Published in final edited form as:

J Health Soc Behav. 2017 December ; 58(4): 455–472. doi:10.1177/0022146517736754.

Couple-level Minority Stress: An Examination of Same-sex Couples' Unique Experiences

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Abstract

Social stress resulting from stigma, prejudice, and discrimination—“minority stress”—negatively impacts sexual minority individuals' health and relational well-being. The present study examined how being in a same-sex couple can result in exposure to unique minority stressors not accounted for at the individual level. Relationship timeline interviews were conducted with 120 same-sex couples equally distributed across two study sites (Atlanta and San Francisco), gender (male and female), and relationship duration (at least six months but less than three years, at least three years but less than seven years, and seven or more years). Directed content analyses identified 17 unique couple-level minority stressors experienced within nine distinct social contexts. Analyses also revealed experiences of dyadic minority stress processes (stress discrepancies and stress contagion). These findings can be useful in future efforts to better understand and address the cumulative impact of minority stress on relational well-being and individual health.

Keywords

minority stress; relationships; same-sex couples; stigma; stress process

The high rates of health problems among sexual-minority persons (Institute of Medicine [IOM] 2011) are partly attributable to their exposure to minority stress (Mays & Cochran 2001; Meyer 1995, 2003). The concept of minority stress (Brooks 1981; Meyer 1995, 2003; Meyer and Frost 2013) is rooted in broader theories of social stress (Dohrenwend 2000; Pearlin 1999), which posit that social stressors—events or circumstances that require

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SUPPLEMENTAL MATERIAL

The codebook is available in the online version of the article.

individuals to adapt to changes intrapersonally, interpersonally, or in their environment—can diminish well-being.

Sexual minority populations can be exposed to unique stressors, including (1) experiences of discrimination (both acute events and chronic, everyday mistreatment), (2) stigma or expectations of rejection, (3) concealment of a stigmatized identity, and (4) internalization of negative social beliefs about one's social groups or social identity (Meyer 1995, 2003). In part, this conceptualization of minority stress stems from Goffman's classic works on stigma (Goffman, 1963) and impression management (Goffman, 1959). As such, minority stressors exist on a continuum of proximity to the self. Stressors most distal to the self are objective stressors based primarily in the environment, such as prevailing stereotypes, prejudice, and discrimination. These lead to more proximal appraisals of the environment as threatening and to expectations of rejection (feeling stigmatized) as well as efforts to conceal or hide stigmatized identities (managing others' impressions). Most proximal to the self is one's internalization of negative social attitudes toward one's minority group (e.g., internalized homophobia). Minority stressors diminish psychological well-being and account for disparities in multiple health outcomes between sexual minority and heterosexual populations (Frost 2011a; Frost and LeBlanc 2015; Frost, Lehavot, and Meyer 2015; Frost and Meyer 2009; Green 2008; Hatzenbuehler 2014; Hatzenbuehler et al. 2010; Mays and Cochran 2001; Meyer 1995, 2003; Meyer and Frost 2013).

BACKGROUND

Minority Stress and Same-sex Couples

Political and legal debates over same-sex marriage have cast a spotlight on same-sex relationships and sexual minority health (e.g., Badgett 2009; Herdt and Kertzner 2006; King and Bartlett 2006; Kurdek 2004; LeBlanc, Frost, and Wight 2015; Patterson 2000; Peplau and Fingerhut 2007). Research suggests that recent state-level bans on same-sex marriage were negatively associated with sexual minority mental health (Hatzenbuehler et al. 2010; Riggle, Rostosky, and Horne 2010). Studies also suggest a positive association between same-sex marriage and mental health among sexual minority populations (Wight et al. 2012; Wight, LeBlanc, and Badgett 2013). Despite the U.S. Supreme Court's 2015 ruling that made same-sex marriage legal in all 50 states (*Obergefell v. Hodges*), the social, political, and legal controversies surrounding same-sex marriage in the United States are deeply rooted. Their effects endure over time, and they vary across social settings and geographic locations (Frost and Fingerhut 2016).

Although most minority stress research focuses on individuals' experiences, emerging work has adopted a relational focus (Mohr and Fassinger 2006; Peplau and Fingerhut 2007; Riggle et al. 2010; Riggle, Thomas, and Rostosky 2005; Rostosky 2007). A small number of studies over the past two decades have shown that heightened experiences of minority stress are associated with lower relationship quality for same-sex couples (Caron and Ulin 1997; Doyle and Molix 2015; Frost and Meyer 2009; Otis et al. 2006; Todosijevic, Rothblum, and Solomon 2005). However, a more concentrated line of inquiry is needed to advance theoretical and methodological approaches to the study of minority stress in relational context.

Shifting Focus from the Individual Level to the Couple Level

When individuals become part of a same-sex couple, they may then become vulnerable to unique *couple-level minority stressors* that are not reducible to their experiences as sexual minority individuals. Couple-level minority stressors may be experienced by individual partners or jointly by couples as a result of the stigmatized status of their relationship, in and of itself. In other words, when their intimate relationships are devalued or diminished by society, individuals may face hardships or adversity as a result. They may also face such challenges together as people who are jointly stigma-tized because their relationship represents a stigmatized relationship form. It is the source of this stress (i.e., society's marginalization of the relationship) that defines such stressors as couple-level minority stressors (LeBlanc et al. 2015).

To contrast individual- and couple-level minority stressors, take the example of a man who hides the fact that he is gay from his friends, whom he perceives to be homophobic, to avoid rejecting or unsupportive reactions. This instance constitutes individual minority stress in the forms of expectations of rejection and identity concealment. However, if this same man were to start a relationship with another man, his status as a member of a same-sex couple will likely result in exposure to additional stressors, above and beyond what he may experience as an individual. In addition to his personal identity concealment, he and his partner may now be faced with managing the visibility of their relationship. This constitutes a couple-level minority stressor in the form of couple-level concealment. The lack of acceptance from others in their respective social and familial networks can be considered a couple-level minority stressor in the form of rejection of their relationship as well as of each man as the other's partner. In all forms of couple-level minority stress, the root source of stress is social disadvantage associated with same-sex relationships, as opposed to disadvantages related to individual experience.

