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THE STRESS ASSOCIATED WITH THE COMING OUT PROCESS IN THE YOUNG
ADULT POPULATION

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The stress associated with the coming out process in the young adult population.

Abstract

The aim of this study is to show the characteristics of stress during a highly stressful coming-out, compared to other stress situations. Our sample comprises 400 lesbian, gay or bisexual young adults aged 18 – 26. The results show high stress during the coming-out. Indeed, almost all participants experienced at least one stressful coming out. According to the transactional model of stress, the primary appraisal (risk assessment/threat) and the secondary appraisals (resources) were examined. Two specificities are present during coming out: the fear to hurt their close ones and the limited resources to cope. These data show the necessity to better understand this specific stressor.

Key words: coming-out, stress, transactional model, LGB.

The stress associated with the coming out process in the young adult population.

Introduction

The present study was conducted with a group of 400 young adults, aged 18-26, self identified as lesbians, gays or bisexuals (LGB). The purpose is to understand the stress of LGB young adults during their coming out from the perspective of the “minority stress model” (MSM) (Meyer, 2003; Meyer, Dietrich, & Schwartz, 2008; Meyer & Northridge, 2007) and the “transactional stress model” (Coyne & Lazarus, 1980; Lazarus, 1966; Lazarus & Folkman, 1984).

The MSM distinguishes the excess stress to which persons from stigmatized social categories are exposed as a result of their social position. According to the MSM, members of stigmatized minority groups have specific stressors called “minority stress”, such as experiences of prejudice events, rejection or discrimination, which add to those of the general population (Meyer & Northridge, 2007; Meyer, 1995). Coming out is a “ minority stress ” (D’Augelli, 2002; Floyd & Stein, 2002). It is characterized by two phases: the revelation to oneself and the revelation to others (Riley, 2010). This research is focused on the second revelation and the term “coming-out” will be used in this article only in reference to this aspect of the coming-out process. Disclosure implies defining oneself as different, outside the norm (Bonet, Wells, & Parsons, 2007), but also facing other people and their possible judgment. The stress during this revelation is increased by the possibility of rejection (D’Augelli, 2002; Meyer, 2003). Hence, a great number of LGB adolescents and young adults do not reveal their sexual orientation, especially to their family, fearing that their relationship might be altered (D’Augelli, Grossman, Starks, & Sinclair, 2010). The developmental theory suggests that parental responses to their children’s coming out may partially predict their

66 social, emotional, and behavioral trajectories. Indeed, individuals' self-perceptions are based
67 on the ways they perceive their parents' perception of themselves (Rohner, 2004). When the
68 revelation leads to parental rejection it can induce instability, fear and anxiety (Julien, 2000).
69 Ryan et al. (2009) recruited a sample of 224 LGBs aged 21-25, and participants reporting
70 higher levels of parental rejection were six times more likely to report elevated levels of
71 depression and eight times more likely to have attempted suicide. In some studies, coming out
72 is positively associated with shame, guilt, and disrupted relationships (Pachankis, 2007) as
73 well as symptoms of depression and anxiety (Beals, Peplau, & Gable, 2009).

74 Although the coming-out process is generally considered a stressful event with
75 negative mental health outcomes, it can also sometimes be perceived as a positive experience
76 (Iwasaki & Ristock, 2007). When the family accept the sexual orientation of their loved one,
77 they encourage the construction of a positive sexual identity (Julien, 2000), increased well-
78 being (Floyd, Stein, Harter, Allison, & Nye, 1999), better self-esteem and less anxiety and
79 distress (Rosario, Hunter, Maguen, Gwadz, & Smith, 2001). Indeed, according to identity
80 development theory, coming out is an essential component of homosexual identity formation
81 (Cass, 1979). The Model of Cass is one of the foundational theories. It shows the complexity
82 of LG identity development ("identity confusion": a time of curiosity, confusion or anxiety of
83 this initial awareness, "identity comparison": the person begins to accept the possibility of
84 having a predominantly gay or lesbian orientation, "identity tolerance": acknowledgement of
85 being gay or lesbian, etc.). Many studies have shown the impact of stress during the coming
86 out but very few focused on the characteristics of this stressor.

87 To better understand the characteristics of the stress of coming out, we also looked
88 into the "transactional stress model" (Coyne & Lazarus, 1980; Lazarus, 1966; Lazarus &
89 Folkman, 1984), where stress is not seen as a stimulus or a response, but rather as a process :
90 "psychological stress is a particular relationship between the person and the environment that

is appraised by the person as taxing or exceeding his or her resources and endangering his or her well-being” (Lazarus and Folkman, 1984, p. 19). This relationship goes through two important phases: cognitive appraisals and coping. This research is focused on the cognitive appraisal. Cognitive appraisal is characterized by two cognitive mechanisms.

