

Balancing Dangers: GLBT Experience in a Time of Anti-GLBT Legislation

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In the past few years, 26 states have changed their constitutions to restrict marriage to one man and one woman. There has been little research on the psychological effects of this political process on gay, lesbian, bisexual, and transgender (GLBT) people. In this qualitative project, 13 GLBT people were interviewed about their experience during the process of a constitutional amendment. A grounded theory analysis of these semistructured interviews was conducted. The core category, or central finding, was “GLBT people need to balance the dual dangers of engagement with GLBT advocacy and self-protection through withdrawal.” Other findings focused on the experience of living in a context of painful reminders that one is seen as less than human by the government and public, and in which one’s life is frequently and publicly misrepresented to advance hostile political campaigns. Social support and a process of self-acceptance helped participants to face their fears of isolation, discrimination, and aggression and to fight for social justice.

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Legislation and ballot initiatives that limit the rights of gay, lesbian, bisexual, and transgender (GLBT) individuals have become prevalent in recent years. Twenty-six states have passed constitutional amendments that restrict marriage to one man and one woman (Human

Rights Campaign, 2006). In 2006 alone, eight states passed such amendments. Efforts have been underway at the federal level to limit the rights of GLBT persons as well. The Defense of Marriage Act, passed in 1996, allowed individual states to refuse to recognize same-sex unions sanctioned in other states and established that the federal government will not recognize same-sex unions for any reason, even if said union is recognized by a state government (Feigen, 2004; Herek, 2006). Additional federal efforts are ongoing to limit the rights of GLBT individuals. The federal marriage amendment, which would prevent marriage from being granted to same-sex couples nationally, failed on a procedural vote in the United States Senate in 2006, but the sponsors of the bill promise to continue to push for the measure (Sullivan, 2006).

Such legislation brings GLBT rights into public debate, thus exacerbating the stigmatized status of sexual minority individuals while unequal treatment of GLBT families is institutionalized and legalized (e.g., Riggle & Rostosky, 2007; Riggle, Thomas, & Rostosky, 2005). There are 1,138 benefits, rights, and protections of marriage that are denied to same-sex couples who are not able to marry, impacting policies including social security, taxes, medical care, military and veteran’s benefits, immigration, and employee benefits (U. S. General Accounting Office, 2004). Emerging research suggests that GLB individuals who live in states with ballot initiatives to revise the constitution to limit marriage to one man and one woman are exposed to more anti-GLB messages and report greater psychological distress in comparison to GLB individuals whose states are not considering constitutional changes on this issue (Rostosky, Riggle, Horne, & Miller, 2008). Also, family members of GLB individuals who were both more connected to GLB community and knowledgeable about GLB issues experienced more negative affect in relation to these amendments (Horne, Rostosky, Riggle, & Martens, 2008).

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This study is part of a larger initiative engaged in by a team of researchers at The University of Kentucky and The University of Memphis to explore the impact of anti-GLBT legislation on the psychological well-being of GLBT individuals through both qualitative and quantitative methodologies. Portions of this research were presented at 115th Annual Convention of the American Psychological Association, San Francisco, CA. We wish to acknowledge Sharon Scales Rostosky and Ellen D. B. Riggle for contributing to the development of this team initiative and joint research program. We also would like to thank the participants for sharing their stories.

A companion research project conducted by some members of this research team explored the experiences of family members of gay, lesbian, bisexual, and transgender individuals to the same political events described in this article. Please see Arm, Horne, and Levitt (in press). One of the 13 participants in the current study was related to a research participant interviewed for this companion project (Participant J).

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The Role of Minority Stress

Rostosky, Riggle, Horne, and Miller (2008) found that minority stress factors were found to positively relate to the increased psychological distress that GLB people experience when living in states with anti-GLB ballot initiatives. *Minority stress* refers to the increased stress that all minorities experience as a result of social stigmatization (DiPlacido, 1998; Meyer, 2003). The minority stress model suggests that this stress adds to the general life stressors that are experienced by all people. It is chronic as it is related to relatively stable underlying social and cultural structures, and it stems from social processes, institutions, and structures (Meyer, 2003). The minority stress model is a conceptual framework developed to aid in the understanding of the “negative effects on psychosocial health and well-being that are caused by a stigmatizing social context” (Rostosky, Riggle, Gray, & Hatton, 2007, p. 393). It holds that the unique identities and situations of the individuals, as well as their social climates, influence the ways in which they are affected by social stigma.

The concept of minority stress first was developed to distinguish the stress that minorities experience due to their stigmatized status as part of a racial/ethnic minority group (e.g., Slavín, Rainer, McCreary, & Gowda, 1991). The literature in this area has used a variety of terms (e.g., *minority trauma*, *ethnic/racial variation in stress*, *racism-related stress*) to study this effect of racism. It can result from racism at individual, institutional, and cultural levels (e.g., Sue, 2003). For instance, racism may cause stress if the heritage of a group is devalued when an individual communicates the belief that one group is superior to another, when this belief is enshrined in systems and procedures that are discriminatory, such as educational or health care systems, or when it is imposed by governments.

Carter (2007), in a review of the theoretical and empirical literature on race-based stress, argued that it is reasonable to see racism as a traumatic stressor because it fulfills many of the criteria of trauma put forward by trauma theorists and clinicians (e.g., Carlson, 1997). For instance, it is often emotionally painful, recurrent, can occur across a range of settings, and can produce numbing/avoidance or vigilance/arousal responses. Furthermore, racial minority stress also is thought to lead to trauma as it targets vulnerable populations, may be uncontrollable, may be sudden and unexpected, and may be an isolating experience for a minority member within a majority context.

Harrell (2000) identified six types of racism-related stress. *Racism-related life events* are time-limited significant experiences that may lead to enduring forms of racism but have a beginning and end themselves (e.g., relocating to a new neighborhood). *Vicarious racism experiences* occur through observing and hearing about racist events or episodes (e.g., a report of racism). *Daily racism microstressors* include subtle unintentional dynamics that contribute to a hostile environment (e.g., being ignored while waiting for service). Unequal distribution of resources and limitations at the level of social systems and politics can lead to *chronic-contextual stress* (e.g., economic disparities). *Collective experiences* are a source of stressors that occur at a group level but do not necessitate witnessing or hearing a report of a specific racist event (e.g., the lack of political representation). Finally, *transgenerational transmission* refers to stress generated by historical racism passed down through generations.

Although racism-related stressors appear to have an impact with physical and psychological health (e.g., Carter, 2007), they are not recognized in psychological or psychiatric diagnostic systems (Prilleltensky, 1995). Also, there has been little research on the assessment and treatment of race-based trauma (Johnson, 1993), although these tools are being developed (e.g., Carter, 2007; Liang, Li, & Kim, 2004). As result, it can be difficult for mental health professionals to account for the effects of stress that are due to a racist environment.

Minority Stress Within the GLB Population

More recently, this minority stress framework has been adopted to describe how stigmatization can contribute to adverse mental health concerns for sexual minority people (e.g., Meyer, 2003). A minority stress model appears to be appropriate within this group. For instance, Harrell's (2000) six definitions of racial minority stress, described previously, are relevant within a sexual minority context. Also, the rationale described in the previous section for viewing racial minority stress as trauma can be applied to sexual minority stress. One difference between racial and sexual minority stressors, however, is that GLB people have been found to experience stress from concealing their sexual orientation (Meyer, 2003). Also, they may be less able to seek support for their minority identity from their families of origin to buffer the impact of their minority stress.

Meyer (1995) originally conceptualized these minority stressors to consist of three different factors. *Stigma* is the expectation of rejection and discrimination that leads to hypervigilance in order to protect oneself from the dominant culture. *Internalized homophobia* is related to the individuals' internalization of prevailing negative societal attitudes. In addition, the *objective experiences of external stressful events and conditions*, including rejection, discrimination, and violence, add to the chronic stress that GLB people experience; Harrell's (2000) categories of minority stress elaborate on the forms of this latter category. In his study, Meyer (1995) examined the mental health effects of minority stressors within a community sample of 741 New York City gay men. His results suggested that minority stress was associated with a two- to threefold increase in risk for high levels of psychological distress. In an extensive literature review and meta-analysis, Meyer (2003) reported that GLB people have a higher prevalence of mental disorders than heterosexuals and argued that minority stressors accounted for this difference. In this later research, he reviewed the research on the original three minority stress processes and added another stress process entitled “concealment of one's sexual orientation” to represent the stress sexual minorities experience from being closeted.

In a national study of mental health concerns among gay, heterosexual, and bisexual participants, ages 25–74, Mays and Cochran (2001) found homosexual and bisexual participants reported more frequently than heterosexual participants that discrimination had made life harder and that discrimination had interfered with having a full and productive life. Furthermore, the odds of having any psychiatric disorder were significantly increased in individuals reporting any lifetime event or day-to-day experiences with discrimination. General societal stigma and prejudice toward GLB individuals also have been linked with increased risk for suicidal ideation and suicide gestures or attempts in gay men and GLB youth (Halpert, 2002; Meyer, 2003) as well as with participating in sexually risky situations (Díaz, Ayala, & Bein, 2004; DiPlacido, 1998).