The concept of couple-level minority stress allows for a fuller understanding of minority stress in the lives of sexual minority persons not only as individuals but also as partners in intimate relationships (LeBlanc et al. 2015). First, couple-level minority stressors have the potential to negatively affect relationship quality and the well-being of each partner. Such effects may occur as a result of unexamined stress processes involving stressors that emerge in relational contexts and not only stressors that have been conceived of and assessed as individual-level phenomena. Although researchers have examined the dyadic nature of more generally experienced social stressors (e.g., Badr et al. 2010; Bolger et al. 1989; Falconier and Epstein 2010; Spanier 1976), research has yet to directly investigate the existence or substance of couple-level minority stressors. Therefore, the primary aim of the present study was to determine the nature of couple-level minority stressors as a potentially critical source of additional stress in the lives of sexual-minority persons.

Second, couple-level minority stressors likely play a role in important processes of *stress proliferation* in the lives of same-sex couples. The concept of stress proliferation refers to the observation that the experience of stress often begets more stress in people's lives, creating a causal chain of stressors that can directly and indirectly diminish well-being (Pearlin 1999; Pearlin and Bierman 2013). Stress can proliferate across domains of stress within an individual's life, and stress can proliferate from person to person, especially within

relationships where individuals are structurally linked to one another (e.g., spouses, parents and children). Drawing from Elder, Johnson, and Crosnoe's (2003) articulation of "linked lives," life course theory recognizes that individuals are often affected by broad social changes through the impact of those changes on their day-to-day experiences of their interpersonal relationships.

Studies of stress proliferation have usefully focused on stress experiences within key social roles, the obligations of such roles, and the social and interpersonal interactions attached to them (Milkie 2010). For example, researchers have studied stress contagion in the forms of *stress spillover* (through intrapersonal processes) and *stress crossover* (through interpersonal processes) in the context of familial relationships between spouses and between parents and children (e.g., Bolger et al. 1989; Grzywacz, Almeida, and McDonald 2002; Young, Schieman, and Milkie 2014). Similarly, distinct processes of stress proliferation have been examined among informal caregivers and care recipients (e.g., LeBlanc, London, and Aneshensel 1997; Pearlin, Aneshensel, and LeBlanc 1997; Wight et al. 2008). Such a role-based framing of stress proliferation has provided fertile ground for understanding the stress experience, illustrating not only that stress moves within the lives of individuals but also that it is shared between persons whose lives are linked.

Adding to this literature, we examine stress proliferation in the context of a stigmatized identity or status. Although it is well understood that stigma-tized individuals face stressors that are unique to their marginalized social status, their experiences of minority stress in the context of their intimate relationships—in particular, regarding the marginalization of their relationships in and of themselves—are poorly understood.

Contextualizing Couple-level Minority Stress

Developing better understandings of stress processes affecting people in same-sex relationships requires careful consideration of the social climate in which they live. Although same-sex marriage is now legal in the U.S., this is a recent change. Prior to the 2015 U.S. Supreme Court decision in *Obergefell v. Hodges*, the policy context regarding same-sex couples' access to legal recognition was complex, varying across states and municipalities. Despite this landmark decision at the federal level, state- and local-level policy environments remain diverse, some characterized by acts of defiance and resistance to implementing the federal law. Therefore, stressors rooted in legal and institutional contexts remain important to study. Indeed, as same-sex couples gain rights and visibility, they may consequently experience stressors that have yet to be conceptualized.

Moreover, couple-level minority stressors continue to emerge in many aspects of people's lives beyond their legal rights and institutionalized policies. The fact that sexual minority persons face stressful interactions—in familial contexts, workplace environments, social interactions, service settings, and public spaces—has been well documented. How all of these social contexts shape the experience of couple-level minority stress—both interpersonally and intrapsychically—has yet to be systematically investigated.

Understanding how couple-level minority stressors are experienced across varying social contexts is also of theoretical importance. Unique stressors, whether they are eventful or

chronic in nature, are not always contained to specific domains of life. Rather they move with the person—and with couples—from place to place. As such, any given minority stressor, for example, unfair treatment or discrimination, may be experienced in multiple social contexts, such as in familial or workplace settings. Understanding how minority stressors manifest in varied social contexts is therefore essential. Some same-sex couples may face considerable discrimination from their families of origin but relatively little in their workplaces or within their social networks. Ignoring the fullest range of social contexts affecting the experience of minority stress is therefore problematic.

The Current Study

In this research, we examine (1) the nature of couple-level minority stress in the lives of people in same-sex relationships, (2) the varied social contexts in which such stressors are experienced, and (3) the dyadic stress processes through which minority stressors (individual- and couple-level) proliferate between partners in same-sex relationships.

DATA AND METHOD

Participants

Participants in this study were 120 same-sex couples, 60 in each of the two study sites (San Francisco and Atlanta). Eligibility criteria for participation were that (1) both partners be at least 21 years of age, (2) both individuals perceive of one another as their partner and of themselves as a “couple,” and (3) at some point in their shared history, they must have been engaged in a sexual relationship. Therefore, we did not include people who cohabited and shared resources but had never been sexually involved. We did not limit inclusion to couples who cohabited or to those who were registered as domestic partners or were married in a symbolic, religious, or legal ceremony because we wished to include a range of relationship arrangements present among gay men and lesbians.

We employed a modified targeted nonprobability recruitment strategy (Meyer, Schwartz, and Frost 2008; Meyer and Wilson 2009; Watters and Biernacki 1989). We began by using an ethno-graphic approach to identify key locations and venues frequented by same-sex couples in the two study sites (Meyer et al. 2008). These included select neighborhoods and business districts. Targeted venues included, for example, grocery stores, hardware stores, child care centers, churches/temples, parks, theaters, bars, and senior centers. Our approach identified venues that yielded high proportions of racial-ethnic minorities. In order to minimize bias inherent to community samples of sexual minority populations, we avoided recruitment from venues that overrepresented individuals with high levels of mental health problems and stressful life events (e.g., 12-step programs, HIV/AIDS service providers, following Meyer and Wilson 2009). Trained recruiters approached individuals, couples, and small groups to provide study information, which included a study website and toll-free number for more information and screening for potential eligibility. Study information was also disseminated through local mainstream and gay newspapers and appropriate websites, listservs, and social media. In total, 915 individuals completed the study screener, and of those, 852 were in same-sex relationships. From among these 852 individuals, 231 eligible couples were identified, and of those, 120 couples were enrolled using a stratified sampling strategy.

