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Hispanic Parental Experiences of Learning a Child Identifies as a Sexual Minority

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Abstract

Sexual minority youth (SMY) who do not feel loved and supported by their families face greater challenges and often experience various health disparities. The coming-out process is often difficult for all SMY and their families. While there is limited research on the impact of sexual orientation disclosure on families, there is even less that focuses exclusively on Hispanic families. This qualitative study explores the impact on a sample of Hispanic parents of having a child come out as lesbian, gay, or bisexual. The results demonstrate that while coming out is often challenging for SMY and their families, these challenges may be exacerbated for Hispanics due to cultural factors that contribute to children living at home longer and negative reactions to being gay. Parental reactions, impacts of disclosure on the family, and the impact of cultural factors are discussed. This study helps illuminate how cultural factors influence the coming out experience of Hispanic parents. These findings are important for understanding the experiences of these families in order to provide culturally appropriate resources for families navigating the coming out process.

Keywords

Coming out; Hispanics; cultural factors

Self-disclosure of sexual orientation, or coming out, occurs within a historical and social context and is an important part of identity development (Greenfield, 2008; Institute of Medicine, 2011). Sexual minority youth (SMY) - individuals who are attracted to the same sex or both sexes, or who identify as lesbian, gay, or bisexual (LGB) (Centers for Disease Control, 2017) - decide to whom, when, and how they will self-disclose their sexual orientation (Greenfield, 2008). Prior to disclosing to parents, SMY may reveal sexual orientation to friends (D'Augelli & Hersherberger, 1993; D'Augelli & Patterson, 2001), likely because they may find it more difficult to disclose sexual orientation to their parents (Savin-Williams, Adelson, Oswald, & Medeiros, 2001; Willoughby, Malik, & Lindahl, 2006).

Sexual orientation disclosure towards parents is an important turning point in the coming out process and lives of SMY (Floyd & Bakeman, 2006).

Research indicates that the parental reaction to a child's sexual orientation disclosure may impact the parent-child relationship (Ben-Ari, 1995). More specifically, negative parental reactions may significantly strain parent-child relationships (Machado, 2015) and be linked to poor health outcomes for the child well into adulthood (Mitrani et al., 2017). For example, parental rejection of a child's sexual orientation has been associated with increased suicide attempts and ideation, increased rates of unprotected sex, increased substance use, and increased rates of depression (D'Augelli, 2002; D'Augelli, Hershberger, & Pilkington, 2001; Mitrani et al., 2017; Padilla, Crisp, & Rew, 2010; Ryan, Huebner, Diaz, & Sanchez, 2009). Conversely, parental acceptance of a child's sexual orientation has been associated with decreases in depression, suicide attempts, and substance use, and increases in self-esteem (D'Augelli et al., 2001; Floyd, Stein, Harter, Allison, & Nye, 1999; Maguen, Floyd, Bakeman, & Armistead, 2002; Mitrani et al., 2017; Resnick et al., 1997; Sheets & Mohr, 2009). These findings highlight the importance of family acceptance as it relates to health outcomes for SMY.

Much research on parental reactions to having a child come out has focused on the child's perspective (D'Augelli, 2006), but some research does exist that considers the parents' perspective. Existing literature suggests that when a child comes out, parents most commonly have negative reactions as opposed to positive reactions (D'Augelli, Grossman, & Starks, 2008; Aveline, 2006; Baptist & Allen, 2008). Negative reactions from parents often stem from worry for the child's well-being, with parents citing concerns about how society will perceive their child as a sexual minority, family perceptions of the child as a sexual minority, and the psychological and physical well-being of the child (Conley, 2011; Wakeley & Tuason, 2011). Additionally, parents often experience their own psychological hardship and internal struggle when their child comes out; it is common for parents to experience sadness, denial, regret, depression, and guilt/shame when a child comes out (Fields, 2001; Gafsky, 2014; Maslowe & Yarhouse, 2015; Phillips & Ancis, 2008; Saltzburg, 2004; Wakeley & Tuason, 2011). Existing literature indicates that, although an initial negative reaction is most common among parents, the trajectory often leads parents toward acceptance of their sexual minority child over time (Freedman, 2008; Gonzalez, Rostosky, Odom, & Riggle, 2013; Goodrich, 2009; Gafsky, 2014; Kuhar, 2007; Maslowe & Yarhouse, 2015; Phillips & Ancis, 2008; Saltzburg, 2004; Savin-Williams & Ream, 2003; Wakeley & Tuason, 2011). More recent research indicates that this trend of negative reactions may be changing while positive reactions and experiences among parents of LGB youth may be increasing (Gonzalez et al., 2013; Gafsky, 2014; Wakeley & Tuason, 2011). Additionally, existing research has gone beyond the initial reactions parents have when a child comes out (Gafsky, 2014; Phillips & Ancis, 2008; Saltzburg, 2004; Wakeley & Tuason, 2011). Gafsky (2014) stresses that becoming the parent of a sexual minority child is an "active and ongoing process" through which parents have to create new identities for themselves. Lastly, factors such as the media, social norms, misinformation, homophobia, parental education, age, religious affiliation, traditional marriage values, and traditional views of sex roles may influence how parents react to, experience, and process their child's

sexual orientation disclosure (Baiocco et al., 2015; Conley, 2011; Gonzalez et al., 2013; Maslowe & Yarhouse, 2015; Newman & Muzzonigro, 1993; Savin-Williams et al., 2001).

The coming out process for Hispanic sexual minority youth and their parents may be influenced by the cultural values endorsed within the family. Among Hispanics, existing literature indicates that young adult Hispanic men who have sex with men have higher levels of reported parental rejection, which is linked to increased depression, suicidal behavior, and HIV risk behavior compared to other ethnic groups (Ryan et al., 2009). Negative parental reactions in the context of Hispanic cultural factors may lead Hispanic sexual minorities to hide their true sexual identity (Diaz, 1998), or disclose later than non-Hispanic whites (Garofalo, Deleon, Osmer, Doll, & Harper, 2006; Grov, Bimbi, Nanin, & Parsons, 2006; Padilla et al., 2010). Hispanic sexual minorities may also experience higher numbers of negative family reactions regarding sexual orientation when compared to non-Hispanics (Ryan et al., 2009). The process of Hispanic parental reactions to having a child come out has not been qualitatively explored in the past.