The degree to which an individual expects to experience discrimination may play an important role in negative outcomes. Stigma consciousness, the expectation of impending discrimination or social constraints due to being a sexual minority, has been associated with negative psychological outcomes, including mental and physical health symptoms (Lewis, Derlega, Clarke, & Kuang, 2006; Lewis, Derlega, Griffin, & Krowinski, 2003), as well as with decreased levels of same-sex relationship quality (Mohr & Fassinger, 2006). Lewis et al. (2006) found that lesbians who were highest in stigma consciousness and who experienced the greatest social constraints in talking about lesbian-related issues also reported the most thought intrusion, internalized homophobia, and bodily symptoms. Additionally, Waldo (1999) found that GLB people who had experienced heterosexism, the privileging of heterosexuality, in the workplace exhibited higher levels of psychological distress and health-related problems as well as decreased job satisfaction.

Resilience and Coping With Sexual Minority Stress

Although general social stigma may be related to negative health outcomes for some GLBT people, many people learn to cope successfully with minority stress. Furthermore, the minority stress model proposed by Meyer (2003) includes the component “minority coping,” which highlights the ways in which individual personal coping strategies and group-level coping resources can interact to shape how an individual copes with minority stress. For example, a GLBT person may be able to access the broader community for GLBT self-enhancing strategies, such as support groups, in order to counteract stigma. It appears that social support and personal resilience may buffer the effects of stress as well (Díaz et al., 2004; DiPlacido, 1998; Meyer, 2003). As well, family support or supportive heterosexual allies may protect against negative effects of minority stress.

The use of personal and group coping may be connected. Meyer (2003) describes how group participation often depends on individual factors, such as personality, fatigue, outness, and multiple identities (e.g., racial or gender identities in addition to a GLB identity). He maintains that even very resilient and resourceful individuals may struggle with their individual coping mechanisms if their group support is lacking or absent.

As well, the processes of coming out, constructing or adapting value systems that support GLB identities in the face of societal prejudice, or even coping with crisis resulting from antigay violence, may serve as opportunities for growth and the development of positive individual and group identities (e.g., Crocker & Major, 1989; D’Emilio, 1983; Garnets, Herek, & Levy, 1990; Meyer 2003; Morris, Waldo, & Rothblum, 2001). The ability to understand negative views about homosexuality as a result of prejudice, fear, social ignorance, and the persuasion of dominant norms also can contribute to the development of a positive self-image (Mills et al., 2004). Gaining this understanding often requires social support from other gay and lesbian individuals (Mills et al., 2004) and goes hand in hand with minimizing the effects of internalized homophobia (Meyer, 2003). Integrating the GLB identity with other personal identities is also seen as important in order to be more resilient to negative societal messages and actions—a task that can be especially important for individuals who hold multiple minority identities (Meyers, 2003).

Consequences of Legislative Initiatives

Although some research has explored the content of legislative debates, highlighting the extensive stereotyping of gay and lesbian individuals and the use of religious dogma to fuel support for antigay and lesbian arguments (e.g., McCorkle & Most, 1997; Wiethoff, 2002), few investigations have considered the effect of discriminatory legislative initiatives upon GLBT people. The influence of these initiatives on bisexual and transgendered people, in particular, tend to be left unexplored. Although not all bisexual and transgender people may have same-sex relationships, they still may be influenced by this legislature both because they are part of the GLBT community and are influenced by associated prejudices, and because the quest for transgender rights and GLB rights typically are intertwined, as rights or protections for transgender people often follow or are attached to policies on GLB rights, when they are conferred. Barriers to GLB rights, therefore, may be seen as barriers to legal protections against discrimination on the basis of gender identity as well.

Colorado residents endorsed an amendment in 1992 that banned GLB people from claiming minority status, protected status, quota preferences, or from claiming discrimination. Although the Supreme Court in Colorado eventually found this measure unconstitutional,¹ the effects of the initiative had deep implications for GLB Colorado residents. Russell (2000) and Russell and Richards (2003) investigated the psychological consequences of this amendment, providing evidence that political legislative initiatives and movements can have personal and profound implications for GLB people. Many GLB people reported, for example, increases in symptoms associated with depression, generalized anxiety, and posttraumatic stress disorder (Russell, 2000). Furthermore, Russell and Richards (2003) used quantitative survey research to identify latent stressors and resilience factors for GLB people in the face of the amendment. Sources of distress included shock at widespread homonegativity, divisions within the GLB communities, efforts to make sense of the sources of anti-gay bigotry, difficulties with family of origin, and internalization of negative messages about themselves. Resilience factors included placing antigay politics in a broader political perspective, personal confrontation with internalized homophobia, being moved to activity by their affect, benefits from acknowledging support from heterosexual people, and the benefits of contact with the GLB community.

In addition to this quantitative research analysis, Russell (2000) used qualitative methods to analyze the written responses to a single open-ended question on her survey: “Tell me anything else about your response to any aspect of Amendment 2.” A thematic analysis highlighted the experience of trauma and oppression along with the central role that support played amidst the crisis of the amendment. In light of these past findings, an intensive qualitative analysis is warranted to consider systematically how GLB people experience their selves and their relationships with others and their environment in the face of antigay politics. In addition, present research in this area is needed as political debates on this topic have intensified since the introduction of the Defense of Marriage Act in 1996.

Research based in Vermont (Solomon, Rothblum, & Balsam, 2004; Todosijevic, Rothblum, & Solomon, 2005) explored the

¹ Please see http://en.wikipedia.org/wiki/Romer_v._Evans.

experience of same-sex couples in 2000, the first year in which local legislation granted civil union recognition. Solomon et al. (2004) found that lesbians in civil unions were more open about their sexual orientation than those not in civil unions and that gay men in civil unions were closer to their family of origin than those not in civil unions. These investigators suggest that there may be a relationship between legalized same-sex relationships and visibility of these relationships to family and the general public. This research suggests that when granted civil unions, gay men and lesbians might experience reductions in minority stresses that allow them to better seek support for their families. Todosijevic et al. (2005) focused on relationship variables specifically, however, and did not address how legislation and movements to limit GLBT rights may have influenced these couples.

Other writers (Herdt & Kertzner, 2006; Herek, 2006) have considered the consequences of denial of marriage rights, but these articles have been theoretical in nature; therefore, little research data are available at this time. Mathy and Lehmann (2004) compared lesbian and bisexual women with heterosexual women and found that married heterosexual women were at a significantly lower risk for suicidality and difficulties with excessively using or controlling their use of alcohol than single heterosexual women or either partnered or single lesbian or bisexual women. Additionally, they were less likely to report that they had received psychiatric mediations or psychotherapy. Mathy and Lehmann (2004) concluded that the stress of being denied the same rights as heterosexuals was at the root of these differences and that the U. S. Defense of Marriage Act may pose a substantial public health risk for lesbians and bisexual women.

In addition to the present marriage debate in the United States, a key component in the push to limit the rights of GLBT individuals via legislation and ballot initiatives is the connection between the initiatives and religious and social movements. Conservative evangelical groups have been some of the most ardent advocates and activists in favor of the initiatives, and the rise of political conservatism in the United States seems to have coincided with increasing interest in banning gay marriage (Bazelon, 2004).

Lost in the furor of these anti-GLBT initiatives is the impact of the initiatives on the personal experiences of GLBT individuals and how it might be understood as a powerful exemplar of minority stress. In order to investigate this question, a group of graduate students and psychologists came together and carried out the following study: Qualitative research methods were used as they are apt at exploring participants' experiences in a more holistic manner, whereas quantitative approaches tend to test specific hypotheses (McLeod, 2001). In addition, qualitative approaches, such as the grounded theory approach used in this study, often are used to illuminate the experiences of minority groups as they can vividly present voices often underrepresented in the research literature (e.g., Fassinger, 2005). These experiences are particularly important for counseling psychologists who both gather and interpret research on mental disorders and who provide services for this population.

Method

Participants

A sample of 13 participants was recruited from Memphis, Tennessee, a mid-south urban city (see Table 1). Participants ranged in

Table 1
Participant Demographics

Participant	Race	Age	Education	Sex	Gender identity	Sexual orientation	Relationship status	Commitment ceremony	Children	Has lived outside Memphis	Years out to self	Years out to others
A	White-Caucasian	31	Master's degree	Female	Lesbian	In committed relationship	Yes	Yes	12	12	12	12
B	White-Caucasian	20	High school degree	Male	Gay	In committed relationship	No	No	6	6	6	4
C	White-Caucasian	30	Master's degree	Male	Gay	In committed relationship	No	No	9	9	9	3
D	White-Caucasian	28	College degree	Female	Lesbian	Single	No	No	13	13	13	13
E	White-Caucasian	25	Some college	Female	Lesbian	Single	No	No	10	10	10	6
F	White-Caucasian	20	Some college	Female	Other	In committed relationship	No	No	8	8	8	4
G	White-Caucasian	33	College degree	Male	Gay	Single	No	No	28	28	28	6
H	White-Caucasian	36	College degree	Male	Gay	In committed relationship	No	No	22	22	22	15
I	White-Hispanic	35	College degree	Male	Gay	In committed relationship	No	No	10	10	10	10
J	White-Caucasian	19	Some college	Female	Bisexual	In committed relationship	No	No	6	6	6	4.5
K	White-Caucasian	62	PhD degree	Male	Bisexual	Single	No	No	50	50	50	28
L	African American	69	College degree	Female	Lesbian	Single	Yes	Yes	40	40	40	40
M	African American	33	Some college	Male	Gay	Single	No	No	7	7	7	33

age from 19 to 69 (mean age = 33.92, $SD = 15.21$). With regard to ethnic identification, 9 participants identified their race as Caucasian or White, 1 identified as Hispanic, 2 as African American, and 1 as multiracial. In terms of educational background, 8 of the participants had completed a college or university degree. Participants came from varied occupational backgrounds, indicating blue collar, white collar, and student occupations. With respect to their geographical history, 5 of the participants had lived in Memphis for fewer than 10 years, and all but 3 had spent some time living outside of Memphis and had experiences living in other locales. The uppercase letters from Table 1 are used as labels to indicate quotes from that particular participant in the *Results* section.