Specifically, three strata reflecting relationship duration were selected to guide construction of the sample: six months to less than three years ($n = 40$), three years to less than seven years ($n = 40$), and seven or more years ($n = 40$). Consequently, we included “new” couples who had been together as few as six months in order to identify some of the early stressors that emerged through the process of relationship formation, some of which may have become too temporally distal for longer-term couples to remember in detail. Our seven-year benchmark distinguishing long-term couples is in keeping with a general finding—from studies of heterosexual marriages—that the risk of relationship dissolution increases in the early years, reaches a peak, and then steadily declines with time (Kulu 2014). Within each of these three categories, participating couples were evenly split across the two study sites and couple gender. Moreover, we selectively recruited participating couples so that at least 40% within each sampling stratum were couples where at least one partner identified as a racial-ethnic minority. As a result, the sample was racially and ethnically diverse, with 47% ($n = 56$) of the couples consisting of two white partners, 24% ($n = 29$) of the couples consisting of two racial-ethnic minority partners, and 29% ($n = 35$) consisting of one white partner and one racial-ethnic minority partner. Finally, we also ensured that participants were recruited from diverse recruitment venues by requiring that at least three different recruitment venue types be represented within each sampling stratum. A \$30 cash incentive was paid to each participant in the study, or \$60 per couple (LeBlanc et al. 2015).

Instruments

Each couple met on one occasion together with an interviewer for an audiotaped discussion lasting approximately two hours. The interviewers received extensive training in research conduct with a diverse sample of same-sex couples. Both partners were present for the full interview. Adapted from existing life-line methodology, interviews were organized around the couples’ joint creation of a “relationship timeline,” along which they defined, labeled, and discussed key events or periods of time over the course of their relationship (as well as those anticipated for the future), focusing explicitly on the stressors that stemmed from these events and periods of time (de Vries et al. 2017).

This relationship timeline method was designed to elicit narratives about events and periods of time involving multiple life domains, including experiences that were seen as positive, negative, or a mixture of the two. Couples worked together to rate each event or period in terms of how stressful it was. Moreover, they were not initially instructed to focus in particular on *minority* stressors per se until after they had labeled and rated each event or period on the timeline. Only then did the interviewers instruct participants to revisit the events and periods on the timeline and designate those involving minority stress, some of which may not have been initially described as such.

The interviewers then identified four events or periods for in-depth discussion: the highest-rated (i.e., most stressful) event/period closest to the date they met, the highest-rated event/period closest to “today,” the highest-rated future event/period, and one event/period of the couple’s choice. These four, some involving minority stress and some not, were then discussed in detail. Up to two events/periods designated as minority stressors by couples were additionally discussed in depth if they had not been previously.

We employed narrative methods for the study of stigma and stress in relationships (Frost 2011b) to elicit stories that revealed the subjective experiences of stress, the nature and social context of those experiences, and how couples attempted to manage related challenges. Specifically, the interviewer used a set of narrative prompts to ask couples to describe each selected event or period, noting the details of what happened, what they were thinking and feeling at the time, and how the event or period affected their daily lives as a couple. The resulting narratives were then subject to our analysis for developing qualitative understandings of couple-level minority stressors and relevant stress processes (LeBlanc et al. 2015).

Analysis Strategy

Transcripts of couples' narratives were entered into NVivo qualitative data analysis software and content analyzed in order to achieve our aims of describing the unique nature of couple-level minority stress. A modified directed content analysis (Hsieh and Shannon 2005) was employed to describe the nature and prevalence of content related to unique couple-level experiences of minority stress. For this analysis, we defined couple-level minority stressors as those stressors that were unique to the experiences of individuals in same-sex relationships or the shared experiences of partners in same-sex couples.

We used an iterative process to create a code-book for analysis (available in the online supplemental material). The first three authors began by studying a subset of 12 interview transcripts to identify key concepts that were present in the data using existing theories of minority stress as a guide (e.g., Meyer 2003) in addition to constructs emerging from our inductive readings of the transcripts. This resulted in a draft codebook of couple-level minority stress constructs, their conceptual and operational definitions, and illustrative examples from 12 transcripts. We also generated a list of social contexts in which the couple-level minority stress constructs were experienced, based on participant accounts. A larger team of eight coders from across the two study sites met in person to discuss the draft codebook and receive training in NVivo. At this meeting, the team attempted to apply the initial codes to a new subset of interviews and discussed any discrepancies in our understanding of these codes and the coding process. This led to a finalized codebook. Each of the 120 transcripts was then independently coded by two team members. Coding discrepancies were identified using NVivo and discussed and resolved at weekly cross-site tele-conferences. Once a code for a couple-level minority stress construct was applied to the data, coders were then instructed to determine whether a social-context code could be applied to the couple's narrative.

First, we examined the frequency and distribution of couple-level minority stress codes within the sample, and then we examined the frequencies of co-occurrences between couple-level minority-stress codes and social-context codes so that we could determine the most frequent social contexts in which couple-level minority stress was experienced. Finally, the first two authors conducted a narrative analysis (Frost 2011b) of couples' discussions of relational manifestations and consequences of individual experiences of minority stress. Narratives identified by the coding team during the directed content analysis were explored

further to determine the degree to which such experiences exemplified dyadic minority stress processes, as previously theorized (LeBlanc et al. 2015).

RESULTS

In its purest form, couple-level minority stress stems from being in a stigmatized relationship, not as a result of either partner's identity. As we discuss further below, dyadic minority stress processes that include individual-level experiences of minority stress also contribute to couple-level minority stress. First, however, we describe unique couple-level minority stressors emanating from society's marginalization of same-sex relationships.

Unique Couple-level Minority Stressors

The content analysis indicated that couples experienced 17 distinct couple-level minority stressors. The conceptual definitions of these couple-level minority stressors are presented in Table 1, alongside two illustrative exemplars of and the number of couples (out of 120) whose interviews contained mention of each. We present these for the full sample as well as separately by gender. Each unique couple-level minority stressor discussed in the text is noted in italics and corresponds to the data exemplars provided in Table 1.