Hispanic families hold more traditional gender roles/norms compared to non-Hispanic White families. For example, the concept of “traditional *machismo*” is often present in Hispanic families, in which a man is expected to be sexual, aggressive, hypermasculine, emotionally reserved, and domineering (Arciniega, Anderson, Tovar-Blank, & Tracey, 2008; Casas et al., 1994; Niemann, 2004; Quinones Mayo & Resnick, 1996). The related concepts of “*caballerismo*”, “positive *machismo*”, and “*nobleza*” refer to more positive traditional Hispanic male characteristics, such as pride, honor, bravery, nurturance, protection of and commitment to the family, dignity, wisdom, hard work, responsibility, spirituality, warmth, gender equality, emotional connectedness, and chivalry (Arciniega et al., 2008; Casas et al., 1994; Mirande, 1988; Parra-Cardona, Córdova, Holtrop, Villarruel, & Wieling, 2008; Ramos, 1979; Tello, 1998; Torres, Solberg, & Carlstrom, 2002). Often present among women in traditional Hispanic households is the concept of “*marianismo*,” an expectation for women to be spiritual leaders and self-sacrificing within in the family, submissive, dependent, chaste, and family-oriented (Castillo, Perez, Castillo, & Ghosheh, 2010; Gil & Vazquez, 2014; Niemann, 2004; Sanchez, Smith, & Adams, 2018; Upchurch, Aneshensel, Mudgal, & McNeely, 2001). Similar to *machismo*, *marianismo* has some aspects that are considered to be positive and others that are deemed negative. Specifically, positive aspects of *marianismo* include being family-oriented and spiritual leaders within the family, while negative aspects of *marianismo* include submissiveness in general and towards men and self-sacrificing within the family (Castillo et al., 2010; Gil & Vazquez, 2014; Niemann, 2004; Upchurch et al., 2001). Prior studies have shown that positive and negative aspects of *machismo* and *marianismo* can impact the health of Hispanics in both positive and negative ways (Nuñez et al., 2016; Piña-Watson, Castillo, Ojeda, & Rodriguez, 2013; Piña-Watson, Lorenzo-Blanco, Dornhecker, Martinez, & Nagoshi, 2016; Rodriguez, Castillo, & Gandara, 2013; Sanchez, Smith, & Adams, 2018).

Another concept related to *machismo* and *marianismo* is *familismo*, which refers to the bond, faithfulness, and mutuality within families, including members of the immediate and extended family, as well as non-direct family members who have a salient role within the life trajectory of a family (Guilamo-Ramos et al., 2007). *Familismo* is a complex Hispanic

cultural concept that refers to the idea that Hispanic families have a collective responsibility toward the development, unity, and success of their family members (Contreras, Mangelsdorf, Rhodes, Diener, & Brunson, 1999; Fuligni, Tseng, & Lam, 1999; Guilamo-Ramos et al., 2007; Sotomayor-Peterson, Figueredo, Christensen, & Taylor, 2012; Zeiders, Updegraff, Umana-Taylor, Mchale, & Padilla, 2016). Research on *familismo* and health outcomes is limited, and results have been mixed; some researchers have found that it has no effect on health outcomes among Hispanics (Sanchez et al., 2018; Valdivieso-Mora, Peet, Garnier-Villarreal, Salazar-Villanea, & Johnson, 2016), while another found that it positively impacted the health of Hispanics (Kapke, Grace, Gerdes, & Lawton, 2017).

As a result of traditional Hispanic gender roles, Hispanic sexual minorities may feel the need to conform to gender and sexuality norms promoted by society, which may negatively impact their health. One study found that Hispanic traditional gender role beliefs were associated with higher levels of rejection of their child's sexual orientation (Richter, 2015). Additionally, Hispanic families have also traditionally and historically identified with Christianity, which has often viewed homosexuality as morally corrupt (Rodriguez, 2010), and one study found that being Hispanic and religious were linked to lower acceptance of a SMY child (Ryan, Russell, Huebner, Diaz, & Sanchez, 2010). However, the intersection of specific traditional Hispanic gender concepts such as *marianismo*, *machismo*, and *familismo* with the coming out process has not been examined previously. Considering that prior research has shown that some aspects of these cultural constructs can positively impact health (Kapke et al., 2017; Piña-Watson, Lorenzo-Blanco, Dornhecker, Martinez, & Nagoshi, 2016; Rodriguez, Castillo, & Gandara, 2013), it is possible that these same positive aspects can facilitate the coming out process among Hispanic families. This gap in the literature speaks to the importance of more research needed examining Hispanic cultural factors and how they can facilitate or hinder the coming out process among Hispanic families.

Although existing literature has documented the increased frequency and greater impact of parental rejection among Hispanic sexual minorities (Alpaslan, Johnston, & Goliath, 2014; Ben-Ari, 1995; Borhek, 1988; Conley, 2011; Fields, 2001; Robinson, Walters, & Skeen, 1989; Saltzburg, 2004; Strommen, 1989), minimal research exists that examines the coming out experience from the perspective of Hispanic parents, as well as the impact a child's coming out process has on Hispanic parents. This makes it difficult to determine whether Hispanic parents have similar experiences to those documented in previous research.

This study aims to better understand the coming out experience from Hispanic parents' perspectives and to examine the role played by factors that may influence this experience. Specifically, we interviewed Hispanic parents living in South Florida about their experiences prior, during, and after learning about their child's sexual minority status, highlighting how some Hispanic cultural factors may influence the way Hispanic parents respond to learning the child's sexual minority status. Lastly, we discuss future research and clinical practice implications.

Methods

The study described in this manuscript employed qualitative methodology and a grounded theory approach to understand the experience of having a child come out as reported by Hispanic parents living in South Florida (Corbin & Strauss, 2015). Grounded theory is a type of qualitative research used to construct a theory that explains a process, action, or phenomena (Corbin & Strauss, 2015; Creswell, 2013). Grounded theory involves a process of collecting data, constructing categories based on the data, exploring connections among the categories, and developing a substantive theory that is grounded in the collected data (Charmaz, 2014; Glaser and Strauss, 1967). Due to the paucity of research examining Hispanic parental experiences of having a child disclose sexual orientation and the ability to gather rich, in-depth descriptions of these experiences, a grounded theory approach was utilized to understand the process Hispanic parents undergo while learning of a child's identification as a SMY.

Participants

Research participants were recruited through the principal investigator's (PI) contacts at a community organization that works with families dealing with gender identity and sexual orientation as well as through informational flyers posted on community bulletin boards in public places (e.g., coffee shops and supermarkets) located in largely Hispanic neighborhoods. In order to be eligible, participants had to self-identify as Hispanic and be the parent or guardian of a child who identified as gay, lesbian, or bisexual.

