

OUTNESS, SOCIAL SUPPORT, AND WELL-BEING IN GAY AND LESBIAN  
COUPLES

By

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## THESIS ABSTRACT

### Outness, Social Support, and Well-Being in Gay and Lesbian Couples

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This study examined lesbian and gay couples in an attempt to understand associations among participants' outness and a variety of outcomes: social support, self-esteem, relationship satisfaction, and sexual satisfaction. Participants were 144 gay and lesbian couples ( $N = 288$  participants,  $M$  age = 33.74 years) from the Southern New Jersey and Philadelphia areas; the majority of the participants were White. Participants completed surveys assessing their outness as well as their health and wellness. Analyses used Actor Partner Interdependence Models; results revealed that both participants' and their partners' outness predicted their social support. No other actor, partner, or interaction effects were significant. These findings are discussed in terms of their possible applications for programming and interventions for LGBTQ+ people.

## **Introduction**

For decades, members of the LGBTQ+ community were compelled to live “in the closet,” keeping their sexuality or gender identity to themselves as a result of normalized homophobia and transphobia (Ball, 2016). It is only within the last few years that LGBTQ+ people have gained the right to marry in all 50 states. Although there is still a great deal of homophobia, things are getting better for members of the LGBTQ+ community, at least in the Western world (Ryan, 2015). This increase in tolerance also brings with it an increase in studies looking at LGBTQ+ topics, and the development of measurements to address LGBTQ+ specific issues.

Something that every LGBTQ+ individual must consider at some point in their lives that heterosexual people do not generally experience is “coming out.” Level of “outness” of an LGBTQ+ person is widely measured using the Outness Inventory (Mohr & Fassinger, 2000), which assesses outness by the number of people who know about the participant’s sexuality or gender identity. Studies looking at outness have often found that a higher level of outness relates to higher self-esteem and other positive outcomes related to well-being (Kosciw, Palmer, & Kull, 2015). Level of outness has also been found to be correlated with perceived social support (Kwon, 2013).

Who an LGBTQ+ person “comes out to” can also have important consequences. Legate, Ryan, and Weinstein (2012) examined the different contexts in which participants came out. The authors hypothesized that people would be more likely to come out in contexts that they felt supported their autonomy, and in which they felt comfortable to be themselves. The results of this study showed significant variations within-participants in terms of the people who were aware of the participants’ sexual

identity; for example, a participant may be highly out to their friends, but not out at all to their family members. The researchers also found that the gay men in their sample had lower well-being across measures and lesbians had the most support and were the most likely to be out. The results of this study showed that across contexts, greater outness was related to less anger, fewer symptoms of depression, and higher self-esteem. Generally, people were more likely to come out to people they knew well, and higher outness was related to a variety of positive outcomes.

The present study examined the associations among outness and social support, self-esteem, relationship satisfaction, and sexual satisfaction among gay and lesbian couples. Given the relative dearth of research examining the LGBTQ+ community, these findings may have not just theoretical but applied implications. Clinicians would benefit from a better understanding of the needs of the LGBTQ+ community. For example, understanding how outness, social support, and other variables relate to well-being may allow clinicians to advise LGBTQ+ clients on the best time to come out and contexts that may prove to be supportive. Among LGBTQ+ persons, knowing more about the benefits and costs of being out in different contexts could help them make important decisions about how to present themselves in the family, work, and other social contexts.

### **Outness and Social Support**

As mentioned earlier, one of the most important factors in an LGBTQ+ person's decision to come out is the people they are coming out to, and people are more likely to come out to people they're comfortable with (Legate, Ryan, & Weinstein, 2012). Kwon (2013) examined resilience in lesbian, gay, and bisexual individuals, and went as far as to conceptualize social support as a resilience factor. The framework presented by Kwon

suggests that social support promotes resilience among sexual minorities, particularly if they are out, and that higher social support relates to lower reactivity to prejudice. Kwon also suggests that social support is particularly useful in reducing stress when deciding to come out and that coming out can actually increase the amount of social support an individual perceives that they have. Therefore, people who are out generally have more social support.