The most commonly mentioned couple-level minority stressors were *experiences of rejection, devaluation, and discrimination*—being treated differently or devalued by others because of being in a same-sex couple—and *fears of rejection, devaluation, and discrimination*, or fearing differential treatment or devaluation from others going into a situation regardless of whether or not that differential treatment or rejection actually occurred. Additionally, structural forms of discrimination were frequently discussed by couples as *consequences of unequal legal recognition of same-sex relationships*. With the exception of 10 participating couples (five in California), interviews were conducted prior to the 2013 U.S. Supreme Court ruling that made same-sex marriage legal in California (*U.S. v. Windsor*), and all were conducted prior to the 2015 U.S. Supreme Court ruling that made same-sex marriage legal across the country (*Obergefell v. Hodges*).

In line with more proximal forms of couple-level minority stress, couples discussed stress related to both *hiding their same-sex relationship* from others (sometimes even when they were out as sexual minority individuals) and negotiating when, how, and to whom they would or should tell others about their relationship (i.e., *coming out*). Most proximal were self-directed forms of minority stress (*internalized stigma*), which stem from prevailing social stigma but are internally generated and perpetuated, resulting in the devaluation of one's own relationship and internal discord between being in a same-sex relationship and other aspects of one's sense of self (e.g., religious values).

In sum, the previously discussed forms of couple-level minority stressors corresponded to classically defined minority stressors experienced by sexual minority individuals (Meyer 2003), but these stressors resulted from being part of a same-sex couple and therefore would not be experienced by single sexual minority individuals. As a result, they may represent an additive stress burden borne by individuals in same-sex relationships.

Additionally, couples' interviews reflected several novel couple-level minority stressors, which did not parallel those articulated in existing minority stress models. Participants described stress related to ensuring that the places (e.g., neighborhoods, cities) in which they lived or spent time and the places to which they traveled were safe for them as a same-sex couple (i.e., *seeking safety and community*). For example, couples researched laws and attitudes about same-sex couples in foreign countries, border control policies related to presenting as a same-sex couple, and hotel accommodations for two people of the same sex. Couples also experienced *feeling public scrutiny*, for instance, when they felt that other people were staring or gawking at them in public places. In short, just as individuals may face the dilemma of potentially hiding the fact that they are a sexual minority person as a protective mechanism when looking for places to live or travel, partners individually and couples collectively may face similar challenges.

Stress also emerged for same-sex couples in the form of strained relationships with family and community. Participants expressed that they faced *limitations to participation in families* of origin, such as not being able to attend celebrations together with a partner or not being able to spend time with children (e.g., nieces, nephews) as a couple. In many of these narratives, participants' relationships with their families were not limited because they were sexual minority individuals. For example, a woman who is lesbian may be welcome to attend the family Christmas party on her own but not if she wished to bring her partner along. Additionally, she might attend the party on her own but knowing ahead of time that conversations about her partner would not be allowed. Finally, same-sex couples might attend family events together under the clear expectation—either implied or enforced—that they not present themselves as a couple.

Additionally, participants noted how they felt like they were *excluded from social support* that heterosexual couples typically enjoy. For example, some couples felt their family and friends at times did not take them seriously when they needed help with a relationship problem. This exclusion from support was discussed as a stressor stemming from the social stigma surrounding same-sex relationships and is thus viewed as a couple-level stressor rather than solely as a lack of support. Relatedly, some couples described circumstances where others (e.g., relatives, coworkers, and neighbors) did not *perceive them as a couple*, instead viewing them as just friends, roommates, siblings, or cousins, overlooking the romantic nature and seriousness of their relationship.

Same-sex couples also articulated unique stressors borne out of relationship dynamics between people in same-sex relationships. These included stress related to *negotiating gender roles*, which have traditionally been structured along a socially imposed male–female binary (e.g., allocation of household duties, management of finances). Additionally, participants articulated stress surrounding *negotiating stereotypes about what same-sex couples are like*, such as correcting assumptions that one partner is more “the man” and the other “the woman” in the relationship. Couples also discussed stress stemming from the challenges of *having children* as a same-sex couple, such as whether to seek a surrogate or adoption, finding adoption agencies that work with same-sex couples, finding a semen or egg donor, and negotiating the role of the donor in the child's life. Not having *relationship terminology* (e.g., “boyfriend,” “wife,” “spouse,” “partner”) to adequately describe how they

see one another was also discussed as stressful, due to the heteronormative basis of most relationship terminology. Finally, *lacking role models* for successful same-sex relationships was noted as a stressor for couples, sometimes contributing to relationship strain.

The Social Contexts of Couple-level Minority Stressors

These data suggest that couple-level minority stressors were experienced in nine distinct social contexts: familial, friends or peers, healthcare, neighborhood, out in public, service provision, social institutions, social settings, and workplace (see contexts provided in brackets following quotes in Table 1). The following presentation of code frequencies illustrates how often the couple-level minority stressors described above were experienced within each of these contexts. Thus, these frequencies describe the prevalence of the contextual emergence of couple-level stressors rather than the prevalence of couples experiencing them.

Familial contexts were the most frequently cited. Specifically, stress related to coming out as a couple ($f = 43$), hiding the nature of their relationship ($f = 35$), discrimination ($f = 64$), expectations of rejection ($f = 57$), negotiating gender roles ($f = 3$), internalized stigma ($f = 28$), negotiating stereotypes ($f = 6$), and inadequate terminology ($f = 6$) were most frequently perpetrated by family members or experienced in interactions at family events. Additionally, stress related to limitations to participation in family was by nature most commonly experienced in familial contexts ($f = 20$). Stressors related to seeking safety and belonging ($f = 14$) and feeling scrutinized as a same-sex couple ($f = 16$) were most commonly discussed as experienced while out in public. Stressors stemming from unequal legal status ($f = 66$), access to benefits ($f = 18$), and trying to have children ($f = 75$) were most commonly experienced in social institutions (e.g., banks, city hall, church) or resulted from institutional stigma and discrimination (e.g., access to legal marriage). Finally, stress stemming from not being perceived as a couple ($f = 11$) was most commonly discussed as experienced within the context of service provision (e.g., working with contractors, realtors).

Dyadic Minority Stress Processes

The final stage of analysis identified two dyadic minority stress processes evident in couples' narratives: dyadic stress stemming from *discrepancies* between partners, and the *contagion* of individual-level minority stressors within same-sex couples.

