participants mentioned no longer attending social venues because of the hostile remarks and stares.

Another study, authored by Horning, Davis, Stirrat, and Cornwell (2011), examined the relationship atheist and theist had in wellbeing, social support, and positive coping among older adults. They surveyed sampled 134 religious and nonreligious (atheists and agonistics) older adults ages 55-84 with a mean age of 65. All were given the Satisfaction with Life Scale (Diener, Emmons, Larsen, & Griffin, 1985), which measured wellbeing and were given the Abbreviated Social Support Scale (Sarason,

Sarason, Shearin, & Pierce, 1987), which measured social support. The participants were also given the Brief Coping Inventory (Carver, 1997) to measure coping behaviors. Horning et al. found that both religious and nonreligious group did not differ significantly in their wellbeing however they did differ in the amount of social support received. Evidently, the religious group had a greater number of social supports while the older nonreligious adult had less. More over, the nonreligious group humor and substances to cope, while the religious used religion to cope with stress. Overall, both groups had the same wellbeing, however it was also suggested that when nonreligious individuals get older they might be at risk for having a limited amount of social supportive.

Stigma

Human beings are naturally social animals. Therefore, when society's values choose to ostracize an individual or a group; this impinges on their feelings of connectedness, thus subjecting them to possible challenges of social functioning (Newheiser & Barreto, 2014). According to Newheiser and Barreto, because stigma can deeply discredit an individual, many people who hold a socially stigmatized identity will choose to hide their identity. More over in their research, Newheiser and Barreto, found that individuals who concealed their identity had decreased feelings of belonging verse their counter parts that choose to reveal their identity. In other words, often these individuals will choose to "stay in the closet" because of the fear of ridicule while giving up feelings of authenticity. Ultimately, the cultural pressure from family and society to conform to the status quo can influence the formation of an individual's identity.

Identity Formation

The identity that LGB and atheist individuals' posses hold a stigma of being immoral, which may be spearheaded by religious dogma (Bostwick et al., 2014; Hammer et al., 2012; Hooghe et al., 2010). Therefore, the identity of being an LGB atheist can be suggested to be a combination of the *worst of the worst*. Moreover, the *coming out* process of these individuals with parents who are deeply religious can possibly have negative effects not only in their relationship but also in their identity formation. For example, the authors Bregman, Malik, Page, Makynen, and Lindahl (2013) examined the *coming out* process of 169 LGB individuals, using latent profile analysis (LPA). They found that parental rejection increased identity struggles; they were more likely to conceal, feel judged, unsure of their sexual orientation, and have uncomfortable feelings of their sexual orientation development.

Researchers from another study, Dahl and Galliher (2012) interviewed 19 identified sexual minorities on their perception of their identity in relation with being reared in a Christian environment. Dahl and Galliher found that sexual minorities who were brought up in a Christian environment and *came out* during adolescence had more internalized homophobia, as opposed to young adults who came out later. Ultimately, a person's development of their sense of self-identity can be further compromised when parents reject or hold to religious doctrines. Moreover, the researchers, Vignoles, Manzi, Golledgem and Scabini (2006), surveyed 82 participants looking at the relationship between identity construction and self esteem and found that when individuals emerged themselves in their identities this provided them with a greater sense of self esteem and meaning in their lives from past, present, and into the future.

Internalized Homophobia

The pressure from society to adhere to cultural norms can influence an individual's development of their identity (Bregman et al., 2013). Elizur and Mintzer, (2001) suggested that the process of a self-identity, self-acceptance, and trust in others were important components of the development of a gay identity. However, when an individual is pressured to delay this process many have been found to have internalized homophobia (Brown & Trevethan, 2010).

In a study of 166 gay men, Brown and Trevethan (2010) examined the associations of shame, homophobia levels, and delay of coming out. Specifically, they found gay men who were once married to women had higher levels of internalized homophobia, as opposed to gay men who were never married. However, gay men who were in relationships with other gay men had lower rates of internalized homophobia, while the gay men that were not in relationships had high levels of shame and internalized homophobia. The authors suggested that being in a relationship might be a buffer to shame and homophobia. Moreover, they found that men who delayed or did not *come out* at all, to parents and siblings also had high levels of internalized homophobia. In another study, authors Cox, Dewaele, Houtte, and Vincke (2011) surveyed 502 individuals self-identified as LGB on the influence of coming out on internalized homophobia. Individuals, who responded that declaring their sexual orientation was too difficult as well as having an environment that they perceived as non-accepting, had high rates of internalized homophobia.

Internalized homophobia has been linked to mental health issues (Meyer, 2003; Newcomb & Mustanski, 2010). In the Newcomb and Mustanski's study, they found a

correlation of depression and anxiety with internalized homophobia. In a similar study, Szymanski and Carr (2008) explored mental distress internalized homophobia in 210 gay men. They found that internalized homophobia was linked to a decrease of self-esteem. In addition, Szymanski and Carr suggested that the individuals with low self-esteem, due to internalized homophobia, were more at risk for having smaller social support networks and more likely to engage in avoidant coping strategies.