Social support is not always measured by the participant's own perception of support. For example, McConnell, Clifford, Korpak, Phillips, and Birkett (2017) examined social support among LGBTQ+ youth in the context of social networking sites. The authors found that LGBTQ+ youth who reported high outness on Facebook were more likely to be out in their real lives. They also found that support behaviors on social networking sites were associated with lower amounts of psychological distress among LGBTQ+ youths. As indicated by Kwon (2013), those who are out in real life have higher perceived social support, and these results suggest that this may translate to outness on social media.

Social support may be positive not only for LGBTQ+ individuals' psychological well-being but for their physical well-being as well. Weisz, Quinn, and Williams (2016) examined whether being more out could expand the already proven health benefits of social support. The researchers collected measures relating to social support, outness, and health, and they hypothesized that the participants' level of outness would strengthen the relationship between social support and health. The results of this study revealed that participants who reported average and high levels of outness reported fewer negative health symptoms than those who reported low levels of outness. They also found that

increased social support was associated with better perceptions of personal health at average and high levels of outness. The present study adds to the research on outness and social support by looking at the associations between outness and social support between members of a couple; for example, how one partner's outness affects their partner's social support and vice versa. Additionally, this paper looks at both gay and lesbian couples.

### **Outness and Self-Esteem**

High levels of social support have also been correlated with other variables of well-being, including self-esteem. Bum and Jeon (2016) examined how social support is correlated to measures of well-being, including self-esteem, depression, and happiness. They found that higher levels of perceived social support were associated with higher self-esteem among youth. There were also associations among social support from parents, professors, and peers and lower levels of depression in their sample (n=311). Finally, they found that higher self-esteem led to higher levels of happiness and lower levels of depression. Because LGBTQ youth are at greater risk of depression (National Alliance on Mental Illness, n.d.), social support and higher self-esteem have the potential to be especially imperative for them.

Self-esteem has also been examined as a mediator between social support and other measures of well-being. Savi Cakar and Tagay (2017) investigated the mediating role of self-esteem when considering social support, well-being and adolescent risky behaviors. These researchers found that higher self-esteem and perceived social support led to fewer risky behaviors by the adolescents in their sample (n=676). In fact, their results indicate that well-being, perceived social support, and self-esteem explained 29%

of the variance in risky behaviors in their sample. This is particularly important when considering LGBTQ+ youth because they are more likely than their heterosexual counterparts to engage in risky sexual behaviors (Hafeez, Zeshan, Tahir, Jahan. & Naveed, 2014).

In another study (Strain & Shuff, 2010), a positive correlation was identified between male-to-female transgender women's level of outness and level of self-esteem. Further, among these women, there was a negative correlation among level of outness and levels of anxiety and depression. As self-esteem and depression and anxiety are typically seen to be negatively related, the potential increase of self-esteem due to outness or vice versa could be even more vital for LGBTQ+ individuals. Other studies have focused specifically on youths' coming out experiences and how they relate to well-being (Kosciw, Palmer, & Kull, 2015). In one study (Kosciw et al., 2015), researchers found that although students who were out were more likely to be bullied, their self-esteem tended to be higher and their symptoms of depression tended to be lower than those students who were not out at school. However, outness was associated with more missed days of school. These findings indicate that although there might be negative reactions or consequences to coming out, self-esteem and general well-being may be positively associated with being out. Thus, in the present study, outness was examined as a predictor of self-esteem. Once again, this is one of the first studies examining both gay and lesbian couples together.

### **Outness and Relationship and Sexual Satisfaction**

Coming out does not only affect the individual, it also intimately involves that person's partner, if they have one. Reeves and Horne (2009) compared levels of outness

between women who were currently in their first same-sex relationship versus those who had been in previous same-sex relationships. The study found that a discrepancy in the level of outness between partners predicted less relationship satisfaction compared to those partners who were similarly to equally out. This indicates that women who are out to friends and family have been shown to experience more relationship satisfaction with other women who are also out, as opposed to women who were still in the closet.

Related, Knoble and Linville (2012) conducted interviews with participants (n=30, 9 female couples and 6 male couples) to determine what factors were related to relationship satisfaction in queer couples. Many of the themes that emerged in the interviews were related to outness. One especially relevant theme was coming out together as a couple, and many of the couples expressed that being out as a couple was very important to them in terms of their overall relationship satisfaction. Generally, the participants placed a lot of importance on outness, even while expressing some of the cons of being out.