Stress discrepancies.—The quotation that follows from an Atlanta-based male couple (three years to seven years) illustrates the experience of a dyadic minority stress discrepancy. In this example, the stress felt within their relationship stems from differences in their individual-level experiences of minority stress, namely, the fact that there is a discrepancy in the degree to which the partners are “out” as gay men.

Partner B (white, age 47) It's a very stressful period for me, because I feel like if you have been with somebody for four years, with children involved that you're living with, that you're denying your family. And that if I had been a woman with children, and you were living with me, yes, it would be completely different, but it's very disrespectful—I'm at the point where I'm about to give out ultimatums, that it's just to the point that it's disrespectful

to his whole life up here. ... That it is just disrespectful to me and the children, and I've tried to balance that with him coming out in his own terms, because we all have to. But, hello, when you're this involved, but he doesn't have a strong relationship with his family to begin with.

Partner A (black, age 44) Right, but at the same token, it's like everybody comes out at their own time, and—

Partner B Richie's time is just a little slower than the rest of the world's. He would be happy not to ever come out. It wouldn't even bother him.

Their respective degrees of outness as individuals are importantly distinct from the degree to which they are out as a couple. Specifically, Partner A's not being out is not discussed as a problem for him, but Partner A's concealment is experienced as stressful for Partner B. It also limits both partners' ability to be out about their relationship and live their lives in a way that respects the family they have built together.

An additional example of stress discrepancies can be seen in a San Francisco-based female couple (seven or more years). In the following exchange, the two partners differ with regard to their internalizations of the stigma associated with the acceptability of being out and showing affection as a same-sex couple when with their family and in the black community more broadly.

Partner A (black, 55) I think that when I am with Wilma as a partner, as her wife, I should be able to do the same things with her that I do, that any heterosexual couple would do. I should be able to hold hands with her. We should be able to dance together. If I want to give her a kiss, that should be OK. I feel like when I'm around her family, or maybe straight black people in general—it's just not a thing that can be done. But on the other hand, I feel like if we're not in sync around it, then [sigh] we don't have an opportunity to just be our natural selves. I feel like I have to be repressed or somehow I have to stand down from my gayness when I'm around her family or even my family, you know... To say if we aren't comfortable with being ourselves in all environments, then we allow those environments to stay the same, which is to repress us so that we can be there and not make the straight people uncomfortable, whereas we should just be able to be ourselves just like they're being their selves.... But if we don't, we'll never break that seal and we'll never shatter that restriction that is unspoken, but there, if that makes sense.

Interviewer to Partner B It does. Um, and what about for you, Wilma?

Partner B (black, 67) I ... we definitely see it differently. I've never had an open display of affection with anybody. Even when I was with my husband I never had any. That's just not me.... And I always walk true to who I am. And, like she says, when you in a, when [unintelligible] especially black folks, black people don't talk about homosexuality and, much at all, you know.

Interestingly, Wilma notes that her lack of willingness to be publicly affectionate with her partner is due not only to her personal preference but also to cultural constraints related to

norms in the black community around not discussing or displaying same-sex attraction. However, her partner is also black and desires Wilma to work to overcome these constraints, which are also likely internalized aspects of the relational stigma afforded to same-sex couples. The discrepancy between their experiences of this individual-level minority stressor not only has consequences for the couple in the form of couple-level concealment (e.g., hiding; see Research Question 1) but also illustrates how the couple is experiencing being out of sync with one another and being held back from being their true selves. In this regard, we see differences in the individual experience of minority stress representing stress for the couple when examined as a discrepancy within the dyad (i.e., between partners).

Stress contagion.—Stress contagion, a form of stress proliferation, manifests when one partner's experience of individual-level minority stress results in a negative impact on the other partner's well-being. An example of this can be seen in an Atlanta-based female couples' narrative (three years to seven years). Here, Partner A (white, age 28) discussed her experience of distress resulting from her partner's (white, age 30) experience of rejection and devaluation from her mother:

It was horrible. Um, it was a constant source of like stress and sadness and pain for both of us.... We both experienced it differently, um, where like this was her mother, um, and I think that was so deeply painful for Ruby. And for a while I was providing I feel, like, primary, counseling and ... mental health support to Ruby who I'd only known for a year. Um, and that was probably one of the most draining things I've ever done.... And I felt very alone and isolated 'cause we couldn't really talk about it with people 'cause Ruby didn't want other people to know what was going on with her family.... I just began to feel like a lot of personal pain where it wasn't just, like, oh my god, I'm so sorry that this is happening to Ruby. But, like, I began to take it all very personally as well.

This example illustrates not only the direct consequences of Partner B's experience of her mother's negative treatment of her as an individual but Partner A's indirect consequences stemming from Partner B's individual-level experience of minority stress. Specifically, Partner A's experience of loneliness, isolation, and pain was not a direct result of Partner B's mother's discriminatory treatment but rather an outcome of the relational manifestation of an individual-level minority stress experience, thus illustrating the couple-level nature of stress contagion as a dyadic minority stress process.

Another example of stress contagion can be seen in an exchange between two men from San Francisco, one of whom was Asian (Partner A, age 34) and one of whom was white (Partner B, age 45) (six months to three years).

Interviewer So, the first event that you two chose, it was ... titled "Came Out to Family That I Am Gay," and you rated that a four. What were you thinking or feeling during this time?...

Partner B Both happy and sad. Happy, because I came out, you know. It took out a thorn inside me. That, okay, yeah, I'm out. I'm not hiding, anymore. Sad, because my family wasn't really accepting it that well.

Interviewer to Partner A How were you feeling?

Partner A I was scared. And my initial thought was, oh, crap. Because it just sounded so bad. Because his family actually did suggest that he move out. He hasn't said that, yet, but yeah, the family did say that. And so, I'm thinking, oh, holy crap ... and he was destroyed. And I was like, I got to be strong. Got to be strong. Got to be strong. But I was kind of scared. And I was a little bit angry, too. Because I don't understand that kind of reaction. Because when I told my—I told my mom, first. And she didn't skip a beat. She was like, oh, yeah, I know. And she kept on going with the sentence. I'm like, wait, back up, you know. And she told my dad. And my dad kind of confirmed, he's like [unintelligible] we raised you to be the best you could be. So, I mean, that's how I was brought up. I was a little bit angry, too. I don't understand how they could be so—

Interviewer Angry with who?