There was diversity within the participant pool in relation to sex and gender identification, sexual orientation, and relationship status. The participants included 6 gay men, 4 lesbian women, 1 bisexual male, 1 queer-identified woman, and 1 transgender participant (female-born and male-identified). The transgender participant identified as bisexual and so was influenced by these amendments both by his sexual orientation and by being part of the GLBT community. The length of time participants had been "out" to themselves ranged from 6 to 50 years, and the length of time reported as "out to others" ranged from 3 to 15 years. With regard to relationship status, 6 of the participants were single, 7 were in a committed relationship, and 2 participants reported having had a marriage ceremony. Neither of these ceremonies was recognized in their states of residence, although one was legally recognized elsewhere. Although most participants did not have children, 2 did report parenting children; 1 had adult children, and 1 had a preschool child.

Researchers

The researchers were a multidisciplinary team consisting of counseling and clinical psychology students as well as students from marketing and management programs. All students were enrolled in master's- or doctoral-level programs. At the beginning of the study, the analysts did not have specific expectations of the study results, although there was a general sympathy with the struggles of GLBT people. The research team was composed of two heterosexual men, five heterosexual women, two lesbian women, one bisexual woman, and two queer-identified women. Although most of the team was new to this topic of study, three members had been engaged in GLBT research. As well, three of the analysts in this study were coauthors on a companion study (Arm, Horne, & Levitt, 2009) in which the experience of an anti-GLBT constitutional amendment was analyzed from the perspective of relatives of GLBT people.² And Horne also conducted survey research on the experiences of GLBT people (Horne, Rostosky, Riggle, & Martens, 2008) in relation to these amendments.

Procedure

Recruitment. Announcements were posted at university and community locations inviting the GLBT public to participate in a study exploring GLBT issues. Participants also were recruited from GLBT community clubs and organizations, by word of mouth, and through personal contact. As diversity within par-

ticipants is an advantage in qualitative research, selection was conducted initially using a method of maximal variation (see Patton, 1990) to diversify experience in terms of age, race, and gender. Selection later on was conducted according to the method of theoretical sampling in which participants were sought out with experiences that were absent in the analysis but that seemed relevant (e.g., GLBT people who were parenting).

Interviews. The graduate student analysts all received training in qualitative interview methods from Heidi M. Levitt, who has expertise in conducting qualitative research. All the researchers, with the exception of Sharon G. Horne, were involved in the interviewing, data analysis, and writing of this project. Sharon G. Horne was involved in the development of the project and the writing of the article. Interviews took place in Memphis within 2 months before (10 interviews) or after (three interviews) the 2006 Tennessee constitutional amendment vote to ban gay marriage. Public polling suggested from the beginning that there was little hope of defeating the proposed amendment, which was eventually passed by a strong majority, so the interviews occurred within a context of limiting GLBT rights. The semistructured interviews were approximately 1–2 hr in duration. The central question in each interview was: "What is the experience of being a GLBT person in the midst of legislative initiatives and movements that seek to limit the rights of GLBT people?" Participants also were asked a set of subquestions that explored how anti-GLBT initiatives and movements affected participants' personal beliefs and experiences (e.g., feelings about self, religious beliefs), their relationships with others (coworkers, family, friends and community, romantic relationships), and their environment (e.g., interactions with strangers and acquaintances; feelings toward city, state, and nation; being "out"; seeking medical and mental health care). These open-ended interview questions were designed to elicit rich description of participants' experiences and to avoid leading their responses.

Application of grounded theory methodology. A grounded theory approach was used to analyze the transcribed interviews (Fassinger, 2005; Glaser & Strauss, 1967). Grounded theory has become a popular and well-respected method for psychologists because of its ability to explore the subjective lived experiences of participants and the rigor within the analytic process (Fassinger, 2005). Researchers use an inductive process to identify commonalities in experiences in order to build a theory of the experience under study. This approach allows the investigators to identify patterns within complex experiences and to develop new understandings of a phenomenon.

The grounded theory approach was applied within a methodological hermeneutic epistemological framework (Rennie, 2000) and the method used as laid out by Rennie, Phillips, and Quartaro

² Within the companion study, Heidi M. Levitt was a cointerviewer and methods advisor, Sharon G. Horne was a cointerviewer, analyst, and content advisor, and an additional author was the lead analyst and interviewer of the companion study. The studies were run concurrently with overlapping data collection and analysis. From a hermeneutic perspective, conducting multiple studies on a topic may be understood as an advantage, as they can enhance the analysts' understanding of the complexities within a subject matter.

(1988). This form of qualitative analysis situates the rigor of the research process from the standpoint of an interpretive, human scientific approach rather than an objectivist, natural scientific approach. For instance, it uses credibility methods that assess rigor while valuing the analysts' complex interpretations rather than obtaining reliability through intercoder ratings on discrete coding systems.

In this study, each transcript was divided into distinct units of text that contained one main idea, or "meaning unit" (Giorgi, 1970), and each was given a meaning unit label that closely fit with the participant's own wording in the transcript. These "meaning units" then each were compared with one another in a process of constant comparison in order to find similar themes among the meaning units. Similar meaning units were grouped together under categories that were labeled, in turn, to identify the common theme found among them. Because the meaning units could be grouped into as many categories as were relevant to their content, the categories created during the analysis were not independent of one another. After the first-order categories were created, they were subjected to the same constant comparison procedure in order to group them into higher order categories on the basis of their shared characteristics or qualities. In this way, this analysis continued with each level of categories, and a hierarchical level of categories was created. This process culminated in a core category at the apex of the hierarchy.

Throughout this research process, the authors conducting the analysis met weekly for 4 months to discuss the coding process and the hierarchy development, and a first draft of the article was prepared at the end of that time. The first four authors of the present article then continued to meet to prepare the draft for publication. Through this process, the researchers used memoing, a form of notetaking, to reduce the effects of any possible biases or preconceived notions that could serve to limit or to lead the direction of the analysis and to record any theoretical insights developed during the analytic process. As is typical in grounded theory, the analysis and data collection were conducted in waves so that the analysis was ongoing before the last of the data collection.

Data collection continued until the categories reached "saturation," which is the state at which the inclusion of new data seems redundant and does not add new categories to the hierarchy (Glaser & Strauss, 1967). At this point, the hierarchy is considered to be comprehensive. In this study, saturation occurred after the 11th interview—meaning that the final two interviews did not necessitate the creation of any new categories. The data analysis also appeared to have richness and complexity, reflecting many perspectives.

Credibility checks. Checks on the researchers' understandings were carried out using three methods in this study. As an initial credibility check, each participant was asked a series of questions at the end of the interview in order to ascertain whether his or her experience had been fully represented. For instance, participants were asked, "Is there anything else that we haven't discussed that feels relevant to your experience of these initiatives or movements? If so, can you describe it now?" These closing questions allowed the researchers to obtain a more complete account of participants' experiences by collect-

ing additional information that may have been missed during the interview.

As a second credibility check, the researchers used the method of consensus when making all coding decisions, which is used in qualitative research methods to show that multiple analysts agree on an interpretation (e.g., Hill et al., 2005). Consistent with the epistemological framework at hand, the analysts were given a privileged status on the transcripts in which they acted as interviewer—as their lived interviewing experience gave them access to vocal and visual expression cues that the rest of the group lacked. When making decisions regarding the hierarchy, researchers ensured that the experiences of the participants they interviewed were represented accurately.

As a third check, participants were sent a summary of the results (an abbreviated version of the following section) and were asked to complete a questionnaire on whether the findings accurately reflected their experiences. Six of the participants returned the feedback questionnaires. When asked whether the summary reflected their experience on a Likert-type scale ranging from 1 (*not at all*) to 7 (*very much*), the average rating was 6.2. When asked on the same scale whether the results contradicted their experience, the average score was 2.2. Overall, the quantitative and qualitative feedback was very affirmative of the findings and provided elaborative comments rather than corrective ones.

Results

We identified 702 meaning units from the 13 interviews. The method of constant comparison described above yielded a hierarchy that consisted of four levels (see Table 2). One core category was developed that subsumed the eight major themes or "clusters" that emerged. Each cluster is described below with reference to its subordinate "categories." The level below the categories is referred to as the "subcategory" level. The core category is described following the cluster descriptions.

Cluster 1: Initiatives Lead to Constant Painful Reminders That I'm Seen as Less Than Human by Our Government and Public Laws

This cluster contains participants' descriptions of the impact of having GLBT issues discussed in public forums around the time of the amendment vote and the unrelenting distress caused by recurrent messages that their humanity is not recognized. Data in this cluster were gathered from 12 participants and composed four categories.