Religious Conflict

Decades of research has shown that having religious associations can increase wellbeing, which would then infer that having no religion or being an atheist would decrease wellbeing (Ano & Vasconcelles, 2004; Koenig, 2009). This notion may be misleading, and more research is need on the wellbeing of atheists before conclusions can be drawn. Since 2001 to 2012, only 100 studies have been published on atheism (Brewster et al., 2014). It should be noted that some of the research has reported no differences in depressive symptoms or wellbeing between atheists and religious/spiritual people (Baker & Cruickshank 2009; Galen & Kloet, 2011; Wilson, Caldwell-Harris, LoTempio, & Beit-Hallahmi, 2011). However, the research specifically on atheists has shown a curvilinear relationship between strength of beliefs and mental health (Galen & Kloet, 2011; Mochon, Norton, & Ariely, 2011). Galen and Kloet, and Mochon, Norton, and Ariely, found that confident religious and atheists individuals had higher levels of wellbeing, as opposed to individuals who were unsure of their religion or non-believing positions. In other words, religious conflict or conflict in ideology can be detrimental to wellbeing.

The formation of identity is heavily influenced by religion. Unfortunately, behaviors and identities that do not align with those religious doctrines can cause discomfort in those ideologies. For instance, Smith (2011) interviewed 40 atheists about their transition to becoming a non-believer. A common theme that emerged was the questioning of their because of their new experiences in college. From watching the behaviors of others Christians and the issues brought up in their college courses, led these individuals to question everything they have learned about god. In the initial stages of their transition, many described being frustrated with the contradictory ideas reportedly found within the bible. In a similar study, LeDrew (2013a) investigated the development of identity formation of an atheist. One participant, who was Muslim, expressed coming to America as a child and remembering questioning. Later, he remembered reaching college where he became confirmed in his identity as an atheist. Moreover, one study found that attending college provided an environment of exploration of one's identity and religious beliefs, which was a strong predictor for decreased commitment to religious affiliations (Barry & Nelson, 2005).

In a qualitative study, conducted by Minwalla, Rosser, Feldman and Varge (2005) they explored the identity experience of progressive gay Muslim (N=6) men. All of the participants discussed having a deep conflict with the Qur'an or Allah. Some of the participants negotiated their understanding of the Qur'an to accommodate their sexual orientation while others completely rejected the Qur'an all together so they can continue to develop their sexual identity without any guilt or shame.

Authors of another study, Levy and Reeves (2011) interviewed 15 gay, lesbian, and queer participants and found that having a faith in Christianity prolonged their sexual

identity development. These once Christian's individuals mentioned knowing from a young age that their sexual orientation was completely against the Bible. Many described hiding out in the Christian organizations so people would not find out about their secret. Others mentioned praying frequently that this part of them would go away, or dating people of the opposite sex hoping that their sexual orientation would change. In addition, many of them questioned the teachings of the bible and closely examined the contradictions of the bible. Subsequently, many of these individuals either became non-religious or described having faith in humanity, rather than a God or a higher power. Although, in a study by Subhi and Geelan (2012), of 20 LGB participants it was found 80% wanted to maintain both their Christian faith and sexual orientation so struggling through the conflict was worth it, even though many of them reported feeling depressed, feeling guilty, and having self blame. Unfortunately, some methods of mitigating the religious conflict included conversion therapy (Yardhouse & Beckstead, 2011).

Conversion Therapy

Despite the fact that the scientific community has now recognized that homosexuality is not a mental illness and has subsequently struck it from the Diagnostic and Statistical Manual of Mental Disorders (Silverstein, 2008), many special interest groups with an anti-LGB agenda have continued to pathologize homosexuality.

Moreover, these anti-LGB groups have at times worked to develop a treatment for "curing" LGB individuals (Drescher, 2009). Conversion therapy, which is also known as reparative therapy, or sexual reorientation therapy was developed for the purposes of changing a person's homosexual orientation (Drescher, 2009; Yardhouse & Beckstead, 2011). Much of reparative therapy includes faradic therapy (electroshock to torso, hands,

or genitals), exorcism, aversion therapy, isolation, and restraints, and various talking-based therapies (Hein & Matthews, 2010; Maccio, 2011). Though the American Medical Association (2012) has opposed and deemed this *treatment* as harmful to individuals, it is still being used on individuals who are suffering with religious conflict because of their homosexual orientation (Cramer, Golom, LoPresto, & Kirkley, 2008).