Partner A His family. Because they were actually really mean to him, you know. It's not right, you know. And like he said he told his mom a long time and I think in her mind she thought that was a phase. When she realized it wasn't and I was pretty much the reason for it, I was scared. Because I'm like, oh, what's going to happen? It's just like a big explosion. And I was mad. I was scared and mad. But, you know, like I said before, some of the stuff that we've gone through solidifies the relationship.

Here, the lack of acceptance that Partner B experienced from his family—culminating in their pushing him to move out—indirectly resulted in distress for Partner A in the form of negative affect, fear, and anger. Although Partner A was not directly involved in the interaction, the stress burden of Partner B's individual-level experience of minority stress became shared by the couple in a contagious manner.

DISCUSSION

The present findings provide the first empirical evidence for a theoretical model of couple-level minority stress (LeBlanc et al. 2015). Because existing conceptualizations of minority stress do not include couple-level stress constructs, they underestimate the degree to which sexual minority populations disproportionately face unique forms of social stress.

Narrative data from this relationship timeline study demonstrate that couple-level minority stress is not reducible to the individual level. Indeed, some sexual minority persons may experience little to no minority stress as individuals but nonetheless face significant challenges related to the devaluation of their intimate relationships. Such stressors are avoided by their unpartnered counterparts. Further, this conceptualization of couple-level minority stressors emanating from membership in a socially stigmatized relationship is thus distinct from other conceptualizations of stressful life events that occur within people's social networks (e.g., illnesses, divorces, or economic hardships), which may be associated with psychological distress among network members who do not directly experience such “network events” (Kessler and McLeod 1984). Couple-level minority stressors also include those emerging from relationship dynamics within couples that set in motion dyadic stress processes. As illustrated above, individual-level minority stressors may move from the

individual to the relational level through processes of stress proliferation involving stress discrepancies or contagion between partners.

Future studies should delve even more deeply into the relational context of minority stress as well as its significance as a potentially critical mechanism in unexamined stress processes that integrate both identity-based (e.g., sexual orientation) and role-based (e.g., partner) stressors simultaneously. In this study of minority stress affecting sexual minority persons, we argue that looking beyond individual-level stressors associated with sexual identity—and additionally examining relational stressors associated with sexual identity—can lead to deeper understandings of sexual minority health and relationship well-being as well as persistent health disparities based on sexual orientation (IOM 2011).

In identifying two forms of stress proliferation in the context of minority stress (i.e., stress contagion and stress discrepancies), our focus was on the interaction of individual-level minority stressors. Future studies should focus on stress processes involving couple-level stress constructs, couple-level minority stressors, and couple-level stressors more generally experienced. For example, experiences of, and fears of, couple-level discrimination may have deleterious effects on relationship quality between partners and between partners and their children. Additionally, couple-level minority stressors are also likely to be exacerbated by an array of other stressors. Indeed, like all stress constructs, couple-level stressors are usefully seen as both dependent and independent variables operating within larger stress processes.

The concept of couple-level minority stress extends beyond the experiences of people in same-sex relationships. Indeed, studies of any relationship forms that are stigmatized or marginalized, such as interracial, interfaith, and age-discrepant couples, may adopt this construct in useful ways (Doyle and Molix 2014; LeBlanc et al. 2015; Lehmler and Agnew 2006), enriching existing understandings of intimate relationships and health. Moreover, although beyond the scope of the present analysis, socioeconomic status, age, and race-ethnicity—at the individual and couple levels—likely play important roles in shaping the stress experience in relational contexts. Indeed, couple-level minority stress is often related to multiple sources of stigma, and future research will benefit from intersectional perspectives (Cole 2009; Crenshaw 1991; Grollman 2012, 2014).

In addition, the present analysis offers a new window into the lived experiences of same-sex couples. Although the most frequently discussed new couple-level minority stress constructs map on to those experienced at the individual level (expectations of rejection, experiences of discrimination, concealment, and internalized stigma), they are inextricably tied to individuals' membership in a romantic relationship with someone of the same sex. Thus, clinical and counseling interventions focused on helping sexual minorities manage minority stress need to be expanded beyond individual patient treatment modalities to couple-level counseling and dyadic psychotherapies. Within these couple-level interventions, clinicians will also be able to assist couples in dealing with the additional unique couple-level minority stressors and dyadic minority stress processes that are also potentially impactful in the magnitude of change they can exert within couples' lives.

As these data also demonstrate, the social contexts of stress experience matter. The majority of couple-level minority stressors emerge within familial contexts. This is important to note because as couples seek to build resources to navigate and cope with minority stress, those resources (e.g., social support, counseling) must be sensitive to an additional relational linkage: the connections between couples and each partner's family of origin. Additionally, as laws change and structural stigma may decline (Hatzenbuehler 2014), familial sources of minority stress will likely endure. Thus, it is important not to lose sight of family as a more proximal and potentially harder-to-circumvent barrier (Frost and LeBlanc 2014) to equal participation in society (e.g., familial devaluation of same-sex relationship partners and parenting) than structural inequality (e.g., laws and policies). Additionally, the understanding of the social contexts that give way to couple-level minority stress directs us to better stress measurement by pointing to the need for multidimensional scales that assess the contextual diversity of stress experience.

The present findings highlight couple-level minority stress as an additional domain of social stress, and we focus here on how such stressors are uniquely experienced, individually and jointly, by members of same-sex couples. In particular, this research highlights eventful and chronic stressors that are thought to play a role in the stress–health association. Traditionally, relationships are thought to play a stress-buffering role, in that (good-quality) relationships can reduce the negative impact of stress on health by providing support and the psychological benefits of intimacy (Cohen 2004; Umberson and Montez 2010). These findings stem from lines of research that have not traditionally addressed same-sex partnerships. Building on the present study, which demonstrates how stigmatized relationships are associated with unique stress experiences, future research examining a greater diversity of relationship forms can further elucidate extant understandings of the complex associations between relational experiences and health.