Outness is thought to be indicative of a certain degree of comfort or certainty of individuals' sexual identity. This comfort or certainty may then extend to their intimate interactions with their partners and facilitate a rewarding sexual relationship with their partners. A study by Okanlatva et al. (2005) examined associations among social support and three issues related to sex life, including satisfaction with sex life. Using survey data (n=21,101) from the Health and Social Support Study, which included both heterosexual and same-sex couples, the researchers found that respondents who reported higher levels of social support from their social network were more likely to be satisfied with their sex lives, and were also more comfortable discussing it. Both straight and lesbian women



particularly benefitted from social support from their partners and friends. Because both greater sexual and relationship satisfaction and higher outness have been found to be related to have been associated with greater self-esteem, I predicted that outness and relationship and sexual satisfaction would also be positively related.

### **The Present Study**

There is significant evidence that how “out” an LGBTQ+ person is may affect their life in a number of positive – and sometimes negative – ways. The aim of the current study is to determine whether outness is associated with social support, self-esteem, relationship satisfaction, and sexual satisfaction among gay and lesbian participants. Unlike the majority of past research examining LGBTQ+ persons, the present study examines self-described lesbian and gay partners (i.e., both members of romantic couples). By looking at both members of a couple, we can gauge how the same relationship could potentially affect each participant separately based on their different levels of outness. Gay men and lesbian women were considered, with their partners, in the proposed hypotheses, which utilize Actor Partner Interaction Models (APIMs).

1. Specifically, based on past research, I hypothesized that among individuals in this study, higher outness will be related to reports of (i.e., actor effects):
  - a. more frequent social support
  - b. higher self-esteem
  - c. higher relationship satisfaction
  - d. higher sexual satisfaction.
2. Further, individuals who have partners who are higher in outness will report (i.e., partner effects):

- a. more frequent social support
  - b. higher self-esteem
  - c. higher relationship satisfaction
  - d. higher sexual satisfaction.
3. Exploratory analyses will consider interactions between actor and partner outness as predictors of:
- a. social support
  - b. self-esteem
  - c. relationship satisfaction
  - d. sexual satisfaction
4. Given some research suggesting associations among our outcomes, such as relationship and sexual satisfaction, correlations among all variables considered were examined for descriptive purposes.

## **Methods**

### **Participants**

Participants in the study consisted of 72 lesbian couples and 72 gay couples (144 couples, 288 participants in all). Each of these couples reported being monogamously committed to their current partner for at least six months. The average length of relationship was 5.55 years. The average age of participants was 33.74 years ( $SD = 11.27$  years). Participants came from diverse socioeconomic backgrounds. Most participants identified as European American (70%), with 14% identifying as African American, 10% identifying as Hispanic, 3% identifying as Asian, and 3% identifying as some other race. Most couples (76%) were currently cohabitating at the time of data collection.

## **Procedure**

The present study utilized data that was collected as part of the Couples' Health Study at Rutgers University. Participants were recruited via advertisements in periodicals as well as health centers and other businesses in the Philadelphia-metro area. Partners completed the study during the same session but were placed into separate rooms during data collection to ensure privacy, as well as to ensure that each participant's partner did not influence his or her answers. The protocol for the study was approved by the relevant IRB, and each couple was compensated \$100 for their time upon completion of the session.

## **Measures**

### *Outness*

Outness was measured using the Outness Inventory (Mohr & Fassinger, 2000). The Outness Inventory is an 11-item scale meant to assess the degree to which lesbian, gay, and bisexual individuals are open about their sexual orientation with other people (for example, family or coworkers). Responses to individual items indicate the degree to which the participant's sexual orientation is known by and discussed with individuals in these different groups, and can range from 0 to 7. A response of 0 would indicate that there is no such person or group of people in the participant's life. A response of 1 would indicate that a person definitely does not know about the participant's orientation status, a response of 7 would indicate that a person definitely knows about the participant's sexual orientation status and that it is openly talked about. In this study, overall outness was measured using a composite of the different items. The reliability found for gay men in this study was  $\alpha = .76$ , and for lesbians, it was  $\alpha = .73$  (See Appendix A).