Category 1.1. The largest category of this cluster, which included the responses of 12 participants, conveyed their pain and anger when the public was experienced as "unsympathetic," "uneducated," or "hostile" regarding GLBT issues. There was a strong concern that the public does not understand who GLBT people are, nor does it care to learn about them when making decisions that powerfully influence their lives. One interviewee conveyed his anger that there is even public apathy in reaction to the numerous murders of transgender people, "I mean, if that is not dehumanizing, then I don't know what is . . . It does make [GLBT] people feel like second-class citizens or less than human, and I think that's pretty clear across the board for

Table 2
Clusters and Categories, With Number of Participants Who Contributed Units to Each

Cluster and category titles ^a
Cluster 1: Initiatives lead to constant painful reminders that I'm seen as less than human by our government and public laws (12)
1.1 Painful and angry to see the public and institutions as unaware, unsympathetic, uneducated, or hostile regarding GLBT issues. (12)
1.2 Initiatives excuse, validate, and strengthen discriminatory views of GLBT people. (3)
1.3 Not knowing who wants to hurt me leads to general fear of others. (7)
Cluster 2: The irrationality of anti-GLBT initiatives and movements is baffling, painful, and scary: We are not who they say we are. (10)
2.1 I am not who you say I am. (5)
2.2 I feel used by political movements that don't mind hurting me. (6)
2.3 Try to understand anti-GLBT people and anti-GLBT arguments, but can't: baffling. (4)
Cluster 3: Supports for my GLBT identity are even more important in the face of initiatives and movements that threaten my religious experience, family, place of residence, or workplace (12)
3.1 Initiatives as threatening my support systems, religion, work, family, or home in a time when I need support. (12)
3.2 Supports for my GLBT identity are important in helping me feel safer, happier, stronger. (11)
Cluster 4: There is a personal need to manage my emotions about these legislative initiatives or movements, like anger, hurt or guilt, via engagement in and/or avoidance of these issues (12)
4.1 Need to reframe or control fear, anger, or hurt due to initiatives or movements. (8)
4.2 Initiatives blur lines between personal and political life—hard to balance. (5)
4.3 Feels guilt when not fighting legislation, sense of obligation to self and to others. (5)
Cluster 5: These issues have a stronger impact if these rights are actively important due to my life regarding marriage, health care, finances, and family security, and/or if I have less support than other GLBT individuals (e.g., due to a transgender or bisexual identity) (9)
5.1 If my identity is marginalized within GLBT community, I am even at more risk. (3)
5.2 These issues have less relevance to my life than others. (6)
5.3 Practical aspects of limits on GLBT people (legal fees, HIV or fertility health care, taxes, parenting, etc.) bother, negatively affect me. (5)
Cluster 6: My level of social activism depends upon how I balance a need for social justice versus fears that these efforts will not secure our safety (13)
6.1 Terrified that fighting will never lead to change. (10)
6.2 Feel sense of personal commitment to fighting for rights despite struggles. (4)
6.3 Motivated to continue fighting because I feel hopeful for the future. (6)
6.4 Feel desire for activism, whether in leadership roles or in quieter ways, because it is important and rewarding. (10)
6.5 Negative effects of very active engagement with issues still can require passive acceptance or emotional withdrawal. (2)
Cluster 7: Connections to others have become more dichotomized due to these issues: In most settings, I feel a stronger isolation, although in supportive ones, I feel more connected (13)
7.1 I feel more connected to the GLBT community if I am involved in fighting initiatives, etc. (12)
7.2 I feel more scared of discrimination and judgment in public. (9)
Cluster 8: Activism seems more rewarding and effective when I can present myself openly with self-acceptance and try to see others' perspectives. (11)
8.1 Facing initiatives has led to positive development of self and community in terms of dignity and empowerment. (7)
8.2 Rehumanizing contact between GLBT and others seen as a redemptive, effective political strategy. (7)

Note. GLBT = gay, lesbian, bisexual, transgender.

^aThe number in parentheses is the number of participants who contributed units to the preceding cluster or category.

everyone" (J). This sense of being perceived as second-class citizens was echoed throughout the interviews.

Category 1.2. In a second category, 3 participants explicitly described the circular effect between these movements and the public reaction. Just as these public reactions were thought to lead to homophobic movements, there was a strong fear that these movements and policies acted to condone and strengthen anti-GLBT sentiment and aggression. There was a general sense that signs of prolegislation support, such as bumper stickers supporting President Bush, who favored the U.S. constitutional amendment, could embolden anti-GLBT reactions—so anxiety-inducing stimuli seemed omnipresent, especially during elections and amendment votes.

Category 1.3. In the final category in this cluster, 7 participants reported the effects of this public sentiment—a feeling of never knowing who wants to harm them within the general public. It could be difficult to separate out the effects of initiatives and movements from general GLBT social stigma—both were experienced as dangerous and building on each other. For instance, participants feared that their rights as parents would be challenged,

that showing public affection to their partners was risky, and they feared unexpected prejudice in general. Two interviewees poignantly described this latter fear:

When you see the votes turn out and it's 84%, 80%, 90%, you have to assume that you know some of these people, that you know every day and interact with people who, in some regards, treat me as if I'm any other human being. But you wonder what's going on in their head and their mind, and that can lead to some level of paranoia or fear or other things. (C)

I was petrified . . . [of] being raped or roughed up or killed, you know, [for] just doing nothing basically. I worry about being picked out as a gay guy because my mannerisms are not entirely masculine. . . . If people look at you too long or too hard . . . it is a little unnerving. (J)

The initiatives and movements not only limited the rights of GLBT individuals, but they restricted participants' self-expression and sense of safety in their daily lives.

Six participants evaluated whether this cluster represented the experience of being a GLBT person within the time of these

initiatives and movements. They gave a mean rating of 6.0 on a Likert-type scale ranging from 1 (*not at all*) to 7 (*very much*).

Cluster 2: The Irrationality of Anti-GLBT Initiatives and Movements is Baffling, Painful, and Scary: We Are Not Who They Say We Are

This cluster illustrates the general sense that the initiatives and movements misrepresent the GLBT community and their families. In response to these initiatives, participants expressed pained bewilderment at how these political movements have been widely accepted, regardless of how they have hurt the GLBT community. In this second cluster, which was endorsed by a total of 10 participants, there were three categories.

Category 2.1. The first category title was “I am not who you say I am,” which was participants’ (5 of 13) response to misrepresentations of GLBT lives by religious and political groups. They described being made out to be the enemy, to be highly sexualized, or to be corrupt people as strongly contrasting with how positively and normally they experienced their own lives:

Defense of marriage . . . it’s like there’s an invading army and we have to defend marriage Our society loves military metaphors It certainly tells me that they view the GLBT community as a threat. (F)

These depictions of their community felt alien, distorted, and menacing.

Category 2.2. In the second category, participants (6 of 13) described feeling used by political movements that do not understand their concerns. Two examples follow:

It upsets me that they’re using GLBT people as a wedge issue, because that’s basically all it is. It doesn’t really matter because there’s already legislation that says exactly the same thing [forbidding GLBT marriage]. It pisses me off that they want to write discrimination into the constitution of Tennessee, but it pisses me off more that they’re just using our community to get votes for them. (F)

They [politicians] are using the Bible to attack. Unfortunately, they are using it wrong. The Bible was never meant to attack. They are using it like a brick on us. They are beating us with it To believe that they might be wrong They’re too proud for that I think this is what is fueling the amendment. (H)

The participants described a strong suspicion of politicians’ motives, especially when their platforms rested upon a religious foundation.

Category 2.3. The third category described how baffling anti-GLBT arguments were for participants (4 of 13). It was hard for interviewees to imagine why people would believe the arguments in public discourse and would want to discriminate against them.

People will come in sometimes, and they are like talking about this stuff when I’m waiting on them. You know, most of them don’t know, so they will say some things that are pretty bad, but I don’t say anything because, you know, I’m at work . . . but it bothers me I’m just like, you know, “Don’t you have anything better to do than like talk bad about people because they’re different from you?” The laws and stuff they are proposing gives them an excuse to talk about it and like openly say things that are just bad. (E)

It was puzzling and painful to believe that prejudices could lead people to accept and express viewpoints that could be so damaging to the interviewee’s lives.

Six participants evaluated whether this cluster represents the experience of being a GLBT person within the time of these initiatives and movements. They gave a mean rating of 6.0 on a Likert-type scale ranging from 1 (*not at all*) to 7 (*very much*).

Cluster 3: Supports for my GLBT Identity are Even More Important in the Face of Initiatives and Movements That Threaten my Religious Experience, Family, Place of Residence, or Workplace

This cluster generated two categories that described the interaction between anti-GLBT movements and participants’ (12 of 13) need for social support. Social affirmation was needed all the more as these movements eroded prior support systems.

Category 3.1. The first category described the threats posed toward the participants’ (12 of 13) support systems, including their family, religion, community, and workplace, in connection with anti-GLBT legislation and movements. For instance, one participant relayed that employees of a company he founded were turned against him due to the board members’ homophobic beliefs.

What they did . . . is hire people based on [asking them] are they Fundamental Baptists? . . . There is a sense of being powerless. There is tremendous anger It [anti-GLBT movements and policies] does give you the feeling that . . . they are being told by the populace that they’re doing the right thing [to me]. (K)

Others (6 of 13) were so concerned about these threats that they considered leaving the area to live in a region that had protections for GLBT people: “[After our daughter was born, my partner and I thought] I can’t believe we are doing this [raising a child] in Memphis! What are we thinking! We need to go to somewhere that we know everything is going to be okay—where we will be respected!” (A). Participants described that anti-GLBT movements and policies robbed them of much-needed supports and that the loss was especially keen in the context of the amendment vote.