A total of 10 parents/guardians were interviewed for this study. The number of research participants was determined when saturation was achieved (Charmaz, 2014; Corbin & Strauss, 2015). Saturation occurs when theoretical categories established are saturated with data, no new data emerges with subsequent interviews, and data analysis produces no new themes (Charmaz, 2014; Glaser & Strauss, 1967). Participants were mostly female ($N=9$). Only one father participated in the study. Five participants spoke of their experience having a son come out, four participants had a daughter come out, and one participant had a younger male cousin who was in her care come out. Six participants were born in Cuba, two were born in the United States, one was born in Colombia, and one was born in Nicaragua. All 10 participants indicated that they were raised in the Roman Catholic faith. Age of the participants ranged from 38 to 73 ($M=58.67$, $SD=10.24$). The current age of their child ranged from 21 to 43 ($M=31.22$, $SD=7.75$), and their child's age at the time of disclosure ranged from 14 to 33 ($M=20.50$, $SD=5.66$).

Procedures

Upon learning of the study, participants contacted the PI by phone or email. Participants were screened for eligibility, and if they chose to proceed with the study, the interview was scheduled. The PI, who is bilingual, conducted all interviews in English or Spanish based on the parents' preferred language. Interviews took place at a location selected by the participant, which often included their home, their place of employment, the PI's office, or a local coffee shop. Participants were compensated \$50 for their participation.

Prior to conducting the interview, the PI presented the participants with a consent form in their preferred language (English or Spanish) and answered any questions participants had. Once consent was obtained, participants completed a short demographic form, and the audiotaped interview began. A semi-structured interview guide was used for the interview, allowing the flexibility to ask probing questions when needed. The interview guide was initially created in English, translated into Spanish, then back-translated to English and compared against the original version to ensure equivalence. The questions posed were open-ended, non-leading, and designed to encourage participants to share their experiences related to having a child come out. Interviews lasted between 30 and 60 minutes. All interviews were conducted by the PI.

Audiotapes of English interviews were transcribed verbatim by a member of the research team or by a professional transcription service. Spanish or bilingual interviews were translated and transcribed by a professional transcription service. All transcripts were verified by a member of the research team by listening to the audio files while reading along with the transcript. During this process they also ensured that any identifiable information such as names were removed from the transcripts. At the completion of this process, the audio files were destroyed.

Data Analysis

Data were analyzed using NVIVO 11 (NVIVO, 2015), a data management software program. Data analysis utilized constant comparison, and inductive and iterative process where collected data is compared within and between texts, highlighting similarities and differences among texts (Charmaz, 2014; Corbin & Strauss, 2015; Glaser & Strauss, 1967). In the initial phases of data analysis, descriptive, concrete codes were derived from line-by-line coding with similar codes being combined into more relevant codes. After establishing the initial codes, focused codes were created that subsumed first-level codes, or a first-level code was elevated to the level of a focused code (Charmaz, 2014). Finally, relationships were drawn among the second-level codes to develop themes. The PI trained all members of the research team. During the training, the list of codes was reviewed and described. Then, the PI demonstrated how to code the transcripts. Each transcript was coded by two independent raters. The first independent rater was either the PI, who is a doctorally prepared Hispanic, or a master's level-prepared Hispanic research assistant. The second was a trained African-American undergraduate research volunteer. Finally, a Hispanic PhD student, educated and trained in qualitative data analysis by taking multiple graduate-level qualitative research courses, compared the coding done by the PI or research assistant and the undergraduate research volunteer to rectify any coding discrepancies. The research team ensured the trustworthiness of the findings by verifying the transcripts, constantly comparing data to ensure that codes were used consistently, and sharing the analysis among members of the research team.

Results

Coming Out

Prior to a child coming out, 70% of parents indicated they knew their child was gay even at a young age. A 67-year-old father with a gay son said,

I had inklings from things that he did, things he didn't do, ways he reacted...things he may have reacted to in a different way than I thought or I reacted to as I was growing up as a child and watching other kids around them. Um so it was about ten that I first thought it.

The other 30% of participants indicated that it was a complete surprise when their child came out to them. A 58-year-old mother of a daughter who identifies as lesbian stated, "I didn't have a clue at all because she had boyfriends while she was growing up. It never occurred to me that she was gay."

The majority (80%) of the parents indicated that their child came out to them directly. One mother explained, "He invited me to lunch, which was a rarity, and uh, as we were sitting in the restaurant, I'm lifting the menu. He says to me, 'Mama, I am gay.'" For two parents, their child did not come out directly. One was outed by his school. His 59-year-old mother recalled, "They called me from school and told me that my son was kissing with a boy." Another parent initiated the conversation about her child's sexuality after discovering evidence of her child's same-sex attractions. This 52-year-old mother of lesbian daughter observed, "I know I saw a letter that she was writing to, apparently, the girl that she liked at that point in time. So that's when we discovered it."

Cultural Factors that Impact the Coming Out Experience for Hispanic Parents

The experiences of all but one of these families was framed by common cultural factors, including religion, *familismo*, gender roles, and *machismo* that were described as having an influence on their experiences. The most commonly cited factors included religion (80%), *Familismo* (80%), traditional gender roles (60%), and *Machismo* (50%). When speaking of the influence of religion, one 65-year-old mother with a son who self-identifies as "queer" stated,

Because if he's going to hell, I am the mother that allowed my son to go to hell. Then I am in a hell with him. The 'hell family' I used to call ourselves. You know, everybody here is doomed.

When speaking of the influence of *familismo*, one 67-year-old father explained, "So the family dynamics is very important. And the nucleus of the family needs to be very clear on what is going on. And then, you decide together what you want." *Machismo* (also referred to as being *machista*) was quite prevalent, with one 53-year-old mother of a gay son discussing how her husband was not accepting of their son's sexuality. She explained:

Well, my husband is very *machista*. He doesn't, you know... he said he would never agree to it, you know he'll never – I mean he does talk to his father and stuff like that, but you know, it's not the same.

Finally, parents spoke of the expectations they had for their kids that were related to gender roles. While this construct is not unique to Hispanic culture, traditional gender roles are quite prevalent among this population. One mother who did not disclose her age recalled,

I started to discover it because my daughter started dressing in a strange way. Strange in the sense that she... she was about 14 years old and didn't like to put on makeup... I used to buy her "girlie" things and she used to push them away.

Parental Reactions to a Child Coming Out

Upon initially learning of their child's sexual orientation, half of the parents reported experiencing negative reactions that included disappointment, fear, shock, sadness, disillusionment, and feeling hurt. For example, a 58-year-old mother described, "It felt like somebody kicked me in the stomach, but really hard. I couldn't catch my breath." Others, particularly those who already suspected their child might be gay, said they experienced relief. A 67-year-old father of a gay son recalled the following:

It was almost like if I was glad that finally uh cause I saw it as a way of him saying 'OK – I've had enough of this loneliness. I want to move on to what my life, what it should be.'