### *Social Support*

Social support was measured using the Enrichd Social Support Instrument (ESSI, Mitchell et al., 2003). The ESSI is a 12-item scale that measures the amount of social support the respondent perceives to have, both from his or her romantic partner (romantic subscale) and in general (i.e., outside of the relationship; general subscale). Items are responded to on a 5-point Likert scale (1 means none of the time, 5 means all the time), with the final question being answered with a yes or no. The reliability for gay men in this sample was  $\alpha = .85$  on the general subscale, which was used to measure social support in this study. The reliability for lesbians in this sample was  $\alpha = .877$  on the general subscale (See Appendix B).

### *Self-Esteem*

Self-esteem was measured using Rosenberg's Self-Esteem Scale (1965). The Rosenberg Self-Esteem Scale is a 10-item scale that measures self-worth by including items that assess both positive and negative feelings about the self. The items are answered using a 4-point Likert scale where 4 means strongly agree and 1 means strongly disagree. Five of the items are reverse coded, and all items are summed together to compute a final score. The reliability found for gay men in the sample was  $\alpha = .85$ , and for lesbians  $\alpha = .89$  (See Appendix C).

### *Relationship Satisfaction*

Relationship satisfaction was measured using the Marital Interaction Scale (Braiker & Kelley, 1979). The Marital Interaction Scale is a 15-item scale that measures love and conflict in relationships as assessed by members in that relationship. The scale is answered on a 9-point Likert scale, where 1 means either not very much or not very

often, and 9 means very much or very often. Love is measured by 10 of the 15 items, and conflict is measured by the remaining 5 items. Scores for each love and conflict are summed separately for an overall love score and an overall conflict score. Conflict can be reverse coded to represent “harmony” in the relationship and summed with “love” for an assessment of overall relationship quality, which is the score used in the present study. Reliability for gay men in this sample was  $\alpha = .71$ , and for lesbians  $\alpha = .80$  (See Appendix D).

### *Sexual Satisfaction*

Sexual satisfaction was measured using a combination of 40 items from the Index of Sexual Satisfaction (Hudson, Harrison, & Crosscup, 1981; ISS) and the Sexual Attitudes Scale (Hendrick & Hendrick, 1987; SAS). These items were answered on a 5-point Likert scale (1 is strongly disagree, 5 is strongly agree). All items were summed in order to create a composite score. Reliability for gay men in the sample was  $\alpha = .90$ , and for lesbians, it was  $\alpha = .90$  (See Appendix E).

### **Analytic Plan**

To analyze these data, the present study uses the statistical package “R.” Given that there are few missing data, and that the sample size is modest, the participants with missing data were included in the analysis. Because all participants are romantic couples, Actor-Partner Interdependence Models were used to control for the dependency in the data. This also allows for analyses that include individuals’ partners (while controlling for actor effects). An APIM model was used to test the first and second hypotheses that higher outness will be related to individuals’ (actor effects) and their partners’ (partner effects) higher perceived social support, self-esteem, relationship satisfaction, and sexual

satisfaction. APIM analyses also allow for an examination of interaction effects. In other words, the actor\*partner outness (interaction term) is used to predict actor and partner outcomes: social support, self-esteem, relationship satisfaction, and sexual satisfaction. These analyses address Hypothesis 3 and are exploratory. Finally, to address Hypothesis 4, correlations were used to examine associations among all variables. These analyses are exploratory and do not control for the dependency in these data; however, they are expected to provide information of interest.

### **Adherence to Ethical Guidelines**

Because the data being used in this study had already been collected prior to these analyses, the study already had IRB approval. Participants in the study provided voluntary consent at the time of data collection, and participants were debriefed after the data collection session was over. Participants were also provided with information about different mental health and LGBTQ+ resources in the area.

### **Results**

To increase power in the models being examined, male and female participants were analyzed together. Using APIM analyses (See Table 1), the actor effect of outness on social support was found to be significant, the partner effect was significant, and the actor\*partner interaction was non-significant.