Category 3.2. The second category in this cluster described the importance of others during this period to offer support and witness their struggle. Social support from religious institutions, families, GLBT friends, and heterosexual allies led participants (11 of 13) to greater feelings of safety, happiness, and strength. For instance, one participant spoke of her chosen family of GLBT-supportive friends.

When [your family] is not [safe], you kind of go over there with this trepidation . . . [that they might] pull the . . . rug out from underneath your feet You never really know where it’s ok to be with them So you choose your own family We all get together and have our holidays, and that feels more like family because I don’t have to worry about them. (G)

Similarly, another participant described his feeling when talking with heterosexual allies:

It’s validating . . . the fact that people get angry about it [discrimination] says something to me They don’t see me as a threat, they validate me and say, “Well, you’re an important person, and you should have the same rights that I have, there’s nothing that should

separate you from me.” So there’s a sense of commonality, shared humanity. (C)

When asked to evaluate whether this cluster represents the experience of being a GLBT person within the time of these initiatives and movements, 6 participants gave a mean rating of 6.8 on a Likert-type scale ranging from 1 (*not at all*) to 7 (*very much*).

Cluster 4: There Is a Personal Need to Manage my Emotions About These Legislative Initiatives or Movements, Like Anger, Hurt, or Guilt, via Engagement in and/or Avoidance of These Issues

Twelve of the participants contributed to this cluster, describing a need to monitor and manage the impact of anti-GLBT initiatives on their own emotions through seeking a balance between withdrawal and engagement in GLBT issues.

Category 4.1. The first of the three categories in this cluster highlighted participants’ (8 of 13) efforts to mitigate the accumulation of fear, anger, or hurt. Strategies included trying to be “stoic” or staying positive, limiting awareness of politics, considering relocating their families to a region with more rights, and trying to make sense of the initiatives via systemic explanations or by actively striving to understand opponents. The following two quotes exemplify these methods of reframing or limiting their awareness of anti-GLBT sentiments: “If I were to start working from the standpoint of an activism standpoint, I would get so overwhelmed and upset about it that it’s easier for me just to stay backed off and pay—like, give money” (G).

I understand where they’re coming from . . . I’m in the South, and . . . I know that there are people who are raised, their entire family, everybody they know believes the way they believe, and they have never had any experience that challenges that. (D)

Category 4.2. The second category described the blurring of boundaries between the personal and political in the course of participants’ (5 of 12) efforts to respond to anti-GLBT initiatives. The interaction between the two spheres was complex. One participant described this interaction succinctly, “You don’t have any energy to be proud of who you are, I mean even though a lot of us learned to be proud of who we are because we are fighting initiatives” (L). Political engagement was distressing when they did not receive support, and when it reduced the time they had available to spend with friends, partners, or other support systems, but it also increased the urgency to come out to others as part of their activism and become more comfortable voicing their identities.

Category 4.3. The third category contained participants’ (5 of 12) experiences of feeling obligated to do more to resist anti-GLBT forces. Interviewees described anticipated pain and lack of time as keeping them from involvement in spite of their guilt as well as fears of marginalization within the GLBT community. For instance, one interviewee described his initial reluctance at getting involved:

Guilt [from being uninvolved] is more or less like, you betrayed yourself . . . Like I’m hurting myself. It really bothered me . . . because people don’t realize how big one voice can be. [So I] joined a group where the majority of people are White. I could have just went to a Black group, but that’s the easy road for me. (M)

The 6 participants who evaluated whether this cluster represents the experience of being a GLBT person within the time of these initiatives and movements gave a mean rating of 5.2 on a Likert-type scale ranging from 1 (*not at all*) to 7 (*very much*).

Cluster 5: These Issues Have a Stronger Impact if These Rights Are Actively Important Due to my Life Regarding Marriage, Health Care, Finances, and Family Security, and/or if I Have Less Support Than Other GLBT Individuals (e.g., due to a Transgender or Bisexual Identity)

In this cluster, participants (9 of 13) identified conditions under which the legislative initiatives and movements had more or less impact on their lives. Three categories emerged in this cluster.

Category 5.1. Individuals (6 of 13) who claimed a marginalized identity within the GLBT community contributed to this first category. Racial minority, bisexual, or transgender interviewees reported feeling especially vulnerable if they were disillusioned with the GLBT community’s recognition of their identity, as even that source of support became unreliable.

It’s insulting quite honestly how people can be involved in the same fight and they can be fighting for each other’s rights, but whenever something large and important, and ah, ground breaking as something like a hate crime bill, and we [transgender people] will just be taken out of it because like I said, we’re treated as expendable members of the [GLBT] community. (J)

These feelings led some participants to become doubtful of being involved in GLBT activism, as they worried that the community would not support their interests.

Category 5.2. The second category described that the initiatives and movements appeared to have less relevance to interviewees (6 of 13) if they were not partnered or with children, not interested in getting married, not experiencing workplace or religious harassment, or could pass as heterosexual. For instance, one participant described,

We’re both rather young. We’re not out of college. We have no plans to get married right now, and, if we do, it would be sometime way off in the future. So [the amendment does] not [have] a direct effect on us. (J)

Still participants worried that over time these conditions could change, and they would be denied rights they wanted, such as partner or parental rights or their ability to make medical decisions in future relationships. “And if we decided to have [a child], I mean, there’s that whole problem there. [My partner] wouldn’t have rights over that child unless he’s, you know, legally allowed to adopt him. I mean there’s so much more crap” (G). Despite the lack of present relevance of these initiatives, these participants expressed that the potential for future harm was always at the back of their minds.

Category 5.3. The last category expressed concerns for the practical aspects of the limits on GLBT people and the personal impact of the initiatives. Participants (5 of 13) described experiencing the effects of discrimination in ways such as added legal fees incurred to protect their relationships, being denied fertility healthcare within Memphis, increased taxation, insecure parental

rights, partner inheritance laws, inability to receive partner health benefits, lack of hospital visitation rights for one's partner, and difficulty finding HIV-related medical care.

It [discrimination] drops in places you wouldn't expect it, like you're filing your tax returns and you can't file jointly . . . I get really angry . . . because I'm honest with myself about who I am as a person, and I am a good person. (C)

These practical obstacles were experienced as a personal attack on the interviewees' dignity or as "emotional stabs."

Six participants evaluated whether this cluster represents the experience of being a GLBT person within the time of these initiatives and movements. They gave a mean rating of 7.0 on a Likert-type scale ranging from 1 (*not at all*) to 7 (*very much*).

Cluster 6: My Level of Social Activism Depends Upon How I Balance a Need for Social Justice Versus Fears That These Efforts Will Not Secure our Safety

This cluster included five categories that described participants' (13 of 13) rationale for engaging in social activism. Their faith in the effectiveness of activism, or lack thereof, appeared to be an important determinant of their engagement.

Category 6.1. The first category described alarm of being depleted and endangered by the efforts of fighting the initiatives or encountering a sense of overwhelming futility. One participant described,

I'm not sure . . . how to go to the African American church, the Black church, because there are a lot of them . . . Or the progressive Baptist convention . . . I look at all these places that need to be reached and I have no idea how to go about it. (L)

They described being tired of being on the defensive with few resources and having to fight against restrictions instead of for greater freedoms.

Categories 6.2–6.4. The next three categories described reasons why people would engage in a fight in spite of low odds of success. Participants described a sense of personal development in adopting activist or leadership roles within the community (10 of 13), a sense of personal commitment to social justice that prompted their involvement (4 of 13), and a hope that future generations will bring about change (6 of 13). One Hispanic community leader said,

Basically I became more involved with fighting . . . anti-all-GLBT legislation. Um, so to me, it kind of brought up, like the sleeping lion, so to speak, or that, you know, that fire within me . . . Where in the past, you know, I just always felt like very lukewarm . . . now I kind of feel that hey, I need to be that voice, of those people that don't speak up for themselves . . . A passion to be, to be fighting, you know, for equality. (I)

Participants described that activism allowed for authentic personal engagement, the sharing of their experiences with others, as well as the shaping of their identities as advocates for their community.

Category 6.5. The final category in the cluster described that in spite of very active engagement with the issues, there could still be a need for either withdrawal or acceptance of a long struggle in order to cope with the negative effects of fighting initiatives. Some

participants reported trying to empathize with people who are scared of GLBT people having equal rights instead of becoming angry:

You have to understand that when you get into it that if you take it personally you're just gonna burn up . . . there's no . . . you can't take that rejection as somebody [is] rejecting you personally and your life personally. I know a lot of people who do that. (D)

Pacing themselves and trying to maintain a detached perspective were strategies used to fight an anti-GLBT agenda.

Overall, this cluster reflected the many ways participants viewed themselves as activists, whether their activism was talking to people about their experiences, seeking out and using GLBT-affirmative products and services, or organizing efforts as an activist and leader in the community for the fight for rights. In evaluating whether this cluster represents the experience of being a GLBT person within the time of these initiatives and movements, 6 participants gave a mean rating of 6.0 on a Likert-type scale ranging from 1 (*not at all*) to 7 (*very much*).

Cluster 7: Connections to Others Have Become More Dichotomized due to These Issues: In Most Settings, I Feel a Stronger Isolation, Although in Supportive Ones, I Feel More Connected

This cluster encompassed the participant experience of feeling ostracized in most social settings but feeling more connected and accepted when surrounded by GLBT people or allies. Within this cluster, there were contributions from all of the participants (13 of 13), and two categories were produced.