In one study, Maccio (2010) examined 263 LGB individuals who were at most risk to participate in reparative therapy. Maccio found that individuals, who had actual and expected negative reactions from their families, when disclosing their sexuality, were most likely to have tried reparative therapy. In addition, Maccio, found a positive correlation in religious fundamentalism and reparative therapy participation. In other words, the more religiously fundamental the individual, the more at risk that individual was to trying reparative therapy. Another finding was that individuals who identified themselves as "spiritual" were likely to have participated in reparative therapy; however, Maccio explained that before participating in reparative therapy, they might have possibly been associated with a religion. In a similar study, authors Tozer and Hayes (2004) also had a positive correlation with religious fundamentalism and reparative therapy participation. Tozer and Hayes used the Quest Scale that measured the participant's level of doubt and uncertainty, and the participants who scored high on this scale (high in doubt or uncertainty of religion), were less inclined to a explore reparative therapy.

The literature on reparative therapy is still in debate in its effectiveness. The limitations are that most studies are not longitudinal studies, have restricted samples, and lack a theoretical framework (Serovichet al., 2008). Some of the literature indicates that

individuals report they have been cured (Yardhouse & Beckstead, 2011) and while others reported that reparative therapy confirmed their homosexual orientation (Maccio, 2011). For example, Maccio surveyed 52 individuals who reported they had participated in reparative therapy. Several of the individuals had no significant change in orientation, while others reported having some change but those changes were short lived. In addition, the participants who once were questioning their sexual orientation prior to reparative therapy said post reparative therapy they were now identifying as gay, lesbian, or bisexual.

Summary

In sum, familial support seems to be a pivot part in an individual's declaration of identity and thus can either promote wellbeing or perhaps create isolative and maladaptive traits within an individual. Moreover, very little is known about the effects of oppression on an individual who bears the label of being an LGB atheist. The aim of this study was to examine the primary relationships of LGB individuals who do not share their parent's theist ideology. It was hypothesized that primary relationship strain will be greater when an atheist sexual minority adult child offspring does not share the same religious beliefs as their parents when compared to a sexual minority adult child offspring that does share the same religious belief as their parents.

CHAPTER 3

METHODOLGY

Research Design

This study implemented a quantitative exploratory design using an online questionnaire. In addition, this study explored the differences and similarities of LGB perception on their relationships with their mothers and fathers when sharing the same and different theist ideology. The McMaster Family Assessment Device was used to measure relationship strain.

Sample

LGB individuals were recruited to participate in this study. The study recruited participants through a convenience and a snowball non-probability sample. Two key informants from the LGB community, and one key informant from an LGB atheist group assisted in the distribution of the online link. The Lesbian, Gay, Bisexual, and Transgendered Campus Resource Center at California State University, emailed an invitation to their member distribution list, asking them if they would like to participate in the study. The organizational leader provided an agency consent letter to approve the distribution of the study (Appendix). All participants were asked to complete a questionnaire regarding religious belief and the McMaster Family Assessment Device.

Procedure

This study's methods were reviewed and approved by the Institutional Review Board at California State University, Long Beach. A self-report questionnaire was

conducted through Survey Monkey. An informed consent letter and the questionnaire were accessible through the Internet site, surveymonkey.com (Appendix). In addition, all organizational leaders had a script to disclose when recruiting participants. The script described the purpose of the study, criteria for participation, and explained confidentiality agreement (Appendix). The script also indicated for the recruited participants to forward the study to others who fit the criteria, to participate in the study, thus adding to the snowball sampling method. All participants had to meet the following criteria: Be at least 18 years old and identify as a lesbian, gay, or bisexual individual.

Instrument

The McMaster Family Assessment Device (FAD, Miller, Epstein, Bishop, & Keitner 1985) was used to measure relationship strain. The questionnaire items were measured on a likert scale and there were an additional six demographic questions.

Participants responded to each statement on a 4-point scale from 1 (*strongly agree*), 2 (*agree*), 3 (*disagree*), and 4 (*strongly disagree*). Items 1-2, 8, 10, 14-16, 20, 22-23, 28-29, 32, 34, 36-38, 40, 43, 50, 51, and 53 were reversed scored so that higher scores reflect more relationship strain. The FAD has been shown to have strong reliability (a = .974, Miller, Epstein, Bishop, & Keitner 1985). The FAD scale, is a self-report instrument, and measures seven subscales of family functioning: problem solving, communication, roles, affective responsiveness, affective involvement, and behaviors. The higher the score on the subscales indicated the greater pathology. Below in table 1, the measure is set up with cut off scores, stressed (clinical) and non-stressed (non-clinical) scores. The cut off scores is not a mean, but a point at which a family may have a potential for familial relationship problems. In addition, the cut off scores is an indication that the variable a

common problem for even non-stressed families. The data was collected through the Survey Monkey database. Survey Monkey's website maintained anonymity for all participants by not collecting Internet Protocol (IP) addresses. The instrument was chosen because it is in the public domain.