Next, the actor, partner, and interaction effects were examined for the outcome of self-esteem. The actor effect of outness on self-esteem was marginally significant, the partner effect was non-significant, and the interaction effect was non-significant.

Next, the actor, partner, and interaction effects were examined for relationship satisfaction. The actor effect of outness on relationship satisfaction was non-significant,

the partner effect was non-significant, and the interaction effect was non-significant.

Finally, the actor, partner, and interaction effects were examined for sexual satisfaction.

The actor effect of outness on sexual satisfaction was non-significant, the partner effect was non-significant, and the interaction effect was non-significant.

Taken together, results indicate that partner outness did not affect most positive well-being outcomes considered in this study. Social support was the one exception, indicating those who are more out have partners with more frequent social support networks, as well as frequent support networks themselves.

In terms of general correlational results, a few of the variables were significantly related (See Table 2). Consistent with the APIM results, outness and social support were positively related. Relationship satisfaction and self-esteem, as well as social support and self-esteem, were significantly related. Relationship satisfaction and sexual satisfaction were significantly related.

## **Discussion**

This study examined the associations between outness and social support, self-esteem, relationship satisfaction, and sexual satisfaction in gay and lesbian couples. The study focuses on gay and lesbian couples due to the relative dearth of research on LGBTQ+ individuals in comparison to heterosexual individuals. By conducting more research with queer people as the subjects, clinicians and other researchers will be better able to understand the unique strengths and concerns that the LGBTQ+ community has. Using APIM analyses, I was also able to look at outness as a predictor of each participant's social support, self-esteem, relationship satisfaction, and sexual satisfaction.

APIM analyses further allow for the examination of partner effects as well as the interactions between each partner's outness.

The significant findings among the APIM analyses conducted for this study were the significant actor and partner effects of outness on social support. This result suggests that those who have more social support are more likely to be out and are more likely to have partners who are also out. This makes sense, as couples are likely to know and share many of the same support individuals. There were no interaction effects found, meaning that the interaction between a person's outness and their partner's outness did not predict social support. Therefore, although people with strong social support who are more out are likely to have a partner with similar levels of social support and outness, one partner's outness does not depend on the other partner's outness in predicting social support.

The examination of self-esteem revealed no significant actor, partner, or interaction effects. However, the actor effect was near significance. This indicates that one's own outness may possibly be related to one's own self-esteem, consistent with past research on self-esteem and outness (Kosciw, Palmer, and Kull, 2015). However, outness does not appear to be related to one's partner's self-esteem. This makes sense, as one's personal experiences in general wouldn't necessarily affect one's partner's own self-esteem. Also, this finding may be due to the fact that those who already have higher self-esteem are simply more likely to be highly out, which has nothing to do with their partner.

For relationship satisfaction and sexual satisfaction, I found no significant actor, partner, or interaction effects. This indicates that outness is not likely related to relationship satisfaction or sexual satisfaction, at least in this sample. In other words,



individuals' outness and their partners' outness, as well as the interaction between partners' outness did not predict relationship and sexual satisfaction. It may be that there are other relationship or individual factors that affect relationship and sexual satisfaction more strongly than does outness. It is also likely that these individuals are pretty out, but there are certain people to whom being out would not effect their relationship with their partner; for example, it would probably not affect the relationship if Partner A was not out to their boss. Given that participants took part in a study about romantic relationships and health among lesbian and gay individuals, they are likely comfortable with their sexual orientation and in relatively secure relationships.

The correlational findings reveal a positive relationship between outness and social support. This makes intuitive sense; people who have stronger support systems may be more likely to be comfortable coming out, or people who are more out have gained more social support (Legate, Ryan, & Weinstein, 2012). Self-esteem was positively related to both social support and relationship satisfaction, which may indicate that having positive relationships with other people is likely to lead to a more positive understanding of the self (Bum & Jeon, 2016; Okanlatva et al., 2005). Finally, the positive relationship between relationship satisfaction and sexual satisfaction may be because many couples report greater sexual satisfaction if they are happy in their relationships and really in love (Okanlatva et al., 2005).