Category 7.1. Most participants (12 of 13) contributed meaning units to the first category, which described their experiences of feeling more connected to the GLBT community when personally involved in fighting anti-GLBT initiatives. One participant described the sense of cohesiveness she gained by becoming involved in the GLBT community struggle.

It feels like more of a community, a real community. That, it's not necessarily just out in the shadows . . . It's to where it's like, hey, we understand the struggle and we're in all this all together . . . On a personal level, it's (the legislation) made me stronger. But I also think it made the community stronger. (I)

Participants reported feeling an affirming sense of connection when they were involved in GLBT-positive religious groups as well as GLBT-activist or support groups.

Category 7.2. The second category within this cluster dealt with the interviewees' (9 of 13) experiences of feeling increased isolation and fear of discrimination and judgment when in most social contexts. One participant described feeling this isolation when hearing homophobic comments in public, "It can make me a bit fearful at times and cautious. In whether you should've met them [homophobic sentiments] head-on and confront them or just let it slide. . . . It's like dealing with the Rottweiler on the other side of the fence" (H). They described feeling wary within educational settings, when they were with their partners in public, as well as a greater danger around strangers. The 6 participants who evaluated whether this cluster represents the experience of being a GLBT person within the time of these initiatives and movements

gave a mean rating of 5.5 on a Likert-type scale ranging from 1 (*not at all*) to 7 (*very much*).

Cluster 8: Activism Seems More Rewarding and Effective When I Can Present Myself Openly With Self-Acceptance and try to see Others' Perspectives

We used meaning units from 11 of the 13 participants in forming this cluster that highlighted perspectives that made activism rewarding for participants, such as the ability to empathize with those who hold oppressive beliefs and to maintain a posture of self-assurance. It contained two categories.

Category 8.1. In the first category in this cluster, participants (7 of 13) described how facing anti-GLBT initiatives had left them with a sense of empowerment, despite the losses incurred. One participant said, "But ah, I do think that, you know, at least if we're standing up for ourselves as I've said before, there's a little more dignity in that than just sitting back and you know, letting it happen to you" (J). Activism also made them feel more comfortable in being out to others and being themselves in their community.

I enjoy work more. In terms of, I'm fine talking on the phone. I feel comfortable hanging a rainbow, I feel comfortable, you know, introducing my partner to my work colleagues. Or, or just being myself Using the right pronouns. (I)

Category 8.2. In the second category of this cluster, participants (6 out of 13) described their efforts to dissolve barriers or rehumanize themselves in the eyes of those outside the GLBT community as being among their most rewarding and effective experiences of activism. Some cited a commitment to treat anti-GLBT people better than they themselves have been treated:

I also have to be careful of my own response to [anti-GLBT] people . . . doing unto them to what they are doing unto me, I have to be careful not to put my stereotypes on them and labeling them . . . I don't want to invalidate them, like "You're not important" or "You're wacko" or "You're stupid because you believe those things," and there's a reason they believe those things. Right or wrong, it's there, and me getting mad, or creating some kind of break in the relationship is never going to make them change their mind. (C)

In contrast, speaking directly and openly with others was described as a powerful way to reach those who might not otherwise have had a basis for understanding GLBT issues:

We don't make huge statements of we're gay or we're not gay or whatever. It is just part of who we are. We talk about our family at daycare, we tease about how (daughter) has to do double duty on Mother's Day. We are just genuine about our lives, and I think that comes through to people, and I think that's worked for us. People have to get to know who you are as a person, to see you are a good person, and the labels and the categories just fall away. (A)

A confident openness was seen as a way to defuse the underlying misunderstanding thought to foster anti-GLBT sentiments.

Six participants evaluated whether this cluster represents the experience of being a GLBT person within the time of these initiatives and movements. They gave a mean rating of 6.7 on a Likert-type scale ranging from 1 (*not at all*) to 7 (*very much*).

Core Category

The core category reflects a central theme within the analysis. In this study, the core category was, "GLBT people need to balance the dual dangers of engagement with GLBT advocacy and self-protection through withdrawal." The dangers of engagement were described most strongly in Clusters 1, 2, 3, and 5, in which the experience of the pain of facing anti-GLBT movements was described as well as the importance of engaging in advocacy and seeking support. The dangers of withdrawal were described most poignantly in Clusters 4, 6, 7, and 8, in which participants described the need to protect themselves and manage their emotions during this time and the risks of isolation or noninvolvement with advocacy. This overarching theme reflected participants' experience of being in a double-bind. On one hand, there could be many dangers involved in engaging in resistance to anti-GLBT movements and policies. Fighting initiatives and movements could threaten their emotional well-being, sense of safety, financial well-being, support systems, time, and resources. At the same time, self-protection through withdrawing from resistance had costs as well. These included fears of increasing discrimination, guilt, loss of a sense of dignity, and a sense of self-betrayal.

Although effective coping in the face of these dangers was described by some participants as bringing about some relative benefits, such as social change, closer community, leadership skills, a sense of integrity or empowerment, the core category emphasized the need to balance dangers for three reasons. (a) The participants were thrust into their situation because of the political dangers in their social context rather than from an internally motivated desire to seek out benefits within a neutral context. (b) It is difficult to see these gains as true benefits as they rarely appear to bring about parity with non-GLBT people. For instance, although participants might develop some connection with the GLBT people in fighting homophobia, it is hard to say that they might not still experience more connection with others if they were not GLBT (or if heterosexism did not exist) in the first place. Or to give another example, a sense of integrity might evolve from advocacy work, but it is hard to say how this would compare with the sense of integrity one might have in the absence of repeated personal attacks. (c) The idea that there are benefits might be misconstrued as washing out the effects of the dangers. Instead, the relative gains described were the result of effective coping within a context of oppression—an overwhelmingly negative experience whether one adopted strategies of withdrawal or engagement. Although not the central experience of homophobic legislation, the relative gains remain important, however, as they demonstrate that participants are not simply passive victims of oppression, but are actively developing strategies for coping in a hostile context.

These findings suggested that the experience of being a GLBT person in the midst of initiatives and movements is one of finding an idiosyncratic equilibrium in which these two dangers can be balanced in a way so that each person can engage in forms of resistance while maintaining a sense of personal safety and security. Depending on resources, supports, communities, and stressors in participants' lives, solutions to this dilemma might take on different forms. Six participants evaluated whether this core category represented the experience of being a GLBT person within the time of these initiatives and movements, and they gave a mean rating of 6.0 on a Likert-type scale ranging from 1 (*not at all*) to 7 (*very much*).

Discussion

Supporting Russell (2000) and Russell and Richards' (2003) findings, we showed in this investigation that legislative initiatives and movements aimed at limiting the rights of GLBT people appear to strongly affect GLBT people, causing them both psychological pain and a need for resilience. However, our use of in-depth interviews provides additional insights about the complexity of the experiences of GLBT people facing these campaigns. In particular, the participants described experiencing tension, because engagement to fight homophobic sentiments or movements could result in increased hurt, fear, and anger, but withdrawal from engagement could result in continued invisibility and discrimination. Both threats were significant and unrelenting.

Balancing Engagement and Withdrawal

Engagement. There was a great pressure among participants to be active. Almost all participants described some of their actions in terms of resistance against anti-GLBT movements and sentiments, whether this engagement meant openly being themselves in the workplace, sharing their story with a family member, or canvassing voters. Participants feared that progress could not be made without their involvement, that present legislative restrictions could lead to even harsher mandates in the future, and that they would continue to be treated as inhuman or as a danger to society. Activism against legislative efforts to further limit the rights of GLBT people carried with it both benefits and risks, however. Our work supported that of Russell (2000), suggesting that political and personal activism can lead to a greater awareness of self, increased self-esteem and pride in one's identity. In addition, this research highlighted how action could lead to a reduction in marginalization, increased interpersonal support, and a sense of hope and personal efficacy.

Ironically, the disadvantages of activist engagement can be seen as the flip side of some of these benefits. In contrast to hope, some participants believed that the fight to achieve acceptance by society was futile and would never be resolved in their lifetime. They perceived activism as a duty that gave them voice, visibility, and strength, but one that could be emotionally taxing and could increase their stigma consciousness, which has been found to increase the adverse psychological effects of minority stress (Lewis et al., 2006). Although the notion of an anti-GLBT climate can produce a vague sense of discomfort, the hard and fast numbers telling GLBT people that over 80% of the people around them want to deny their families safety and securities can be a painful check on any hopes for a community's tolerance and can generate a very different psychological reality of living in a location.

Withdrawal. The disadvantages of activism led some participants to withdraw from the GLBT community or their resistance efforts. Dangers of withdrawal from activism reported by participants included strong guilt about not doing enough, isolation from the community, and the fear that they might contribute to increased anti-GLBT legislation that would create more dangers or obstacles in their lives.

Withdrawal from activism also was reported to have advantages as well, however, in addition to minimizing the hurt and fear that engagement might entail. Being an activist often meant being "out" to a broad circle of people, which was risky in a number of

ways. Being out is related to victimization of GLB people in hate crimes (Herek, Gillis, & Cogan, 1999; Smith, Horne, & Levitt, 2007). Facing higher levels of discrimination than heterosexual people (e.g., Mays & Cochran, 2001), GLB people can also be at risk for mental and physical health problems (e.g., DiPlacido, 1998; Halpert, 2002; Meyer, 2003). Increased public attention might increase these risks if it brings with it increased discrimination or harassment.