TABLE 1. The McMaster Family Assessment Device (FAD)

	Cut-Off	Stressed	Non-Stressed	
FAD Scale				
Problem Solving	2.20	2.44	2.22	
Communication	2.20	2.14	1.90	
Roles	2.30	2.31	1.96	
Affective	2.20	2.42	2.16	
Affective	2.10	2.04	1.74	
Behavior Control	1.90	1.52	1.43	
General Family	2.00	1.68	1.49	
•				

Data Analysis

After running frequencies on the demographics, the various statistical methods were used: frequencies, descriptive, independent t-test, independent sample Kruskal-Wallace tests and analysis of variance (ANOVA). Data was analyzed through the Statistical Package for Social Sciences (SPSS) 22 software program. Independent t-test was used to measure atheist and theist adult children who either shared or did not share their parents theist preference, theist matched, age, open to parents, racial and ethnic group, and a one-way ANOVA for sexual orientation.

CHAPTER 4

RESULTS

This study aimed to offer insight into the perceptions of LGB individuals regarding their relationship with their theist parents. The study examined relationship strain and theist differences, between LGB adult children and their parents. Forty-four participants who identified as LGB responded to questions regarding their relationship with their parents. As shown in Table 2, the participants were predominantly people that did not share the same theist orientation as their parents (77%). There were more atheist adult children with theist parents (73%). A majority of participants were between the ages 18-30 (64%), identified as bisexual (50%), and reported not *being out* regarding their sexual orientation to their parents (48%). The McMaster Family Assessment Device seven subscales were used to measure relationship strain with higher scores indicating greater strain. Cronbach's alpha for the: Problem Solving subscale (0.79); Communication subscale (0.53); Roles subscale (0.51); Affective Response scale, (0.67); Affective Involvement scale (0.71); Behavior Control scale (0.63); General family function Scale (0.93).

Theist Matched Comparisons

Independent t-tests were conducted and as shown in Table 3, there were no significant differences in relationship strain between participants who shared the same theist orientation as their parents and participants who do not share the same theist orientation as their parents. All participants cut off scores were above pathology scores.

TABLE 2. Characteristics of Respondents (N = 44)

ſ	0/0
22	50
18	40.9
3	6.8
28	63.6
16	36.4
22	50
8	18.2
34	77.3
10	22.7
21	47.7
18	40.9
20	45.5
15	34.1
1	2.3
3	6.8
3	6.8
2	4.5
	22 18 3 28 16 22 8 34 10 21 18

Note: Percentages may not total 100 due to missing data.

Relationship Strain of Atheist/Theist Participants with Theist Parents

Independent t-tests were conducted and as shown in Table 4, and there were no significant differences in relationship strain between atheist participants who have theist parents and theist participants who shared the same theist preference as their parents. The scores of all participants were above the pathology cut off for each subscale.

TABLE 3. Theist Matched Comparisons of Likelihood of Relationship Strain

Scale	<u>M</u>	<u>SD</u>	t	p
Problem Solving				
Matched	2.38	0.29		
Not Matched	2.61	0.61	1.12	.27
Communication				
Matched	2.54	0.33		
Not Matched	2.53	0.47	0.15	.99
Roles				
Matched	2.40	0.47		
Not Matched	2.55	0.33	0.86	.40
Affective Responsiveness				
Matched	2.50	0.35		
Not Matched	2.73	0.57	1.09	.28
Affective Involvement				
Matched	2.36	0.64		
Not Matched	2.50	0.54	0.55	.58
Behavior Control				
Matched	2.16	0.39		
Not Matched	2.13	0.40	0.13	.90
General Family Functioning				
Matched	2.27	0.66		
Not Matched	2.70	0.66	1.32	.20
Overall Score				
Matched	2.33	0.32		
Not Matched	2.52	0.44	0.93	.36

Sexual Orientation and Relationship Strain Subscales

A one-way ANOVA was conducted and as shown in Table 5 there was a significance among group differences on the relationship strain subscale of roles because of sexual orientation F(2,28)=4.73, p=.05. The post hoc Scheffe comparisons showed

that individuals who identified as lesbian (2.93 SD = 0.23) were significantly more likely to score higher on the relationship strain subscale of problem solving than individuals who identified as gay(2.32, SD = 0.54) (p=.03). The scores of all participants were above the pathology cut off for each subscale.