Primary appraisal refers to the stakes a person has in a certain encounter (Risk assessment/threat). Secondary appraisal refers to perceived resources for coping with demands (perceived control). Consequently, stress is present when the subject perceives the situation as a threat and does not feel capable of coping with it. Our method is based on this model.

Method

This research was conducted during a doctorate in France and under the supervision of a Full Professor.

Participants.

Participants were recruited in 2010 on two French dating sites for LGBs (Gaypax: www.gaypax.com, Gayvox: www.gayvox.fr). Private mails were sent to all profiles describing the theme, the framework and the procedure. To those interested we sent a confidential questionnaire after they had signed a consent form online. So, all data were collected online. We recorded these data on a secure university computer and removed them from our inboxes. Then, we contacted the individuals again (by mail or telephone) to answer any questions they may have.

Our sample is comprised of 400 young adults self-identified as LGB, and aged 18-26, because coming out to relatives often happens around that age (Savin-Williams & Ream, 2003). The mean age is 21.78 years ($SD = 2,6$), 145 women (36.25% of the sample) and 255

men (63.75% of the sample). We interviewed subjects from various French regions: 57.5% in town centers (n = 230), 27.5% in rural areas (n = 110), 11.8% in bourgeois suburbs (n = 47) and 3.2% in disadvantaged suburbs (n = 13).

The sample was sorted into three categories according to the instructions in the questionnaires. In the group “imposed CO” (n = 200) the participants responded in reference to their most stressful coming out (*“Consider your most stressful revelation of your sexual orientation and answer the following questions”*). Two-hundred other subjects answered the same questionnaire but in reference to the most stressful situation in their lives (*“Consider the most stressful situation in your life and answer the following questions”*). Among them, 52 subjects chose their coming out (group “free CO”) and 148 subjects chose other situations and were placed in the group “OS” (“Other Situations”). In the group “OS”, the situations varied a lot: family problems (n = 36, i.e. 24.3%), emotional problems (n = 27, i.e. 18.24%) or health problems (n = 17, i.e. 11.49%). Nine subjects mentioned their work (6.10%), seven their studies, seven their leisure activities, seven others events in relation with public transport. Several more situations were mentioned marginally (e.g. legal problems, rapes, etc).

Measures

Characteristics of the situation. Age at the moment of the stressful situation, level of preparation and initiative (0 = “ not at all ” and 4 = “ totally ”), outcome (1 = “not solution and the situation worsened” and 6 = “the situation is resolved as you like it”) and the persons involved in the situation. We also asked participants how stressful their coming out was.

Primary appraisal of stress (risk assessment/threat). According to the “transactional stress model”, people evaluate the possible threat of a situation, that is, if it can endanger their well-being. So, participants rated the importance of 13 general risks, on a scale

from 0 for “not at all” to 4 for “a lot” (eg. hurt a relative, lose your self-esteem, appear as a person without ethics, diminish your financial resources, etc.) (Graziani, 2001).

Secondary appraisal (resources). During the secondary appraisal, the subjects evaluate coping resources. The questionnaire includes four ways of coping: change the situation or act on it, accept the situation, seek information before acting, or stick to the plan and keep doing what you wanted to do (Folkman, 1984; Kessler, 1998).

The aim of this study is to show the specificities of the stress of coming-out, compared to other stress situations. Therefore, we compared the averages of three groups (ANOVA) with SPSS.

Results

Characteristics of the situation.

Almost all participants had experienced several stressful coming out events, two on average. Only 10 had never had even one stressful revelation (Table 1). On average, all participants experienced the chosen stressful situation at the age of 18. In groups “imposed CO” and “free CO”, participants were more prepared and they had been more at the initiative of the situation than in the group “OS”. Hence, coming out is a situation which is more prepared and provoked by LGBs than other stressful situations. In the three groups, the individuals mostly considered that the outcome of the situation was beneficial to them.

Table 1: Characteristics of the situation in the three groups (means, standard deviations and ANOVA).