This reluctance may be exacerbated by workplace pressures to remain closeted, especially in locales like the Memphis area, which at the time of this research was one of only six cities in the United States its size or larger that offered no nondiscrimination protection for GLBT people (S. G. Horne, personal communication, September 5, 2006). Indeed, our participants reported that fear of being economically, emotionally, or physically hurt was a part of their decision to not be more involved in activism. Other concerns included the fear of losing existing relationships because of limited time for social activities as they became involved in activist actions. Also, participants described the threat of burnout as they attempted to cope with the seemingly unending onslaught of negative stereotyping of the GLBT community. Benefits of withdrawal from activism included the ability to keep things in a larger perspective, maintaining the capacity to not take things personally, and obtaining relief from the stigmatization and pain often experienced as a part of activism.

Minority stress appeared to take a toll on GLBT persons engaged in all types of activism, and learning to identify when to withdraw and find support might help prevent negative mental health consequences resulting from minority stress or stigma consciousness. Mays and Cochran (2001) reported that daily experiences with stigmatization and discrimination could interfere with living a full and productive life and increase the chances of mental health problems. GLBT community centers or organizations might wish to consider how to support those who need to withdraw periodically from political action in order to self-protect. If not, then they might lose an important function of the GLBT community—being a safe place where GLBT people can withdraw from anti-GLBT sentiments in the outside social system. As our research has confirmed, the support systems for members of the GLBT community can be important to their daily lives (e.g., Lewis et al., 2006).

Implications for Counseling, Education, and Advocacy

An awareness of the experience of GLBT people in a context of anti-GLBT movements and legislation can influence counseling, education, and advocacy. Readers are cautioned that the descriptions of distress in this study should not be used to attribute the source of distress as arising from within the research participants themselves. Instead, we hope our finding help readers develop sensitivity to the impact of a hostile political and social environment. A supportive role may be especially relevant for therapists because gay and lesbian people appear to be more likely to seek therapy than heterosexual people (e.g., Morgan, 1992). In addition, counselors are charged with recognizing that substantial and long-standing minority stress might be at hand when engaged in diagnosis of this population, depending on the context and the history of an individual client. In counseling GLBT clients who live in environments with strong anti-GLBT sentiments, inquiring about

the impact of this environment as well as recognizing and validating these extraordinary stressors can be an important aspect of developing a strong working alliance. This recognition and validation can be a crucial component of the treatment itself.

It is important that the GLBT community, heterosexual allies, and mental health professionals support GLBT individuals in balancing healthy activism with healthy withdrawal or replenishing. Although advocates might wish to encourage GLBT people's activism, it can be important to recognize that this balance differs depending on the individual, and the stress of engagement will be overwhelming for some. For clients who have learned that being open about their sexual orientations is dangerous, advocacy can be frightening. Clients' ability to engage in advocacy also may shift depending on the level of safety and his or her own emotional resources. For instance, on the feedback questionnaire, one of our participants wrote,

I'd never literally cried over the result of an election until I saw that the amendment had passed. For several weeks and even into today, I have felt extremely depressed and have, at least temporarily, lost interest in even trying to combat these initiatives. (J)

The costs of engaging in activism may be especially high in regions where there are no anti-discrimination policies and where coming out to advocate for themselves may mean losing their livelihoods (as of May 2008, it was legal to fire someone because of their sexual orientation in 31 states and because of their gender identity in 39 states).³ Often advocacy is left to the group that is under fire, and heterosexual allies may not realize the emotional vulnerability that this resistance entails or their importance as advocates. Although the field of psychology has a history of pathologizing GLBT people, the American Psychological Association has acted to support fair treatment of GLBT people nationally and internationally.⁴

In education, it can be important to inform students about the anti-GLBT policies and restrictions that exist in their own communities. We are surprised at how many students hold inaccurate assumptions about GLBT rights. Also, it can be important to talk about the issues in a way that brings to light the complexities involved, such as the rights that are denied when marriage is denied or the stress of living closeted when one can be fired for one's sexual orientation. Education on this topic can help proactively counteract the negative effects of university policies that may contribute to homophobic environments, for instance, by not developing or publicizing nondiscrimination policies to protect GLBT faculty, staff, and students; by denying health benefits and health club memberships for same-sex families; or by not allowing the creation of a GLBT student group, GLBT safe/space room for meetings, or resource center.

Limitations and Strengths

In keeping with the hermeneutical approach (Rennie, 2000) to grounded theory methodology (Glaser & Strauss, 1967) used within the study, the research presented is not intended to be read as the only possible interpretation of the data, but is instead intended as an interpretive understanding on the basis of careful analysis of participants' interviews over several months. Readers are provided with information, in the form of quotes, demographic information, and a description of the ballot initiative, to help them

determine how well these results fit to other contexts or people—increasing the transferability of this study. In this process, readers should keep in mind that this study was conducted with participants living in the greater Memphis metropolitan area right before and after the 2006 election when the Tennessee constitutional amendment to restrict the definition of marriage to one woman and one man was passed. Although there is evidence that some of these findings have empirical support in other states that have faced similar legislative proposals (e.g., Russell, 2000; Russell & Richards, 2003), further research would be required to compare these experiences with those of GLBT people in states that are not challenging GLBT people's rights or that are awarding rights to GLBT people. It also did not include participants who were entirely closeted, and so caution should be used in transferring these understandings to GLBT people who are not open about their sexual orientations.

That being said, the design of this study includes several strengths, including multiple credibility checks such as participant feedback, group consensus, and interview checks. The dependability of our findings was bolstered in two ways: (a) We had an author who did not participate in the analytic process, review our analysis and findings, and she enthusiastically supported our interpretation of our data. (b) Also, a companion study conducted at the same time found some similar themes among family members of GLBT individuals—in particular with regards to dangers of becoming involved in GLBT advocacy (Arm et al., 2009). Memoing was used to increase researchers' self-awareness during the study and limit the effects of biases, to facilitate the development of theory, and to record procedural shifts, increasing the confirmability of the study. Also, participants were recruited to reflect a wide range of experiences within the GLBT community, and the analysis achieved saturation, suggesting that it was comprehensive.

This analysis depicts that during this time of anti-GLBT legislation, the participants experienced an almost daily balancing act—walking a tightrope between political engagement and self-care by disengaging. Neither pole provided an ideal solution, and both could bring heavy costs. This study calls for future quantitative research that examines how political movements and hostile environments may influence GLBT people's relationships, sense of community, mental and physical health, emotional coping, and sense of self. It illustrates the myriad ways that minority stress can impact the lives of GLBT people. There has been debate about whether movements and legislation that seek to limit GLBT rights cause psychological harm to GLBT people; the voices of these participants not only highlighted the persistent pain of living in a climate of anti-GLBT legislation and initiatives, but they spoke to the importance of advocacy, social support, and social justice in ensuring that GLBT people are regarded as full citizens.

³ Please see www.hrc.org/laws_and_elections/enda.asp.

⁴ Please see www.apa.org/pi/lgbt.

References

- Arm, J. R., Horne, S. G., & Levitt, H. M. (2009). Negotiating connection to GLBT experience: Family members' experience of anti-GLBT movements and policies. *Journal of Counseling Psychology, 56*, 82–96.
- Bazelon, E. (2004, May 16). The same sex marriage argument that Justice Scalia fears. *Boston Globe*, p. E1.