A common reaction experienced by all parents in the study was fear. These fears included fears of what others would think, of what it meant to be gay, or of the breakdown of hopes and/or dreams the parents held for their child. A 73-year-old mother with a gay son recalled thinking:

What are people going to say about me? What are people going to think about my family because I have to be perfect, my family has to be perfect. And having a gay son doesn't fall into that picture of perfection.

Another mother, age 59, expressed, "I was afraid that my son would suddenly – I have heard that they kill themselves, consume drugs; I was afraid." A 54-year-old mother with a gay daughter shared fears that "she will never have kids. I will never have grandkids... I will never be able to see her walk down the aisle. You know all of these expectations that a mother, especially your oldest daughter."

Despite having experienced a negative reaction initially, most parents in the study (80%) have reached a level of acceptance, ultimately leading to improved relationships between parent and child. Some parents also described putting their child before themselves (30%) and recognizing the importance of family support (20%). One mother who did not disclose her age and who has a gay son and a lesbian daughter explained:

I am not rich, but I am proud. I tell the whole world before they say, 'Your kids are gay,' I am proud of my children. I am very proud of them. And I tell them all every day, and every day I write them a little message, and I tell them, 'I love you. You know that your mom is here to listen to you when you feel sad, when you need to talk with someone. Respect everyone else, so that everyone respects you.'

Parents' Own Disclosure to Other Family Members

When speaking of disclosing their child's sexual identity to other family members, only 20% of parents described leaving the decision to disclose to other family members up to their child. Half of the parents chose not to disclose to their own parents or siblings, particularly when their family members lived in their country of origin. One mother stated:

All of our families are in Colombia. My husband's family, my family – nobody in our families knows. When I go to Colombia, they ask me. 'No, he's fine, he's studying, he's in college...' But I can't talk about that topic because I don't see how my family will react, how to talk about an issue so openly as I am talking to you.

However, other parents experienced a "coming out" process of their own when they disclosed to their parents, siblings, extended family, and friends about having a gay child. One 52-year-old mother spoke of how her own mother helped her accept her daughter, stating:

And of course my mom would talk to me a lot, and she would tell me, 'Listen, she is your daughter no matter what. She doesn't do drugs. She is a great kid. She gets great school grades, so what else do you want?'

Discussion

The purpose of this study was to examine the experience of Hispanic parents having a child come out. To our knowledge, this is one of the few studies to focus on parents of Hispanic ethnicity within this context. This study found both similarities and differences with existing literature examining the experience of having a child come out among non-Hispanic parents. These results have several public health implications relevant to Hispanic sexual minority populations.

In this study, Hispanic parents reported initially having a negative reaction to their child coming out, which was often followed by a period of strain in the parent-child relationship. This mirrors what was reported by Hispanic youth (Gattamorta & Quidley-Rodriguez, 2017). Parents often felt disillusioned when confronting their realization that the trajectory they had envisioned for their child was no longer possible. Parents cited fear for the well-being of their children, because of the potential use of drugs, risky sexual behaviors, and other negative beliefs they associated with being gay. Parents also cited fear of their child not being respected in society and being discriminated against or judged negatively. However, all parents in the sample eventually reached a level of acceptance for their children coming out as sexual minority individuals, leading to an improved parent-child relationship. Cultural factors common among Hispanics such as *familismo*, which underscores a strong connection to and support received from extended family, may help explain the process of acceptance of the LGB child. Our findings are consistent with research demonstrating that parents will become more accepting or more tolerant over time (Beals & Peplau, 2006; Conley, 2011; Fields, 2001; Freedman, 2008; Gonzalez et al., 2013; Goodrich, 2009; Gafsky, 2014; Kuhar, 2007; Maslowe & Yarhouse, 2015; Phillips & Ancis, 2008; Saltzburg, 2004; Savin-Williams & Ream, 2003; Wakeley & Tuason, 2011), and that acceptance is

often facilitated when parents maintain contact with their children, listen to them, and are exposed to other sexual minority individuals (Heatherington & Lavner, 2008). Interventions such as the Family Acceptance Project (FAP; Ryan, 2010) have been successful in increasing parental acceptance by regarding families' cultural values as strengths and by helping families understand how their specific behavior and communication patterns contribute either positively or negatively to their child's health. Our findings support the need for more research as well as the development or adaptation of interventions that aim to both facilitate the coming out process among Hispanics, and prevent poor health outcomes associated with negative parental reactions to having a child come out. It is worth repeating that in our sample, all parents eventually reached a level of acceptance with their children coming out, leading to an improved parent-child relationship.

While previous research has focused on the impact parents' reactions have on the child, this study revealed that having a child come out can result in consequences for parents. This finding is similar to prior literature, which has suggested that after learning of a child's sexual minority status, some parents may follow a process that parallels Kübler-Ross's (2011) five stages of grief - denial, anger, bargaining, depression, and acceptance (Savin-Williams & Dubé, 1998) - which are used to describe the stages experienced during the loss of a loved one (LaSala, 2000; Willoughby, Doty, & Malik, 2008). However, more recent research suggests that these stages of grief are only parents' initial experience when a child comes out, and that the acceptance phase is part of an ongoing process of learning and experiencing what it means to be the parent of a sexual minority child (Grafsky, 2014). Additionally, newer research suggests that parents may also have positive developmental growth experiences as a result of being the parent of a sexual minority child (Gonzalez et al., 2013; Grafsky, 2014; Wakeley & Tuason, 2011). It should be noted, however, that the extent of mental/emotional distress experienced by parents and the effect that it may have had on their child was not explored in this study.

Hispanic cultural factors may cause Hispanic parents to be affected in different ways compared to non-Hispanic parents. For example, *familismo* – the concept of centrality of family and family orientation – was a common theme in the results of this study. Having a child come out in Hispanic families may have a stronger impact on parents and other family members when compared to non-Hispanic families. On the other hand, several participants stressed the importance of family support and unconditional acceptance for the child's well-being, which suggests that *familismo* can facilitate the coming out process among Hispanic families. Further examination of how having a child come out impacts Hispanic families, and how to leverage *familismo* to facilitate the coming-out process is needed.