Variable	$F_{(2)}$	Group “imposed CO” n = 200		Group “OS” n = 148		Group “free CO” n = 52	
		M	SD	M	SD	M	SD
Number of stressful COs	3.53*	2.36	1.71	2.23	1.69	2.96	1.79
Age at time of situation	1.79	18.19	2.58	18.80	3.65	18.52	2.47
Degree of preparation	13.03***	1.88	1.56	1.23	1.4	2.33	1.53
Degree of initiative	16.78***	2.22	1.63	1.30	1.61	2.44	1.61
Outcome of situation	2.79	4.62	1.76	4.49	1.73	5.13	1.34

Note. * $p < .05$ ** $p < .01$ *** $p < .001$

In the group “OS”, the individuals reported quite different situations (Table 2). A large proportion mentioned complex configurations (like partners/parents, parents/teachers or included people who were not on the list of propositions). For the two other groups, the responses were more homogeneous. For the majority, coming out to family was the most stressful, particularly to parents.

Table 2: Persons involved in the situation in the three groups (N values and percentages).

Persons involved	Group “imposed CO” n = 200		Group “OS” n = 148		Group “free CO” n = 52	
	N	%	N	%	N	%
Parents	131	65.50	31	20.90	26	50
Various family members	25	12.50	16	10.80	8	15.40
Partner	0	0	15	10.10	0	0
Friends	28	14	19	12.80	12	23
Family and friends	9	4.50	0	0	6	11.50
Work	3	1.50	8	5.40	0	0
Other	4	2	59	39.80	0	0

Primary appraisal of stress: risk assessment and threat.

The subjects evaluated the intensity of 13 risks. Scores vary between the three groups (Table 3). LGB young adults who match based on their coming-out (groups imposed “CO” and “free CO”) were especially afraid of their relatives reaction and the possibility of hurting them or of losing their love (risks b, d, g, k). Participants in the “OS” group feared more for their own well-being, their health and their future, professional or financial (risks c, e, f, h and m). Nevertheless, even if the nature of the threat was different, it’s intensity (total risk score) was similar in the three groups. These results show a specificity of the coming out situation, in which the subjects fear more for their relatives than for themselves

Table 3: *Primary appraisal of stress (risk assessment and threat) in the three groups (means, standard deviations and ANOVA).*

Risk	F (2)	Group “imposed CO” n = 200		Group “OS” n = 148		Group “free CO” n = 52	
		M	SD	M	SD	M	SD
a. Harm the physical well-being and health of your relatives	1.68	1.09	1.46	1.24	1.62	0.81	1.27
b. Hurt a relative	6.26**	2.76	1.39	2.32	1,71	3.10	1,32
c. Jeopardize your own physical health, your security or your well-being	17.92***	1.51	1.49	2.68	2,27	1.69	1.60
d. Disrupt the habits of a relative	13.72***	2.05	1.38	1.45	1.61	2.58	1.35
e. Not achieve a an important goal at work	21.82***	0.55	1.11	1.32	1.67	0.17	0.59
f. Diminish your financial resources	11.12***	0.48	1	0.91	1,42	0.13	0,49
g. Lose somebody’s affection who is important to you	29.90***	3.06	1.32	1.97	1.81	3.44	1.02
h. Lose your self esteem	6.92**	1.04	1.32	1.57	1.55	1	1.40
i. Appear as a careless person	0.82	0.86	1.17	1.03	1,48	0.85	1.27
j. Appear as person without ethics	0.27	1.03	1.35	1.01	1.46	1.17	1.40
k. Lose somebody’s approval or respect who is important to you	1.46***	2.81	1.41	1.90	1.67	2.94	1.32
l. Lose respect for someone else	2.76	1.19	1.50	0.94	1.44	1.48	1.69
m. Show yourself as incompetent	32.70***	0.47	1.02	1.46	1.62	0.25	0.71
Total	0.50	1.45	0.65	1.53	0.72	1.51	0.59

Note. * $p < .05$ ** $p < .01$ *** $p < .001$

Secondary appraisals (resources).

The participants also evaluated several ways of coping with the situation. In the three groups, they favoured acceptance (Table 4). On average, the subjects of the group “OS” have more resources to deal with the situation (such as change the situation or seek information before acting) than the other subjects. Therefore, the participants who announced their homosexuality seemed to have fewer resources to deal with their coming-out. In a very stressful coming out, LGBs believe they have little influence on the situation. This low sense of control is an important aspect in the comprehension of excessive coming out stress.