TABLE 4. Relationship Strain of Atheist/Theist Participants with Theist Parents

Scale	<u>M</u>	<u>SD</u>	t	p
Problem Solving				
Atheist	2.64	0.65		
Theist	2.43	0.29	0.90	.38
Communication				
Atheist	2.57	0.52		
Theist	2.43	0.36	0.35	.73
Roles				
Atheist	2.50	0.33		
Theist	2.47	0.51	0.15	.88
Affective Responsiveness				
Atheist	2.74	0.61		
Theist	2.47	0.40	0.99	.33
Affective Involvement				
Atheist	2.57	0.59		
Theist	2.43	0.69	0.46	.65
Behavior Control				
Atheist	2.04	0.40		
Theist	2.22	0.42	0.82	.42
General Family Functioning				
Atheist	2.69	0.71		
Theist	2.31	0.74	0.95	.36
Overall Score				
Atheist	2.51	0.46		
Theist	2.37	0.35	0.55	.59

Out to Parents Comparisons of Likelihood of Relationship Strain

Independent t tests were conducted and as shown in Table 6, individuals who were not out to their parents regarding their sexual orientation when compared to those who were out to their parents had significantly higher scores of relationship strain on subscales of problem solving t(31.34)=2.94, p=.006, roles in the family t(20.28)=3.35, p=.003, affective involvement t(27.32)=3.00, p=.006, behavior control t(21.20)=2.52, p=.02, general family functioning t(13.48)=2.88, p=.01 and overall score t(13.58)=2.62, p=.02. Scores of all participants were above the pathology cut off of each subscale.

TABLE 5. Sexual Orientation and Relationship Strain Subscales

	Les	bian	Ga	ny	Bisez	xual		
Scale	M	SD	M	SD	M	SD	F	p
Problem Solving	2.93	0.23	2.32	0.54	2.65	0.56	2.50	.09
Communication	2.50	.017	2.50	0.36	2.54	0.51	.029	.97
Roles	2.63	0.55	2.34	0.40	2.66	0.21	3.27	.05
Affective	2.72	0.63	2.70	0.54	2.66	0.56	.035	.97
Response								
Affective	2.33	0.83	2.30	0.54	2.63	0.53	1.38	.27
Involvement								
Behavior Control	2.41	0.57	2.03	0.45	2.63	0.33	1.09	.35
General Family	2.86	0.97	2.35	0.72	2.77	0.58	1.57	.23
Functioning								
Overall Score	2.63	0.50	2.38	0.44	2.55	0.41	0.70	.51

Ethnic Comparisons of Likelihood of Relationship Strain

Independent sample Kruskal-Wallace tests were conducted to evaluate differences among ethnic groups and the subscales of relationship strain. The test, which was corrected for tied ranks, was significant (H(38) = 11.32, p = .05) with a mean rank for scores on the

communication subscale of (23.7) for Caucasians, (17.6) for Middle Eastern, (4.5) for African Americans, (28.5) for Asian/API, (8.67) for Latinos, and (8.0) for multiracial.

TABLE 6. Out to Parents Comparisons of Likelihood of Relationship Strain

Scale	\underline{M}	<u>SD</u>	t	p
Problem Solving				
Out	2.26	0.53		
Not out	2.78	0.50	2.94	.006
Communication				
Out	2.36	0.56		
Not Out	2.67	0.31	2.02	.052
Roles				
Out	2.33	0.30		
Not Out	2.69	0.23	3.36	.003
Affective Responsiveness				
Out	2.60	0.59		
Not Out	2.78	0.51	0.91	.37
Affective Involvement				
Out	2.20	0.38		
Not Out	2.70	0.50	3.00	.006
Behavior Control				
Out	1.93	0.37		
Not Out	2.26	0.31	2.52	.02
General Family Functioning				
Out	2.16	0.71		
Not Out	2.88	0.47	2.88	.013
Overall Score				
Out	2.25	0.45		
Not Out	2.67	0.27	2.62	.02

Age and Relationship Strain

Independent t tests were conducted and as shown in Table 7 there were no significant differences in the relationship strain scores between participants who were 18 to 30 years old and 31 and over. Younger participants had lower average scores 2.45(SD = 0.45) on the communication subscale indicating less pathology than older participants 2.68(SD = 0.38). The scores of all participants were above the pathology cut off for each subscale.

TABLE 7. Age and Relationship Strain

Scale	<u>M</u>	<u>SD</u>	t	р
Problem Solving				
18-30	2.53	0.55		
31+	2.57	0.59	.30	.77
Communication	_,,			
18-30	2.45	0.45		
31+	2.68	0.38	1.58	.12
Roles				, - -
18-30	2.56	0.39		
31+	2.46	0.27	0.81	.42
Affective Responsiveness				
18-30	2.62	0.53		
31+	2.78	0.55	0.86	.39
Affective Involvement				
18-30	2.46	0.60		
31+	2.50	0.47	0.18	.86
Behavior Control				
18-30	2.17	0.41		
31+	2.07	0.37	0.66	.51
General Family Functioning				
18-30	2.60	0.68		
31+	2.67	0.67	0.25	.80
Overall Score				
18-30	2.45	0.44		
31+	2.56	0.38	0.70	.49

Atheist and Theist Out to Their Theist Parents

A chi square analysis was conducted and the results indicated there were no significant differences between Atheists 52.2% and Theists 47.8% and their openness regarding their sexual orientation with their parents χ^2 (n=44,df=1)= .954, p=.33.