Based on the testimony from several mothers in this study, it was common for fathers to take longer to accept the child and be less accepting in general than mothers. The traditional *machismo* and *marianismo* ideals - that men should be dominant and the main provider, in other words, "the man," and women should be submissive "ladies" who focus on caring for the family - may have played a role in our sample. Having a gay son/daughter may not bode well for families who have a "traditional *machista/marianista*" mentality and may be less capable of understanding more complex gender roles. For example, a gay man may or may not be dominant or the main provider, and a lesbian woman may or may not be submissive,

be a stay-at-home mom, or even bear her own child. Having a traditional *machista/* *marianista* mentality may mean that a family holds stricter and more conservative views of gender roles for their children, which may hold true more so for Hispanic families than non-Hispanic families, since traditional *machismo/marianismo* roles are common themes in Hispanic culture. This conclusion aligns with prior literature that indicates that Hispanic families with traditional gender role beliefs were associated with higher levels of rejection towards a child's sexual orientation (Richter, 2015). As a result, families with higher levels of *machismo* and *marianismo* may be more likely to experience strained parent-child relationships when a child comes out, a longer period of time before parents/families accept the child, and more extreme consequences for the child as a result of sexual orientation disclosure (such as being forced out of the home). However, prior research has also shown that when the positive aspects of *machismo*, *marianismo*, and *familismo* are harnessed, individuals can experience positive outcomes (Kapke et al., 2017; Piña-Watson, Lorenzo-Blanco, Dornhecker, Martinez, & Nagoshi, 2016; Rodriguez, Castillo, & Gandara, 2013), which suggests that both parents and children can harness these positive aspects to facilitate the coming out process for both parties. Indeed, in our own study we identified that *familismo* may have facilitated the coming out process among Hispanic families, and *familismo* can be considered a sub-concept within and positive aspect of *marianismo* and *machismo*. These conflicting findings emphasize the need for more research examining Hispanic cultural factors such as *machismo*, *marianismo*, and *familismo*, and their role in the coming out process among Hispanic families. Particularly, more research is needed to determine how Hispanic cultural factors can facilitate or hinder the coming out process among Hispanic families, and how Hispanic families can harness the positive aspects of *machismo*, *marianismo*, and *familismo* to improve this family process.

In some cases, religion played a larger role in the negative reaction of Hispanic parents. Our entire sample identified as Catholic, and one parent from a very traditional Catholic background cited conversion therapy, depression, and a suicide attempt as part of her child's coming out experience. Although it is not clear if the impact of religion on negative parental reactions toward sexual orientation disclosure is greater or more common among Hispanic families, it is known that individuals of Hispanic ethnicity often come from more traditionally Catholic backgrounds and that historically, in the Catholic faith, homosexuality has been historically viewed as morally corrupt (Rodriguez, 2010). This is consistent with prior research which has shown that being Hispanic and religious are linked to lower acceptance of SMY (Ryan, et al., 2010). However, existing research has also shown that religious affiliation among non-Hispanic families who had a child come out can also facilitate the acceptance process (Gonzalez et al., 2013). Therefore, it is also possible that Hispanic families can draw upon the strengths of their religion and church for coping and acceptance facilitation. More research examining the role of religion among Hispanic families in the coming out process is needed to determine how Hispanic families can use their religion to facilitate the coming out process.

Limitations

Several important limitations must be acknowledged. First, the sample size for this study was very small. However, to our knowledge, ours is the first study to focus exclusively on

Hispanic parents and their experiences of having a child come out. Therefore, the study adds valuable information to the literature. Moreover, given that the sample was mostly female, potential gender differences could not be explored and should be considered in future studies. All of the families interviewed ultimately accepted their child and, as a result, do not reflect the views of parents who continue to struggle with acceptance and/or reject their child. Considering that existing literature indicates that negative parental reactions to having a child come out as a sexual minority have been linked to poor health outcomes (D'Augelli, 2002; D'Augelli, Hershberger, & Pilkington, 2001; Padilla, Crisp, & Rew, 2010; Ryan, et al., 2009), including depression among Hispanics (Mitrani et al., 2017), it is important to continue to study Hispanic parent/child relationships and the coming out process in less ideal situations. Additionally, recent literature indicates that even decades after disclosure, negative parental feelings toward a Hispanic child's sexual orientation may reemerge or persist (Mitrani et al., 2017), which stresses the need to examine these feelings and their effects on the parents and children across time. Lastly, this study did not elaborate on the process by which Hispanic parents reach acceptance of their child's sexual orientation. Future research can expand on the acceptance process in order to help inform interventions for this population.

Conclusion

While the process of having a child come out has elements that may be experienced universally, negative aspects of cultural factors may result in greater challenges for Hispanic families, while positive aspects of these cultural factors may help reduce challenges for Hispanic families. Also of importance is the fact that while resources exist to help sexual minority youth and adults in the community, there is very little support for parents. Even fewer culturally competent resources are tailored to the needs of Hispanic families. Future research is needed to determine how both negative and positive aspects of cultural factors hinder or facilitate the coming out process, and how any factors found to facilitate the process can be harnessed to lead Hispanic families towards a path of healthy familial, parental, and child development.

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Appendix A. Interview Guide

1. When did you first know your (child/sibling) was (insert orientation label selected on demographic form)?
2. Tell me about that experience.
3. How would you describe your reaction?
4. Did that experience change your relationship with _____?

5. How has your relationship changed since then? How would you describe your relationship with _____ now?
6. Looking back on this process, is there anything you wish you could change?
7. What was the most difficult part of this for you? And how did you deal with that?
8. Do you think your experiences are different for you as a Hispanic, than for families that are not Hispanic?
9. Now I want you to think about other families that are going through this process. What advice would you have for them? What can someone like me who is trying to help families do to help?
10. Is there anything else that we haven't talked about that you think is important for me to know?