Table 4 : *Secondary appraisals (resources) in the three groups (means, standard deviations and ANOVA).*

Coping resources	<i>F</i> (2)	Group “imposed CO” n = 200		Group “OS” n = 148		Group “free CO” n = 52	
		<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
a. Change the situation or act on it	10.43***	0.89	1.21	1.51	1.48	0.88	1.15
b. Accept the situation	1.95	2.98	1.25	2.82	1.43	3.23	1.16
c. Seek information before acting	7.68***	1.25	1.33	1.72	1.56	0.94	1.27
d. Stick to the plan and keep doing what you wanted to do	4.73**	1.23	1.45	1.74	1.65	1.33	1.54
Total	10.90***	1.59	0.67	1.95	0.83	1.60	0.69

Discussion

Our results show the high stress of LGB young adults when revealing their sexual orientation. Indeed, almost all participants experienced at least one stressful coming out. However, the intensity of the stress varied among the individuals, 148 subjects (group “OS”) did not consider their coming-out as the most stressful event in their lives. For most of them, coming out to the family, especially to the parents, was the most stressful one. Our data show that the revelation takes place on average at the age of 18, as in the study by Willoughby, Malik and Lindahl (2006). But questioning about sexual orientation can begin as early as the

age of 10 (Carver, Egan, & Perry, 2004; Floyd, & Stein, 2002). Some individuals delay this revelation because they fear negative reactions from their parents. The results of Ryan et al. (2009) show that for 43% of LGB young adults (21-25), parents reacted negatively to their coming out. In comparison, only the parents of 11% of the participants accepted their homosexuality. In France, in the “SOS Homophobie” (a non profit organization) report published in 2015, 230 calls (10% of calls) concerned homophobic acts by relatives, mostly parents (59%). After the age of 18, the need to reveal their homosexuality and the opportunities of doing so appear to increase. As noted by Savin-Williams and Esterberg (2000), in the younger population, the concerns are all the more significant since they live with their parents or are financially dependent on them. But coming out is more of a lifelong process and although disclosure may have occurred with parents and friends, every encounter with a new person or a new environment requires a decision about whether or not to disclose one’s sexual orientation (Ragins, 2008).

Our results show that in a particularly stressful coming out, the LGB young adults mainly fear to hurt their loved ones, to harm them. Conversely, in the other stressful situations, they are more concerned about their welfare, their security, their future or their financial resources. These differences in primary appraisal demonstrate one of the specificities of coming out stress. The threat is associated with relatives rather than the individual. Indeed, the revelation involves exposure to a possible rejection. This fear of rejection is one of the most prevalent reasons for not coming out. Savin-Williams and Ream (2006) explored the disclosure process to parents in 17–25-year-old LGBs (N = 164) and showed that the predominant reason for not coming out to their mother is that it would damage the relationship. They expected negative reactions from their mothers, they feared disappointing them or losing their support.

Nevertheless, despite the fear of hurting their loved ones, a large majority of the participants estimated that their revelation had a positive outcome. Conversely, the literature

emphasizes the importance of negative reactions both in the USA (Savin-Williams & Ream, 2003; Willoughby, Malik, & Lindahl, 2006) and in France (Hefez, 2003; Beck, Firdion, Legleye, & Schiltz, 2010; SOS Homophobie, 2015). This discrepancy can be partially explained by our retrospective questionnaire. It could have led some participants to assess the result of their coming-out positively now, while it would have been considered unsatisfactory immediately after the event. These data suggest that the relatives' attitudes evolve positively over time, which has been shown in other studies (Charbonnier & Graziani, 2011; D'Augelli et al., 2010 ; Savin-Williams & Ream, 2006). The coming out of a child implies gradual adjustment of the parents, it implies that they break down their stereotypes about homosexuality and shake off guilt (Floyd et al., 1999). In addition to the significant threat of their coming out, participants believe they have few coping resources, which can affect their sense of control and thus the intensity of stress. Yet, our data show that LGB young adults are more likely to prepare and provoke their coming-out than other stressful situations. These results seem contradictory with weak perceived control. We are allowed to think they believe they cannot influence the reactions of their relatives rather than the situation itself.

Limitations.

This research has several limitations. The online recruitment is more likely to contain potential lies and errors than a questionnaire administered face-to-face. Yet, it is an efficient recruitment in a particular population difficult to access (Fenner et al., 2012) like LGBs. Some important French research organizations ("Institut national de la santé et de la recherche médicale" (INSERM) and "institut de veille sanitaire" (IVS)) have resorted to online recruiting (Pouchieu, Castetbon, Galan, Herberga, & Touvier, 2012) and questions about the veracity of the responses arise as soon as individuals are asked to give their opinion. Furthermore, our sample is composed only of people on dating sites which may be a lack of

diversity in our population. And, as previously mentioned, the retroactive character of our questionnaire requires the examination of the results with particular attention.