CHAPTER 5

DISCUSSION

The current study contributes to the expanding research that has investigated the impact of religion on the LGB population. Specifically, the purpose of this study was to explore the perception of relationships strain when an atheist LGB individual does not share their parent's theistic beliefs. In addition, using the theory of intersectionality, it was hypothesized that identifying with multiple marginalized labels, atheist and LGB, will have more of a negative impact on quality of their primary relationships when compared to LGB who share their parents theistic ideology. This study was intended to assist social workers in understanding atheist and theist differences among the LBG populations and how it impacts their relationships with their parents. This chapter discusses the findings, limitations, and implications for future research and social work practice.

Findings

Although the hypothesis was not supported, the results suggest that both atheist and theist LBG adult children have overall relationship strain with their primary relationships. In other words, on all subscales these families scored higher than healthy families. However, the general family functioning subscale indicated that atheist LGB scored higher on relationship strain with their theist parents as opposed to LGB individuals who shared the same theist ideology as their parents. The findings lend support to Rosario et al., (2004) study, when drawing a parallel to the intersectionality of

being an ethnic minority LGB individual. Specifically, Rosario et al. found that individuals who identified as Black and LGB had limited social support and stay in the closet longer than White LGB individuals. According to Mohr and Fassinger (2003), individuals that decided to not come out of the closet perceived their mothers as unsupportive and thus resulted in a delay of declaration of sexual orientation. Overall, the individuals who encompassed the highly marginalized labels, atheist and sexual minority, these individuals were at risk for having more problems in their relationships with their parents.

The hypothesis was supported for theist-matched comparison of likelihood of relationship strain. Though there were no significant findings, in the problem solving subscale, LGB that did not match in theist preference as their parents had a higher score than LGB who did match in theist preference as their parents, which further suggested that these individuals had more relationship strain. In addition, in the general family functioning subscale, individuals who did not share the same belief as their parents had a higher score than the individuals who did match in theist preference as their parents, which also suggested that the individuals who did not match their parents theistic ideology were at more risk for relationship strain. The findings are consistent with Colaner et al. (2014) research indicating that when parents and adult children had a different religion affiliation it compromised relationship wellbeing.

On every subscale and for all variables, LGB individuals overall had greater scores than the normative scores for healthy families as measured by the McMaster Family Assessment Device, therefore, it is suggested, that the participants in this study, all had clinical levels of relationship strain in their families. However, in this study the

participants who identified as Lesbian had greater relationship strain in the area of problem solving as opposed to the gay participants. This also lends support to Friedman and Morgan's (2009) research as they found that Lesbian individuals reported they felt more uncomfortable asking family advice because they perceived their parent's lacked understanding of their life style.

It should be noted that white LBG individuals were more likely to be out to their families as opposed to all other ethnic group participants. Some ethnic groups may be at higher risk for more stigma, delayed identity formation and internalized homophobia, which has been associated with suicide and depression (Lytle et al., 2014; Szymanski & Gupta, 2009). Overall the findings suggest that intersectionality with race and ethnicity and identifying, as LGB need to be further investigated.

Most of the participants in this study reported not being out about their sexual orientation to their parents and of those participants most had significant relationship strain as opposed to the individuals who were out to their parents. This lends support to Potoczniak et al., (2009) research that suggested that it may have been more difficult to come out to parents who had strong religious backgrounds. The participants in Potoczniak et al. study expressed parents would use religious triangulation to elicit guilt or shame regarding their sexual identity.

Limitations

There were several limitations in this study. The sample size of this study was small and results cannot be generalized. The study also used a convenience and snowball method, which over sampled atheist participants, and participants who did not match theist ideology of their parents. The instrument was chosen based on being in the public

domain and had 61 questions, which caused attrition. The study was also limited by the absence of the parent's perspective of relationships strain and thus relied only on the LGB participant perception.

Implications for Social Work Practice and Policy

When working with individuals with diverse sexual orientations assessing their needs and providing services their religious preferences or a lack their of should be considered in the treatment planning. Specifically, when social workers are trying to facilitate family therapy for individuals who identify LGB and their parents, it is important to not over look how religion plays a part in how their family functions. In fact addressing and examining the role of god and religious conflict may provide for a more careful assessment when choosing an intervention for these families. All the participants in this study had relationship strain with their theist parents, therefore social support may be inadequate and thus clients identifying as LGB may be at risk for depression, suicide, isolation, and internalized homophobia. This study findings underscored the high level of relationship strain that exists in families of individuals who identify as LGB and informs social workers on the potential risk that religion may have in a family, and thus emphasizes the importance of assessing family dynamics.

Religious institutions are pillars in the community and have a considerable amount of influence in on how society will view deviating ideologies. Therefore social workers, as it is a part of their code of ethics, need to advocate in these religious institutions for civil treatment not only LGB but for LGB who also identify as atheists.