Given past research (Kwon, 2013; Weisz, Quinn, & Williams, 2016; Bum & Jeon, 2016; Strain & Shuff, 2010; Reeves & Horne, 2009; Knoble & Linville, 2012; Okanlatva et al., 2005), I expected that outness would be related to all of the health and wellness variables examined in this study. However, one reason that I may not have found

significant relationships between outness and self-esteem, relationship satisfaction, and sexual satisfaction may have to do with the sample itself. For the most part, these couples were recruited from LGBTQ+ healthcare centers and were required to have been in a same-sex relationship for at least six months. Although scores on outness in this sample ranged from the minimum to the maximum possible (11-77), more than half of the sample (64%) had a score above the mid-point. Further, although there are no clearly defined cut-offs for what indicates that an individual is somewhat versus very “out,” with an average outness score of 47.79, it appears that most of our sample was at least “somewhat out.”

Another reason I may not have found significance in the relationships between outness and self-esteem, relationship satisfaction, and sexual satisfaction is that perhaps outness just isn’t as much a contributing factor to these well-being variables as most of the literature would suggest. Although some of the research reviewed here was published in 2016-2017, much was published years earlier. Perhaps, the importance of outness has decreased over the years as stigma against LGBTQ+ people seems to be decreasing and more people have been able to come out. On the other hand, an article by Hatzenbuehler (2009) suggests that sexual minority status increases stigma, which then leads to greater risk for mental health issues. Presumably, these effects would be worse for LGBTQ+ people who are more highly out, due to the corresponding increase in stigma. Therefore, it is possible that there are both benefits and negative consequences to being out that essentially cancel each other out, making this not a particularly strong predictor of wellness among LGBTQ+ people.

### **Limitations and Conclusions**

One limitation of this study is that, as mentioned, there was not as much variability in outness among the participants as would have been ideal, which may have contributed to the lack of significant findings. Another limitation is that the study used data that had already been collected, meaning that the hypotheses of this study were not being considered when the data were collected. If I were to repeat this study, I would like to include a comparison of the well-being variables with heterosexual couples. Additionally, I would like to ask each participant's sexual orientation so I could potentially compare bisexual participants with homosexual and heterosexual participants. Finally, I would include a measure of depression such as the Beck Depression Inventory, because I think depression is an important well-being related variable, especially for the LGBTQ+ community.

One implication of this research is that those with lower outness may have weaker social support networks, indicating that they may need more support from their healthcare providers, especially when it comes to mental health. Alternatively, their support from existing members of their network could be strengthened. Another implication is that, at least for gay and lesbian couples, outness may not be that important for other well-being related variables. Perhaps rather than outness itself, it's actually the acceptance from your social circle that positively relates to these well-being variables; in other words, social support could be a potential mediator between outness and well-being related variables.

In general, it appears as though outness is not related to self-esteem, relationship satisfaction, or sexual satisfaction in gay and lesbian individuals. However, those with higher outness were likely to have stronger social support and to have partners with

stronger social support as well. Whether this link is because those who have stronger social support are more likely to come out or because those who are out have stronger social support is unclear – only continued research in this area will be able to determine the relationship between outness and well-being.

Table 1

<i>APIM Analysis Results</i>					
	<u>Outcomes</u>	<u>Estimate</u>	<u>SE</u>	<u>t-value</u>	<u>r-value</u>
<u>Actor</u>	Social Support	-.0706*	.0246	-2.8702	.1682
	Self-Esteem	-.0068	.0237	-.2857	.0170
	Relationship Sat.	.0737	.0531	1.3870	.0828
	Sexual Sat.	-.0022	.0857	-.2853	.1696
<u>Partner</u>	Social Support	.0857*	.0247	3.4704	.2020
	Self-Esteem	.0443	.0237	1.8731	.1105
	Relationship Sat.	.0799	.0531	1.5053	.0898
	Sexual Sat.	-.0766	.0855	-.8961	.0540
<u>Interaction</u>	Social Support	.3043	.0020	1.0291	.0611
	Self-Esteem	.0025	.0018	1.4303	.0846
	Relationship Sat.	-.0043	.0045	-.9481	.0567
	Sexual Sat.	.0022	.0080	.2807	.0169
Note: * $p < .05$					