References

- Alpaslan A, Johnston T, & Goliath V (2014). Parents' experiences regarding the coming-out process of a gay or lesbian child. *Social Work/Maatskaplike Werk*, 45(1).
- Arciniega GM, Anderson TC, Tovar-Blank ZG, & Tracey TJ (2008). Toward a fuller conception of machismo: Development of a traditional machismo and caballerismo scale. *Journal of Counseling Psychology*, 55(1), 19. doi: 10.1002/j.2161-1912.2013.00024.x
- Aveline D (2006). "Did I have blinders on or what?" Retrospective sense-making by parents of gay sons recalling their sons' earlier years. *Journal of family issues*, 27(6), 777–802. doi: 10.1177/0192513x05285613
- Baiocco R, Fontanesi L, Santamaria F, Ioverno S, Marasco B, Baumgartner E, ... Laghi F (2015). Negative parental responses to coming out and family functioning in a sample of lesbian and gay young adults. *Journal of Child & Family Studies*, 24(5), 1490–1500. doi:10.1007/s10826-014-9954-z
- Baptist JA, & Allen KR (2008). A family's coming out process: Systemic change and multiple realities. *Contemporary Family Therapy*, 30(2), 92–110. doi:10.1007/s10591-008-9057-3
- Beals KP, & Peplau LA (2006). Disclosure patterns within social networks of gay men and lesbians. *Journal of Homosexuality*, 51(2), 101–120. doi:10.1300/j082v51n02_06 [PubMed: 16901869]
- Ben-Ari A (1995). The discovery that an offspring is gay: Parents', gay men's, and lesbians' perspectives. *Journal of Homosexuality*, 30(1), 89. doi: https://10.1300/j082v30n01_05 [PubMed: 8907600]
- Borhek MV (1988). Helping gay and lesbian adolescents and their families: A mother's perspective. *Journal of Adolescent Health Care*, 9(2), 123–128. [PubMed: 3360666]
- Casas JM, & et al. (1994). Hispanic masculinity: myth or psychological schema meriting clinical consideration. *Hispanic Journal of Behavioral Sciences*, 16(3), 315–331. doi: 10.4135/9781483326801.n15
- Castillo LG, Perez FV, Castillo R, & Ghosheh MR (2010). Construction and initial validation of the Marianismo Beliefs Scale. *Counselling Psychology Quarterly*, 23(2), 163–175. doi: 10.1080/09515071003776036
- Centers for Disease Control. (2017). Health risks among sexual minority youth Retrieved from: <https://www.cdc.gov/healthyyouth/disparities/smy.htm>
- Charmaz K (2014). *Constructing grounded theory* (2nd ed.). Thousand Oaks, CA: Sage Publications.
- Conley CL (2011). Learning about a child's gay or lesbian sexual orientation: Parental concerns about societal rejection, loss of loved ones, and child well being. *Journal of Homosexuality*, 58(8), 1022–1040. doi:10.1080/00918369.2011.598409 [PubMed: 21902490]

- Contreras JM, Mangelsdorf SC, Rhodes JE, Diener ML, & Brunson L (1999). Parent-child interaction among Latina adolescent mothers: The role of family and social support. *Journal of Research on Adolescence*, 9(4), 417–439. doi: 10.1207/s15327795jra0904_3
- Corbin J, & Strauss A (2015). *Basics of qualitative research: Techniques and procedures for developing grounded theory* (4th ed.). Los Angeles, CA: Sage Publications.th
- Creswell JW (2013). *Qualitative inquiry and research design: Choosing among five approaches* (3rd ed.). Los Angeles, CA: Sage Publications.
- D’Augelli AR (2002). Mental health problems among lesbian, gay, and bisexual youths ages 14 to 21. *Clinical Child Psychology and Psychiatry*, 7(3), 433–456. doi:10.1177/1359104502007003039
- D’Augelli A (2006). *Developmental and Contextual Factors and Mental Health among Lesbian, Gay, and Bisexual Youths* (pp. 37–53). Washington, DC: American Psychological Association.
- D’Augelli AR, Grossman AH, & Starks MT (2008). Families of gay, lesbian, and bisexual youth: What do parents and siblings know and how do they react? *Journal of GLBT Family Studies*, 4(1), 95–115. doi:10.1080/15504280802084506
- D’Augelli AR, & Hershberger SL (1993). Lesbian, gay, and bisexual youth in community settings: Personal challenges and mental health problems. *American Journal of Community Psychology*, 21(4), 421–448. doi:10.1007/BF00942151 [PubMed: 8192119]
- D’Augelli AR, Hershberger SL, & Pilkington NW (2001). Suicidality patterns and sexual orientation-related factors among lesbian, gay, and bisexual youths. *Suicide and Life-Threatening Behavior*, 31(3), 250–264. doi:10.1521/suli.31.3.250.24246 [PubMed: 11577911]
- D’Augelli AR, & Patterson CJ (2001). *Lesbian, gay, and bisexual identities and youth: Psychological perspectives* New York, NY, US: Oxford University Press.
- Diaz RM (1998). *Latino gay men and HIV: Culture, sexuality, and risk behavior* New York, NY: Routledge
- Fields J (2001). Normal queers: straight parents respond to their children’s “coming out”. *Symbolic Interaction*, 24(2), 165–187. doi: 10.1525/si.2001.24.2.165
- Floyd F, & Bakeman J (2006). Coming-out across the life course: Implications of age and historical context. *Archives of Sexual Behavior*, 35(3), 287–296. doi: 10.1007/s10508-006-9022-x [PubMed: 16804747]
- Floyd FJ, Stein TS, Harter KSM, Allison A, & Nye CL (1999). Gay, lesbian, and bisexual youths: Separation-individuation, parental attitudes, identity consolidation, and well-being. *Journal of Youth and Adolescence*, 28(6), 719–739. doi:10.1023/A1021691601737
- Freedman L (2008). Accepting the unacceptable: Religious parents and adult gay and lesbian children. *Families in Society: The Journal of Contemporary Social Services*, 89(2), 237–244. doi: 10.1606/1044-3894.3739
- Fulgini AJ, Tseng V, & Lam M (1999). Attitudes toward family obligations among American adolescents with Asian, Latin American, and European backgrounds. *Child Development*, 70(4), 1030–1044. doi:10.1111/1467-8624.00075
- Garofalo R, Deleon J, Osmer E, Doll M, & Harper GW (2006). Overlooked, misunderstood and at-risk: Exploring the lives and HIV risk of ethnic minority male-to-female transgender youth. *Journal of Adolescent Health*, 38(3), 230–236. doi:10.1016/j.jadohealth.2005.03.023 [PubMed: 16488820]
- Gattamorta K, & Quidley-Rodriguez N (2017). Coming out experiences of Hispanic sexual minority young adults in South Florida. *Journal of Homosexuality*, 65(6), 741–765. doi: 10.1080/00918369.2017.1364111
- Gil RM, & Vazquez CI (2014). *The Maria paradox: How Latinas can merge old world traditions with new world self-esteem* New York, NY: Open Road Media.
- Glaser B, & Strauss AL (1967). *The discovery of grounded theory: Strategies for qualitative research* Hawthorne, NY: Aldine De Gruyter.
- Gonzalez KA, Rostosky SS, Odom RD, & Riggle ED (2013). The positive aspects of being the parent of an LGBTQ child. *Family Process*, 52(2), 325–337. doi:10.1111/famp.12009 [PubMed: 23763690]