Further Research

Future research should consider exploring the theist parent perspective of relationship strain. In addition, according to (Smith, 2011) non-acceptance by family strengthened atheist's sense of identity and gave them a sense of liberation therefore investigating possible coping strategies can inform social work on potential interventions for individuals who identify as LGB atheists. Since more people are identifying as atheist, and in some parts of the world killed if they are atheist, more empirical studies need to be conducted in order to understand the fear and challenges these individuals face.

APPENDICES

APPENDIX A AGENCY CONSENT LETTER

AGENCY CONSENT LETTER

November 7, 2014 CSULB Institutional Review Board for the Protection of Human Subjects Office of University Research University Foundation Building, Suite 310 Long Beach

To Whom It May Concern:

The CSULB Lesbian, Gay, transgendered Student Resource Center is pleased to submit a letter of approval for Anita Le, a graduate student in the department of Social Work at California State University, Long Beach. She has requested permission to recruit participant for her study, The Intersectionality of Being a Sexual Minority and Atheist, through out LGBT Student Resource Center.

I understand that Anita is adhering to the legal requirements for the protection of human subjects through the CSULB Institutional Review Board. I wish to support Anita Le and am willing to move forward to link an invitation to our students to participate in her study.

Sincerely,

APPENDIX B

QUESTIONNAIRE

- 1. We usually act on our decisions regarding problems.
- 2. When someone is upset, the others know why.
- 3. When you ask someone to do something, you have to check that they did it.
- 4. We are reluctant to show our affection for each other.
- 5. If someone is in trouble, the others become too involved.
- 6. We don't know what to do when an emergency comes up.
- 7. Planning many family activities is difficult because we misunderstand each other.
- 8. After our family tries to solve a problem, we usually discuss whether it worked or not.
- 9. You can't tell how a person is feeling from what they are saying.
- 10. We make sure members meet their family responsibilities.
- 11. Some of us just don't respond emotionally.
- 12. You only get the interest of others when something is important to them.
- 13. You can easily get away with breaking the rules.

Circle You	ır Answe	rc	
Strongly Agree		Disagree	Strongly Agree
4	3	2	1
4	3	2	1
4	3	2	1
	_	_	
4	3	2	1
4		2	1
4	3	2	1
1	2	2	1
4	3	2	1
4	3	2	1
4	3		1
4	3	2	1
•			1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
	-		
	_	_	
4	3	2	1

- 14. In times of crisis we can turn to each other for support.
- 15. We resolve most emotional upsets that come up.
- 16. People come right out and say things instead of hinting at them.
- 17. Family tasks don't get spread around enough.
- 18. We do not show our love for each other.
- 19. We are too self-centered.
- 20. We know what to do in an emergency.
- 21. We cannot talk to each other about the sadness we feel.
- 22. We confront problems involving feelings.
- 23. We are frank with each other.
- 24. We have trouble meeting our bills.
- 25. Tenderness takes second place to other things in our family.
- 26. We get involved with each other only when something interest us.
- 27. We have no clear expectations of toilet habits.
- 28. Individuals are accepted for what they are.
- 29. We try to think of different ways to solve.

Circle Yo	ur Answers	3	
Strongly	Agree	Disagree	Strongly
Agree			Agree
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1

- 30. We don't talk to each other when we are angry.
- 31. There's little time to explore personal interests.
- 32. We express tenderness.
- 33. We show interest in each other when we can get something out of it personally.
- 34. We have rules about hitting people.
- 35. We avoid discussing our fears and concerns.
- 36. We can express feelings to each other.
- 37. When we don't like what someone has done, we tell them.
- 38. We discuss who is to do household chores.
- 39. There are lots of bad feelings in the family.
- 40. We cry openly.
- 41. Our family shows interest in each other only when they can get something out of it.
- 42. We don't hold to any rules or standards.
- 43. We feel accepted for who we are.
- 44. If people are asked to do something, they need reminding.

Circle You	ur Answers	 S	
Strongly Agree	Agree	Disagree	Strongly Agree
4	3	2	1
			1
4	3	2	1
		_	-
4	3	2	1
<u> </u>		<u> </u>	
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1
4	3	2	1