Table 2

<i>Pearson Correlations</i>					
	<u>Outness</u>	<u>Self-Esteem</u>	<u>Relationship Sat.</u>	<u>Sexual Sat.</u>	<u>Social Support</u>
<u>Outness</u>	--	.109	.115	-.049	.145*
<u>Self-Esteem</u>	--	--	.177*	.099	.248*
<u>Relationship Sat.</u>	--	--	--	.421*	-.049
<u>Sexual Sat.</u>	--	--	--	--	.116
<u>Social Support</u>	--	--	--	--	--
Note: * $p < .05$					

### Appendix A – Outness Inventory

Use the following rating scale to indicate how open you are about your sexual orientation to the people listed below. Try to respond to all of the items, but leave items blank if they do not apply to you.

1= person definitely does NOT know about your sexual orientation status

2= person might know about your sexual orientation status, but it is NEVER talked about

3= person probably knows about your sexual orientation status, but it is NEVER talked about

4= person probably knows about your sexual orientation status, but it is RARELY talked about

5= person definitely knows about your sexual orientation status, but it is RARELY talked about

6= person definitely knows about your sexual orientation status, and it is SOMETIMES talked about

7= person definitely knows about your sexual orientation status, and it is OPENLY talked about

1. Mother	1	2	3	4	5	6	7
2. Father	1	2	3	4	5	6	7
3. Siblings (sisters, brothers)	1	2	3	4	5	6	7
4. Extended family/relatives	1	2	3	4	5	6	7
5. My <u>new</u> straight friends	1	2	3	4	5	6	7
6. My peers at work and/or school	1	2	3	4	5	6	7
7. My employer(s)/ boss(es) and/or teachers	1	2	3	4	5	6	7
8. Members of my religious community (e.g., church, temple)	1	2	3	4	5	6	7
9. Leaders of my religious community (e.g., church, temple)	1	2	3	4	5	6	7
10. Strangers, new acquaintances	1	2	3	4	5	6	7
11. My <u>old</u> straight friends	1	2	3	4	5	6	7

### Appendix B – Enrichd Social Support Instrument (ESSI)

Please read the following questions and mark the number that best describes your life now.

<i>None of the time</i>	<i>A little of the time</i>	<i>Some of the time</i>	<i>Most of the time</i>	<i>All of the time</i>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

- \_\_\_\_\_ 1. Besides your romantic partner, is there someone available whom you can count on to listen to you when you need to talk?
- \_\_\_\_\_ 2. Besides your romantic partner, is there someone available to you to give you good advice about a problem?
- \_\_\_\_\_ 3. Besides your romantic partner, is there someone available to you who shows you love and affection?
- \_\_\_\_\_ 4. Besides your romantic partner, is there someone available to help with daily chores?
- \_\_\_\_\_ 5. Besides your romantic partner, can you count on anyone to provide you with emotional support (talking over problems or helping you make difficult decisions)?
- \_\_\_\_\_ 6. Besides your romantic partner, do you have contact with someone you feel close to, someone whom you can trust and confide in?



### Appendix C – Rosenberg’s Self-Esteem Scale

**Please circle the number indicating whether you strongly disagree, disagree, agree, or strongly agree with each of the following statements.**

	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>
1. I feel that I am a person of worth, at least on an equal plane with others.	1	2	3	4
2. I feel that I have a number of good qualities.	1	2	3	4
3. All in all, I am inclined to feel that I am a failure.	1	2	3	4
4. I am able to do things as well as most people.	1	2	3	4
5. I feel I do not have much to be proud of.	1	2	3	4
6. I take a positive attitude toward myself.	1	2	3	4
7. On the whole, I am satisfied with myself.	1	2	3	4
8. I wish I could have more respect for myself.	1	2	3	4
9. I certainly feel useless at times.	1	2	3	4
10. At times, I think I am no good at all.	1	2	3	4

### Appendix D – Marital Interaction Scale

Please read the following questions and circle the number that best describes your feelings about your romantic partner.