Conclusion

Our results show two specificities of coming out: the fear to hurt relatives, to harm them and the limited resources to cope with it. The combination of these two dimensions lead to high stress in LGB young adults during their coming out. So, information campaigns and discussion groups for adolescents or young adults (eg. information about sexual diversity, specific stressors and places where they can talk about them) could reduce their isolation and help them develop ways of handling their revelation. However, even if some disclosures are stressful, the stress level depends on the individuals. When we ask their most stressful situation in their lives three quarters of the participants evoke other situations. Finally, we focused on the vision of LGB young adults, but coming out also involves other people. Our data show that the coming-out to the family is frequently the most stressful of all. Consequently, an information campaign targeting families seems essential, since knowing about homosexuality enhances the adjustment process and parental acceptance (Ben-Ari, 1995).

References

- Beck, F., Firdion, J. M., Legleye, S., & Schiltz, M. A. (2010). *Les minorités sexuelles face au risque suicidaire. Acquis des sciences sociales et perspectives*. Saint Denis : INPES.
- Beals, K. P., Peplau, L. A., & Gable, S. L. (2009). Stigma management and well-being: The role of perceived social support, emotional processing, and suppression. *Personality and Social Psychology Bulletin*, 35, 867– 879.
- Ben-Ari, A. (1995). The discovery that an offspring is gay: Parents', gay men's, and lesbians' perspectives. *Journal of Homosexuality*, 30, 89-112.
- Bonet, L., Wells, B. E., & Parsons, J. T. (2007). A positive look at a difficult time: A strength based examination of coming out for lesbian and bisexual women. *Journal of LGBT Health Research*, 3, 7-14.
- Carver, P. R., Egan, S. K., & Perry, D. G. (2004). Children who question their heterosexuality. *Developmental Psychology*, 40(1), 43–53.
- Cass, V. C. (1979). Homosexual identity formation: A theoretical model. *Journal of Homosexuality*, 4(3), 219–235.
- Charbonnier, E., & Graziani, P. (2011). La perception de jeunes lesbiennes et gais concernant l'attitude de leurs parents à l'égard de leur homosexualité. *Revue canadienne de santé mentale communautaire*, 30, 31-46.
- Coyne, J. C., & Lazarus, R. S. (1980). Cognitive style, stress perception and coping. In I. L. Kutasha & L. B. Schlesinger (Eds.), *Hand book of stress and anxiety : Knowledge, theory and treatment* (pp. 144-158). San Francisco: Jossey Bass.
- D'Augelli, A. R., Grossman, A. H., Starks, M. T., & Sinclair, K. O. (2010). Factors associated with parents' knowledge of gay, lesbian, and bisexual youths' sexual orientation. *Journal of GLBT family studies*, 6(2), 178-198.

- 307 D'Augelli, A. R. (2002). Mental health problems among lesbian, gay, and bisexual youths
308 ages 14 to 21. *Clinical child psychology and psychiatry*, 7(3), 433-456
- 309 Fenner, Y., Garland, S. M., Moore, E. E., Jayasinghe, Y., Fletcher, A., Tabrizi, S. N., et al.
310 (2012). Web-Based recruiting for Health Research Using a Social Networking Site : An
311 Exploratory Study. *Journal of Medical Internet Research*, 14(1), e20.
- 312 Floyd, F. J., Stein, T. S., Harter, K. S. M., Allison, A., & Nye, C. L. (1999). Gay, lesbian, and
313 bisexual youths: separation-individuation, parental attitudes, identity consolidation, and
314 well-being. *Journal of youth and adolescence*, 28, 719-739.
- 315 Floyd, F. J., & Stein, T. S. (2002). Sexual orientation identity formation among gay, lesbian
316 and bisexual youths: Multiple patterns of milestone experiences. *Journal of Research on*
317 *Adolescence*, 12, 167-191.
- 318 Folkman, S. (1984). Personal control and stress and coping process: A theoretical analysis.
319 *Journal of Personality and Social Psychology*, 46, 839-852.
- 320 Graziani, P. (2001). *Spécificité de l'évaluation, du vécu émotionnel et du coping des sujets*
321 *souffrant de Troubles anxieux confrontés à des événements stressants* (Unpublished
322 doctoral dissertation). Université Charles de Gaulle-Lille 3, Lille.
- 323 Hefez, S. (2003). Adolescence et homophobie. In C. Broqua, F. Lert & Y. Souteryrand (Eds.),
324 *Homosexualités au temps du sida* (pp. 147-168). Paris: ANRS.
- 325 Iwasaki, Y., & Ristock, J. L. (2007). The nature of stress experienced by lesbians and gay
326 men. *Anxiety Stress Coping*, 20(3), 299-319.
- 327 Julien, D. (2000). Famille d'origine et homosexualité. In M. Simard & J. Alary (Eds.),
328 *Comprendre la famille : actes du 5e symposium québécois de recherche sur la famille*
329 (pp. 210-222). Québec: Presse Universitaire du Québec.
- 330 Kessler, T. A. (1998). The cognitive appraisal of health scale : development and psychometric
331 evaluation. *Research in Nursing and Health*, 21, 73-82.