		Circle Your Answers					
		Strongly	Agree	Disagree	Strongly		
45. Even though we mean	well, we	Agree		C	Agree		
intrude too much in each o	ther's lives	4	3	2	1		
46. If the rules are broken	we do not	4	3	2	1		
know what to expect.		-					
47. Making decisions is a problem for		4	3	2	1		
our family.			J		1		
•							
48. We are generally dissar	tisfied with	4	3	2	1		
the family duties assigned		4	3		1		
5		4	2	2	1		
49. Anything goes in our fa	amily.	4	3	2	1		
J. 88-12	J						
50. We are able to make de	ecisions about						
how to solve problems.		4	3	2	1		
The Walter Barra Productions.							
51. There are rules about d	angerous	4	3	2	1		
situations.	angerous						
Situations.							
52. We don't get along we	11 together	4	3	2	1		
32. We don't get along we	ii together.						
53. We confide in each oth	nar.	4	3	2	1		
33. We confide in each our	101.						
54. Sexual Orientation							
14. Sexual Orientation Lesb	vian	58. Ethnicity					
Gay		90. <u>Dumiloit</u>	, ☐ Cauca	asian			
Bise				an Americar	1		
55. Age	Auui			/Pacific Isla			
18-3	0		Hispa	nic/Latino(a	1)		
31-5			Multi	racial			
☐ 51+			☐ Not L	isted			
56. Theist Preference	4	59. Out to P	arents?				
Athe	eist		Yes				
Prote	estant Christian		☐ No				
<u>—</u>	olic Christian		Only	to One Pare	nt		
Jewi							
☐ Mus							
Budo							
Agno							
	Listed						
<u> </u>	_						
57. Family Dominate Relig							
Please List							

APPENDIX C INFORMED CONSENT LETTER

INFORMED CONSENT LETTER

CONSENT TO PARTICIPATE IN RESEARCH entitled:

The Intersectionality of Being a Sexual Minority and an Atheist

You are asked to participate in a research study conducted by, Anita Le, a candidate for a Master's of Social Work, MSW, from the School of Social Work at California State University Long Beach. The study is a thesis requirement for graduation. You were selected as a possible participant in this study because you identify as either lesbian, Gay, or bisexual and you are at least 18 years of age.

PURPOSE OF THE STUDY

The purpose of the study is to gain a better understanding of the primary relationship challenges that an LGB atheist individual may face.

PROCEDURE

If you agree to participate in this study, you will be asked to participate in a survey. You will be asked six basic demographic questions and questions pertaining to your family relationships. The survey will take approximately 20 minutes.

POTENTIAL RISKS OR DISCOMFORTS

There are minimal risks to participation in this study. Some survey questions may make you feel discomfort or anxiety. If you feel that any particular question is too personal, or if you are distressed when considering any question, you are free to refrain from answering or you can stop at any time.

POTENTIAL BENEFITS TO SUBJECTS AND/OR SOCIETY

There are no direct benefits to you for participating in the research. On a larger scale, information you provide will add to the knowledge base of professionals who work with LGB individuals and their families.

PAYMENT FOR PARTICIPATION

You will not receive payment for your participation. You will be able to take part in the survey after you read the consent form.

CONFIDENTIALITY

Surveys are submitted through an Internet survey provider (Survey Monkey) and no IP addresses will be collected during the survey. You will not be providing any identifiable information. The researcher cannot guarantee confidentiality or anonymity.

Confidentiality will be maintained to the degree permitted by technology. No guarantee can be made regarding the tracking or interception of responses by any third party. By completing this survey, you are agreeing to the provided informed consent. All survey responses will be kept in a locked file for three years. After the third year, the researcher will destroy them. Any information that is obtained in connection with this study and that can be identified with you will remain confidential and will be disclosed only with your permission or as required by law.

PARTICIPATION AND WITHDRAWAL

Your participation is entirely voluntary and you will not be penalized in any way if you prefer not to participate. Your involvement in this study will not affect your relationship with your organization.

IDENTIFICATION OF INVESTIGATORS

If you have any questions about the study, please feel free to contact the principal investigator, Anita Le, at <u>Anita.Le@student.csulb.edu</u>, or the thesis advisor, Jo Brocato, Ph.D., at (562) 985-1522; jo.brocato@csulb.edu.

RIGHTS OF RESEARCH SUBJECTS

You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights or remedies because of your participation in this study. If you have any questions regarding your rights as a participant in this research study, you may contact the Office of University Research, CSU Long Beach, 1250 Bellflower Blvd., Long Beach, CA 90840; Telephone: (562) 985-5314 or email to ORSP-Compliance@csulb.edu.

By completing and submitting this survey, I am affirming that I am 18 years of age or older and I am indicating my consent to participate in this research.

APPENDIX D INVITATION SCRIPT

SCRIPT FOR KEY INFORMANTS

Anita Le, an MSW Candidate from California State University, Long Beach, School of Social Work is conducting a research project that will help with understanding the possible challenges LGB atheists face when having a parent (s) who is religious. If you are 18 years or older and identify as lesbian, gay or bisexual and would be interested in participating in her research project here is the link to her online questionnaire (hand the individual the link). The questionnaire should take less than 20 minutes to complete. The study is voluntary and whether or not you participate will not affect your relationship with the organization. No one will know whether you chose to participate.

Survey Monkey will be used and no IP addresses collected. You will not be providing any identifiable information. The researcher cannot guarantee confidentiality or anonymity. Confidentiality will be maintained to the degree permitted by technology. No guarantee can be made regarding the tracking or interception of responses by any third party. By completing this survey, you are agreeing to the provided informed consent.

https://www.surveymonkey.com/s/C8H9DS5

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