1. To what extent do you have a sense of “belonging” with your partner?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
2. How often do you and your partner argue with one another?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
3. How much do you feel you “give” to the relationship?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
4. To what extent do you try to change things about your partner that bother you (behaviors, attitudes, etc)?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
5. To what extent do you love your partner at this stage?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
6. To what extent do you feel that things that happen to your partner also affect or are important to you?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
7. How often do you feel angry or resentful toward your partner?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
8. How committed do you feel toward your partner?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
9. How close do you feel toward your partner?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
10. How much do you need your partner at this stage?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
11. How sexually intimate are you with your partner?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
12. How attached do you feel to your partner?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
13. When you and your partner argue, how serious are the problems or arguments?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
14. To what extent do you communicate negative feelings toward your partner (e.g., anger, dissatisfaction, frustration, etc.)?  

Not at all
1 2 3 4 5 6 7 8 9
Very much
15. To what extent do you feel your relationship is special compared to other relationships you’ve been in?  

Not at all
1 2 3 4 5 6 7 8 9
Very much

## Appendix E – Sexual Attitudes Scale

Instructions: Indicate how much you agree with the following statements. Circle the appropriate number beside each statement.

	Strongly Disagree	Moderately Disagree	Neutral	Moderately Agree	Strongly Agree
1) I feel that my partner enjoys our sex life.	1	2	3	4	5
2) Our sex life is very exciting.	1	2	3	4	5
3) Sex is fun for my partner and me.	1	2	3	4	5
4) Sex with my partner has become a chore for me.	1	2	3	4	5
5) I feel that our sex is dirty and disgusting.	1	2	3	4	5
6) Our sex life is monotonous.	1	2	3	4	5
7) When we have sex it is too rushed and hurriedly completed.	1	2	3	4	5
8) I feel that my sex life is lacking in quality.	1	2	3	4	5
9) My partner is sexually very exciting.	1	2	3	4	5
10) I enjoy the sex techniques that my partner likes or uses.	1	2	3	4	5
11) I feel that my partner wants too much sex from me.	1	2	3	4	5
12) I think that our sex is wonderful.	1	2	3	4	5
13) My partner dwells on sex too much.	1	2	3	4	5
14) I try to avoid sexual contact with my partner.	1	2	3	4	5
15) My partner is too rough or brutal when we have sex.	1	2	3	4	5

16) My partner is a wonderful sex mate.	1	2	3	4	5
17) I feel that sex is a normal function of our relationship.	1	2	3	4	5
18) My partner does not want sex when I do.	1	2	3	4	5
19) I feel that our sex life really adds a lot to our relationship.	1	2	3	4	5
20) My partner seems to avoid sexual contact with me.	1	2	3	4	5
21) It is easy for me to get sexually excited by my partner.	1	2	3	4	5
22) I feel that my partner is sexually pleased with me.	1	2	3	4	5
23) My partner is very sensitive to my sexual needs and desires.	1	2	3	4	5
24) My partner does not satisfy me sexually.	1	2	3	4	5
25) I feel that my sex life is boring.	1	2	3	4	5
26) Sex is best when you let yourself go and focus on your own pleasure.	1	2	3	4	5
27) Sex is primarily the taking of pleasure from another person.	1	2	3	4	5
28) The main purpose of sex is to enjoy oneself.	1	2	3	4	5
29) Sex is primarily physical.	1	2	3	4	5
30) Sex is primarily a bodily function like eating	1	2	3	4	5
31) Sex is mostly a game between two people.	1	2	3	4	5

32) Sexual techniques get better as a relationship progresses. (Sex gets better as a relationship progresses).	1	2	3	4	5
33) Sex is the closest form of communication between two people.	1	2	3	4	5
34) A sexual encounter between two people deeply in love is the ultimate human interaction.	1	2	3	4	5
35) Orgasm is the greatest experience in the world.	1	2	3	4	5
36) At its best, sex seems to be the merging of two souls.	1	2	3	4	5
37) Life without sex would be very dull. (Sex is a very important part of life.)	1	2	3	4	5
38) Sex is usually an intensive, almost overwhelming experience.	1	2	3	4	5
39) During sexual intercourse, intense awareness of the partner is the best frame of mind.	1	2	3	4	5
40) Sex is fundamentally good.	1	2	3	4	5

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