Such research can draw from the present qualitative findings and underlying couple-level minority stress model in quantitative research designs involving dyadic and longitudinal components. Our next step is to develop quantitative measures of these couple-level minority stress constructs. Such measures, included alongside existing individual-level minority stress measures, promise to help us better explain health disparities between sexual minority and heterosexual populations. Additionally, we hope that the present research will inspire future studies that aim to broaden the minority stress universe even further by identifying previously unexamined stress domains affecting individuals and couples (Meyer et al. 2011).

Limitations

Conclusions based on the present analyses must be interpreted in light of the study's limitations. Primarily, although we offer an analysis of both the qualitative nature and frequency distribution of key components of couple-level minority stress, our purposive sample prohibits generalizing frequencies to the broader population of same-sex couples in the United States. The fact that the study was done prior to the legalization of same-sex marriage at the federal level further limits the applicability of the findings to the current legal climate. Additionally, even though Atlanta and San Francisco provided diverse and

distinct contexts for this research, our sample does not reflect experiences of same-sex couples living in rural environments, which are likely less accepting.

Moreover, most interviewing and coding was conducted by researchers who are sexual minorities and members of same-sex couples. We attempted to address concerns related to “insider/outsider” status via the use of a standardized protocol, extensive interviewer training on sensitivity, role-playing activities, and engagement in reflexive exercises in weekly project meetings (e.g., to build empathy and perspective-taking; Gair 2012). Finally, the interview was by design focused on minority stress resulting from being in a same-sex couple, and these data did not support in-depth analysis of couple-level minority stressors primarily emanating from other sources.

CONCLUSION

The current study is the first attempt to investigate the nature of couple-level minority stress experienced by same-sex couples. It extends existing minority stress theory by highlighting the relational context of minority stress. Moreover, it extends stress scholarship more generally by simultaneously considering both identity-based (sexual minority) and role-based (partner) stress domains, providing evidence to support a new stress framework for identifying stress processes that are potentially detrimental to relational well-being and individual health, particularly among minority populations (LeBlanc et al. 2015). The unique couple-level minority stressors we identified in some ways correspond to conceptual categories of minority stress at the individual level but also point to previously-unaccounted-for forms of minority stress in the lives of same-sex couples. Our findings indicate that same-sex couples perceive structural stigma and experience differential legal and policy treatment as stressful. However, they also clearly illustrate that the majority of the couple-level stressors experienced by same-sex couples occur in social/interpersonal and familial settings. This knowledge is essential for designing future research and effective interventions aimed at understanding and addressing the numerous ways in which minority stress impacts the health and well-being of people in same-sex relationships.

Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

FUNDING

The authors disclosed receipt of the following financial support for the research, authorship, and/or publication of this article: This work was supported by National Institutes of Health Grant 1R01HD070357 (Allen J. LeBlanc, Principal Investigator).

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Table 1.

Couple-level Minority Stress Categories by Couple Gender ($N = 120$).

Couple-level Minority Stressors	Female Couples		Male Couples		Total	
	n	%	n	%	n	%
Fears of rejection, devaluation, and discrimination	44	73.3	46	76.7	90	75.0
	Example: "Picking out venues and working with caterers and things like that—officiants, and things—you know, having—feeling the need to ask them is your group comfortable with working with a lesbian couple or same-sex couple. You know, are there going to be any issues, you know, with that." [ATL, 29/31, Latino/white] [Context: Service provision]		Example: "You don't know like what—what is the moment that someone is capable of doing something like that looks and says, 'Hmm, I thing those guys are gay. Let me go kick their ass.'" [ATL, 32/4, white] [Context: Out in public]			
Experiences of rejection, devaluation, and discrimination	46	76.7	38	63.3	84	70.0
	Example: "Yeah, I mean, it was—well, it just, like, wasn't really acknowledged that we were a couple. So, in the same sort of way that your parents have—it's been, like, the ignore—the ignore, don't talk about it tactic." [ATL, 25/29, white] [Context: Familial and social settings]		Example: "And then I had a picture of the two of us on my desk and she kind of noticed and next thing I knew her kid was being pulled out of my class." [SF, 40/47, white/Filipino] [Context: Workplace]			
Consequences of unequal legal recognition of same-sex relationships	37	61.7	38	63.3	75	62.5
	Example: "If anything, like, can highlight the separate-but-equal status of a registered domestic partnership, it's going to a notary in a UPS store, versus going to City Hall to get an actual marriage license." [SF, 34/31, white] [Context: Social institutions]		Example: "I'm documented and he's not; how does that affect us as a couple and it really does ... for five years we've lived with the possibility—and we've seen it happen to his friends and our friends, uh, something could happen and he could end up on his way to Brazil." 1 15 [ATL, 67/38, white/Latino] [Context: social institutions]			
Hiding same-sex relationship	36	60.0	24	40.0	60	50.0
	Example: "Which is why we got a two-bedroom apartment in Berkeley on purpose to get a two-bedroom. Because I knew that that was the only way I was ever gonna get to live with this woman is if I could make it look like we were just roommates to her mom." [SF, 37/35, white/Latino] [Context: Familial!]		Example: "But part of the reason why you didn't come is you—you—my mom asked that you not come. Well, she asked that I take off my—my marriage ring. 'Cause she didn't want to have to answer questions as to 'when did Josh get married and why didn't you tell us?'" rSF, 45/45, white! [Context: Familial!]			
Internalized stigma	26	43.3	31	51.7	57	47.5
	Example: "So there's the struggle of, how do you still serve your God and still believe in this relationship? So I would like to see us find peace with our relationship with God, and it not be a conflict." [ATL, 43/36, black] [Context: Social institutions]		Example: "And we don't want to make anyone's life harder because we're a couple." [ATL, 51/40, Asian/white] [Context: Familial]			
Coming out as a same-sex couple	26	43.3	26	43.3	52	43.3
	Example: "I was not going to come out to my family until, like, there was someone that I knew was going to be in my life forever." [ATL, 35/31, white] [Context: Familial]		Example: "Every time that you have to get on the phone to talk to a caterer or florist, or to walk into a shop and talk about things. It's about coming out all over again. And going through that process." [SF, 29/34, white] [Context: Service provision]			
Seeking safety and community	28	46.7	18	30.0	46	38.3
	Example: "We get scared when we think about having to move out of San Francisco" [SF, 34/31, white/Latino] [Context: Neighborhood]		Example: "There are a lot of countries we'd like to visit, but don't because of how they treat gay people." [ATL, 47/29, black/Asian and black] [Context: Out in public, social institutions]			
Not being perceived as a couple	21	35.0	15	25.0	36	30.0
	Example: "And even at work, I mean, when people see the pictures on my desk, in my office. And it's Doris. Sometimes people say, 'Well is that your sister?'" [ATL, 37/46, black] [Context: Workplace]		Example: "I honestly don't even know if our neighbors know we're gay or that we're just of—he walks me around like he's my—sometime I think they think he's my"			