- Goodrich KM (2009). Mom and dad come out: The process of identifying as a heterosexual parent with a lesbian, gay, or bisexual child. *Journal of LGBT Issues in Counseling*, 3(1), 37–61. doi: 10.1080/15538600902754478
- Grafsky EL (2014). Becoming the parent of a GLB son or daughter. *Journal of GLBT Family Studies*, 10(1–2), 36–57. doi:10.1080/1550428x.2014.857240 [PubMed: 25685111]
- Greenfield J (2008). Coming out: The process of forming a positive identity. *Fenway Guide to Lesbian, Gay, Bisexual and Transgender Health*, 45–74.
- Grov C, Bimbi DS, Nanin JE, & Parsons JT (2006). Race, ethnicity, gender, and generational factors associated with the coming-out process among lesbian, and bisexual individuals. *Journal of Sex Research*, 43(2), 115–121. doi:10.1080/00224490609552306 [PubMed: 16817058]
- Guilamo-Ramos V, Dittus P, Jaccard J, Johansson M, Bouris A, & Acosta N (2007). Parenting practices among Dominican and Puerto Rican mothers. *Social Work*, 52(1), 17–30. doi: 10.1093/sw/52.1.17 [PubMed: 17388080]
- Heatherington L, & Lavner JA (2008). Coming to terms with coming out: Review and recommendations for family systems-focused research. *Journal of Family Psychology: JFP: Journal of The Division of Family Psychology of The American Psychological Association (Division 43)*, 22(3), 329–343. doi:10.1037/0893-3200.22.3.329
- Institute of Medicine. (2011). *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding* Washington, DC: The National Academies Press
- Kapke TL, Grace MA, Gerdes AC, & Lawton KE (2017). Latino early adolescent mental health: Examining the impact of family functioning, familism, and global self-worth. *Journal of Latina/o Psychology*, 5(1), 27–44. doi:10.1037/lat0000057
- Kübler-Ross E (2011). *On Death and Dying*: New York, NY: Simon and Schuster.
- Kuhar R (2007). The family secret: Parents of homosexual sons and daughters. In Kuhar R & Takács J (Eds.), *Beyond the pink curtain. Everyday life of GLBT people in Eastern Europe*, 35–48 The Peace Institute 35–48.
- LaSala MC (2000). Lesbians, gay men, and their parents: Family therapy for the coming-out crisis. *Family Process*, 39(1), 67–81. doi:10.1111/j.1545-5300.2000.39108.x [PubMed: 10742932]
- Machado S (2015). The poetics of parent-son encounters following negative parental reactions to the disclosure of gay identity. *Journal of Humanistic Psychology*, 55(1), 30–52. doi: 10.1177/0022167814522911
- Maguen S, Floyd FJ, Bakeman R, & Armistead L (2002). Developmental milestones and disclosure of sexual orientation among gay, lesbian, and bisexual youths. *Journal of Applied Developmental Psychology*, 23(2), 219. doi:10.1016/s0193-3973(02)00105-3
- Maslowe KE, & Yarhouse MA (2015). Christian parental reactions when a LGB child comes out. *American Journal of Family Therapy*, 43(4), 352–363. doi:10.1080/01926187.2015.1051901
- Mirande A (1988). Chicano fathers: Traditional perceptions and current realities. In Bornstein P & Cowan CP (Eds.), *Fatherhood Today: Men's Changing Roles in the Family* (pp. 93–106). New York: Wiley.
- Mitrani VB, De Santis JP, McCabe BE, Deleon DA, Gattamorta KA, & Leblanc NM (2017). The impact of parental reaction to sexual orientation on depressive symptoms and sexual risk behavior among hispanic men who have sex with men. *Archives of Psychiatric Nursing* doi:10.1016/j.apnu.2017.04.004
- Newman BS, & Muzzonigro PG (1993). The effects of traditional family values on the coming out process of gay male adolescents. *Adolescence*, 28(109), 213–226. [PubMed: 8456611]
- Niemann YF (2004). Stereotypes of Chicanas and Chicanos: Impact on family functioning, individual expectations, goals, and behavior. *The Handbook of Chicana/o Psychology and Mental Health*, 61–82.
- Núñez A, González P, Talavera GA, Sanchez-Johnsen L, Roesch SC, Davis SM, & ... Gallo LC (2016). Machismo, marianismo, and negative cognitive-emotional factors: Findings from the Hispanic Community Health Study/Study of Latinos Sociocultural Ancillary Study. *Journal Of Latina/O Psychology*, 4(4), 202–217. doi:10.1037/lat0000050 [PubMed: 27840779]
- NVIVO Software (Version 11) [Computer Software] (2015). Melbourne, Australia: QSR International.