- 332 Lazarus, R. S. (1966). *Psychological stress and coping process*. New York: McGraw-Hill.
- 333 Lazarus, R. S., & Folkman, S. (1984). *Stress, Appraisal and Coping*. New York: Springer
334 Publishing.
- 335 Meyer, I. H. (1995). Minority stress and mental health in gay men. *Journal of Health and*
336 *Social Behavior*, 36(1), 38-56.
- 337 Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual
338 populations: conceptual issues and research evidence. *Psychological Bulletin*, 129(5),
339 674-697.
- 340 Meyer, I. H., Dietrich, J., & Schwartz, S. (2008). Lifetime prevalence of mental disorders and
341 suicide attempts in diverse lesbian, gay, and bisexual populations. *American Journal of*
342 *Public Health*, 98(6), 1004-1006.
- 343 Meyer, I. H., & Northridge, M. E. (2007). *The Health of Sexual Minorities: Public Health*
344 *Perspectives of Lesbian, Gay, Bisexual and Transgender Populations*. New York:
345 Springer.
- 346 Pachankis, J. E. (2007). The psychological implications of concealing a stigma: A cognitive-
347 affective-behavioral model. *Psychological Bulletin*, 133, 328-345.
- 348 Pouchieu, C., Castetbon, K., Galan, P., Hercberga, S., & Touvier, M. (2012). Prise de
349 compléments alimentaires évaluée par autoquestionnaire sur Internet ; étude NutriNet-
350 Santé. *Revue d'Epidémiologie et de Santé Publique*, 60, 95.
- 351 Ragins, B. R. (2008). Disclosure disconnects: Antecedents and consequences of
352 disclosing invisible stigmas across life domains. *Academy of Management Review*, 33,
353 194-215.
- 354 Riley, B. H. (2010). GLB Adolescent's "Coming-out". *Journal of Child and Adolescent*
355 *Psychiatric Nursing*, 23, 3-10.
- 356 Rohner, R. P. (2004). The parental "acceptance-rejection syndrome": Universal correlates of

- 357 perceive rejection. *American Psychologist*, 59, 830–840.
- 358 Ryan, C., Huebner, D., Diaz, R. M., & Sanchez, J. (2009). Family rejection as a predictor of
359 negative health outcomes in white and Latino lesbian, gay, and bisexual young adults.
360 *Pediatrics*, 123(1), 346-352.
- 361 Rosario, M., Hunter, J., Maguen, S., Gwadz, M., & Smith, R. (2001). The coming-out process
362 and its adaptational and health-related associations among gay, lesbian, and bisexual
363 youths: Stipulation and exploration of a model. *American Journal of Community*
364 *Psychology*, 29(1), 113-160.
- 365 Savin-Williams, R. C., & Ream, G. (2003). Sex variations in the disclosure to parents of
366 same-sex attractions. *Journal of Family Psychology*, 17(3), 429–438.
- 367 Savin-Williams, R. C., & Esterberg, K. G. (2000). Lesbian, gay, and bisexual families. In D.
368 H. Demo, K. R. Allen & M. A. Fine (Eds.), *Handbook of family diversity* (pp. 197-215).
369 New York: Oxford University Press.
- 370 SOS Homophobie. (2015). *Rapport sur l'homophobie 2015*. Paris: SOS Homophobie.
- 371 Willoughby, B. L. B., Malik, N. M., & Lindahl, K. M. (2006). Parental Reactions to Their
372 Sons' Sexual Orientation Disclosures: The Roles of Family Cohesion, Adaptability, and
373 Parenting Style. *Psychology of Men & Masculinity*, 7(1), 14-26.
- 374
- 375
- 376