- Carlson, E. B. (1997). *Trauma assessments: Clinicians' guide*. New York: Guilford Press.
- Carter, R. T. (2007). Racism and psychological and emotional injury: Recognizing and assessing race-based traumatic stress. *The Counseling Psychologist, 35*, 13–105.
- Crocker, J., & Major, B. (1989). Social stigma and self-esteem: The self-protective properties of stigma. *Psychological Review, 96*, 608–630.
- Defense of Marriage Act, § 7, 28 U.S.C. § 1738C (1996).
- D'Emilio, J. (1983). *Sexual politics, sexual communities: The making of a homosexual minority in the United States, 1940–1970*. Chicago: University of Chicago Press.
- Díaz, R. M., Ayala, G., & Bein, E. (2004). Sexual risk as an outcome of social oppression: Data from a probability sample of Latino gay men in three U.S. cities. *Cultural Diversity & Ethnic Minority Psychology, 10*, 255–267.
- DiPlacido, J. (1998). Minority stress among lesbians, gay men, and bisexuals: A consequence of heterosexism, homophobia, and stigmatization. In G. M. Herek (Ed.), *Stigma and sexual orientation* (pp. 138–159). Thousand Oaks, CA: Sage.
- Fassinger, R. E. (2005). Paradigms, praxis, problems, and promise: Grounded theory in counseling psychology research. *Journal of Counseling Psychology, 52*, 156–166.
- Feigen, B. (2004). Same-sex marriage: An issue of Constitutional rights not moral opinions. *Harvard Women's Law Journal, 27*, 345.
- Garnets, L. D., Herek, G. M., & Levy, B. (1990). Violence and victimization of lesbians and gay men: Mental health consequences. *Journal of Interpersonal Violence, 5*, 366–383.
- Giorgi, A. (1970). *Psychology as a human science*. New York: Harper & Row.
- Glaser, B. G., & Strauss, A. L. (1967). *The discovery of grounded theory: Strategies for qualitative research*. New York: Aldine de Gruyter.
- Halpert, S. C. (2002). Suicidal behavior among gay male youth. *Journal of Gay and Lesbian Psychotherapy, 6*, 53–79.
- Harrell, S. P. (2000). A multidimensional conceptualization of racism-related stress: Implications for the well-being of people of color. *American Journal of Orthopsychiatry, 70*, 42–57.
- Herdt, G., & Kertzner, R. (2006). I do, but I can't: The impact of marriage denial on the mental health and sexual citizenship of lesbians and gay men in the United States. *Sexuality Research and Social Policy, 3*, 33–49.
- Herek, G. M. (2006). Legal recognition of same-sex relationships in the United States. *American Psychologist, 61*, 607–621.
- Herek, G. M., Gillis, J. R., & Cogan, J. C. (1999). Psychological sequelae of hate-crime victimization among lesbian, gay, and bisexual adults. *Journal of Consulting and Clinical Psychology, 67*, 945–951.
- Hill, C. E., Know, S., Thompson, B. J., Williams, E. N., Hess, S. A., & Ladany, N. (2005). Consensual qualitative research: An update. *Journal of Counseling Psychology, 52*, 196–205.
- Horne, S. G., Rostosky, S. S., Riggle, E. D. B., & Martens, M. (2008). *The role of LGB- investment and LGB-knowledge in amendment-related affect among family members of LGB individuals during the 2006 election*. Unpublished manuscript.
- Human Rights Campaign. (2006). *State prohibitions on marriage for same-sex couple*. Retrieved November 25, 2006, from http://www.hrc.org/laws_and_elections/state.asp
- Johnson, R. (1993). Clinical issues in the use of the DSM-III with African American children: A diagnostic paradigm. *Journal of Black Psychology, 19*, 447–460.
- Lewis, R. J., Derlega, V. J., Clarke, E. G., & Kuang, J. C. (2006). Stigma consciousness, social constraints, and lesbian well-being. *Journal of Counseling Psychology, 53*, 48–56.
- Lewis, R. J., Derlega, V. J., Griffin, J. L., & Krowinski, A. C. (2003). Stressors for gay men and lesbians: Life-stress, gay-related stress, stigma consciousness, and depressive symptoms. *Journal of Social and Clinical Psychology, 22*, 716–729.
- Liang, C. T. H., Li, L. C., & Kim, B. S. K. (2004). The Asian American Racism-Related Stress Inventory: Development, factor analysis, reliability, and validity. *Journal of Counseling Psychology, 51*, 103–114.
- Mathy, R. M., & Lehmann, B. A. (2004). Public health consequences of the Defense of Marriage Act for lesbian and bisexual women: Suicidality, behavioral difficulties and psychiatric treatment. *Feminism & Psychology, 14*, 187–194.
- Mays, V. M., & Cochran, S. D. (2001). Mental health correlates of perceived discrimination among lesbian, gay, and bisexual adults in the United States. *American Journal of Public Health, 91*, 1869–1876.
- McCorkle, S., & Most, M. G. (1997). Fear and loathing on the editorial page: An analysis of Idaho's anti-gay initiative. In S. L. Witt & S. McCorkle (Eds.), *Anti-gay rights: Assessing voter initiatives* (pp. 63–76). Westport, CT: Praeger.
- McLeod, J. (2001). *Qualitative research in counseling psychology*. London: Sage.
- Meyer, I. H. (1995). Minority stress and mental health in gay men. *Journal of Health and Social Behavior, 36*, 38–56.
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin, 129*, 674–697.
- Mills, T. C., Paul, J., Stall, R., Pollack, L., Canchola, J., Chang, Y. J., et al. (2004). Distress and depression in men who have sex with men: The Urban Men's Health Study. *American Journal of Psychiatry, 161*, 278–285.
- Mohr, J., & Fassinger, R. (2006). Sexual orientation, identity, and romantic relationship quality in same-sex couples. *Personality and Social Psychology Bulletin, 32*, 1085–1099.
- Morgan, K. S. (1992). Caucasian lesbians' use of psychotherapy. *Psychology of Women Quarterly, 16*, 127–130.
- Morris, J. F., Waldo, C. R., & Rothblum, E. D. (2001). A model of predictors and outcomes of outness among lesbian and bisexual women. *Journal of Orthopsychiatry, 71*, 61–71.
- Patton, M. Q. (1990). Chapter 7: Qualitative interviewing. *Qualitative Evaluation and Research Method* (2nd ed.). Newbury Park, CA: Sage.
- Prilleltensky, I. (1995). The politics of abnormal psychology: Past, present, and future. In N. R. Goldberger & J. B. Veroff (Eds.), *The culture of psychology reader* (pp. 652–673). New York: New York University Press.
- Rennie, D. L. (2000). Grounded theory methodology as methodological hermeneutics: Reconciling realism and relativism. *Theory and Psychology, 10*, 481–502.
- Rennie, D. L., Phillips, J. R., & Quartaro, G. K. (1988). Grounded theory: A promising approach to conceptualization in psychology? *Canadian Psychology, 29*, 43–50.
- Riggle, E. D. B., & Rostosky, S. S. (2007). The consequences of marriage policy for same-sex couple well-being. In C. Rimmerman & C. Wilcox (Eds.), *The politics of same-sex marriage* (pp. 65–84). Chicago: University of Chicago.
- Riggle, E. D. B., Thomas, J., & Rostosky, S. S. (2005). The marriage debate and minority stress. *PS: Political Science and Politics, 38*, 21–24.
- Rostosky, S. S., Riggle, E. D. B., Horne, S. G., & Miller, A. D. (2008). *Marriage amendments and psychological distress in Lesbian, Gay and Bisexual (LGB) adults*. Unpublished manuscript.
- Rostosky, S. S., Riggle, E. D. B., Gray, B. E., & Hatton, R. L. (2007). Minority stress experience in committed same-sex couple relationships. *Professional Psychology: Research and Practice, 38*, 392–400.
- Russell, G. M. (2000). *Voted out: The psychological consequences of anti-gay politics*. New York: New York University Press.
- Russell, G. M., & Richards, J. A. (2003). Stressor and resilience factors for lesbians, gay men and bisexuals confronting antigay politics. *American Journal of Community Psychology, 31*, 313–328.
- Slavin, L. A., Rainer, K. L., McCreary, M. L., & Gowda, K. K. (1991). Toward a multicultural model of the stress process. *Journal of Counseling & Development, 70*, 156–163.

- Smith, B. L., Horne, S. G., & Levitt, H. M. (2007). *The psychological impact of bias-motivated offenses against lesbian, gay and bisexual individuals across four national samples*. Unpublished manuscript.
- Solomon, S. E., Rothblum, E. D., & Balsam, K. F. (2004). Pioneers in partnership: Lesbian and gay male couples in civil unions compared with those not in civil unions and married heterosexual siblings. *Journal of Family Psychology, 18*, 275–286.
- Sue, D. W. (2003). *Overcoming our racism: The journey to liberation*. San Francisco: Jossey-Bass.
- Sullivan, A. (2006, April). When would Jesus bolt? *The Washington Monthly*. Retrieved May 20, 2008, from <http://www.washingtonmonthly.com/features/2006/0604.sullivan.html>
- Todosijevic, J., Rothblum, E. D., & Solomon, S. E. (2005). Relationship satisfaction, affectivity, and gay-specific stressors in same-sex couples joined in civil unions. *Psychology of Women Quarterly, 29*, 158–166.
- U. S. General Accounting Office. (2004, January 21). *Defense of Marriage Act, GAO-04-353R*. Washington, DC: Author.
- Waldo, C. R. (1999). Working in a majority context: A structural model of heterosexism as minority stress in the workplace. *Journal of Counseling Psychology, 46*, 218–232.
- Wiethoff, C. (2002). Naming, blaming, and claiming in public disputes: The 1998 Maine referendum on civil rights protection for gay men and lesbians. *Journal of Homosexuality, 44*, 61–82.

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Call for Nominations: *Psychology of Violence*

The Publications and Communications (P&C) Board of the American Psychological Association has opened nominations for the editorship of *Psychology of Violence*, for the years 2011–2016. The editor search committee is chaired by William Howell, PhD.

Psychology of Violence, to begin publishing in 2011, is a multidisciplinary research journal devoted to violence and extreme aggression, including identifying the causes and consequences of violence from a psychological framework, finding ways to prevent or reduce violence, and developing practical interventions and treatments.

As a multidisciplinary forum, *Psychology of Violence* recognizes that all forms of violence and aggression are interconnected and require cross-cutting work that incorporates research from psychology, public health, neuroscience, sociology, medicine, and other related behavioral and social sciences. Research areas of interest include murder, sexual violence, youth violence, inpatient aggression against staff, suicide, child maltreatment, bullying, intimate partner violence, international violence, and prevention efforts.

Editorial candidates should be members of APA and should be available to start receiving manuscripts in early 2010 to prepare for issues published in 2011. Please note that the P&C Board encourages participation by members of underrepresented groups in the publication process and would particularly welcome such nominees. Self-nominations are also encouraged.

Candidates should be nominated by accessing APA's EditorQuest site on the Web. Using your Web browser, go to <http://editorquest.apa.org>. On the Home menu on the left, find "Guests." Next, click on the link "Submit a Nomination," enter your nominee's information, and click "Submit."

Prepared statements of one page or less in support of a nominee can also be submitted by e-mail to Emnet Tesfaye, P&C Board Search Liaison, at Emnet@apa.org.

Deadline for accepting nominations is January 31, 2009, when reviews will begin.