- Padilla YC, Crisp C, & Rew DL (2010). Parental acceptance and illegal drug use among gay, lesbian, and bisexual adolescents: Results from a national survey. *Social Work, 55*(3), 265–275. doi: 10.1093/sw/55.3.265 [PubMed: 20632661]
- Parra-Cardona JR, Córdova D, Holtrop K, Villarruel FA, & Wieling E (2008). Shared ancestry, evolving stories: Similar and contrasting life experiences described by foreign born and US born Latino parents. *Family Process, 47*(2), 157–172. doi:10.1111/j.1545-5300.2008.00246.x [PubMed: 18605119]
- Phillips MJ, & Ancis JR (2008). The process of identity development as the parent of a lesbian or gay male. *Journal of LGBT Issues in Counseling, 2*(2), 126–158.
- Piña-Watson B, Castillo LG, Ojeda L, & Rodriguez KM (2013). Parent conflict as a mediator between marianismo beliefs and depressive symptoms for Mexican American college women. *Journal of American College Health, 61*(8), 491–496. doi:10.1080/07448481.2013.838567 [PubMed: 24152027]
- Piña-Watson B, Lorenzo-Blanco EI, Dornhecker M, Martinez AJ, & Nagoshi JL (2016). Moving away from a cultural deficit to a holistic perspective: Traditional gender role values, academic attitudes, and educational goals for Mexican descent adolescents. *Journal of Counseling Psychology, 63*(3), 307. doi:10.1037/cou0000133 [PubMed: 26651213]
- Quinones Mayo Y, & Resnick RP (1996). The impact of machismo on Hispanic women. *Affilia, 11*(3), 257–277. doi:10.1177/088610999601100301
- Ramos R (1979). Discovering the production of Mexican American family structure. *De Colores Journal, 120*–134.
- Resnick MD, Bearman PS, Blum RW, Bauman KE, Harris KM, Jones J, ... Udry JR (1997). Protecting adolescents from harm. Findings from the National Longitudinal Study on Adolescent Health. *JAMA, 278*(10), 823–832. doi:10.1001/jama.1997.03550100049038 [PubMed: 9293990]
- Richter BE (2015). Sociocultural variables associated with parental rejection in parents of lesbian, gay, and bisexual youth: The impact on LGB youth adjustment. Open Access Theses Retrieved from: https://scholarlyrepository.miami.edu/oa_theses/577
- Robinson BE, Walters LH, & Skeen P (1989). Response of parents to learning that their child is homosexual and concern over AIDS: a national study. *Journal of Homosexuality, 18*(1–2), 59–80. doi:10.1300/j082v18n01_03 [PubMed: 2794499]
- Rodriguez EM (2010). At the intersection of church and gay: a review of the psychological research on gay and lesbian christians. *Journal of Homosexuality, 57*(1), 5–38. doi: 10.1080/00918360903445806 [PubMed: 20069492]
- Rodriguez KM, Castillo LG, & Gandara L (2013). The influence of marianismo, ganas, and academic motivation on Latina adolescents' academic achievement intentions. *Journal of Latina/o Psychology, 1*(4), 218. doi:10.1037/lat0000008
- Ryan C (2010). Engaging families to support lesbian, gay, bisexual, and transgender youth: The Family Acceptance Project. *Prevention Researcher, 17*(4), 11–13.
- Ryan C, Huebner D, Diaz RM, & Sanchez J (2009). Family rejection as a predictor of negative health outcomes in white and Latino lesbian, gay, and bisexual young adults. *Pediatrics, 123*(1), 346–352. doi:10.1542/peds.2007-3524 [PubMed: 19117902]
- Ryan C, Russell ST, Huebner D, Diaz R, & Sanchez J (2010). Family acceptance in adolescence and the health of LGBT young adults. *Journal of Child and Adolescent Psychiatric Nursing, 23*(4), 205–213. doi:10.1111/j.1744-6171.2010.00246.x [PubMed: 21073595]
- Saltzburg S (2004). Learning that an adolescent child is gay or lesbian: the parent experience. *Social Work, 49*(1), 109–118. doi:10.1093/sw/49.1.109 [PubMed: 14964523]
- Sanchez D, Smith LV, & Adams W (2018). The relationships among perceived discrimination, marianismo gender role attitudes, racial-ethnic socialization, coping styles, and mental health outcomes in Latina college students. *Journal of Latina/O Psychology, 6*(1), 1–15. doi:10.1037/lat0000077
- Savin-Williams RC, Adelson SL, Oswald RF, & Medeiros DM (2001). *Mom, Dad, I'm Gay: How Families Negotiate Coming Out* Washington, DC: American Psychological Association.
- Savin-Williams RC, & Dubé EM (1998). Parental reactions to their child's disclosure of a gay/lesbian identity. *Family Relations, 47*(1), 7–13. doi:10.2307/584845

- Savin-Williams RC, & Ream GL (2003). Sex variations in the disclosure to parents of same-sex attractions. *Journal of Family Psychology*, 17(3), 429. doi:10.1037/0893-3200.17.3.429 [PubMed: 14562466]
- Sheets RL Jr., & Mohr JJ (2009). Perceived social support from friends and family and psychosocial functioning in bisexual young adult college students. *Journal of Counseling Psychology*, 56(1), 152–163. doi:10.1037/0022-0167.56.1.152
- Sotomayor-Peterson M, tueredo AJ, Christensen DH, & Taylor AR (2012). Couples' cultural values, shared parenting, and family emotional climate within Mexican American families. *Family Process*, 51(2), 218–233. doi:10.1111/j.1545-5300.2012.01396.x [PubMed: 22690862]
- Strommen EF (1989). "You're a what?": Family member reactions to the disclosure of homosexuality. *Journal of Homosexuality*, 18(1–2), 37–58. doi:10.1300/J082v18n01_02 [PubMed: 2677133]
- Tello J (1998). El hombre noble buscando balance: The noble man searching for balance. *Family Violence and Men of Color: Healing the Wounded Male Spirit*, 31–52.
- Torres JB, Solberg VSH, & Carlstrom AH (2002). The myth of sameness among Latino men and their machismo. *American Journal of Orthopsychiatry*, 72(2), 163. doi:10.1037/0002-9432.72.2.163 [PubMed: 15792057]
- Upchurch DM, Aneshensel CS, Mudgal J, & McNeely CS (2001). Sociocultural contexts of time to first sex among Hispanic adolescents. *Journal of Marriage and Family*, 63(4), 1158–1169. doi: 10.1111/j.1741-3737.2001.01158.x
- Valdivieso-Mora E, Peet CL, Garnier-Villarreal M, Salazar-Villanea M, & Johnson DK (2016). A systematic review of the relationship between familism and mental health outcomes in Latino population. *Frontiers in Psychology*, 7. doi:10.3389/fpsyg.2016.01632
- Wakeley MD, & Tuason MTG (2011). Tasks in acceptance: Mothers of lesbian daughters. *Journal of Gay & Lesbian Social Services*, 23(1), 1–29. doi:10.1080/10538720.2010.541027
- Willoughby BLB, Doty ND, & Malik NM (2008). Parental reactions to their child's sexual orientation disclosure: A family stress perspective. *Parenting: Science and Practice*, 8(1), 70–91. doi: 10.1080/15295190701830680
- Willoughby BLB, Malik NM, & Lindahl KM (2006). Parental reactions to their sons' sexual orientation disclosures: The roles of family cohesion, adaptability, and parenting style. *Psychology of Men & Masculinity*, 7(1), 14–26. doi:10.1037/1524-9220.7.1.14
- Zeiders KH, Updegraff KA, Umana-Taylor AJ, Mchale SM, & Padilla J (2016). Familism values, family time, and Mexican-origin young adults' depressive symptoms. *Journal of Marriage & Family*, 78(1), 91–106. doi:10.04.87/jomf.12248 [PubMed: 26778855]

Table 1.

Most Frequently Occurring Codes by Category

Category	Codes	Number of parents
Coming Out	Always Knew	7
	No Idea	3
	Came Out Directly	8
	Parent Initiated	2
Parental Reactions	Reacting Negative	5
	Reacting Positive	3
	Fear	10
	Acceptance	8
Parent's Own Disclosure	Letting the child decide	2
	Not disclosing to family/friends	5
	Disclosing to family/friends	2
Cultural Factors	Religion	8
	<i>Familismo</i>	8
	Gender roles	6
	<i>Machismo</i>	5