Couple-level Minority Stressors	Female Couples		Male Couples		Total		
	n	%	Example	n	%	n	
Having children or not	20	33.3	“When we were going to the insemination process, it was—it really felt like—and I know there are infertile couples. Straight couples. Heterosexual couples. But, because we are a—a lesbian couple, it—you know, it affects how you would go through starting a family! And so—then, I think—especially, because of what insurance companies will and won’t cover, based on whether you’re a straight couple or not.” [ATL, 35/31, white] [Context: Social institutions]	11	18.3	“Right, uh, you know adoption is daunting to begin with no matter who you are but then you add in that you’re a gay couple and you’re in a state that doesn’t, you know, it—makes it a lot harder.” [ATL, 45, white] [Context: Social institutions]	31
	12	20.0	“Lynn’s daughter wouldn’t have been considered my stepchild. I think in—in changing jobs, um, that’s also one of the biggies that we would look at. Do they have same-sex coverage, especially insurance for you know, my daughter.” [ATL, 45/43, white]	13	21.7	“We had to prove that we were a legitimate couple. We had to get a lot of stuff notarized. And—we had to do a lot of things that... a male-female couple would never be asked to do. You know, we had to open up savings accounts, and put up all this documentation that we were actually a couple.” [ATL, 39/27, white] [Context: Social institutions]	25
Limitations to participation in family	7	11.7	“They called on New Year’s Day just to tell me not—like, “If you were thinking of stopping and staying with us on the way to Florida, you can’t if ‘J’ is with you,” is basically why they called. Like, four months in advance.” [ATL, 39/29, white] [Context: Familial]	14	23.3	“Joseph then went to Canada for Christmas and then you could hear in our conversation the stress over me not feeling like I was invited and him seeing it as, well, we just both kind of agreed that it wasn’t the best and you were going to do this.” [SF, 35/37, white] [Context: Familial]	21
Managing stereotypes about what same-sex couples are like	9	15.0	“Like a lot of people with like lesbian like couples and stuff, they’re like, “Okay. Well, which one’s the boy, and which one’s the girl?”” [ATL, 25/23, black] [Context: Social settings]	10	16.7	“People in society still think about gay couples as, especially gay male couples, as more fly-by-night, more about sex, more about one-night stands and stuff and less about, you know, monogamous long-term kinds of relationships.” [SF, 44/53, white] [Context: Social settings]	19
Feeling public scrutiny	13	21.7	“Just in walking down the street. Like, people like literally—heads turning. Stopping to look. You know? They stop dead in their tracks and like stare at you in your face.” [SF, 29/24, black/white] [Context: Out in public]	5	8.3	“All these very family-oriented restaurants, you know, chain-type like—like Applebee’s, you know, that kind of thing. Um, there would be times when we would kind of walk in together, and you could feel families at tables staring at you, and, ‘What are those two doing together?’” [SF, 60/51, white] [Context: Out in public]	18
Terminology regarding relationships	10	16.7	“I mean, we’re engaged and we are—we have a, you know, a wedding planned. But we just refer to each other as girlfriends. That’s, that’s it. Like, we don’t say ‘fiancée.’ We don’t say ‘partner.’ And so that—it just feels funny the way it kind of like comes about where it’s like if you said ‘fiancée,’ fiancée feels so straight.” [SF, 32/28, white] [Context: social settings]	7	11.7	“I feel like <i>boyfriend</i> , for gay relationships, are—is immature or something. Because, I think, guys get a bad rap of being so promiscuous, and, you know, I’ll say when I introduced Theobald to gay people, I say ‘my boyfriend.’ No problem. It’s to straight people that I’m like—that I don’t know what to call him. ‘Cause I want to give you more credit than—just my boyfriend.” [ATL, 26/28, white] [Context: Social settings]	17
Exclusion from social support	9	15.0	“I feel like in every step, and even going through difficult times when we’re not getting along, if we were a regular, old straight married couple I feel like we would have support, there’d be more people I could call when we’re	3	5.0	I think that’s one of the saddest things about gays not being able to get legally married in a lot of America is that you miss out on that whole community support, and	12
							10.0

Couple-level Minority Stressors	Female Couples			Male Couples			Total	
	n	%	Example	n	%	Example	n	%
Lack of role models	6	10.0	going through a rough time. Or you know what I mean, just support, people pushing for you.” [SF, 44/43, white/Latina]			the expectation of longevity.” [SF, 35/45, Latino/white] [Context: Social institutions]		
			“I mean, I guess I didn’t know exactly what a same-sex relationship was like, but, I’ve had a lot of friends in relationships and I’ve talked to all of them about a lot of different things. I know it can be healthy, and I also know a lot of crazy girls that date guys. And I was pretty sure you weren’t crazy.” [ATL, 33/27, white]	6	10.0	“There’s not a training manual on how to date. And there’s certainly not a training manual on men dating men. So—I mean, there were a lot of times when I was like, ‘Well, I don’t know how this is supposed to work. I don’t know what we’re supposed to do.’” [ATL, 39/27, white]	12	10.0
Negotiating gender roles	7	11.7	“We are talking about, um, name—our name change for our wedding and you know, I had asked her to take my name.... Not that she didn’t want to, it’s just—I don’t know.” 113 [ATL, 29/30, Latino/white]	3	5.0	“With today’s standards two men don’t have that. Who’s going to stay home and clean. Who’s going to do this. Who’s got that. So, we’ve got that to muddle through, too.” [SF, 34/45, Asian/white]	10	8.3

Note: Information in brackets reflects partners’ ages, race-ethnicity, and location (ATL = Atlanta metro area, SF = San Francisco Bay Area). Context codes are provided when relevant.